

# Doing Business with Anthem in 2014

## HOW ACA CHANGES OUR DAY TO DAY

### DOING BUSINESS WITH ANTHEM IN 2014

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On January 1, 2014, the Affordable Care Act (ACA) will dramatically change the way we do business. At Anthem, we're doing everything we can to support our brokers through this transition.

In order to prepare and implement the requirements of the ACA legislation, Anthem will administer its Individual and Small Group ACA-compliant plans on a single operating platform.

Most of the work in transitioning to the ISG systems will be invisible to your clients. There are, however, some changes that will impact the administrative details of your day-to-day business.

**IMPORTANT:** The information in this guide refers to the broker and customer experiences associated with purchasing through traditional Anthem channels. Some aspects will differ with purchases through the Health Insurance Marketplace, also known as the Exchange.

### Here's what you can expect:

- All ACA-compliant plans will be administered on Anthem's Individual and Small Group (ISG) system.
  - **Individual:** Your current non-grandfathered Individual clients will be transitioned to ACA-compliant benefits and the ISG system on their 2014 renewal date.
  - **Small Group:** Your current Small Group clients will be transitioned to ACA-compliant benefits and the ISG system on their 2014 renewal date.
- **New, easier-to-understand Enrollment Applications for all ACA-complaint plans.** Available through the [Producer Toolbox](#) secure web portal, we have streamlined our member and employer applications for Individual and Small Group clients.

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### Anthem 2014 Business Development

Please make note of these new resources designed specifically to help you retain and grow your business in 2014.

#### Producer Toolbox

We've developed a new secure website, the [Producer Toolbox](#), to help you do business in the new health care reform marketplace (some functionality will not be available with initial launch). Use the toolbox to obtain rate quotes and new business proposals for ACA products, and:

- Manage new ACA business applications
- Manage renewals
- Download reports
- View commission information
- Get sales and training information
- Change or update your online account

From anthem.com, brokers can access both the new Producer Toolbox and the previous legacy broker portal pages. New users can register for a new account right from the log-in page. Throughout 2014, you will have access to Anthem's legacy portals for all lines of business from the new Producer Toolbox home page.

#### Individual Business AgentConnect

AgentConnect is a personalized website that you create where consumers can purchase Anthem products with or without assistance from you. Consumers using Google search can locate your AgentConnect page and purchase a product – you

get credit for the sale whether or not you have the opportunity to assist them during their visit!

Follow these [step-by-step instructions](#) to create your new AgentConnect link using Anthem's secure Producer Toolbox.

#### New ACA broker help line for Individual business

We've set up a new broker help line to help you retain your current customers and increase Individual membership in the new health care reform world. Contact the new help line for assistance with any of the following:

- Quoting Individual new plans
- Subsidy eligibility
- Producer Toolbox
- Individual application submission
- New Individual product questions

The new help line is available from 8:00 am – 5:00 pm EST, Monday – Thursday and 9:00 am – 5:00 pm EST on Friday **1-866-255-4745** or email at [ACAbroker@wellpoint.com](mailto:ACAbroker@wellpoint.com).

#### Start using the new Producer Toolbox

- The [Producer Toolbox Overview](#) reviews registration, basic navigation and key site features.
- The [Quoting Tool](#) explains how to generate new business quotes.

# Member ID Cards

INDIVIDUAL

At renewal, members will receive new ID cards for their ACA-compliant benefits. The cards will look very similar to what they look like today, but there are some changes.

## What's changing:

### Member Name

Space is limited for member names and addresses so they'll see a slight variation in how their information is displayed on their ID card, for example:

