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**STEVEN HORSFORD**  
CONGRESS OF THE UNITED STATES  
4TH DISTRICT, NEVADA

COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM  
SUBCOMMITTEES:  
ENERGY POLICY, HEALTH CARE & ENTITLEMENTS  
ECONOMIC GROWTH, JOB CREATION  
AND REGULATORY AFFAIRS

COMMITTEE ON HOMELAND SECURITY  
SUBCOMMITTEE:  
CYBERSECURITY, INFRASTRUCTURE PROTECTION,  
AND SECURITY TECHNOLOGIES

COMMITTEE ON NATURAL RESOURCES  
SUBCOMMITTEES:  
ENERGY & MINERAL RESOURCES  
PUBLIC LANDS & ENVIRONMENTAL  
REGULATION

November 19, 2013

Commissioner Scott Kipper  
Nevada Division of Insurance  
1818 E. College Pkwy, Suite 103  
Carson City, NV 89706

Dear Commissioner Kipper:

In light of the Obama Administration's announcement that health insurance companies can continue offering certain healthcare plans for 2014, I am writing to urge you to ensure that insurance companies accurately communicate the options consumers have when purchasing or renewing their plans.

As you may be aware, some insurance companies have used misleading language in their cancellation notices to policyholders. Recently, the Kentucky Department of Insurance fined Humana of Kentucky \$65,430 for misleading letters that inadequately listed the state's exchange as an option to shop for coverage. Unfortunately, Humana of Kentucky is not the only company issuing misleading letters to consumers.

I recently held a telephone town hall during which several constituents complained about questionable practices by insurance companies in Nevada. For example, a letter sent by Anthem Blue Cross Blue Shield of Nevada listed only three options for policyholders: renew a similarly designed plan, do nothing, or shop for a different Anthem plan. Renewal letters sent by the same company to policyholders whose plans are "grandfathered" only provided two options: stay on the current plan or choose a different Anthem plan.

The letters do not list the state exchange, Nevada Health Link, as an option for consumers to purchase health insurance. Only in a footnote do the letters briefly mention that customers may qualify for federal subsidies through the exchange. This vital information regarding Nevada Health Link is virtually undisclosed to Nevada consumers as it is buried in a footnote and does not clearly outline options to compare and choose competing plans on the state exchange. Put simply, these letters are misleading and impair the ability of Nevadans to make informed decisions about their health insurance.

It is my understanding that Anthem Blue Cross Blue Shield has issued approximately 11,000 cancellation notices and approximately 9,000 "grandfathered" plan notices.

I am urging your office, as the agency responsible for regulating private insurance plans in Nevada, to initiate an investigation on the misleading letters sent by Anthem Blue Cross Blue Shield of Nevada. Additionally, I ask you to ensure no other health insurance company in Nevada is sending equally questionable and misleading letters.

There is no doubt that the rollout of the Affordable Care Act has been challenging. Despite difficulties, Governor Sandoval worked with the Nevada Legislature to establish a state exchange and worked to implement the Affordable Care Act. It is our responsibility to work together at the state and federal level to ensure the law is implemented properly and to make improvements where necessary. To that end, we must provide Nevadans with the information they need to make the best, most informed decisions for their personal health care needs.

Sincerely,

A handwritten signature in blue ink that reads "Steven Horsford". The signature is fluid and cursive, with the first name "Steven" and last name "Horsford" clearly legible.

STEVEN HORSFORD  
Member of Congress  
Nevada's 4<sup>th</sup> Congressional District

encl: Anthem Blue Cross Blue Shield of Nevada Plan Cancellation Notice  
Anthem Blue Cross Blue Shield of Nevada Grandfathered Plan Notice

cc: Brian Sandoval, Governor of Nevada  
Catherine Cortez Masto, Attorney General of Nevada  
Mo Denis, Nevada Senate Majority Leader  
Marilyn Kirkpatrick, Speaker of the Nevada Assembly  
Michael Roberson, Nevada Senate Minority Leader  
William Horne, Nevada Assembly Majority Leader  
Pat Hickey, Nevada Assembly Minority Leader  
Kelvin Atkinson, Nevada Senator, Chair of the Senate Commerce and Labor Committee  
David Bobzien, Nevada Assemblyman, Chair of the Assembly Commerce and Labor Committee  
Mike Wilden, Director of the Nevada Department of Health and Human Services  
Jon Hager, Executive Director of the Silver State Health Insurance Exchange



