

Annual Notice of Changes

Look inside to understand benefits and changes in your plan for 2021



Do nothing to stay in your plan

But keep reading this important information to get the most from your plan. You can use your benefits effective **January 1 – December 31, 2021**. Thank you for your membership.



Anthem Medicare Prescription Drug Member Services

For questions, please call Member Services at **1-833-279-0460** or, for TTY users, **711**, available 24/7, or visit www.anthem.com/ca.



Online tools to help you access care

Our member portal

You are enrolled in Blue Cross MedicareRx (PDP) with Senior Rx Plus. Use your unique member ID printed on our membership card to register and log in to our secure member portal at www.anthem.com/ca. It offers access to important plan information when you need it.

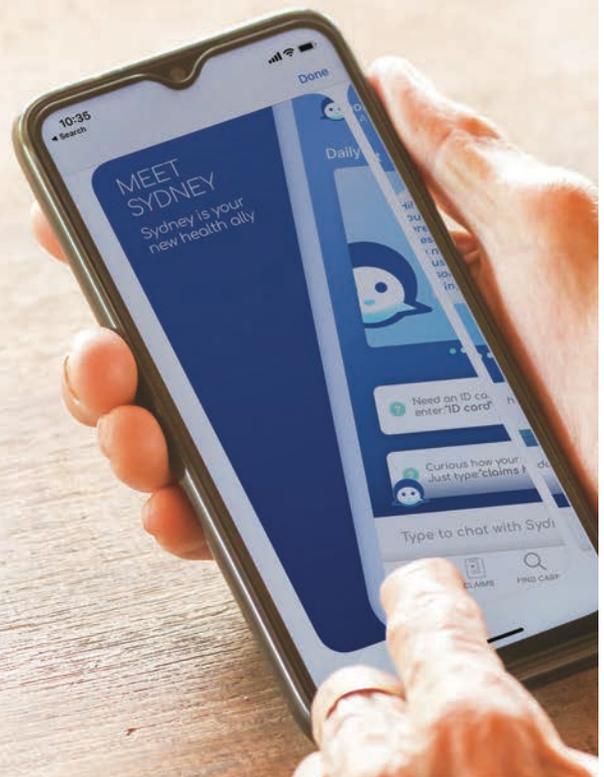
After log-in, use the links below to understand all that your plan offers and how to access your benefits. From the home page:

My plan	Provides more details about your benefits, claims and membership card — including the ability to print a temporary card.
Care	Helps you to locate places where you can use your benefits — when you select Find Care .
Support	Connects you to help via online chat and tells you other ways you can contact us with questions.

The Sydney Health mobile app

Want access to your plan information on the go? Sydney Health gives you a simple and connected experience through your iPhone or Android smartphone.

- View your membership card — wherever you are.
- Use your device's GPS to find nearby pharmacies.
- Check the status of recent pharmacy claims.
- Use the chat feature to quickly find answers to health questions.





Your important plan documents available online

After log-in at www.anthem.com/ca, you can view all important plan documents to learn about any changes to your benefits and how they affect you. (You can also view your plan documents at www.ucppoplans.com.)

Evidence of Coverage (EOC)

This is a legal document that describes what is covered and what you pay for your Medicare prescription drug (Part D) coverage. It also explains your rights and responsibilities. Review the benefits chart located at the front of the *EOC* to see any changes to your share of the cost. The *EOC* is available online approximately two weeks after your receipt of this *Annual Notice of Changes* document.

Part D Formulary (List of Covered Drugs)

This has information about the drugs we cover in your plan. Check if your drugs will continue to be covered, are on the same tier, are available through mail order, or if there are new restrictions or step therapy plans. We encourage you to talk to a doctor if any of the changes affect you.