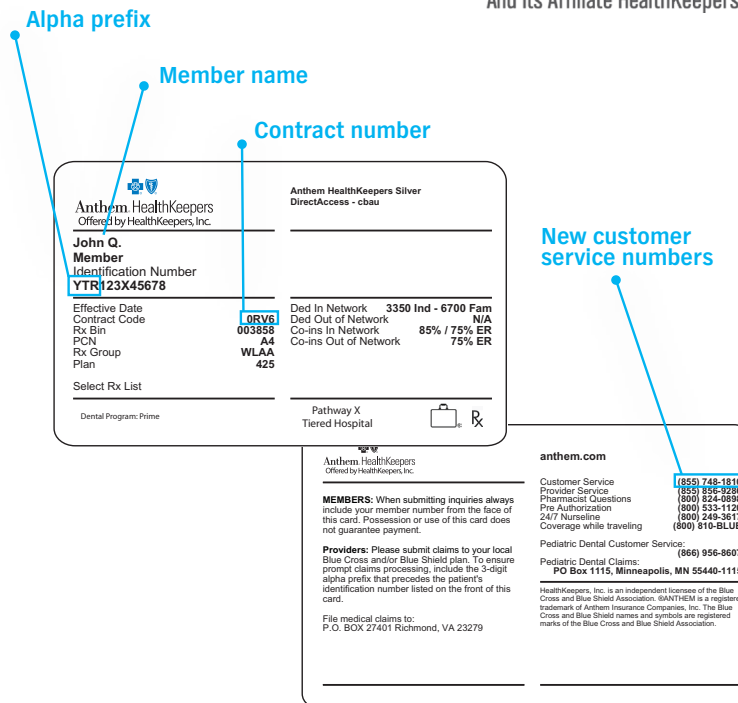
**Prior to 1/1/14:** SANTORO SAN ANGELO  
**After 1/1/14:** SANTORO SAN ANGE

### Alpha Prefix

While member ID numbers are not changing, the three-letter alpha prefix that appears before the member ID number is changing. The prefix identifies for a doctor or hospital the member's product type and associated provider network. We have developed unique prefix codes to distinguish between Anthem plans purchased directly through us, as well as Anthem's plans offered through the Health Insurance Marketplace, also known as the Exchange.

| INDIVIDUAL – PURCHASED DIRECTLY THROUGH ANTHEM |              |                         |
|--|--------------|-------------------------|
| Alpha prefix                                   | Product type | Network                 |
| YTO  | HMO          | Pathway Tiered Hospital |

| INDIVIDUAL – PURCHASED THROUGH THE HEALTH INSURANCE MARKETPLACE |              |                           |
|---|--------------|---------------------------|
| Alpha prefix  | Product type | Network                   |
| YTR   | HMO          | Pathway X Tiered Hospital |



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## Individual Member Customer Service Numbers

To streamline our members' customer service experience, we have established dedicated phone numbers to support members who renew into an ACA-compliant health plan. These numbers are changing and listed on page 5.

## Contract Code

A new Contract Code will be assigned at renewal and will be included on the member ID card. Here's an example of how the number will change:

**Prior to 1/1/14:** 8402001  
**After 1/1/14:** ORV6

## WHAT YOU NEED TO DO:

Remind your clients how important it is to use their new member ID cards. If they don't, they risk claims being denied or having to pay for services up front.

# Billing Statements

## INDIVIDUAL

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## What's changing

- **Billing statements will look different**, but the format is cleaner and they contain all the information they do today.
- **Member name and address:** Space is limited for member names and addresses so members will see a slight variation in how their information is displayed on their monthly billing statement, for example:

#### Prior to 1/1/14:

SANTORO SAN ANGELO  
164 THOMPSON LAKE SHORES RD

#### After 1/1/14:

SANTORO SAN ANGE  
164 THOMPSON LAKE RD

We have applied USPS-approved abbreviations for the changes made to the street address suffix and any secondary address information.

- **Billing statements will run on the first day of each month.** For example, January 2014 premium will be generated and mailed the first week of December and is due on January 1, 2014.
- **There is a new lockbox address for premium payments.** The address is:  
Anthem BlueCross and BlueShield  
P.O. Box 11792  
Newark, NJ 07101-4792.

It is critical that your clients update their online banking information with the new lockbox information. If premium for their ACA-compliant

plan is sent to the old lockbox, **it will delay the processing.** The new address will be included on their billing statement.

- All premium payments **must include the invoice coupon** to prevent delay in payment processing.
- **Manual adjustments to the bill cannot be processed.** All premium invoices must be paid in full.

