
Stronger with you

Plan updates to keep your
clients well ahead





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Hello



Thank you for your continued service to your Blue Shield of California clients. 2024 Open Enrollment is upon us, and we've been hard at work finding efficiencies and building tools to help you grow your business with Blue Shield of California.

Here are several highlights I am proud to share with you:

- **We are committed to enhancing our members' ability to engage in their health care:** We continue to update and upgrade the Member Portal and Mobile App creating a streamlined welcome journey to direct members to their important information such as benefits, payment options, PCP, and more.
- **We are working to improve your efficiency:** The enrichment of our self-service tools continues so you can easily sign your clients up for AutoPay, send your clients their ID card, quickly review renewal and enrollment status, and get answers to your support questions without picking up the phone via our live chat feature.
- **We are keeping your clients' data safe:** We have implemented 2-step verification to reduce risk to both you and your clients.
- **And, as always, our mission is to provide all Californians with access to high-quality, affordable health care.** We continue to pursue opportunities to work with hospitals, providers, pharmaceutical manufacturers, the state Office of Health Care Affordability, and policymakers to curb the unsustainable rising cost of health care.

We are here to support your efforts during this open enrollment season. We continue to be stronger working together on the mutual goal of providing access to affordable health coverage, worthy of our family and friends.

Sincerely,

A handwritten signature in black ink, reading "Patrice Bergman".

Patrice Bergman
Vice President & General Manager
Individual & Family Plans

Key dates

Open enrollment for 2024 will begin on **November 1, 2023**.

We will mail your clients information about changes to their plan rates and benefits, which we will provide October 1 through October 21.

Starting October 1, Blue Shield members can renew their plan through our online renewal tool at blueshieldca.com/renew. Off-exchange members can change their plan on the same site, but on-exchange members will need to make changes through Covered California. Grandfathered and off-exchange dental, vision and life plan members can renew starting November 1, 2023.

New plan selections must be submitted by December 31, 2023 to ensure a January 1, 2024 effective date.

| | | |
|----------|----|---|
| October | 1 | Blue Shield's online broker and member renewal tools are available |
| | | Clients are notified of any rate or benefit changes to their plan* |
| November | 1 | Open enrollment begins |
| December | 31 | Final date for new members to obtain coverage effective January 1, 2024 |
| | | Final date for renewing members to change plans for a January 1, 2024 effective date |
| January | 31 | Final day of open enrollment and last day to apply for coverage for a February 1, 2024 effective date |
| February | 1 | Special Enrollment Period (SEP) begins and applicants must experience a Qualifying life Event (QLE) to be eligible for coverage |

* The majority of your clients will receive a renewal booklet by October 1. Those who enrolled September through November will receive their 2024 plan information via renewal booklet 2-3 weeks after enrollment.

New for 2024

State enhanced cost sharing reduction (CSR) plans

When the California state budget was approved, the governor authorized the appropriation of \$82.5 million of the HCARF (Health Care Affordability Reserve Fund) to support a Covered California program providing additional financial assistance for the 2024 coverage year. \$165 million was appropriated for the 2025 coverage year and beyond. Covered California will use the funds to enhance existing federal CSR plans by removing the in-network deductibles, reducing the in-network out-of-pocket maximum and some in-network copays. No changes will be made to the existing CSR eligible population (up to 250% FPL) for plan year 2024.

To help ensure that the greatest number of people can take advantage of these cost savings and benefits, Covered California will automatically renew members into the Silver CSR plans if they are eligible. They will move them from Platinum, Gold or Bronze into the richest Silver CSR plan available to them with their same carrier, at no additional premium cost.

If you would like to learn more, be sure to [register](#) for an Open Enrollment webinar where we will discuss the Enhanced CSR plan changes and enrollment as they are implemented.

Grandfathered plan withdrawal

The Shield Savings 5200-G product (issued by Blue Shield Life), is being withdrawn as of December 31, 2023. Members who are currently on this plan will be auto-migrated to the Bronze 60 HDHP PPO off-exchange plan (issued by Blue Shield) with an effective date of January 1, 2024. Notifications will be sent in mid-September. There is nothing for the member to do if they choose to accept the new plan.

