

Isn't it time someone  
created a healthier  
health plan?



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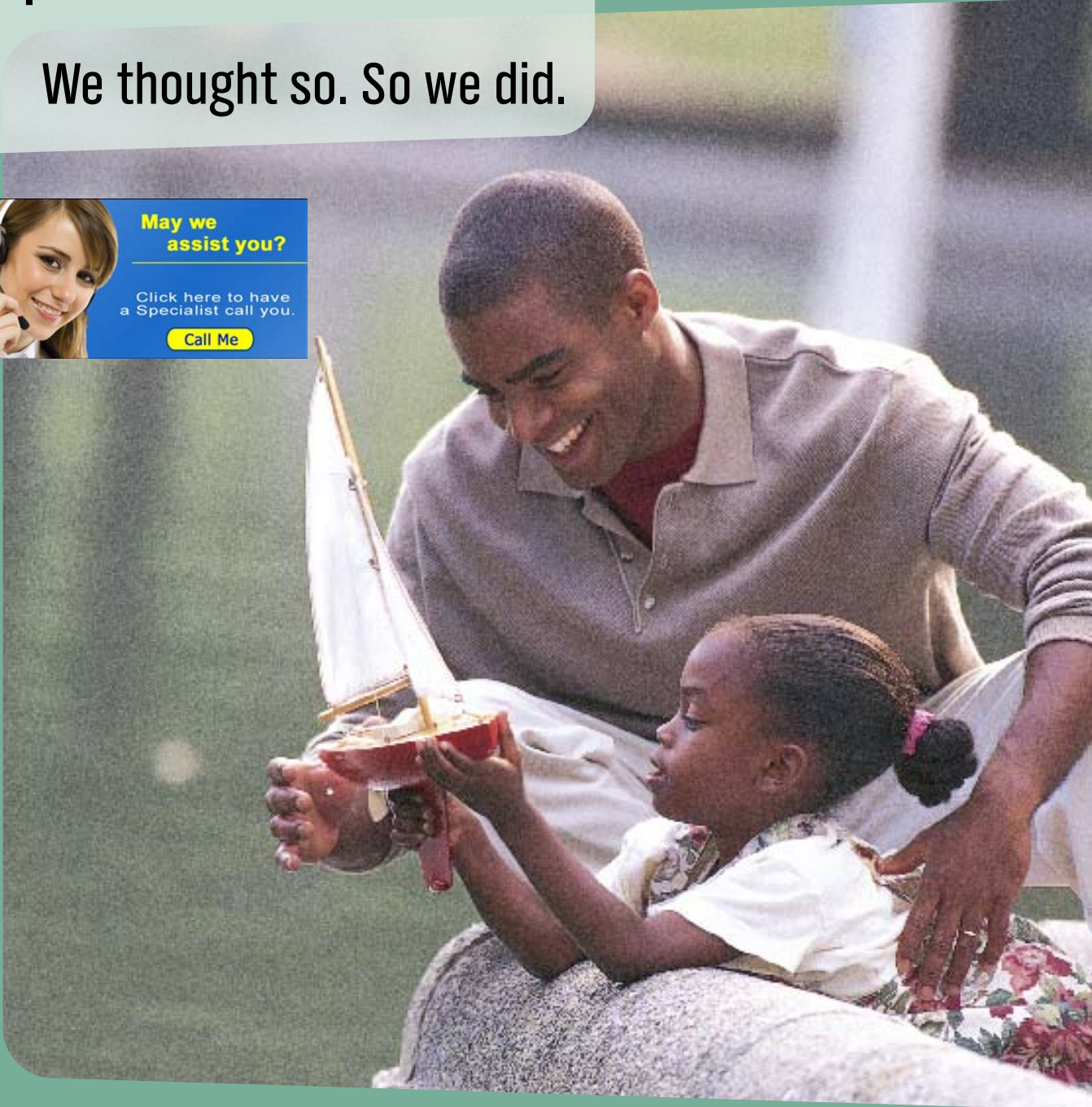
We thought so. So we did.




**May we  
assist you?**

Click here to have  
a Specialist call you.

**Call Me**



**Lumenos<sup>®</sup> Consumer-Driven Health Plans**  
for Individuals and Families in California

A couple is seen from behind, sitting on a stone ledge. They are looking out over a scenic landscape that includes a river, dense green trees, and a wooden railing. The woman has long brown hair in a ponytail, and the man has dark hair. They are both wearing blue shirts. The scene is bright and natural, suggesting a park or a scenic overlook.

## **Our Lumenos plans are for people who want to take more control of their health care and expenses. Does that sound like you?**

At Anthem Blue Cross Life and Health Insurance Company (Anthem), we think health plans should do more than pay for care when you're sick. Good health is something to work on all the time. Whether you have a long-term condition, a temporary illness, or even if you're currently in good health, there are things you could be doing to maintain or improve your health. Do you want a health plan that helps you do those things?

We thought so. And we developed a portfolio of health plans whose goal is to give you accounts, information, services and rewards to help maintain and improve your health. These consumer-driven plans – which we call our Lumenos plans – offer the kinds of things that help you reach your health potential and give you more control over your health care dollars, plus a whole lot more.

# What makes the Lumenos plans different?

## A health account that empowers you and offers flexibility

Lumenos plans give you the ability to better manage and control your health care dollars. They are designed to help you reduce your out-of-pocket health expenses, while improving your health and well-being. Plus, you have three plan choices and a variety of deductible options, so you can tailor the plan to your needs and budget – for even more flexibility.