## Methods of Payment

Individual members have a number of options in paying their monthly premiums — bank draft, online, pay by phone and mail.

However, if your clients are reapplying for coverage, they will need to update their banking information with a new authorization.

### WHAT YOU NEED TO KNOW:

If the bill is not paid by the **1st of the month** upon renewal, the member will not receive the new ID cards and will likely have to pay for any services out of pocket.

Please emphasize to your clients the importance of paying their premiums in advance of the 1st of the month due date. Coverage is not activated until the bill is paid.

# Customer Service

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If members ever have questions, we're standing by with answers and assistance. Our service representatives are highly trained on all aspects of the ISG system and even receive ongoing mentoring from associates of our service centers of distinction which serve the needs of local and large group clients across the country.

Our member customer service numbers changed on October 1. We've established separate numbers for members who purchase their coverage either through Anthem directly or through the Health Insurance Marketplace. These numbers are:

|   |  |
|---|--|
| Anthem direct                                   | (855) 330-1108   |
| Anthem through the Health Insurance Marketplace | (855) 748-1810   |
| Broker Services                                 | (800) 225-3611<br>(non ACA-related calls)<br>(866) 255-4745<br>(ACA-related calls) |

**NOTE:** For Individual grandfathered members, their customer service numbers will not change.

**TIP:** Always remind your clients that when they need to call customer service, always refer to the number listed on their member ID card.

### e-Certificates

#### What's changing:

With our transition to the ISG system, we are able to offer your clients access to e-Certificates. Either by email or through anthem.com, your clients can quickly view their Plan Notices, Policies, Agreements, Evidence of Coverage booklets, Explanation of Benefits statements and much more.

#### WHAT YOU NEED TO KNOW:

After transition to the new system on their renewal date, we'll send members a flier with everything they need to know on how to register.

#### WHAT YOU NEED TO KNOW:

The new customer service numbers for our ACA-compliant plans can be found on the back of the member ID card.

If a member does call the old customer service number, rest assured that a trained associate will still handle the call and route to the appropriate area for immediate attention.

# Member ID Cards

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At renewal, members will receive new ID cards for their ACA-compliant benefits. The cards will look very similar to what they look like today, but there are some changes.

### What's changing:

#### Member Name

Space is limited for member names and addresses so they'll see a slight variation in how their information is displayed on their ID card, for example:

|                         |                      |
|-------------------------|----------------------|
| <b>Prior to 1/1/14:</b> | <b>After 1/1/14:</b> |
| SANTORO SAN ANGELO      | SANTORO SAN ANGE     |

#### Alpha Prefix

While member ID numbers are not changing, the three-letter prefix that appears before the member ID number is changing. The prefix identifies for a doctor or hospital the member's product type and associated provider network. We have developed unique prefix codes to distinguish between Anthem plans purchased directly through us, as well as Anthem's plans offered through the Health Insurance Marketplace, also referred to as the Exchange.

| SMALL GROUP – PURCHASED DIRECTLY THROUGH ANTHEM |              |               |
|---|--------------|---------------|
| Alpha prefix                                    | Product type | Network       |
| YTB   | HMO/POS      | HealthKeepers |
| YTN   | PPO          | KeyCare PPO   |

| SMALL GROUP – PURCHASED THROUGH THE HEALTH INSURANCE MARKETPLACE |              |                           |
|--|--------------|---------------------------|
| Alpha prefix   | Product type | Network                   |
| YTU  | HMO/POS      | Pathway X Tiered Hospital |

### Member Customer Service Numbers

To streamline our members' customer service experience, we have established dedicated phone numbers to support members who renew into an ACA-compliant health plan. These numbers are changing and are listed on page 11.

### Group Number

A new Group Number will be assigned at renewal and will be included on the member ID card.

### Contract Code

The ID card also lists a four-character contract code. The contract code is unique to the benefit plan for the member.

### WHAT YOU NEED TO DO:

Remind your clients how important it is to use their new member ID cards. If they don't, they risk claims being denied or having to pay for services up front.