Continually upgrading our broker tools

New for Brokers: Our client list has recently been augmented with important new capabilities to improve your efficiency. You can now help your clients even more – right from Broker Connection. You are able to:

- Download, print, and email your clients' virtual ID cards
- Complete a one-time payment for your clients with guest payment
- Live Agent Chat to answer your questions without picking up the phone
- **Coming soon.** Set up Auto-pay for your clients, with existing or new payment methods

We are streamlining our dental plans

We are working hard to get approval on a new dental plan to round out our offerings. The plan is not fully approved yet, but we will provide you with more details via email once it is approved. Stay tuned!

Effective January 1, 2024, we will be closing the Enhanced Dental PPO 50/1250 plan to new enrollment. Existing members are allowed to remain on the plan, so there is nothing for the member to do if they choose to accept the plan.



Vision ID cards with the new vision network provider

New and existing members with vision* coverage will now receive a Vision ID card in their welcome kit, which highlights member benefits and provides a personalized directory of local in-network providers.

The 90-day waiting period for services is no longer required for all vision plans as of January 1, 2024.

Blue Shield of California Life & Health's contract with MESVision will end effective December 31, 2023. Blue Shield Life entered into a relationship where EyeMed will be responsible for all vision services to members beginning January 1, 2024. EyeMed's stated focus is to support a network which grants members the greatest combination of access and choice, through the largest vision network in the industry. The enrollment experience will remain the same, and existing members should experience little impact as there is currently a 96% network provider overlap, and EyeMed is actively reaching out to providers who have not yet joined the EyeMed network.

Keeping your account data safe

We have launched 2-step verification (also known as MFA) for both broker and member accounts that provides an additional layer of security beyond username and password. The 2-step verification can help reduce password-based attacks, protects against phishing and social engineering, meets HIPAA and PHI requirements, and gives you more control over your accounts while maintaining quick access.

Reminder about Medi-Cal Redetermination

Medi-Cal redetermination activities launched in May of 2023. If any of your clients no longer eligible for Medi-Cal still need coverage, now is the time to help complete their enrollment. If you need a redetermination refresher or want to learn more, head to our [training page](#) on Broker Connection.

Reminder about Family Glitch Fix

Don't forget about the Family Glitch Fix. If any of your small group clients' premium for Employer Sponsored family coverage is over 9.12% of their salary, their dependents can enroll in an IFP plan during this open enrollment and possibly qualify for a subsidy.*

* Underwritten by Blue Shield of California Life & Health Insurance Company

* Covered California determines eligibility and the amount of the subsidy.

Rate changes

[Visit the rates page](#) on Broker Connection to download the 2024 rate book and regional rate sheets.

Blue Shield 2024 medical rates are increasing by an average of 15%. Our rates are increasing due to higher utilization of healthcare services, costs stemming from the COVID-19 public health emergency, medical inflation, and increasing pharmacy costs.

As the only major nonprofit health plan in the nation with a 2% pledge (returning all net income above that level to customers and communities), our rate increases are to finance our increasing cost of healthcare services.

Dental, vision*, and life insurance* products will get a rate pass.



Medical plan rate changes

Our non-grandfathered on-exchange, mirrored, and off-exchange medical plan rates will receive an average increase of 15% (14.8% on-exchange and 15.5% off-exchange) state-wide effective January 1, 2024.

Our PPO plan rates will increase an average of 14.8% (14.4% on-exchange and 15.3% off-exchange), while our HMO plans will receive an average increase of 16.1% (16% on-exchange and 17.3% off-exchange).

Our grandfathered medical plans will have an average rate increase of 9.9%.

Please consult our comprehensive [rate books](#) to see detailed rate information.



Dental plan rate changes

Our dental plans will get a rate pass this year. Your clients can still get a Blue Shield dental plan for as low as \$13.40 for adults and \$12.50 for children per month.



Vision plan rate changes

Our vision* plans will get a rate pass this year. Your clients can still get a Blue Shield vision plan for as low as \$6.90 per month.

* Underwritten by Blue Shield of California Life & Health Insurance Company

Network updates

Don't forget to [download the new 2024 PPO and Trio HMO Plans at a Glance brochures](#) on Broker Connection. They are available in English, Spanish, Chinese, Korean, and Vietnamese. You can also order print versions in English and Spanish through the [online ordering site](#).