Your Extra Covered Drugs

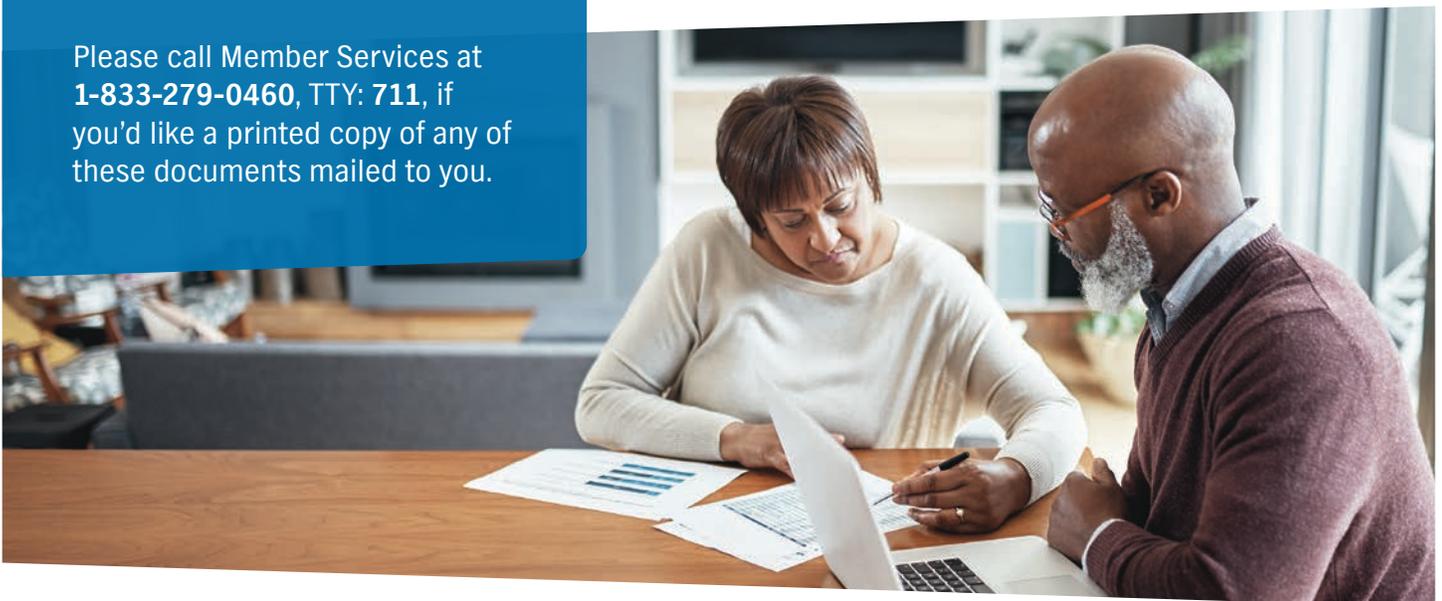
This lists drugs that are covered in addition to what Medicare allows us to cover as part of your *Part D Formulary*. This includes cough and cold medications, vitamins and minerals, and erectile dysfunction drugs.

Pharmacy Directory

The plan year 2021 directory is available beginning December 21, 2020. Plan year 2020 information is available through December 31, 2020.

To locate the directory online, use the *Find Care* link on our member portal — it helps you find the pharmacies available through your plan.

Please call Member Services at **1-833-279-0460**, TTY: **711**, if you'd like a printed copy of any of these documents mailed to you.



Special benefits, services and access to care

We want you to use your benefits and all of the special services/offers in our plan so you can achieve what we call whole-person health. This plan includes a wide variety of programs and tools to help you make choices toward better health in all aspects of your life. **All of these resources are available at no additional medical plan cost to you.**



Active&Fit Direct™

Choose from 9,000+ participating fitness centers nationwide for \$25 a month (plus a \$25 enrollment fee and applicable taxes).



LifeMart

Great deals on beauty/skin care, diet plans, fitness clubs, spas, yoga, sports gear and more.



TruVision

Save up to 40% on LASIK eye surgery at over 1,000+ locations, with over 6.5 million procedures performed in the network.





Using your prescription drug benefits -

IngenioRx* is the plan's pharmacy benefits manager. Be sure to check the drug *Formulary* and list of *Extra Covered Drugs* online to better understand what's covered.

Ways to get your prescriptions filled

- Use retail pharmacies in your plan for short-term prescriptions for medications you need right away.
- For ongoing long-term or maintenance medications, save even more through IngenioRx home delivery. To get started, call us or log in at www.anthem.com/ca and select the **Pharmacy** menu. Follow the prompts and complete the questions for home delivery. We'll keep you updated on your request status.

