Thank you for choosing us for your Individual health coverage. This packet includes information about some upcoming changes to your plan. We’re also giving you information about your options so you can make the best decision for your health care needs.

Here’s what’s inside:

- **Your Personalized Plan information**: This letter goes over all of your plan options and how to stay covered.
- **Plan Discontinuation notice**: This is an official notice that outlines your current plan will be discontinued as of January 1, 2015.
- **Policy Year Endorsement**: This is the official document that shows we’ve added wording that defines a new renewal date and policy year term to your existing plan. **Please keep this with your contract.**
- **Billing and Payment Options**: You may have to change the way you pay your new plan’s premium. Check out the options available to you.
- **HIPAA/NCQA Notice**: We know your privacy is important. We send out these notices each year to keep you up to date on how we protect your health information.

What if you have questions?
We’re here to help. This is a lot of information to sort through, and we want to make sure you understand all your options. If you have questions, call us at (855) 817-4401 to speak with one of our Health Plan Advisors.
Dear <Member First Name>,

Thank you for choosing Anthem Blue Cross and Blue Shield ("Anthem") for your Individual health coverage. As you may have heard in the news, key requirements of the Affordable Care Act (ACA) will be effective in January 2014. You may be wondering what will change and how those changes will affect you.

Because of the changes under the ACA, we can no longer offer the health insurance plan you currently have, and your plan will be discontinued as of January 1, 2015. To help guide you in these changing times, we have included information about your options. If you have additional questions you can speak to your Anthem Broker/Agent or contact one of our Health Plan Advisors.

There may be other coverage options for you to consider.
When key parts of the health care law take effect, you’ll be able to buy coverage for you and your family through Nevada’s health insurance marketplace, Nevada Health Link. By purchasing a plan through Nevada Health Link you might be eligible for a new kind of tax credit that lowers your monthly payments. Nevada Health Link will also allow you to check into whether you’re eligible for financial assistance from the government (called a subsidy), to help* you pay for your health insurance. You can also see what your premiums, deductible, and out-of-pocket expenses will be before you enroll in a new plan. If you request enrollment within 30 days of when your current plan ends, you may even have an opportunity to enroll in a group plan that you are eligible for (such as a spouse’s plan offered by their employer) even if the plan does not accept late enrollees.

*Financial help with premiums, deductibles, and co-payments isn’t available outside the Marketplace

Have questions? We’re here to help.
Check out our new educational site, go to anthem.com and click on Health Care Reform For You, to get answers to any questions you may have. The site provides simple information to help you understand how health care reform affects you.

If you have additional questions about plan options, feel free to call your Anthem broker/agent, or call a Health Plan Advisor at 855-817-4401. Our business hours are Monday–Friday 7:30 a.m. – 7:00 p.m.PST.
We look forward to serving you with a new plan. Thank you for choosing Anthem Blue Cross and Blue Shield.

Sincerely,

Mike Murphy
President
Anthem Blue Cross and Blue Shield, HMO Nevada
Personalized Plan Information Letter

Dear <Subscriber first name> <Subscriber last name>

Thank you for choosing Anthem Blue Cross and Blue Shield (Anthem) and its subsidiary company HMO Nevada for your Individual health coverage. Changes from health care reform (also called the Affordable Care Act or ACA) continue to take effect in 2014. Your plan was set to end on December 1, 2014. However, due to recent guidance from the government under the ACA, you can stay on your policy through December 31, 2014. In addition, to meet the requirements of the new laws, your current plan is no longer available in 2015.

You do have options and you can count on us to provide you with a plan that's right for you. You'll need to choose your new plan between November 15, 2014 and December 31, 2014 to make sure your coverage is effective for January 1, 2015.* Here are your three options to consider:

1. Move to a new Anthem plan. Your <current plan name> plan can no longer be offered as of January 1, 2015. To make things easy for you, we can move you into a new plan called <new plan name>. We've chosen this plan because it includes the requirements of the new laws. Your rate will be $<ACA Plan rate>.

