Anthem Blue Cross

2016 Medicare Advantage Plans Changing

We want you to know about changes to Anthem Blue Cross Medicare Advantage Individual plan service areas. These changes will take effect Jan. 1, 2016.

These service area and plan name changes do not impact your participation in the Medicare Advantage network. Group-sponsored Medicare Advantage plan members are not affected by these changes. Anthem Medicare Advantage member ID cards contain a CMS identifier in the lower right corner of the card. The member is in a group-sponsored plan when the CMS identifier contains eight characters and the last three digits start with an eight (8XX).

- Anthem is changing the plan names of all Individual Medicare Advantage plans in California. Individual Medicare Advantage plan names, beginning in 2016, will contain “Anthem MediBlue” in the plan name followed by Plus (HMO), Coordination Plus (HMO), Select (HMO), Dual Advantage (HMO SNP) or Access (PPO). Group-sponsored Medicare Advantage plans are not impacted by these changes.
- We will introduce new Anthem MediBlue Plus (HMO) plans, traditional HMO Medicare Advantage Prescription Drug plans, in Sacramento, Yolo, and San Diego counties. Prior to 2016, Anthem MediBlue Plus (HMO) plans were previously named Blue Cross Senior Secure Plan I or Plan II (HMO) in California.
- Anthem MediBlue Coordination Plus (HMO) plans will be launched in Los Angeles, Orange, Riverside, San Bernardino and San Diego counties. Anthem MediBlue Coordination Plus plans are new plans with a benefit design that is more consistent with Medicare statutory limits on Medicare covered services, such as medical coinsurances of 20 percent or more, Part D member premiums and Part D deductibles. These plans also offer enhanced benefit coverage at no additional cost to members on services not traditionally covered by Medicare, such as allowances for comprehensive dental, vision eyewear, and hearing aids. These plans are open for general enrollment to all Medicare eligibles. However, members with dual eligibility may be more appropriate for this product as they may not be required to pay the cost-sharing (premium, co-insurance, co-pays) associated with this plan.
- We will introduce new Anthem MediBlue Select (HMO) plans, which have a focused network of providers, in San Bernardino and Riverside counties.
- We will offer the Anthem MediBlue Dual Advantage (HMO) plan in Sacramento County. Anthem MediBlue Dual Advantage plans are Dual-Eligible Special Needs Plans, also known as DSNPs, that serve only those members eligible for both Medicaid and Medicare. These HMO plans coordinate the separate programs, while providing enhanced benefits. All of these plans have $0 premiums.
- We will eliminate the PPO plans in San Francisco, Madera and San Diego counties.
- We will continue to offer HMO and DSNP plans in San Francisco County.
- Medicare Supplement plans are available throughout our entire licensed service area in California.

Prior to Oct. 3, 2015, members in existing plans affected by these changes will receive a letter from us that explains their Medicare coverage options. Members will continue to have coverage...
through their current plans until December 31, 2015. It’s important to note that members may have a different network of providers and/or different benefit structure when switching from previous plans.

We are working with the Centers for Medicare & Medicaid Services (CMS) to help ensure our members understand options for continuing their Medicare health insurance coverage.

We understand our members may contact their doctors’ offices with questions about their plan. Members may call the customer service telephone number in the letter they receive from us. Members may also contact our customer service through the number provided on the back of their member ID cards. Our Customer Service representatives will be able to assist them.

Reminder: These changes do not impact members enrolled through their employer or group-sponsored plan.

We are always evaluating our Medicare Advantage products to ensure that they meet our member needs for access, cost and quality.

If you have any questions, please contact your provider network manager.

55443CAPENABC 08/18/2015

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