<Subscriber first name> <Subscriber last name>  
<Subscriber address>  
<Subscriber city>, <state> <zip>

<Date>

#### Personalized Open Enrollment Letter

Dear <Subscriber first name> <Subscriber last name>,

Thank you for choosing Anthem Blue Cross and Blue Shield and its subsidiary company HMO Nevada (Anthem) for your individual health coverage. Changes from health care reform (also called the Affordable Care Act or ACA) continue to take effect in 2014. To meet the requirements of the new laws, your current plan can no longer be offered. But you have options and you can count on Anthem to help you make sense of these changes and make sure you have the plan that's right for you.

#### Here are your three options to consider.

1. **Renew early to keep your current plan design.** If you want to keep the same type of benefits as your current plan, this is the best option for you. By acting quickly, you can keep using your same quality benefits through December 1, 2014, which means you can continue to visit your current doctors, hospitals and pharmacies.

The new effective date for your plan will be December 1, 2013. The new rate for <plan name> will be \$<new rate> and your new plan year will be extended until December 1, 2014. And even though your policy will have a new effective date, the amount you've spent towards your deductible will not start over until January 1, 2014.

Please note, if you choose this option:

- o You will not be eligible for financial assistance from the government for your health coverage. Check the notice below to see if you might qualify.
- o Your policy does not have to meet certain federal laws.
- o You are meeting the requirements to have health insurance.
- o Your dental and/or vision plan will renew.

**How?** Complete the enclosed acceptance form and mail it in the postage-paid envelope. Note that this must be received by us no later than **November 15, 2013**.

2. **Do nothing until <renew mm/dd>/14.** You can stay on your current plan, <name of plan>, until <renew mm/dd>/14. On <renew mm/dd>/14, your plan can no longer be offered. So, it's important to choose a new plan before then. We have lots of plans that meet the requirements of the new laws and we are here to help you find one to fit your needs.  
**Note:** If you choose this option, you are meeting the requirements to have health insurance. To make this clear, we've added language to your current policy defining the policy year and anniversary date. A copy of the added language, called an amendment, is included with this letter. Nothing about the benefits of your current policy — has changed.

**How?** To continue your current coverage, just send in your December 2013 payment.

Questions? Call one of our Health Plan Advisors at <xxx-xxx-xxxx>.

3. Shop during Open Enrollment and choose a different Anthem plan for 2014. If your needs have changed, you can shop from October 1, 2013 – March 31, 2014 and choose a different Anthem plan.

How? To review other Anthem plans, speak with your broker/agent or call one of our Health Plan Advisors.

Whenever you change your health plan, it's important to make sure your doctors, pharmacies and medicines are still covered. Find out during Open Enrollment by going to [changemycoverage.com](http://changemycoverage.com).

We're here to help. If you have questions about any of your options, call your broker/agent or one of our Health Plan Advisors at <xxx-xxx-xxxx>, Monday – Friday 7:30 a.m. – 9:00 p.m., Saturday 9:00 a.m. – 5:00 p.m., Pacific Time. We also have a variety of tools available at [anthem.com](http://anthem.com) to help you understand how health care is changing and decide which option is best for you.

Thank you for trusting Anthem for your health coverage. We look forward to continuing to serve you.



Mike Murphy  
President  
Anthem Blue Cross and Blue Shield, HMO Nevada

**IMPORTANT: Financial assistance for your health coverage may be available.**

You could qualify if you have a modified adjusted gross income of \$11,490 to \$45,960 a year (or \$23,550 to \$94,200 for a family of four). <Insert Versioning A or B>

- A. To take advantage of financial assistance, you need to be enrolled in a plan offered through the Health Insurance Marketplace in Nevada, [NevadaHealthLink.com](http://NevadaHealthLink.com). We have Anthem plans available on the Health Insurance Marketplace, so you could continue receiving your health care benefits at a lower cost from us – an organization you know and one that has many options to fit your needs. Try our subsidy estimator during Open Enrollment and see how much money you'll get toward your health plan costs. Then see all our new plans at [changemycoverage.com](http://changemycoverage.com). And if you want, we can help you find the right plan for you and help you enroll.
- B. To take advantage of financial assistance, you need to be enrolled in a plan offered through the Health Insurance Marketplace in Nevada, [NevadaHealthLink.com](http://NevadaHealthLink.com). We have Anthem plans available on the Health Insurance Marketplace, so you could continue receiving your health care benefits at a lower cost from us – an organization you know and one that has many options to fit your needs. Try our subsidy estimator during Open Enrollment and see how much money you'll get toward your health plan costs. Then see all our new plans at [changemycoverage.com](http://changemycoverage.com).