   Please note: if you have a dependent turning 26, they will NOT be able to stay on your plan, so the cost above does not include them. They will be covered under your current plan until the end of the month when they turn 26. We will send you more information about their choices soon.

   The Affordable Care Act requires all individual health plans to include coverage for ten Essential Health Benefits. These benefits are part of your health plan including pediatric dental care. Starting January 1, 2015, coverage for pediatric dental care will be part of your medical policy and subject to your medical deductible and out-of-pocket maximum. Diagnostic and preventive services such as cleanings, exams and x-rays are not subject to your deductible.

   Whenever you change your health plan, it's important to make sure your doctors and medicines are still covered. Find out by going to changemycoverage.com.

   How? If this plan seems like a good fit, just pay your new monthly premium when it arrives. Check out a complete list of benefits and services for this plan at < ACA Plan SBC URL > on or after Nov. 15, 2015.
Questions? Call one of our Health Plan Advisors at (855) 817-4401.

2. **Shop during Open Enrollment and choose a different Anthem plan for 2015.** If your needs have changed, we have many plans that meet the new ACA requirements, and we can help you find an ACA compliant plan to fit your needs.

   **How?** To review other Anthem plans, speak with your broker/agent or call one of our Health Plan Advisors. You can also compare plans, check if your doctors will be in the network, look up your pharmacy and see if your medicines are covered by logging in at changemycoverage.com during Open Enrollment*.

3. **Choose an ACA Anthem plan for coverage starting on December 1, 2014.** If you want coverage with an ACA plan as of December 1, 2014, we have many plans that meet the ACA requirements and we can help you find one to fit your needs. **You will need to select a plan by November 30, 2014 to have an ACA plan be effective on December 1, 2014.**

   **How?** To review other Anthem plans, speak with your broker/agent or call one of our Health Plan Advisors. You can also compare plans, check if your doctors will be in the network, look up your pharmacy and see if your medicines are covered by logging in at changemycoverage.com.

   Remember, if you switch plans, you may have a different network of doctors and pharmacy benefits. And you won’t be able to switch back. By selecting a 2014 ACA plan you should be aware some benefit and rate changes will occur when your plan renews in January 2015. You will receive additional information about these changes and other enrollment options, by mail.

Whenever you change your health plan, it’s important to make sure your doctors, pharmacies and medicines are still covered. Find out by going to changemycoverage.com during Open Enrollment.

**We’re here to help.** If you have questions about any of your options, call your broker/agent or one of our Health Plan Advisors at (855) 817-4401, Monday-Friday 7:30 a.m. – 7:00 p.m. PST. We also have a variety of tools available at anthem.com to help you understand how health care is changing and decide which option is best for you.

Thank you for trusting Anthem for your health coverage. We look forward to continuing to serve you.

Mike Murphy
President
Anthem Blue Cross and Blue Shield, HMO Nevada

**IMPORTANT: Financial assistance for your health coverage may be available.**

You could qualify if you have a modified adjusted gross income of $11,670 to $46,680 a year (or $23,850 to $95,400, for a family of four). To take advantage of financial assistance, you need to be enrolled in a plan offered through the Health Insurance Marketplace in Nevada, NevadaHealthLink.com. We have Anthem plans available on the Health Insurance Marketplace, so you could continue receiving your health care benefits at a lower cost from us – an organization you know and one that has many options to fit your needs. Try our subsidy estimator during Open Enrollment and see how much money you'll get toward your health plan costs. Then see all our new plans at changemycoverage.com.

* Open Enrollment is November 15, 2014 – February 15, 2015. If you don’t choose another Anthem plan by December 31, 2014, we will assume you have chosen the plan we have suggested for you. Be sure to pay your bill when it arrives. If you don’t choose a plan addressed above, or a replacement plan, you will not be covered as of January 1, 2015.