- OPTION 1: Lumenos Health Savings Account (HSA) Plan
- OPTION 2: Lumenos Health Incentive Account (HIA) Plan
- OPTION 3: Lumenos Health Incentive Account Plus (HIA Plus) Plan

Remember, the higher the deductible, the lower your premium. You'll also need to consider what you can comfortably afford to pay up front for medical care before traditional health coverage begins.

## Preventive care covered – before your deductible

When you use our network providers, nationally recommended preventive care services are covered by us, with no additional cost to you. Below are some of the covered preventive care services:

Child Preventive Care	Adult Preventive Care
<b>Preventive Physical Exams</b>	<b>Preventive Physical Exams</b>
<b>Immunizations</b>	<b>Immunizations</b>
<b>Screening Tests including the following:</b> <ul style="list-style-type: none"><li>• Eye chart vision screening</li><li>• Hearing screening</li><li>• Screening for lead exposure</li><li>• Pelvic exam and Pap test</li></ul>	<b>Screening Tests including the following:</b> <ul style="list-style-type: none"><li>• Eye chart vision screening</li><li>• Hearing screening</li><li>• Cholesterol and lipid level screening</li><li>• Blood glucose test to screen for Type II diabetes</li><li>• Prostate cancer screenings including digital rectal exam and PSA test</li><li>• Breast exam and Mammography screening</li><li>• Pelvic exam and Pap test</li></ul>

## 360° Health® – Personalized services and online tools for health-conscious consumers

360° Health is our approach to surrounding you with the resources, tools, guidance and support to help you make the right health care decisions for you and your family. You'll have access to a wealth of ways to improve and maintain your health – all at no additional charge, including:

- An online MyHealth Assessment designed to help you measure your overall health.
- Our health coaching programs for managing ongoing conditions, and our Healthy Lifestyles programs such as Tobacco-Free and Healthy Weight.
- A 24/7 NurseLine when you need a quick answer to a routine health question or information on a medical issue.
- An online health site with tools and information, including network provider listings, hospital quality ratings, prescription drug costs, wellness articles, and much more.

## Built-in value through our discounts

You choose your own doctor and you never need referrals – and when you use our network providers, you can save money because you'll receive our negotiated discounts on services and prescriptions. If you visit an out-of-network provider, you'll still have benefits, but your share of the cost for covered services will increase.

# How the Lumenos plans work

## Preventive Care

### Preventive care to maintain your health.

- 100% coverage for nationally recommended preventive care services with no deduction from your health account and no out-of-pocket costs when you use network providers.
- If you see an out-of-network provider, then your deductible or out-of-network coinsurance responsibility will apply.

## Health Account

### Health account to pay for medical care and prescriptions.

- You can use these funds to pay for covered health expenses.
- You'll earn additional credit for your health account with reward credits<sup>1</sup> for healthy behaviors. These credits help pay for covered expenses.
- Unused funds roll over from year to year so your account can keep growing to help meet future health care costs.
- The funds you spend from your health account on covered expenses apply to your plan deductible, which must be satisfied before traditional health coverage begins.

## Out-of-Pocket “Bridge” to Traditional Health Coverage

### Then, use Traditional Health Coverage, if needed.

- Plans include a bridge amount, an annual deductible, coinsurance and an annual out-of-pocket limit. See the Plan Comparison for specific amounts for each plan.

#### **Bridge**

- Once all of the funds in your health account are used to offset your annual deductible, you pay the remaining deductible amount. This payment is called a “bridge” amount because it bridges the health account and traditional health coverage components of the plan.
- Your bridge amount will vary depending on how much of your account you spend to help meet your annual deductible.
- **Health Account + “Bridge” = Annual Deductible**

#### **Plan Deductible<sup>2</sup>**

- The plan's annual deductible must be satisfied before traditional health coverage begins.
- Health account funds used for covered medical expenses from both in-network and out-of-network providers apply to your deductible.

#### **Coinsurance**

- When traditional health coverage begins, the plan pays all or the majority of covered expenses, depending on the plan selected. With some Lumenos plans, you pay no coinsurance in-network after your deductible; with others, you pay 30% in-network after your deductible.
- The coinsurance percentage you pay will be less for covered services received from an in-network provider. You will pay a higher coinsurance percentage for services you receive from an out-of-network provider.
- You pay the same coinsurance percentage for most benefits, such as physician office services, urgent care, emergency room and prescription drugs.

#### **Out-of-Pocket Limit<sup>2</sup>**

- The plan pays 100% of in-network covered expenses after you reach the annual deductible and out-of-pocket limit.
- The amount you pay for your coinsurance counts towards your annual out-of-pocket limit.
- The plan includes a separate out-of-pocket limit for in-network services and for out-of-network services.

## Traditional Health Coverage

<sup>1</sup> Reward credits available for HIA and HIA Plus plans only.

<sup>2</sup>The annual deductible and annual out-of-pocket limit are based on a calendar year.

## Three Lumenos plan options

Our portfolio of Lumenos plans offers three choices for individuals and families. You decide which one works best for you:

• **OPTION 1: Lumenos Health Savings Account (HSA) Plan** is funded by your own contributions, which may be tax-deductible. This type of plan gives you the option to open an account called a Health Savings Account, or HSA, which you can use to pay for medical care and prescriptions; and can lower the amount you have to spend out of your pocket.

Plus, the HSA plan provides an opportunity for tax savings. If you open a Health Savings Account with your Lumenos HSA plan, you can save on taxes in three ways:

- First, contributions you make to your account may be tax-deductible (within certain IRS limits), which can reduce your overall taxes.
- Second, the money in your account can earn tax-free interest and you even have the opportunity to save for the future.
- Third, withdrawals to pay for eligible medical expenses are tax-deferred.