Our Trio ACO HMO Network covers 28 counties and includes 345 hospitals, over 6,100 primary care physicians, and over 24,200 specialists.

The Trio HMO plan is available in 28 counties



(F) = Full coverage

(P) = Partial coverage

Alameda (F)

Contra Costa (F)

El Dorado (P)

Fresno (P)

Kern (P)

Kings (P)

Los Angeles (P)

Marin (P)

Monterey (P)

Nevada (P)

Orange (F)

Placer (P)

Riverside (P)

Sacramento (P)

San Bernardino (P)

San Diego (P)

San Francisco (F)

San Joaquin (F)

San Luis Obispo (P)

San Mateo (F)

Santa Barbara (P)

Santa Clara (F)

Santa Cruz (F)

Solano (P)

Stanislaus (P)

Tulare (P)

Ventura (P)

Yolo (P)

PPO network

Offer your clients more choice and the providers they want with one of the largest PPO networks in California for the IFP market. Our robust provider network offers access to more than 62,000 doctors, 1,000 urgent care centers, and 320 hospitals. The network includes premier hospitals such as:



Our PPO plans also include coverage for non-network providers, if they are willing to pay a higher share of the cost. If your clients value their choice of providers, a Blue Shield PPO plan may be the right choice for them.

Plan benefit changes

Medical plan benefit changes

There are several benefit cost share changes for 2024, most notably with the six CSR plans: Silver 73 PPO and Trio HMO, Silver 87 PPO and Trio HMO, and Silver 94 PPO and HMO plans.

You will find a high-level summary of key changes by plan in the benefit charts below. For a comprehensive list of all benefit change details, and to see copies of the notifications your clients will receive, visit the [2024 Client Notifications page](#).

Some notable changes include:

- The medical and pharmacy deductibles are being eliminated in the Silver 73, Silver 87, and Silver 94 PPO and Trio HMO plans, but increasing in the Silver 70 PPO and HMO plans and the Blue Shield Minimum Coverage PPO plan.
- Vasectomy services and procedures will now be covered at \$0 when using a participating provider. The cost share has been reduced per the requirements of California Senate Bill 523 (2022).

View the [2024 Client notifications](#) page for more information.

For a comprehensive list of benefits for each plan, please view the [2024 Summary of Benefits](#) page.

Silver 70 Off-Exchange PPO changes

2022

2023

Off-exchange only plans (non-mirrored)

| | Silver 70 PPO and Trio HMO Changes | | | |
|--|------------------------------------|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Medical deductible | \$4,750 | \$9,500 | \$5,400 | \$10,800 |
| Out-of-pocket max (OOPM) | \$8,750 | \$17,500 | \$9,100 | \$18,200 |
| Pharmacy deductible | \$85 | \$170 | \$150 | \$300 |
| Office visit: PCP, mental health, urgent care, rehab, allergy testing, etc. | \$45 | | \$50 | |
| Office Visit: Specialist | \$85 | | \$90 | |
| Tier 1 - Pharmacy copay (after deductible) | \$16 | | \$19 | |
| Outpatient services and surgery coinsurance | 20% | | 30% | |

| | Bronze 7500 Trio HMO | | | |
|---------------------------------|----------------------|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Out-of-pocket max (OOPM) | \$8,750 | \$17,500 | \$9,100 | \$18,200 |
| Mental Health / Substance abuse | \$115 | | \$0 | |

On-exchange and mirror plans

| | Silver 70 PPO and Trio HMO Changes | | | |
|--|------------------------------------|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Medical deductible | \$4,750 | \$9,500 | \$5,400 | \$10,800 |
| Out-of-pocket max (OOPM) | \$8,750 | \$17,500 | \$9,100 | \$18,200 |
| Pharmacy deductible | \$85 | \$170 | \$150 | \$300 |
| Office Visit: PCP, mental health, urgent care, rehab, allergy testing, etc. | \$45 | | \$50 | |
| Office Visit: Specialist | \$85 | | \$90 | |
| Tier 1 - Pharmacy copay (after deductible) | \$16 | | \$19 | |
| Outpatient services and surgery coinsurance | 20% | | 30% | |

