Anthem BlueCross BlueShield
Changing 2014 Medicare Advantage Individual Plans

Colorado

We want you to know about changes to Anthem Blue Cross and Blue Shield Medicare Advantage Individual plan service areas. These changes will take effect Jan. 1, 2014.

These changes have no impact on your participation in the Medicare Advantage network.

We will not renew the Sure Value Select Medicare Advantage HMO plan in Adams, Arapahoe, Broomfield, Denver, Douglas and Jefferson counties. We will not renew the Anthem Medicare Preferred LPPO in Adams, Arapahoe, Broomfield, Denver, Douglas, Jefferson, Fremont and Pueblo counties. While we no longer will offer individual Medicare Advantage plans in Colorado, employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits Start with an eight (8xx).

Prior to Oct. 2, 2013, members 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, 2013.

All Medicare-eligibles in our service area will have access to Anthem’s Medicare Supplement 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.

Again, the status of your Medicare Advantage provider agreement is not affected. 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.

Y0071_13_17994_I 08/27/2013

Connecticut

We want you to know about changes to our individual Medicare Advantage HMO and LPPO plan service areas. These changes will take effect Jan. 1, 2014.
These service area changes do not impact your participation in the Medicare Advantage network. Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits start with an eight (8xx).

We will reduce the Anthem MediBlue Preferred Standard LPPO in Litchfield, Middlesex and Tolland counties. We will continue to offer this plan in Hartford County.

We will reduce the Anthem MediBlue Value HMO in New Haven, New London and Windham counties. We will continue to offer this plan in Fairfield, Litchfield, Middlesex and Tolland counties.

Medicare Supplement plans are available throughout our entire licensed service area in Connecticut.

Prior to Oct. 2, 2013, members 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, 2013. 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 also may 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.

Again, the status of your Medicare Advantage provider agreement is not affected. We are always evaluating our Medicare Advantage products to ensure that they meet our members’ needs for access, cost and quality.

If you have any questions, please contact the provider inquiry call center at 1-800-992-2583.

Indiana

We want you to know about changes to our Medicare Advantage Individual Plan service areas. These changes will take effect Jan. 1, 2014.

These service area changes do not impact your participation in the Medicare Advantage network.* Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits Start with an eight (8xx).

We will eliminate the Anthem Medicare Preferred Core LPPO products in 28 counties throughout Indiana. Our Anthem Medicare Preferred Standard LPPO will continue to be offered in 21 of the current 26 counties. All Indiana counties will continue to offer the Blue Medicare Access Value RPPO.

Medicare Supplement plans are available throughout our entire licensed service area in Indiana.
Prior to Oct. 2, 2013, members 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, 2013. It’s important to note that members may have a different network of providers and/or a 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 can 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.

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

If you have any questions, please contact your provider network manager at 1-800-455-6805, Extension 7.

* Providers who have received termination notices for reasons other than service area reductions/eliminations are not impacted by this Notice.

Kentucky

We want you to know about changes to our individual Senior Advantage (HMO) and Medicare Preferred (LPPO) plan service areas. These changes will take effect Jan. 1, 2014. Some plan service areas will be eliminated or reduced.

These service area changes do not impact your participation in the Medicare Advantage network. Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits start with an eight (8xx).

We will eliminate the Anthem Senior Advantage Complete HMO and the Anthem Medicare Preferred Select LPPO in all counties. Additionally, we are reducing the Anthem Medicare Preferred Standard LPPO in nine counties, including Ballard, Hancock, Jessamine, Mason, Menifee, Pendleton, Scott, Shelby and Trimble. We will no longer offer LPPO plans in these nine counties. The Anthem Senior Advantage Value HMO will continue to be offered in 12 counties, while the Anthem Medicare Preferred Standard LPPO will be offered in 33 counties. All Kentucky counties will continue to offer the Blue Medicare Access Value RPPO.

Medicare Supplement plans are available throughout our entire licensed service area in Kentucky.

Prior to Oct. 2, 2013, members 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, 2013. 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 also may 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.

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

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

---

Missouri

We want you to know about changes to our individual MediBlue (HMO) and Medicare Preferred (LPPO) plan service areas. These changes will take effect Jan. 1, 2014.

These service area changes do not impact your participation in the Medicare Advantage network.* Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits Start with an eight (8xx).

We will launch a new Anthem MediBlue HMO in St. Louis City, St. Louis County and Saint Charles County.

We will continue to offer Anthem Medicare Preferred LPPO plans in Christian, Dade, Dallas, Douglas, Greene, Jasper, Lawrence, Newton, Ozark, Polk, St. Louis County, Saint Charles County, Warren, Webster and Wright counties and St. Louis City.

We will no longer offer Anthem Medicare Preferred LPPO plans in Barry, Barton, Cedar, Stone and Taney counties.

Medicare Supplement plans are available throughout our entire licensed service area in Missouri.

Prior to Oct. 2, 2013, members 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, 2013. 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 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 also may 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.