You can also use the money in your HSA to pay for eligible medical expenses that aren't covered by the health plan, like contact lenses, over-the-counter medications, or orthodontic braces (however, these amounts won't apply to your deductible).

• **OPTION 2: Lumenos Health Incentive Account (HIA) Plan** is funded entirely through reward credits you can earn for healthy behaviors. It gives you an account called a Health Incentive Account, or HIA, which you can use to help pay for medical care and prescriptions, and can lower the amount you have to spend out of your pocket.

• **OPTION 3: Lumenos Health Incentive Account Plus (HIA Plus) Plan** is funded with quarterly contributions from the health plan. It gives you an account called a Health Incentive Account, or HIA. You can earn additional reward credits for your account with rewards for healthy behaviors. You can use the health account credits for covered medical care and prescriptions, and can lower the amount you have to spend out of your pocket.

Plan Features	HSA	HIA	HIA Plus
100% coverage for preventive care with no deduction from your health account and no out-of-pocket costs when you use in-network providers	✓	✓	✓
Health account to help pay medical expenses	✓	✓	✓
Health account balance belongs to you if you leave the plan	✓		
Rewards for doing things to improve your health potential		✓	✓
Opportunity for tax savings	✓		
Traditional Health Coverage to protect you against large health expenses	✓	✓	✓
Access to our interactive online health site to help you make better health decisions	✓	✓	✓
Access to personalized services	✓	✓	✓

The key difference among the three is how contributions are made to your health account and how you can use those credits to help pay for health expenses. The HSA Plan offers an opportunity for tax savings while the HIA and HIA Plus Plans provide rewards for activities to improve your health potential.

No matter which plan you choose, our Lumenos plans are designed to make it easier for you to do the right things for your health.

## Take a closer look at our Lumenos plan options:

### OPTION 1: Lumenos Health Savings Account (HSA) Plan

If you select the Lumenos HSA Plan, you have a separate Health Savings Account (HSA). You can make tax-deductible contributions (with certain IRS limits and requirements) to your account, and withdraw the money tax-free to pay for eligible medical expenses, including prescriptions.

The tax advantages help to lower your out-of-pocket costs, and the money you use from the account applies to your “bridge” responsibility (the amount you must pay out of pocket before traditional health coverage kicks in).

There are other advantages: If you don't spend all the money in a given year, the amount rolls over, so your account keeps growing. **The money in the account is yours to keep – it's never forfeited, even if you leave the health care plan.**

Your HSA can be set up for you with ACS/Mellon Trust of New England® (Mellon) – or you can choose another financial institution. Refer to page 8 to see how easy an HSA with Mellon is for you to use. Consultation with your tax advisor is a wise choice when considering any strategy to maximize tax benefits for your personal circumstances.



# How could the Lumenos HSA Plan work for you?

Let's look at one example of how the Lumenos HSA Plan can help individuals and their families. You can view more examples at [anthem.com/ca](http://anthem.com/ca).



## STEVE ADAMS

Steve is a healthy 35-year-old who loves skiing and the outdoors. Being healthy is important to him, but he never really thinks about it. Unfortunately, he took a nasty spill on the slopes and had to have knee surgery later in the year. Since his expenses were higher than usual, Steve had some out-of-pocket expenses in his first year. His second year was more typical and he was able to begin to build savings in his HSA for the future.

360° Health services used by Steve:

- Online MyHealth Assessment
- Online physician directory and profiles
- 24/7 NurseLine
- Online fitness program to help Steve stay healthy

## STEVE ADAMS' HSA PLAN

Steve contributes \$1,500 to his HSA each year. His plan's deductible is \$3,000. If he chooses to use his HSA to pay for covered services, this will reduce the out-of-pocket amount (the bridge) needed to meet his deductible before the Traditional Health Coverage begins.

Year 1	
HSA: \$1,500 contribution	\$1,500
Total Expenses:	\$4,650
Preventive care services	\$250
Arthroscopic knee surgery	\$4,200
Prescription drugs	\$200
Paid by preventive care benefit - no deduction from HSA	\$250
Expense balance remaining	\$4,400
Amount paid from HSA (Steve's choice)	-\$1,500
Steve pays remainder of bridge amount needed to meet annual deductible (\$3,000 - \$1,500 = \$1,500)	-\$1,500
Expense balance remaining	\$1,400
Amount paid by Traditional Health Coverage (100% x \$1,400 = \$1,400)	-\$1,400
Total Amount Plan Pays	-\$1,650
Total Amount Steve Adams Pays (includes Steve's HSA contributions)	-\$3,000
HSA Rollover to Year 2	\$0

Year 2	
HSA Balance: \$1,500 contribution for Year 2	\$1,500
Total Expenses:	\$500
Preventive care services	\$200
Office visits	\$100
Prescription drugs	\$200
Paid by preventive care benefit - no deduction from HSA	\$200
Expense balance remaining	\$300
Amount paid from HSA (Steve's choice)	-\$300
HSA Rollover to Year 3	\$1,200

Since Steve did not spend all of his HSA dollars, he did not need to pay any additional amounts out of pocket this year.

This is an example. Different coinsurance and deductible options may be available, and your actual experience will vary. All expenses assume the use of in-network providers.

# Your Lumenos HSA with Mellon Bank

Anthem makes it easy to get your account started. We've partnered with Mellon to make establishing and managing your Health Savings Account simple – we'll even set up the account for you once you're approved for our health plan coverage. Or, if you would rather use another financial institution, that's fine too.