Learn more about your drug prices

Your drug prices may have risen, or you may have had alternate medications suggested to you. For information about drug prices, visit www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Information-on-Prescription-Drugs/index.html. These dashboards highlight which manufacturers have been increasing their prices and also show other year-to-year drug price information. Make sure to check your *Evidence of Coverage* to understand what costs you may be responsible for in regard to drug prices.

Price medications and get prescription reminders

Our online tools under the *Pharmacy* menu at www.anthem.com/ca allow you to:

- Review your prescription history, set up home delivery and turn on automatic refills.
- Check prices when you need medicine — we'll let you know if a generic drug or home delivery may save you money.
- Opt in or out of phone or email notifications about refills, prescription renewals, order status, shipment and more.
- Manage your payments and account balance.

* IngenioRx, Inc. is an independent company providing pharmacy benefit management services on behalf of your health plan.

Other important things to know

You don't need to do anything to stay in your plan

We will send a new membership card to you. Look for it in the mail. Effective January 1, 2021, this card should be used for any 2021 benefits. If you choose not to stay enrolled in our plan, your eligibility for your UC Medicare PPO or UC High Option Supplement to Medicare plan may be affected. Please contact RASC at **1-800-888-8267** for more information.

Prior authorization

Prior authorization is approval that doctors and pharmacies request and receive from your plan in order to provide you with certain services, treatments, therapies or drugs.

- Select drugs on the plan's *Formulary* list require prior authorization review before being processed and dispensed through prescription orders.
- Your doctor or pharmacy will advise you on alternatives if the prior authorization is denied.

Refer to the benefits chart in your *Evidence of Coverage* and drug *Formulary* documents online for more information about this process and the benefits or drugs that require prior authorization.

Update to late enrollment penalties

The University of California (UC) may have previously paid any applicable Medicare late enrollment penalty (LEP) charges on your behalf. Beginning January 1, 2021, UC will no longer pay this penalty for you. If this applies to you, you will be receiving a monthly invoice for this penalty directly from Anthem in December. Look for more information on UCNet under *Notice of Creditable Coverage*.

You may qualify for help paying for prescription drugs

There are agencies that can help pay for your prescription drugs, such as Medicare's Extra Help program, State Pharmaceutical Assistance Program (SPAP) and AIDS Drug Assistance Program (ADAP). If you qualify, you can get help paying for your drug plan's monthly premium, yearly deductible, coinsurance/copays, coverage gap and late enrollment penalty. To learn more about these programs and additional benefits, contact these agencies. Contact information is listed in the last chapter of your *Evidence of Coverage* document online.

Free health insurance counseling is available

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. It is not connected with any insurance company or health plan. The counselors can answer your questions and help you understand your Medicare plan choices. Look in the last chapter of your *Evidence of Coverage* for your state's SHIP contact information.

Medicare & You 2021 resource

For more information, we encourage you to read *Medicare & You 2021*. This booklet is mailed to people with Medicare every year in the fall. It has a summary of Medicare benefits, rights and protections. It also includes answers to the most frequently asked questions. If you don't have a copy of this booklet, request one at **www.medicare.gov**. Or call **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, seven days a week. TTY users should call **1-877-486-2048**.



FOR QUESTIONS ABOUT ... PLEASE CONTACT:

Medicare prescription drug coverage	Anthem Medicare Prescription Drug Member Services 1-833-279-0460 , TTY: 711 Available 24/7 Or visit www.anthem.com/ca or www.ucppoplans.com
Enrollment	UC Retirement Administration Service Center (RASC) 1-800-888-8267 (in U.S.) Monday to Friday, 8:30 a.m. to 4:30 p.m. PT Fax: 1-800-792-5178 Or visit UCNet at https://ucnet.universityofcalifornia.edu/contacts/rasc.html
Medical coverage with UC Medicare PPO plan with Prescription Drugs or UC High Option Supplement to Medicare	Anthem Health Guide 1-844-437-0486 Monday to Friday, 5 a.m. to 8 p.m. PT Or visit www.ucppoplans.com

It's important we treat you fairly

That's why we follow Federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters. Interested in these services? Call Member Services for help (TTY: 711).