# Group Numbers, Group Name and Address, Effective Dates

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### Group Numbers

#### What's changing:

Today, a Group Number consists of eight digits. With our transition to ISG, the Group Number will now be condensed to six digits. Also, all subgroups will roll up to one number. We'll no longer have separate numbers for locations.

#### WHAT YOU NEED TO KNOW:

The new Group Number will be comprised of six digits. Here's an example: **M01234**

### Effective Dates

#### What's changing:

Member effective dates will align to the life event. For example, a newborn who is born on February 14th will have an effective date of 2/14 and the premium will be prorated accordingly.

### Group Name and Address

#### What's changing:

The ISG system limits how some information is stored and displayed for your Small Group clients. For example:

- All mailings are sent to a single address, known as the billing address
- Group name and address length is shorter, for example:
  - **Prior to 1/1/14:**  
TECHNICAL PLANNING ASSOCIATES INC  
DBA DESIGN GROUP AND CLARENCE  
TNPK OFFICE PARK 1579 STRAITS TURNPIKE
  - **After 1/1/14:**  
TECHNICAL PLANNING ASSOC  
1579 STRAITS TURNPIKE

We have applied USPS-approved abbreviations for the changes made to the street address suffix and any secondary address information.

# Waiting Periods

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### What's changing:

To be compliant with ACA regulations, clients with waiting periods greater than 90 days will be transitioned into an ACA-compliant waiting period at the same time they are transitioned into an ACA-compliant plan as defined below:

| Waiting period today                                | Waiting period beginning 1/1/14                    |
|---|--|
| First of the month following 6-month waiting period | First of the month following 60-day waiting period |
| 120-day waiting period                              | 90-day waiting period                              |

If your current Group Imposed Waiting Period is greater than 90 days, it will automatically be converted to an ACA-compliant time period. If members are effective first of the month, they will move to First of the Month after 60 days, which is the maximum allowed waiting period under ACA's regulations. If coverage becomes effective as soon as the waiting period is met, the group will convert to a 90-day waiting period. Current waiting periods that are ACA-compliant will remain unchanged. For example: An employee is hired on 10/1/13. Prior to this group's renewal period, the standard waiting period was six months. The group's renewal period is 2/1/14 and this member's waiting period will now be satisfied as of 2/1/14.

Employees hired before the renewal date who have not yet met the waiting period, will become effective on the earlier of the previous group imposed waiting period or the new period beginning on the renewal date. No member can wait more than 90 days after the group renewal date before their coverage becomes effective. It is the employer group's responsibility to ensure that member applications are submitted in a timely manner for members realizing a reduced waiting period.

We understand that your clients may have questions, for example, what happens with members in their current waiting period? The answer is – it depends on where they are in their waiting period in relationship to their employer's revised waiting period.

A complete list of waiting period options appears under the Eligibility section of the employer enrollment application.



# Evidence of Coverage, Schedule of Benefits, Master Contract

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### What's changing:

Upon renewal, **employers** will receive a package of materials that includes:

- Thank you for renewing letter
- Copy of their Master Group Contract
- Evidence of Coverage, also known as a Schedule of Benefits



# Billing Statements

## SMALL GROUP

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### What's changing:

- **Billing statements will look different**, but the format is cleaner and they contain all the information they do today.
- **Billing statements will run on the first day of each month.** We will no longer be able to support bi-monthly or quarterly billing periods. Billing statements will also vary in length depending on the number of products offered as well as the number of members covered by the group.
- There is a **new lockbox address** for premium payments and will be included on the new billing statement. It is critical that your **clients update their online banking information** with the new lockbox information. If premium for their ACA-compliant plan is sent to the old lockbox, **it will delay the processing.** The new address is:
  - Anthem Blue Cross and Blue Shield  
P.O. Box 11792  
Newark, NJ 07101-4792
- All premium payments must include the **invoice coupon** to prevent delay in payment processing.
- **Manual member adjustments to the bill cannot be processed.** All premium invoices must be paid in full. To achieve optimum processing speed, the ISG system is highly automated; therefore, manual member adjustments are not recognized. It is critical that groups pay the full amount shown on the billing statement, otherwise the account could move to a delinquent status.
- **New reinstatement process fee**  
A group may only be reinstated twice within a 12-month period. Should a group need to be reinstated, the group must pay all past due amounts and current premium as well as a \$150.00 reinstatement fee.
- **Medicare Supplement billing changes**  
The Medicare Supplement products can no longer be billed on the same group number as active employees so these individuals will receive their bills mailed directly to their home.