## Lumenos HSA with Mellon Key Features

The Lumenos HSA with Mellon provides many useful tools and services:

- a single customer service contact for the health plan and the Health Savings Account
- a single online health site to access your plan benefit information and account details
- competitive interest rates and investment options for the funds in your Health Savings Account

## HSA Welcome Kit

If you have selected to use our banking partner on your application form, your Health Savings Account will automatically be established with Mellon once you're approved for the Lumenos HSA plan. A separate application for your account is not required (unless you choose a different financial institution). Soon after you're approved for the plan, you will receive an HSA Welcome Kit with all of the banking documentation and instructions for using your Health Savings Account.

## Interest and Investments

You will earn interest on your Health Savings Account funds and will also have the opportunity to invest your funds once your account balance reaches \$3,000. Investment options include a number of mutual funds from the Dreyfus family of mutual funds. Once you are ready to invest, you can request a prospectus for each fund for more details.

## Debit Cards and Checkbooks

Use your MasterCard® debit card or your Health Savings Account checkbook – provided by Mellon – to pay your health care provider or pharmacy directly for eligible medical expenses, or to access cash from your account.

## Deposits to Your Account

Contribute to your Health Savings Account by sending a check and deposit slip to the address printed on your checkbook. You can also set up an electronic funds transfer between your bank and Mellon for regular account contributions.

## Account Activity Statements

Each month, you will receive a statement from Mellon that shows all of your account activity. You will also receive an IRS 1099 form and an IRS 5498 form from Mellon near tax time to assist with tax preparation.

# Mellon Health Savings Account Fee and Rate Schedule

The following administrative and banking fees apply to the Health Savings Account with Mellon:

## Administrative fees

- One time account set-up fee \$15

## Banking fees

- Monthly account fee \$2.95
- Debit card transactions no charge
- Check writing no charge
- ATM transactions \$1
- Card replacement fee \$5
- Check reorder \$10
- Non-sufficient funds \$25
- Stop check service \$25
- Duplicate check \$5

You will receive a Health Savings Account Deposit Agreement and Disclosures and Fee Sheet in your Mellon Welcome Kit after you're approved for the Lumenos HSA Plan. Please refer to those documents for the complete terms and conditions related to your account.

## To open a Health Savings Account, the IRS maintains certain eligibility requirements:

- You must be covered by an HSA-compatible high deductible health plan (such as the Lumenos HSA plan)
- You must be a U.S. resident, and not a resident of Puerto Rico or American Samoa
- You cannot be covered by any other medical plan that is not an HSA-compatible high deductible health plan
- You cannot be enrolled in Medicare
- You cannot be claimed as a dependent on another individual's tax return
- If you are a veteran, you may not have received veteran's benefits within the last three months
- You cannot be active military

# The Lumenos Health Incentive Account (HIA) and Health Incentive Account Plus (HIA Plus) Plans: powerful rewards for your health

With the HIA or HIA Plus Plans, you'll have the opportunity to earn contributions to your health account – while improving your health – by participating in our rewards programs. Reward credits in your health account are used to help you pay part of your annual deductible. And amounts you don't use can roll over to the next year.

## How to Earn Reward Credits

The health plan will contribute reward credits into your health account for taking any of the following steps to improve and maintain your health:

- **Completing or updating a MyHealth Assessment**, our online tool designed to help measure your overall health. The health information you provide is secure and strictly confidential. Earn \$50 per family per year.
- **Enrolling in and graduating from one of our health coaching programs**, a one-on-one support program intended to help you proactively manage your health. Available if you qualify. Earn \$100 for enrolling and \$100 for graduating.
- **Completing our Tobacco-Free Program**, designed to help you lead a tobacco-free lifestyle. Participation is open to you and your covered family members age 18 or older, and includes counseling support and tools, including nicotine replacement therapy coverage. You and your covered spouse can each earn \$50 for completing the program (one reward per lifetime).
- **Completing our Healthy Weight Program**, personalized phone course with a team of counselors (a registered dietitian and health educator) designed to help you adopt lifestyle changes necessary to lose weight and maintain weight loss. Participation is open to you and your covered family members age 18 and older who have a Body Mass Index (BMI) of 25 or higher. You and your covered spouse can each earn \$50 for completing the program (one reward per lifetime).



## OPTION 2: Lumenos Health Incentive Account (HIA) Plan

If you select the Lumenos HIA Plan, your health account is funded entirely through rewards – credit you can earn in your health account for doing the right things for your health. Just like the other Lumenos plans, you can use this credit to pay for covered medical expenses, including prescriptions.

Once all the credit in your health account is spent, you satisfy a limited out-of-pocket responsibility – called a “bridge” – before the traditional health coverage begins. You don’t have to spend it all, though. Unused credit in your account can roll over from year to year, as long as you remain in the plan. (If you leave the plan, however, any credit left in your account is forfeited.)



# How could the Lumenos HIA Plan work for you?

Let's look at one example of how the Lumenos HIA Plan can help individuals and their families. You can view more examples at [anthem.com/ca](http://anthem.com/ca).



## MARY JONES

Mary is a healthy 25-year-old who works out four days a week.

360° Health services used by Mary:

- Online MyHealth Assessment
- Online MyHealth Record
- Online physician directory and profiles
- Online office visit guidelines
- 24/7 NurseLine
- Tobacco-Free Program to help Mary stop smoking

## MARY JONES' HIA PLAN

Mary earns reward credits for her HIA by taking certain steps to improve her health. Her plan's annual deductible is \$1,500 for individual coverage. After she uses all of her HIA dollars, she will pay a limited amount out of pocket (the bridge) to meet her deductible before the Traditional Health Coverage begins.

