

Medicare Advantage

Outreach and Education Bulletin



Anthem Blue Cross Changing 2012 Medicare Advantage Plans

Local PPOs new for 2012

California HMO changes service area

Anthem Blue Cross will be offering new Local PPO Medicare Advantage plans in California to make more affordable and attractive benefits available to our members. We also are not renewing our Medicare Advantage Freedom Blue Regional Plan I and Classic Regional PPO (R9943) plans for 2012. We also will remove Santa Barbara County in California from the Anthem Blue Cross Senior Secure Plan I (HMO) (H0564-047) service area. Affected members will receive a letter the week of September 19 that explains their Medicare coverage options. Members will continue to have Freedom Blue RPPO plan coverage and Blue Cross Senior Secure Plan I (HMO) coverage until December 31, 2011.

The new Local PPO will be available January 1, 2012 in Alameda, Los Angeles, Orange, Riverside, San Bernardino, Sacramento, San Francisco, San Diego, San Mateo, Santa Clara, Sonoma, Stanislaus and Ventura counties.

For 2012, Anthem Blue Cross Senior Secure Plan I (HMO) (H0564) will remain in Kern, Los Angeles, Orange, Riverside, San Bernardino and San Diego counties.

Anthem Blue Cross also will continue to offer Medicare Supplement plans throughout California in all 58 counties for 2012.

We are working with Centers for Medicare & Medicaid Services (CMS) to help ensure our members understand all of their options for continuing their Medicare health insurance coverage, including:

- Joining an Anthem Blue Cross Medicare Advantage plan in our service area or other Medicare Advantage plans in counties where an Anthem plan is not available.
- Changing to original Medicare and joining a Prescription Drug Plan

- Changing to original Medicare, buying a Medigap (Medicare Supplement) policy, and joining a Medicare Prescription Drug Plan. Because their Medicare Advantage plan was discontinued, through May 2, 2012, they have a special guarantee issue opportunity to enroll in certain Medicare Supplement plans. During this fixed period, Medicare eligible members cannot be denied coverage because of preexisting conditions or health status, including claims experience.
- Changing to original Medicare and using other health care and prescription drug coverage, such as employer or union plan, or VA benefits, if applicable.

The nonrenewal also triggers a “special election period,” which gives members until February 29, 2012 to choose a new Medicare Advantage or Prescription Drug Plan. As noted above, members are also given a Medicare Supplement guaranteed issue period through May 2, 2012. However, to ensure no lapse in coverage, members will need to select an alternate plan prior to January 1, 2012.

We understand our members may contact your office with questions about their plan. Members can call the customer service telephone number in the letter they will 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. Members can also call 1-800-MEDICARE or visit the Medicare website at www.medicare.gov.

If you have any questions, please contact your network representative.

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