### WHAT YOU NEED TO DO:

Your clients can expect to receive a billing statement based on the ACA-compliant benefits outlined in their renewal approximately **30 days prior to the effective date of the renewal.**

If the group selects a different ACA-compliant plan, please let them know that **subsequent bills will reflect the premium change.**

Please emphasize to your clients the importance of **paying their premiums as billed each month and to include the payment coupon.**

# Customer Service

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If members ever have questions, we're standing by with answers and assistance. Our service representatives are highly trained on all aspects of the ISG system and even receive ongoing mentoring from associates of our service centers of distinction which serve the needs of local and large group clients across the country.

### Member Customer Service

To streamline our members' customer service experience, we have established dedicated phone numbers to support members who renew into an ACA-compliant health plan. These numbers are:

|   |                |
|---|----------------|
| Anthem direct                                   | (855) 330-1214 |
| Anthem through the Health Insurance Marketplace | (855) 748-1812 |

| Group Administrator and Broker Services |                |
|---|----------------|
| Anthem direct                           | (855) 250-1430 |
| Anthem through the SHOP Marketplace     | (800) 706-7893 |

**NOTE:** For Small Group members whose employer has opted to Early Renew with Anthem, their customer service numbers will not change.

**TIP:** Always remind your clients that when they need to call customer service, always refer to the number listed on their member ID card.

### Post-Enrollment Group and Broker Services

If you have eligibility and billing questions after your client has renewed, please call our dedicated team:

**(855) 250-7765**

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### Anthem has the resources you need

This is just one piece of how Anthem is here to support you as you help your clients navigate and be “ACA Ready!” In addition to this “Doing Business with Anthem in 2014” guide, you also have access to a number of resources, many of which are tailored to the specific needs of Individual and Small Group.

#### General Resources for You

- [news.anthem.com](#) – We’ve created a special section of our Producer News site to be your “go-to” resource for news and updates.
- [Producer toolkits](#) designed to help you guide your clients through the current ACA environment so they can make decisions that best meet their needs.
- [Ongoing information and educational resources](#) – PowerPoint presentations, FAQs, fliers, talking points – all designed and organized for you to get what you need when you need it most.

#### Individual Resources for You and Your Clients

- [healthcarereformforyou.com](#) – This consumer-focused website provides your Individual clients access to important information about ACA’s regulations, timelines and options for buying insurance. It also includes:
  - A [financial calculator](#) which helps your clients assess the financial differences of offering health care coverage on exchange vs. off exchange.

- An [interactive decision-support tool](#) that provides your clients with a high-level overview of what to expect with the provisions of ACA. It’s a guided user experience that allows the user to answer questions that will help generate information on what ACA means for them.



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#### Small Group Resources for You and Your Clients

- [Summary of Benefits](#) – Easy access to benefit details on Anthem’s plans.
- [Small Group Plan Comparison Tool](#) which easily allows you to compare your Small Group client’s prior plan to their new 2014 ACA-compliant plan. This tool gives you an apples-to-apples comparison of the plans available, making the renewal experience easier for both you and your client.
- [makinghealthcarereformwork.com](#) – You’ll find a comprehensive library of resources to support you and your clients. This website is designed specifically for you and your Small Group clients. Select your role – Producer or Small Group Employer – and the resources that are the most relevant to you will appear, including:
  - An **interactive decision-support tool** that provides you and your clients with a high-level overview of what to expect with the provisions of ACA. It’s a guided user experience that allows the user to answer questions that will help generate information and cost-containment solutions based on their unique responses.
  - **Podcast series** where you can learn about the facts or myths of health care reform – accessible via your computer or mobile device.

Select your State and Role for your custom experience



- A **financial calculator** which helps your clients assess the financial differences of offering health care coverage on exchange vs. off exchange.