[Full Brand Name] [Brand address1] [Brand address2] [Brand CSZ]



[Send date - In December 1, 2015 format]

[Recipient Name] [Recipient Address1] [Recipient Address2] [Recipient CSZ]

> Member ID [HCID]

Group ID [Group Number]

[Subscriber First Name], your benefits are changing

Required plan changes are coming May 1, 2020 from our regulator, the Department of Managed Health Care (DMHC). They'll affect the amount you pay when you visit the doctor.

This isn't the news you want to hear — and it's not the kind of news we like to share. But let's work together to make sure you understand the changes.

Changes the DMHC is requiring us to make

You currently get three visits to your primary care doctor or specialist before paying your deductible. Starting May 1, 2020 your plan won't include these three visits with the deductible waived.

You'll pay for the care you get until you meet your deductible when you visit your primary care doctor, specialist, and other health care professionals. You'll pay a copay after meeting your deductible until you meet your out of pocket maximum.

A change we're choosing to make — and it's to your advantage

We're increasing the number of LiveHealth Online visits available at no cost to you. Plans will include 12 visits, after which they'll cost \$5 per visit.

Want more information?

The table on the next page shows the detailed changes to deductibles and LiveHealth Online visits effective May 1, 2020.

Need to see your 2020 Evidence of Coverage? Log in at anthem.com/ca.

Questions? Call the Member Services number on your ID card.

Sincerely,

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Colin Havert Vice President and General Manager California Small Group Business



Benefit-to-Benefit Comparison

Effective on May 1, 2020

Below is an overview of regulatory changes for affected medical plans, which will take effect on May 1, 2020.

For a complete listing of benefits, limitations and exclusions, please review the complete Evidence of Coverage. Amounts listed below are the member's responsibility to pay after any applicable deductible (unless otherwise specified).

PLAN NAME (S):		Anthem Bronze PPO 40/5600/40% Anthem Bronze Select PPO 40/5600/40%				
IMPACTED BENEFITS		Effective January 1, 2020	<i>Effective May 1, 2020 per Regulatory Change</i>			
PHYSICIAN SERVICES						
Office Visits - Primary Care	PPO:	\$40 (ded. waived 3 visits); then \$40 after ded.	Deductible, then \$40 copay			
Office Visits - Specialist	PPO:	\$80 (ded. waived 3 visits); then \$80 after ded.	Deductible, then \$80 copay			
Maternity post-partum visit, Counseling (excludes mental health, substance abuse, Nutritional counseling for eating disorders, acupuncture professional visits, telehealth/telemedicine	PPO:	\$40 (deductible waived) for 3 combined office visits, then deductible applies	<i>Deductible, then \$40 copay</i>			
Preferred Online Visits (LiveHealth Online)	PPO:	No charge for 3 visits; \$5 after 3 visits	<i>No charge for 12 visits; then</i> \$5			
Retail Health Clinic	PPO:	\$40 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$40 copay			

PLAN NAME:		Anthem Bronze PPO 60/6350/40% Anthem Bronze Select PPO 60/6350/40%		
IMPACTED BENEFITS		Effective January 1, 2020	<i>Effective May 1, 2020 per Regulatory Change</i>	
PHYSICIAN SERVICES				
Preferred Online Visits (LiveHealth Online)	PPO:	No charge for 3 visits; \$5 after 3 visits	No charge for 12 visits; then \$5	

Office visits - Primary Care Physician	PPO:	\$60 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$60 copay
Office visits - Specialist	PPO:	\$80 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$80 copay
Maternity post-partum visit, Counseling (excludes mental health, substance abuse, Nutritional counseling for eating disorders, acupuncture professional visits, telehealth/telemedicine	PPO:	\$60 (deductible waived) for 3 combined office visits, then deductible applies	<i>Deductible, then \$60 copay</i>
Retail Health Clinic	PPO:	\$60 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$60 copay

PLAN NAME (S):		Anthem Bronze PPO 70/6300/35%Anthem Bronze Select PPO 70/6300/35%				
IMPACTED BENEFITS		Effective January 1, 2020	Effective May 1, 2020 per Regulatory Change			
PHYSICIAN SERVICES						
Preferred Online Visits (LiveHealth Online)	PPO:	No charge for 3 visits; \$5 after 3 visits	<i>No charge for 12 visits; then \$5</i>			
Office visits - Primary Care Physician	PPO:	\$70 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$70 copay			
Office visits - Specialist	PPO:	\$85 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$85 copay			
Maternity post-partum visit, Counseling (excludes mental health, substance abuse, Nutritional counseling for eating disorders, acupuncture professional visits, telehealth/telemedicine	PPO:	\$70 (deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$70 copay			
Retail Health Clinic	PPO:	\$70(deductible waived) for 3 combined office visits, then deductible applies	Deductible, then \$70 copay			