Year 1		
HIA:	\$50 reward credit for completing online MyHealth Assessment, plus \$50 reward for completing the Tobacco-Free Program	\$100
Total Expenses:		\$450
	Prescription drugs	\$200
	OB/Gyn visit and lab tests	\$150
	Office visits	\$100
Paid by preventive care benefit - no deduction from HIA		\$150
Amount paid from HIA (reward credits)		-\$100
Mary pays additional expense remaining, which is applied toward this year's bridge.		-\$200
HIA Rollover to Year 2		\$0

Year 2		
HIA Balance:	\$0 from Year 1, plus \$50 reward credit for updating the online MyHealth Assessment	\$50
Total Expenses:		\$500
	OB/Gyn visit and lab tests	\$350
	Prescription drugs	\$150
Paid by preventive care benefit - no deduction from HIA		\$350
Amount paid from HIA (reward credits)		-\$50
Mary pays additional expense remaining, which is applied toward this year's bridge.		-\$100
HIA Rollover to Year 3		\$0

This is an example. Different coinsurance and deductible options may be available, and your actual experience will vary. All expenses assume the use of in-network providers.

## OPTION 3: Lumenos Health Incentive Account Plus (HIA Plus) Plan

If you choose the Lumenos HIA Plus Plan, we will make quarterly contributions to a health account on your behalf (a fixed amount for individuals and more for families). You use these funds first to pay for covered medical care and prescriptions.

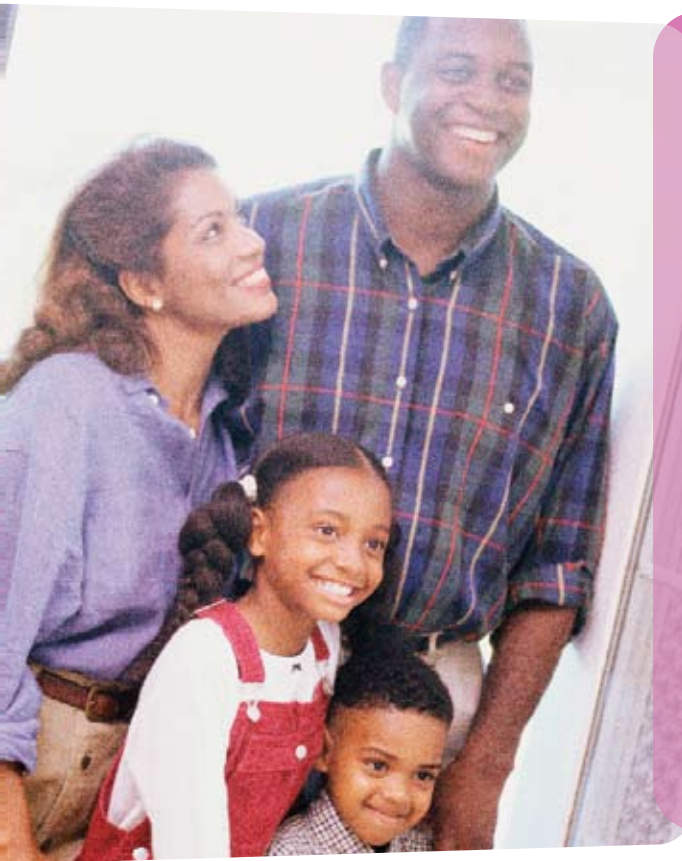
Once all the credit in your health account is spent, you satisfy a limited out-of-pocket responsibility – called a “bridge” – before the traditional health coverage begins. You don’t have to spend it all, though. Unused credit in your account can roll over from year to year, as long as you remain in the plan. (If you leave the plan, however, any credit left in your account is forfeited.)

You also have the opportunity to earn reward credits for your health account for taking certain steps to improve your health.



# How could the Lumenos HIA Plus Plan work for you?

Let's look at one example of how the Lumenos HIA Plus Plan can help individuals and their families. You can view more examples at [anthem.com/ca](http://anthem.com/ca).



## THE SMITHS

The second year the Smiths were enrolled, Mr. Smith had major surgery for his back. Thanks to their HIA savings from their first year, the Smiths had funds in their HIA account to help cover some of their bridge amount in Year 2.

360° Health services used by all the Smiths:

- Online MyHealth Assessment
- Online MyHealth Record
- Online physician directory and profiles
- Online office visit guidelines
- 24/7 NurseLine
- Online hospital procedure guides - what to expect in the hospital, safety tips and self-care at home – to help with Mr. Smith's back surgery
- MyHealth Coach support for home care after surgery and low back pain

## THE SMITHS' HIA PLUS PLAN

The Smiths receive a \$1,000 annual contribution from the health plan (provided on a quarterly basis) in their HIA account each year. Their plan's annual deductible is \$6,000 for family coverage. If they use all of the credit in their account, they will pay \$5,000 out of pocket (the bridge) to meet their deductible before the Traditional Health Coverage begins.