| | Gold 80 Trio HMO Changes | | | |
|---|--------------------------|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Out-of-pocket max (OOPM) | \$8,550 | \$17,100 | \$8,700 | \$17,400 |
| Inpatient facility fee (per day up to 5 days) | \$350 | | \$330 | |
| Outpatient services and surgery coinsurance | \$150 | | \$130 | |

| | Gold 80 PPO Changes | | | |
|---|---------------------|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Out-of-pocket max (OOPM) | \$8,550 | \$17,100 | \$8,700 | \$17,400 |
| Outpatient services and surgery coinsurance | 20% | | 30% | |

| | Platinum 90 Trio HMO Changes | | | |
|---|------------------------------|--------|------------|--------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Tier 1 - Pharmacy copay | \$5 | | \$7 | |
| Tier 2 - Pharmacy copay | \$15 | | \$16 | |
| Outpatient surgery copay | \$100 | | \$75 | |
| Outpatient physician copay | \$25 | | \$20 | |
| Inpatient facility fee (per day up to 5 days) | \$250 | | \$225 | |

| | Platinum 90 PPO Changes | | | |
|-------------------------|-------------------------|--------|------------|--------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Tier 1 - Pharmacy copay | \$5 | | \$7 | |
| Tier 2 - Pharmacy copay | \$15 | | \$16 | |

| | Bronze 60 PPO Changes (On-exchange and Mirrored) | | | |
|--|---|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Out-of-pocket max (OOPM) | \$8,200 | \$16,400 | \$9,100 | \$18,200 |
| Tier 1 - Pharmacy copay | \$18 | | \$17 | |
| Office visit: PCP, mental health, urgent care, rehab, allergy testing, etc. | \$65 | | \$60 | |
| Office visit: Mental health | No longer included in the 3-visit limit and no longer subject to deductible | | | |

On-exchange 2024 plan changes cont.

| | Bronze 60 HDHP PPO (On-exchange and Mirror) | | | |
|--------------------------|---|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Medical deductible | \$7,000 | \$14,000 | \$7,050 | \$14,100 |
| Out-of-pocket max (OOPM) | \$7,000 | \$14,000 | \$7,050 | \$14,100 |

| | Minimum Coverage PPO (On-exchange and Mirror) | | | |
|--------------------|---|----------|------------|----------|
| | 2023 | | 2024 | |
| | Individual | Family | Individual | Family |
| Medical deductible | \$9,100 | \$18,200 | \$9,450 | \$18,900 |

Enhanced cost sharing reduction plans (CSRs)

| | Silver 73 | | | |
|-----------------------------------|----------------------|---------|------------------------------|---------|
| | Between 201-250% FPL | | | |
| | 2024 ACA Silver 73 | | State Enhanced CSR Silver 73 | |
| | Deductible | Amount | Deductible | Amount |
| Medical deductible | | \$5,400 | | \$0 |
| Pharmacy deductible | | \$150 | | \$0 |
| Coinsurance (member) | | 30% | | 30% |
| MOOP | | \$7,550 | | \$6,100 |
| | | | | |
| ED facility fee | | \$450 | | \$350 |
| Impatient facility fee | Applies | 30% | Does not apply | 30% |
| Impatient physician fee | | 30% | | 30% |
| Primary care visit | | \$50 | | \$35 |
| Specialist Visit | | \$90 | | \$85 |
| MH/SU outpatient services | | \$50 | | \$35 |
| Imaging (CT/PET scans, MRIs) | | \$325 | | \$325 |
| Speech therapy | | \$50 | | \$35 |
| Occupational and physical therapy | | \$50 | | \$35 |
| Laboratory services | | \$50 | | \$50 |
| X-rays and diagnostic imaging | | \$95 | | \$95 |
| Skilled nursing facility | Applies | 30% | Does not apply | 30% |
| Outpatient facility fee | | 30% | | 30% |
| Outpatient physician fee | | 30% | | 30% |
| | | | | |
| Tier 1 (Generics) | Applies | \$19 | | \$15 |
| Tier 2 (Preferred brand) | Applies | \$55 | Does not apply | \$55 |
| Tier 3 (Nonpreferred brand) | Applies | \$85 | Does not apply | \$85 |
| Tier 4 (Specialty) | Applies | 20% | Does not apply | 20% |
| | | | | |

Enhanced cost sharing reduction plans (CSRs) cont.