<Subscriber first name> <Subscriber last name>  
<Subscriber address>  
<Subscriber city>, <state> <zip>

<Date>

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To meet the requirements of the new laws, most of our current plans can no longer be offered. But you can relax — your plan is not changing! This means you can keep your same benefits and network of doctors you're used to.

You always have choices. Here are two options to consider.

1. **Stay on your current "grandfathered" plan.** Since you're on a "grandfathered" plan, you DO NOT have to change plans. "Grandfathered" means your plan was in effect as of March 23, 2010 — and it's not subject to some of the new health care reform laws. One advantage to staying on your grandfathered plan is that it gives you the biggest selection of doctors, hospitals and pharmacies to choose from.

By choosing this option, you are meeting the requirements to have health insurance.

How? Send in your January 2014 payment and your coverage will continue.

2. **Choose a different Anthem plan.** Looking for something different? We have lots of plans that meet the new ACA requirements, and we can help you find one to fit your needs. If you're interested in a new plan, you'll need to choose a new plan between October 1 – December 15, 2013.\*

How? To review other Anthem plans, speak with your broker/agent or call one of our Health Plan Advisors. Whenever you change your health plan, it's important to make sure your doctors and medicines are still covered. Find out during Open Enrollment by going to [changemycoverage.com](http://changemycoverage.com).

**Please note:** Whatever option you choose, if you have a dependent turning 26, they won't be able to stay on your plan. They will be covered under your current plan until the end of the month when they turn 26. We will send you more information about their choices soon.

Whenever you change your health plan, it's important to make sure your doctors, pharmacies and medicines are still covered. Find out during Open Enrollment by going to [changemycoverage.com](http://changemycoverage.com).



Questions? Call one of our Health Plan Advisors at <XXX-XXX-XXXX>.

We're here to help. If you have questions about any of your options, call your broker/agent or one of our Health Plan Advisors at <XXX-XXX-XXXX> Monday – Friday 7:30 a.m. – 9:00 p.m., Saturday 9:00 a.m. – 5:00 p.m., Pacific Time. We also have a variety of tools available at [anthem.com](http://anthem.com) to help you understand how health care is changing and decide which option is best for you.

Thank you for trusting Anthem for your health coverage. We look forward to continuing to serve you.



Mike Murphy

President

Anthem Blue Cross and Blue Shield, HMO Nevada

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- A. To take advantage of financial assistance, you need to be enrolled in a plan offered through the Health Insurance Marketplace in Nevada, [NevadaHealthLink.com](http://NevadaHealthLink.com). We have Anthem plans available on the Health Insurance Marketplace, so you could continue receiving your health care benefits at a lower cost from us – an organization you know and one that has many options to fit your needs. But if you switch, your new plan won't be "grandfathered." Try our subsidy estimator during Open Enrollment, and see how much money you'll get toward your health plan costs. Then see all our new plans at [changemycoverage.com](http://changemycoverage.com). And if you want, we can help you find the right plan for you and help you enroll.
- B. To take advantage of financial assistance, you need to be enrolled in a plan offered through the Health Insurance Marketplace in Nevada, [NevadaHealthLink.com](http://NevadaHealthLink.com). We have Anthem plans available on the Health Insurance Marketplace, so you could continue receiving your health care benefits at a lower cost from us – an organization you know and one that has many options to fit your needs. But if you switch, your new plan won't be "grandfathered" and you will have a different network of doctors and pharmacy benefits. Try our subsidy estimator during Open Enrollment, and see how much money you'll get toward your health plan costs. Then see all our new plans at [changemycoverage.com](http://changemycoverage.com).

\* The Open Enrollment Period actually goes through March 31, 2014, but if you don't choose another Anthem plan by December 15, 2013, we will assume you wish to remain on your existing plan.