Year 1		
HIA:	Annual contribution is \$1,000, plus \$50 reward credit for completing the online MyHealth Assessment	\$1,050
Total Expenses:		\$650
	Prescription drugs	\$150
	Preventive care services	\$500
Paid by preventive care benefit - no deduction from HIA		\$500
Expense balance remaining		\$150
Amount paid from HIA		-\$150
Total Amount the Smiths Pay		\$0
HIA Plus Rollover to Year 2		\$900

Year 2		
HIA Balance:	\$900 from Year 1, plus \$1,000 annual contribution for Year 2 and \$50 reward credit for updating the online MyHealth Assessment and \$200 reward credit for enrolling in and graduating from the MyHealth Coach Program	\$2,150
Total Expenses:		\$15,050
	Preventive care services	\$300
	Hospital and surgery charges	\$14,300
	Prescription drugs	\$450
Paid by preventive care benefit - no deduction from HIA		\$300
Expense balance remaining		\$14,750
Amount paid from HIA balance		-\$2,150
Smiths pay remainder of bridge (\$6,000 - \$2,150 = \$3,850)		-\$3,850
Expense balance remaining		\$8,750
Amount paid by Traditional Health Coverage (100% x \$8,750 = \$8,750)		-\$8,750
Total Amount HIA and Plan Pay (\$2,150 + \$300 + \$8,750 = \$11,200)		-\$11,200
Total Amount the Smiths Pay		-\$3,850
Total expenses paid in Year 2		\$15,050
HIA Plus Rollover to Year 3		\$0

This is an example. Different coinsurance and deductible options may be available, and your actual experience will vary. All expenses assume the use of in-network providers.



## All Lumenos plans include these features

### Save on prescription drugs—including mail order

Prescription medications—even through mail order—are covered when the traditional health plan coverage kicks in (less any applicable coinsurance payments). But that doesn't mean you have to wait to save money:

- The cost of the prescription may be paid first from your health account, if you have funds in the account. If you don't have funds in your account, you still benefit from our discount rate.
- Thanks to our buying power, we are able to negotiate significant discounts on all types of prescription medicines. Just show your health plan ID card at pharmacies in our network— that's over 95% of pharmacies nationwide. Your card lets them know your prescription should receive our discount rate.
- To further lower your cost, visit [anthem.com/ca](https://www.anthem.com/ca) (it's easy to register once you're approved in the plan) to learn about generics or other low-cost alternatives that could save you money.
- You may also save on prescriptions by ordering a 90-day supply through mail order. Once you're approved in the plan, you can download a mail order form from [anthem.com/ca](https://www.anthem.com/ca).

### Get plenty of online support and helpful tools

Regardless of the plan option you choose, once you're approved in the plan, simply register at [anthem.com/ca](https://www.anthem.com/ca) for instant access to a wealth of online content designed to help keep you healthy and save money. Some of the tools and information available to you and your eligible dependents include:

- **MyHealth Assessment:** Our online tool designed to help measure your current overall health. The information you provide is secure and strictly confidential.
- **Health Coaching Programs:** One-on-one support programs to help you proactively manage your health. Available if you qualify.
- **Tobacco-Free Program:** A proven program to manage withdrawal symptoms, identify triggers and learn new behaviors and skills to remain tobacco-free. Participation is open to you and eligible dependents age 18 or older, and includes counseling support and tools, including nicotine replacement therapy coverage.
- **Healthy Weight Program:** A personalized phone program designed to help you adopt lifestyle changes necessary to lose weight and maintain weight loss. A team of counselors (a registered dietitian and health educator) with expertise in weight management will advise you on healthy eating, physical activity and exercise, stress management, and more. You and eligible dependents age 18 and older with a Body Mass Index (BMI) of 25 or higher are eligible for this program.
- **SpecialOffers@Anthem<sup>SM</sup>:** Saves you money on a wide variety of health-related products and services.



## Why should a health plan care about your health?

The fact is, good health not only feels better, it costs less, too. Doing what's best for your health is not a short-term fix – it's a long-term solution. And over the long term, living a healthier life can help you save money. Our Lumenos plans are designed to help you do both.

Once you're enrolled in a Lumenos plan, you'll have coverage for preventive care services and a plan that's designed to help you feel better.

**If you have an ongoing health condition,** you'll have traditional health coverage to protect you against high medical expenses. Plus, our health coaching programs can help you manage certain health conditions for optimal results. And our award-winning online health site can help you maintain and improve your health with tools, information and personalized services.

**If you have occasional health expenses,** you can save dollars from low-expense years to help pay for care in years with higher expenses. Our online health site can help you prepare for a medical procedure. And if you develop a health condition, our health coaching programs can help you manage it more effectively.

**If you have few health expenses,** you may be able to enjoy no out-of-pocket costs, and the chance to save health care dollars from year to year for future health care expenses.

**If you choose the Lumenos HIA plan or HIA Plus plan,** you'll have the opportunity to earn rewards for doing good things for your health.

**To all of these benefits, add one more – it's easy to get started.** Whether you're looking for individual or family coverage, the application can be filled out and submitted easily and securely online.

In other words, our Lumenos plans are for people who want to take more control of their health care and expenses. *Does that sound like you?*

Visit [anthem.com/ca](http://anthem.com/ca) or talk to your Anthem agent today for more information and complete details.



*We're leading a  
revolution in health  
benefits. And the  
winner is your health.*