If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, 4361 Irwin Simpson Rd, Mailstop: OH0205-A537; Mason, Ohio 45040-9498. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TTY: 1-800-537-7697) or online at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Get help in your language

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the Member Services number on the back of your ID card.

English: You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY: 711)

Spanish: Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY: 711)

Arabic:

يحق لك الحصول على هذه المعلومات والمساعدة بلغتك مجاناً. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة. (TTY: 711)

Armenian: Դուք իրավունք ունեք Ձեր լեզվով անվճար ստանալ այս տեղեկատվությունը և ցանկացած օգնություն: Օգնություն ստանալու համար զանգահարեք Անդամների սպասարկման կենտրոն Ձեր ID քարտի վրա նշված համարով: (TTY: 711)

Chinese: 您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。 (TTY: 711)

Farsi:

شما این حق را دارید که این اطلاعات و کمکها را به صورت رایگان به زبان خودتان دریافت کنید. برای دریافت کمک به شماره مرکز خدمات اعضاء که بر روی کارت شناسایی تان درج شده است، تماس بگیرید (TTY: 711).

French: Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY: 711)

Haitian: Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm - Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY: 711)

Italian: Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiami il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY: 711)

Japanese: この情報と支援を希望する言語で無料で受けることができます。支援を受けるには、IDカードに記載されているメンバーサービス番号に電話してください。(TTY: 711)

Korean: 귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY: 711)

Polish: Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY: 711)

Portuguese-Europe: Tem o direito de receber gratuitamente estas informações e ajuda no seu idioma. Ligue para o número dos Serviços para Membros indicado no seu cartão de identificação para obter ajuda. (TTY: 711)

Russian: Вы имеете право получить данную информацию и помощь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY: 711)

Tagalog: May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY: 711)

Vietnamese: Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY: 711)

Protecting your privacy

The Health Insurance Portability and Accountability Act (HIPAA) is the federal privacy law. It protects and safeguards your private health information. This law allows you to get a copy of our Notice of Privacy Practices (NOPP) from us.

The NOPP describes:

- Our privacy practices.
- Our legal duties.
- Your rights that deal with your Protected Health Information.

We must follow the privacy practices found in the current NOPP. This NOPP stays in effect until we publish a new one.

We may use data about you that has been made public to be able to let you know about our health plan benefits and types of care.

Our health plan, affiliates and/or vendors, may call or text you. We may use an automatic telephone dialing system and/or a recorded voice. Our calls may be about treatment options. Or they may be about types of care that can impact your health. What we do must comply with the TCPA. If you don't want us to contact you by phone, let us know. Or call **1-844-203-3796** to add your phone number to our Do Not Call list.

You may go to our website, www.anthem.com/ca/privacy, to get a copy of our NOPP. Or you may call the Member Services number on your member ID card.

State Notice of Privacy Practices

Our HIPAA NOPP notes that we must follow state laws. At times, they are stricter than the federal HIPAA privacy law. This notice explains your rights and our legal duties under state law.

Your Private (Nonpublic) Personal Information

We may collect, use and share your private Personal Information (PI) in ways this notice describes. PI identifies you. Your PI can be used to make judgments about your health, finances, character, habits, hobbies, reputation, career and credit. That's why we take safety measures within reason to protect the PI we have about you.

One reason your PI is gathered is for insurance matters.

If we use or disclose PI for underwriting, we must not use or disclose genetic PI.

We may get your PI about you from others such as doctors, hospitals or other carriers.

We may share your PI with persons or entities outside of our company without your OK in some cases.

If we do something that would require us to give you a chance to opt out, we will contact you. We will tell you - how you can let us know that you do not want us to use or share your PI for a given activity. -

You have the right to access and correct your PI. -

You can ask for a more detailed state notice. Please call the Member Services number on your ID card. -

Anthem Blue Cross Life and Health Insurance Company is a PDP plan with a Medicare contract. Enrollment in Anthem Blue Cross Life and Health Insurance Company depends on contract renewal. Anthem Blue Cross Life and Health Insurance Company is an independent licensee of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.



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