```
<DATE>
<Member First Name> <Member Last Name>
<Address 1>
<Address 2>
<City>, <State> <ZIP Code>
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Starting November 4, 2015 certain compound drug(s) will no longer be paid by your plan.

Dear <Member First Name> <Member Last Name>:

During a recent review of drug claims it has come to our attention that we have been paying for certain compounded drugs that are not covered under your existing benefit plan. You recently filled a prescription for one or more of these compound drugs:

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□ RX #>, <date filled>, <Dispensing Pharmacy>
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The compound drug(s) noted above is not covered under your existing drug benefit because one or more of the prescription ingredients within the compound is not approved by the Food and Drug Administration (FDA). For a compound drug to be covered by your health plan it must contain only FDA approved ingredients and requires a prescription. Without FDA approved ingredients, we cannot be assured that the compound is safe and effective to use.

What does this mean to you?

Starting November 4, 2015, your prescription drug plan will no longer pay for the compound drug(s) listed above. That means, the next time you fill a prescription for any of them, you will have to pay the full cost of the drug. Please speak to your doctor to see if there is another drug(s) that is covered and proven to be safe and effective. For full details about your prescription drug coverage, please see your prescription drug rider or portion of your benefit plan that talks about drug coverage.

If you have questions or concerns, please call the customer service number on your member ID card.

We apologize for any inconvenience. We are committed to making sure safe and effective medications are available for you.

Anthem Blue Cross