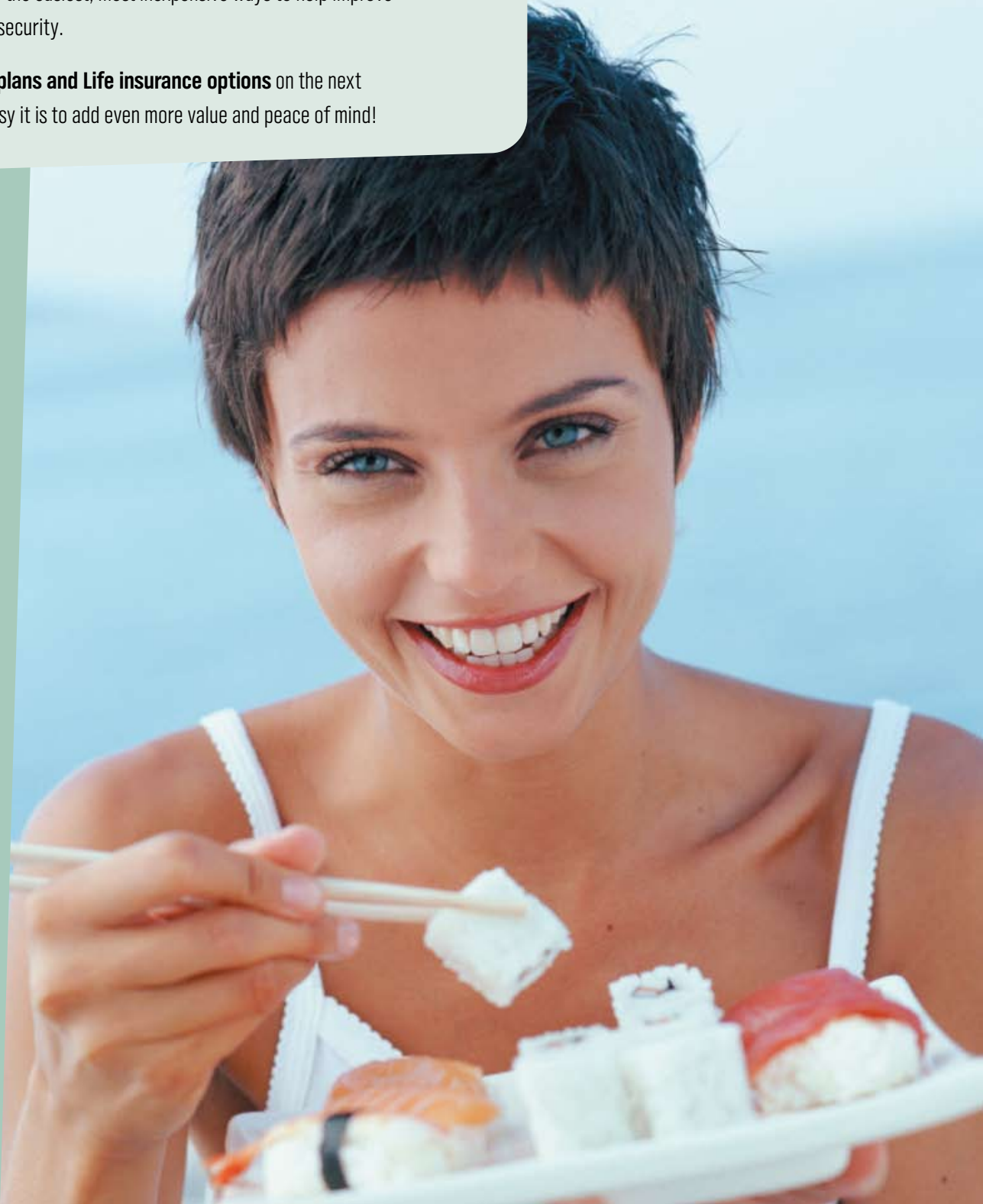
## Speaking of Benefits, We Also Offer Dental and Life

Did You Know?

Research consistently shows links between periodontal disease and several serious health conditions.

Life insurance is one of the easiest, most inexpensive ways to help improve your family's financial security.

Check out our **Dental plans and Life insurance options** on the next page – and see how easy it is to add even more value and peace of mind!



## Why not add Dental Coverage?

We believe that a good dental plan should:

- **Provide quality coverage** at affordable rates
- **Help minimize the cost** of expensive dental care
- **Contribute to your overall health**

Remember: Regular dental checkups and cleanings can help detect early signs of oral health problems, reducing the risk of permanent damage to your teeth and gums and preventing costly treatments later on. Also, your dentist may be the first to see signs of a health problem, helping you to keep it from becoming more serious.

Improve your quality of life, self-confidence and appearance by making good oral health a part of your daily routine and by taking advantage of the benefits offered through our dental plans. Whether you choose our Dental Blue PPO plans from Anthem Blue Cross Life and Health Insurance Company or our Dental SelectHMO<sup>SM</sup> plans from Anthem Blue Cross, you'll get the benefits you need from a company you can trust.



## It's also easy to enroll in Term Life Insurance

Losing a loved one is hard enough without having to worry about financial obligations. Families are often unprepared for this sudden loss, and term life insurance can provide financial support and peace of mind at a difficult time. Here are just a few reasons why you'll want to purchase term life insurance from Anthem Blue Cross Life and Health Insurance Company:

- **It's inexpensive** – just pennies a day
- **It's easy** – no additional forms are required to enroll

### Term Life Monthly Rates

Age	\$15,000 Benefit	\$30,000 Benefit	\$50,000 Benefit	\$75,000 Benefit	\$100,000 Benefit
1-18	\$1.50	\$3.00	N/A	N/A	N/A
19-29	\$2.80	\$5.60	\$9.30	\$11.25	\$13.00
30-39	\$3.25	\$6.50	\$10.80	\$13.50	\$16.00
40-49	\$7.50	\$15.00	\$25.00	\$33.75	\$42.00
50-59	\$20.90	\$41.80	\$69.60	\$97.50	\$125.00
60-64	\$29.40	\$58.80	\$98.00	\$142.50	\$185.00

**For more information on our dental plans or life insurance, ask your Anthem agent today!**

# What the California Individual Lumenos Plans Do Not Cover

Please take a few moments to review the exclusions and limitations. We want you to understand what your coverage does not include before you enroll.

