Grandfathering Reference Sheet



We're dedicated to helping your clients understand the Affordable Care Act (ACA) and how it will impact their health plan. During the last quarter of 2010, all Anthem Blue Cross Individual members received mailings with information about changes to their benefits, effective December 1, 2010, as well as open enrollment opportunities. These Individual members have also received their policy amendments with further information based upon approval from the state insurance regulator.

Benefit Changes

All Anthem Individual members will see changes to their current benefits as a result of health care reform. The extent of those changes will be based on their grandfathered or non-grandfathered status.

| Non-grandfathered members receive full, mandated PPACA benefits | while grandfathered members receive a subset of mandated benefits. |
|-----------------------------------------------------------------------|--------------------------------------------------------------------|
| Expanded Dependent Coverage | Expanded Dependent Coverage |
| No Annual Dollar or Lifetime Limits | No Lifetime Limits |
| New Patient Protections | New Patient Protections |
| New Limitations on Rescission | New Limitations on Rescission |
| Expanded Preventive Care | |
| No Pre-existing Condition Waiting Period for Children under 19 | |

<u>Click here</u> to view a complete list of plans in your state with grandfathered or non-grandfathered status.

Changes that Impact Grandfathered Status

If your clients haven't made changes to their policies since March 23, 2010, they have grandfathered status. The legislation includes special rules for members with grandfathered status. Having a grandfathered plan means that your clients have the same benefits they did before health care reform, plus some new ones required by the law.

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Important Note about Grandfathered Status

- o Grandfathered status allows your clients to keep their current plan/policy.
- Please note that on November 1, 2010, the Departments of Health and Human Services, Labor, and Treasury (Departments) issued <u>FAQs About the Affordable Care Act</u> <u>Implementation Part IV</u>. In this document, the Departments allowed for an exception to the grandfathered rule in the case of Individual plans that include certain contract language.

We have determined that some of our Individual health coverage plans have this contract language and are impacted by the DOL guidance in the following states:

California

- Georgia
- Colorado
 - Connecticut
- Nevada
- Virginia

Please refer to updated Product Movement Guidelines for more detail on member plan movement options.

Should my client change their grandfathered status?

- Your clients should consider all options carefully before making any changes to their plans.
- Grandfathered plans don't have all the benefits of health care reform. They don't have expanded preventive care benefits, and they still have a pre-existing condition waiting period for children under age 19. This may help control costs over time, but it doesn't guarantee that rates will be lower – now, or in the future.
- Grandfathered plans are "closed" plans, no longer sold to new applicants. It is possible that premiums or costs may increase because new, healthy applicants are no longer being added to the closed "pool" of members. Premium changes for all plans, whether "closed" or open to new sales, are driven by several factors. These include increased consumer demand for services, rising prescription drug costs, advances in medical technology, and benefits and/or taxes required by state and federal legislation.