| | Silver 87 | | | |
|-----------------------------------|----------------------|---------|------------------------------|---------|
| | Between 151-200% FPL | | | |
| | 2024 ACA Silver 87 | | State Enhanced CSR Silver 87 | |
| | Deductible | Amount | Deductible | Amount |
| Medical deductible | | \$800 | | \$0 |
| Pharmacy deductible | | \$50 | | \$0 |
| Coinsurance (member) | | 20% | | 20% |
| MOOP | | \$3,150 | | \$3,000 |
| | | | | |
| ED facility fee | | \$150 | | \$150 |
| Impatient facility fee | Applies | 20% | Does not apply | 20% |
| Impatient physician fee | | 20% | | 20% |
| Primary care visit | | \$15 | | \$15 |
| Specialist visit | | \$25 | | \$25 |
| MH/SU outpatient services | | \$15 | | \$15 |
| Imaging (CT/PET scans, MRIs) | | \$100 | | \$100 |
| Speech therapy | | \$15 | | \$15 |
| Occupational and physical therapy | | \$15 | | \$15 |
| Laboratory services | | \$20 | | \$20 |
| X-rays and diagnostic imaging | | \$40 | | \$40 |
| Skilled nursing facility | Applies | 20% | Does not apply | 20% |
| Outpatient facility fee | | 20% | | 20% |
| Outpatient physician fee | | 20% | | 20% |
| | | | | |
| Tier 1 (Generics) | | \$6 | | \$5 |
| Tier 2 (Preferred brand) | Applies | \$25 | Does not apply | \$25 |
| Tier 3 (Nonpreferred brand) | Applies | \$45 | Does not apply | \$45 |
| Tier 4 (Specialty) | Applies | 15% | Does not apply | 15% |
| | | | | |

Enhanced cost sharing reduction plans (CSRs) cont.

| | Silver 94 | | | |
|-----------------------------------|----------------------|---------|------------------------------|---------|
| | Between 100-150% FPL | | | |
| | 2024 ACA Silver 94 | | State Enhanced CSR Silver 94 | |
| | Deductible | Amount | Deductible | Amount |
| Medical deductible | | \$75 | | \$0 |
| Pharmacy deductible | | \$0 | | \$0 |
| Coinsurance (member) | | 10% | | 10% |
| MOOP | | \$1,150 | | \$1,150 |
| | | | | |
| ED facility fee | | \$50 | | \$50 |
| Impatient facility fee | Applies | 10% | Does not apply | 10% |
| Impatient physician fee | | 10% | | 10% |
| Primary care visit | | \$5 | | \$5 |
| Specialist visit | | \$8 | | \$8 |
| MH/SU outpatient services | | \$5 | | \$5 |
| Imaging (CT/PET scans, MRIs) | | \$50 | | \$50 |
| Speech therapy | | \$5 | | \$5 |
| Occupational and physical therapy | | \$5 | | \$5 |
| Laboratory services | | \$8 | | \$8 |
| X-rays and diagnostic imaging | | \$8 | | \$8 |
| Skilled nursing facility | Applies | 10% | Does not apply | 10% |
| Outpatient facility fee | | 10% | | 10% |
| Outpatient physician fee | | 10% | | 10% |
| | | | | |
| Tier 1 (Generics) | | \$3 | | \$3 |
| Tier 2 (Preferred brand) | | \$10 | | \$10 |
| Tier 3 (Nonpreferred brand) | | \$15 | | \$15 |
| Tier 4 (Specialty) | | 10% | | 10% |
| | | | | |

Dental, vision and life plan updates

Don't forget to [download the new 2024 Dental, Vision and Life Plans at a Glance brochures](#) on Broker Connection. It is available in English, Spanish, Chinese, Korean, and Vietnamese. You can also order print versions in English and Spanish through the [online ordering site](#).

Complete your clients' coverage with dental and vision*

Encourage your clients to prepare for a healthier future with whole person care from Blue Shield. Dental and vision coverage can detect serious issues early, resulting in better health outcomes. Blue Shield offers affordable plans starting at \$12.50 for children and \$13.40 for adults for our dental plans and \$6.90 for vision.

Ensure smooth, continuous coverage by enrolling your clients in AutoPay for each of their dental and vision plans, which you can do soon through the client list on Broker Connection.