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

If you have any questions, please contact your provider network manager.
* Providers who have received termination notices for reasons other than service area reductions/eliminations are not impacted by this Notice.

**Nevada**

We want you to know about changes to Anthem Blue Cross and Blue Shield Medicare Advantage Individual plan service areas. These changes will take effect Jan. 1, 2014.

This change has no impact on your participation in the Medicare Advantage network. We will eliminate the Medicare Advantage individual Local PPO plan, Anthem Medicare Preferred Standard, in Washoe County. While we will no longer offer individual Medicare Advantage plans in Nevada, employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits Start with an eight (8xx).

Prior to Oct. 2, 2013, members 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, 2013. It’s important to note that members may have a different network of providers and/or different benefit structure when switching from previous plans.

All Medicare-eligible Nevadans in our service area will have access to Anthem’s Medicare Supplement 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 or the number on the back of their member ID cards. Our Customer Service representatives will be able to assist them. Again, the status of your Medicare Advantage provider agreement is not affected. 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.

**Ohio**

We want you to know about changes to our individual Senior Advantage (HMO) and Medicare Preferred (LPPO) plan service areas. These changes will take effect Jan. 1, 2014. Some plan service areas will be eliminated or reduced.

These service area changes do not impact your participation in the Medicare Advantage network.* Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits Start with an eight (8xx).

We will no longer offer Anthem Senior Advantage HMO plans in nine counties, including Allen, Defiance, Hancock, Henry, Paulding, Putnam, Van Wert, Wayne and Williams. We are also reducing the
service area of the Senior Advantage Plus plan by an additional 14 counties. We will no longer offer
Anthem Medicare Preferred LPPO plans in 10 counties, including Ashtabula, Clark, Fairfield, Huron,
Morrow, Ottawa, Paulding, Pickaway, Putnam and Union. We are also reducing the service area of the
Medicare Preferred Select plan by an additional seven counties. Additionally, we will eliminate the
Anthem Medicare Preferred Core LPPO. All Ohio counties will continue to offer the Blue Medicare
Access Classic and Standard RPPOs. Overall, Senior Advantage HMOs will continue to be offered in 37
counties, while the Medicare Preferred LPPOs will be offered in 34 counties.

Medicare Supplement plans are available throughout our entire licensed service area in Ohio.

Prior to Oct. 2, 2013, members 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, 2013. 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 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 also may
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.

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

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

* Providers who have received termination notices for reasons other than service area
reductions/eliminations are not impacted by this Notice.

Virginia

We want you to know about changes to individual Medicare Preferred (LPPO) plan service areas. These
changes will take effect Jan. 1, 2014. This plan’s service area will be reduced.

These service area changes do not impact your participation in the Medicare Advantage network.

Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in
an employer or union sponsored plan when the last three digits start with an eight (8xx).

We will eliminate the Anthem Medicare Preferred Core LPPO in 12 counties, including Gloucester
County, Hampton City, James City County, King and Queen County, Lancaster County, Richmond
County, Roanoke County, Salem City, Suffolk City, Surry County, Williamsburg City and York County.
No other Medicare Advantage plans will be available in these counties.

The Medicare Preferred Core LPPO will remain in Mathews County and Roanoke City.
Medicare Supplement plans are available throughout our entire licensed service area in Virginia and there is no impact to our Medicare Supplement business.

Prior to Oct. 2, 2013, members 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, 2013. 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 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 can 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.

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

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

Wisconsin

We want you to know about changes to our individual Medicare Preferred (LPPO) plan service areas. These changes will take effect Jan. 1, 2014. Some plan service areas will be eliminated or reduced. Anthem MediBlue Select (HMO) and Blue MedicareRx (PDP) are not affected by these changes.

These service area changes do not impact your participation in the Medicare Advantage network. Employer or union 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 number will be five characters (xxxxx) followed by three characters (XXX). The member is in an employer or union sponsored plan when the last three digits start with an eight (8xx).

We will no longer offer individual Anthem Medicare Preferred LPPO plans in Rock and Walworth counties. We will continue to offer individual LPPO plans in 22 counties. Anthem MediBlue HMO plans will continue to be available to individual Medicare Advantage members in Milwaukee, Waukesha, Kenosha and Racine counties.

Medicare Supplement plans are available throughout our entire licensed service area in Wisconsin.

Prior to Oct. 2, 2013, members 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, 2013. 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 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 also may
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.

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

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

Y0071_13_18124_f 09/05/2013

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. In Connecticut: Anthem Health Plans, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. In Ohio: Community Insurance Company. In Virginia (serving Virginia excluding the city of Fairfax, the town of Vienna and the area east of State Route 123): Anthem Health Plans of Virginia, Inc. In Wisconsin: Blue Cross Blue Shield of Wisconsin (“BCBSWI”) underwrites or administers the PPO and indemnity policies; Compcare Health Services Insurance Corporation (“Compcare”) underwrites or administers the HMO policies; and Compcare and BCBSWI collectively underwrite or administer the POS policies. Independent licensees of the Blue Cross and Blue Shield Association. ® ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.