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 system will be invisible to you and your clients. There are, however, some changes that will impact the administrative details of your day-to-day business.

Here’s what you can expect:

- All ACA-compliant plans will be administered on Anthem’s Individual and Small Group (ISG) system.
- **Individual and Small Group**: Your current non-grandfathered Individual and Small Group customers will be transitioned to ACA-compliant benefits and the ISG system on their 2014 renewal date.
- **Faster updates**: As future ACA regulations are defined, required updates and programming to ISG will be implemented faster than currently possible.
- **Enhanced speed to market**: As we continue to pilot new products and services, the ISG system allows us to quickly expand from a pilot to full market expansion more efficiently.
- **New easier-to-understand Enrollment Applications for all ACA-compliant plans**: Available through the Producer Toolbox secure web portal, we have streamlined our member and employer applications for Individual and Small Group clients.

**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.
Doing Business with Anthem in 2014

HOW ACA CHANGES OUR DAY TO DAY

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

AgentConnect for Individual business
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.

Producer Toolbox
We’ve developed a new secure producer 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

Users of our previous (also called “legacy”) secure broker portal can access the Producer Toolbox using the same user ID and password you already have; 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 right from the new Producer Toolbox home page.

New ACA broker help line
We’ve set up a new broker help line to help you retain you 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 1-855-492-6776 or email at ACAbrokerCentral@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 alpha prefix identifies for a doctor or hospital the member’s product type and associated provider network. We have developed unique alpha 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.

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</table>
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** and it 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 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.

**Special note for your clients who currently pay through bank draft**: We’ll automatically establish on the ISG system their bank draft information, so there’s nothing your clients need to do. Approximately two weeks before the due date we’ll automatically issue their new ID cards with their ACA-compliant benefits and we will draft their account the first week of January. However, if your clients are reapplying for coverage, they will need to update their banking information with a new authorization.

**WHAT YOU NEED TO DO:**

Remind your clients to **always include their invoice coupon with their payment**. This will ensure their payments are processed and applied correctly.

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

Our member customer service numbers are changing beginning 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:

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
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<tbody>
<tr>
<td>Anthem direct</td>
<td>(855) 330-1215</td>
</tr>
<tr>
<td>Anthem through the Health Insurance Marketplace</td>
<td>(855) 748-1813</td>
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</table>

**NOTE:** For Individual grandfathered members, their customer service number 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 DO:** 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.
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**
The ISG system limits the number of characters allowed for a member’s name so there will be slight variation in how a member’s name 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 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.

<table>
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<th>SMALL GROUP</th>
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<td>Alpha prefix</td>
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<tr>
<td>VZU</td>
</tr>
<tr>
<td>VZC</td>
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<td>VZB</td>
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**Small Group Member Customer Service Number**
To streamline our members’ customer service experience, we have established a dedicated phone number to support members who renew into an ACA-compliant health plan. This number is changing and is listed on page 11.

**Group Number (also known as Bill Entity on Billing Invoices)**
A new Group Number will be assigned at renewal and will be included on the member ID card.

**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, also known as Bill Entities on Billing Invoices

What’s changing:
Today, a Group Number consists of nine digits. With our transition to ISG, the group number will also be called a Bill Entity and will be condensed to six digits. Also, all subgroups will roll up to one number. We’ll no longer have separate numbers for locations and Division Codes will no longer be used.

WHAT YOU NEED TO KNOW:
The new Group Number/Bill Entity will be comprised of six digits. Here’s an example: 425989

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.

Effective Dates

What’s changing:
Effective dates will be limited to the first of the month only. We will no longer be able to support 15th of the month effective and renewal dates.
Waiting Periods also referred to as Probationary Periods

SMALL GROUP

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 as defined below:

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<tr>
<th>Waiting period today</th>
<th>Waiting period beginning 1/1/14</th>
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<tbody>
<tr>
<td>First of the month following 6-month waiting period</td>
<td>First of the month following 60-day waiting period</td>
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<tr>
<td>120-day waiting period</td>
<td>90-day waiting period</td>
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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. The following examples will help you as you work with your clients through the ACA requirements.

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

What's changing:

- **Billing statements will look different**, but they are easy to read and 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 it 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 NOT be transferred and applied to their active account, but instead will be refunded. The new address is:
  
  Anthem Blue Cross and Blue Shield  
  P.O. Box 6406  
  Carol Stream, IL 60197-6406

- **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. Reinstatement fees for small groups of 2-50 will remain at $150.00.

**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.
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.

**Member Customer Service**

**Small Group Member Customer Service Number**

To streamline our members’ customer service experience, we have established a dedicated phone number to support members who renew into an ACA-compliant health plan. This number is: (855) 330-1216

**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 Services**

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

(855) 250-7766
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” 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](http://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](http://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 **subsidy estimator** 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.
Small Group Resources for You and Your Clients

- **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.

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

Start by getting up to date with this interactive timeline. You’ll find useful tools to plan — you can download the Anthem Plan Selector to help you and your clients make an informed decision.