These listings are an overview only. The Lumenos plans Policy booklets contain a comprehensive list of the plans' exclusions and limitations. For a sample copy of a Policy booklet, ask your agent or contact Anthem.

## Exclusions and Limitations

- Cosmetic surgery.
- Custodial care.
- Dental care, dental implants or treatment to the teeth, except as specifically stated in the Policy.
- Orthodontic services, braces, and other orthodontic appliances.
- Durable Medical Equipment, except as specifically stated in the Policy.
- Educational services and nutritional counseling, except as specifically provided or arranged by Anthem.
- Any amounts in excess of the maximum amounts stated in the benefit sections of the Policy.
- Experimental or investigative services.
- Food and/or dietary supplements, except for formulas and special food products as specifically stated in the Policy.
- Any services provided by a local, state or federal government agency.
- Hearing aids.
- Infertility services.
- Mental and nervous disorders and substance abuse, except as specifically stated in the benefit sections of the Policy.
- Care or treatment furnished in a non-contracting hospital, except for a Medical Emergency as defined in the Policy.
- Any services received by Medicare benefits without payment of additional premium.
- Services received before your effective date or during an inpatient stay that began before your effective date.
- Services received after your coverage ends.
- Any services or supplies that are not Medically Necessary.
- Orthopedic shoes, except when joined to braces or shoe inserts.
- Outdoor treatment programs.
- Outpatient drugs, medications or other substances dispensed or administered in any outpatient setting.
- Outpatient speech therapy, except as specifically stated in the Policy.
- Personal comfort items.
- Services or supplies related to a pre-existing condition.
- Private duty nursing.
- Routine physical exams, except for preventive care services (e.g., physical exams for insurance, employment, licenses or school are not covered) except as specifically stated in the Policy.
- Services for which no charge would be made if you did not have a health plan or insurance coverage.
- Services from relatives.
- Sex changes.
- Telephone and facsimile machine consultations.
- Services not specifically listed as Covered Services in the Policy.
- Vision care, except as specifically stated in the benefit sections of the Policy.
- Services primarily for weight reduction or treatment of obesity, except Medically Necessary treatment of morbid obesity.
- Conditions covered by workers' compensation law.
- Maternity and pregnancy care (unless the plan selected specifically includes maternity coverage).

## Enrollment Guidelines

### To enroll, you must be:

- Age 64½ or younger;
- A permanent legal resident of California;
- A U.S. resident for at least the last 3 months;
- The applicant's spouse or domestic partner, age 64½ or younger;
- The applicant's children (under 19 years of age), or the children (under 19 years of age) of the applicant's enrolling spouse or qualified domestic partner;
- The applicant's unmarried dependent children between the ages of 19 through 22 ("dependent" as defined by the Internal Revenue Service).
- The applicant's child (of any age) who is incapable of self-sustaining employment by reason of a physically or mentally disabling injury, illness or condition and is chiefly dependent upon you for support or maintenance.

### Medical Underwriting Requirement

We believe that the cost of our plans should be consistent with a member's expected health care needs and risk factors. That's why Anthem offers various levels of coverage. To determine individual medical risk factors, all applications are subject to medical underwriting. Depending on the results of the underwriting review, a number of things may happen:

- You may be offered coverage at the standard rate, or
- You may be offered the plan you selected at a higher rate, or
- You may not qualify for the plans listed in this brochure, or
- You may be offered an alternate plan.

If you have a significant medical condition and do not qualify for the plan in this brochure or if you have discontinued group coverage, please contact your Anthem representative for information regarding other Individual coverage options.

### Waiting Periods

There is a specific six-month waiting period for coverage of any condition, disease or ailment for which medical advice or treatment was recommended or received within six months preceding the effective date of coverage. If you apply for coverage within 63 days of terminating your membership with another "creditable" health care plan, then you can use your prior coverage for credit toward the six-month waiting period. Anthem will credit the time you were enrolled in the previous plan. Consult with your Anthem agent or representative if you have a question about the underwriting process.

## Rights and Obligations

### Incurred Medical Care Ratio

As required by law, we are advising you that Anthem Blue Cross and its affiliated companies' incurred medical care ratio for 2007 was 80.43 percent. This ratio was calculated after provider discounts were applied.

### No-Obligation Review Period

After you enroll in a Lumenos plan offered by Anthem, you will receive a Policy/EOC booklet that explains the exact terms and conditions of coverage, including the plan's exclusions and limitations. You have 10 full days to examine your plan's features. During that time, if you are not fully satisfied, you may decline by returning your Policy/EOC booklet along with a letter notifying us that you wish to discontinue coverage. Policy/EOC booklets are available for you to examine prior to enrolling. Ask your agent or Anthem.



**Si necesita asistencia o materiales de venta en español, por favor contacte a su agente Anthem.**

This brochure is intended to be a brief outline of coverage and is not intended to be a legal contract. The entire provisions of benefits and exclusions are contained in the contract or certificate of coverage. In the event of a conflict between the contract or certificate of coverage and this brochure, the terms of the contract or certificate of coverage will prevail.

The contribution limits set by the U.S. Treasury and the IRS may be increased for inflation annually. These limits include contributions from any source. Anthem strongly encourages consultation with a tax advisor before establishing a Health Savings Account.

Lumenos, Dental Blue and Term Life are offered by Anthem Blue Cross Life and Health Insurance Company. Dental SelectHMO is offered by Anthem Blue Cross. Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. ® ANTHEM, LUMENOS and 360° Health are registered trademarks. ® The Blue Cross name and symbol are registered marks of the Blue Cross Association.

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