Dental plans

Make sure your clients' coverage is complete with a Blue Shield of California dental plan. We have a variety of HMO and PPO plans, both for on- and off-exchange consumers. All plans offer \$0 copays for exams, cleaning, and X-rays. Most plans offer orthodontic coverage, as well as implants for all ages (including members 65 years and older). HMO plans have no calendar-year benefit maximum, while PPO plans offer up to \$2,000 in benefits per year per member.

If your client had dental coverage with another carrier and meets certain criteria, all waiting periods for their new Blue Shield dental plans can be waived. Just have your client submit proof of their prior coverage with the Blue Shield application.

Dental plan changes

Plan closure: We will no longer offer the Enhanced Dental PPO 50-1250 plan to new members in 2024. Existing members, however, can remain in the plan.

New dental plan: Stay tuned for information on a new dental plan offering for 2024. We will provide all the details as soon as it is approved.

Vision* plans

Starting at \$6.90, our vision plans are a great value to your clients, offering them benefits like exams, contact lenses, and frame allowances through the largest vision network in California.

Vision plan changes

The 90-day waiting period for services is no longer required for all vision plans as of January 1, 2024.

Blue Shield of California's contract with MESVision will end effective December 31, 2023, as MESVision was acquired by EyeMed in 2020. Members should experience no change in their enrollment experience.

With this change, new and existing vision members will now have access to:

- Welcome kit highlighting member benefits and a personalized directory of local in-network providers
- Vision ID card
- Single sign on during enrollment process
- Customized online site for Blue Shield clients

Members have easy access to a diverse network of providers across the U.S. including online options, independent eye doctors and national/regional retail providers like LensCrafters®, Pearle Vision®, and Target Optical®.

Update to the claims vision plan Administrator address, as of January 1, 2024.

Payment of benefits and claims for all covered services should be sent to:

Vision plan administrator
Attn: OON claims
P.O. Box 8504
Mason, OH 45040-7111

Grievance process

(877) 691-9083
Vision plan administrator
Attn: Quality assurance
4000 Luxottica Place
Cincinnati, OH 45040
eyemedqa@eyemed.com
Fax: (513) 492-3259

* Underwritten by Blue Shield of California Life & Health Insurance Company.

Dental, vision and life plan updates cont.

Life insurance

Help your clients prepare for the unexpected by purchasing an Individual Term Life* and Accidental Death and Dismemberment* (AD&D) policy ranging from \$10,000 to \$100,000 in coverage.

The digital DocuSign® application lets you or your client complete and submit the application with just a few clicks – online from start to finish. No payment is required at the time of application. Once approved, members will be billed for their premium. The application and age-banded rates can be accessed on our [life plans home page](#).

Visit our [life insurance page](#) to start protecting your clients and their families today.

And to make things even easier, we've consolidated all our dental, vision, and life insurance forms and applications for you on one page.

* Underwritten by Blue Shield of California Life & Health Insurance Company.

Tools to simplify your sales

We're committed to investing in tools and improving processes that help you grow your business and minimize your administrative burden.

Member Mobile App Improvements

We continually strive to support our customers and provide a safe environment for them to care for their health and the health of their families. Our newly updated [mobile app](#) is providing just that. With reminders for wellness checks, virtual ID cards, claim information, and more, this enhanced 24/7 service provides ease of access to your clients' important information.

Self-service tools enhancing your back office

Digital ID cards are available online – You now have the capability to obtain and share ID cards for your clients via Broker Connection. Find your client in the client list and download their card to easily print or email it.

Manage your book of business through the client list – Now you can help your clients more than ever through your client list on Broker Connection. Aid them in signing up for AutoPay and check application and payment status. You can help move your clients along in the process by seeing who is current, who is late, and at risk of lapsing for non-payment, and pending members who still need to submit an initial payment to complete their enrollment.

Live agent chat – Chat with a live agent for support and answers to your questions from 8 a.m. to 6 p.m., Pacific Time on Broker Connection. With our secure chat platform, you can solve your client's challenges, upload supporting documentation, and get help navigating our self-service capabilities.

There is more information than ever that can be found without calling a representative.

Maximize your sales with our webinars

Open enrollment broker selling webinars – Keep current with our plans and get the latest competitive and market insights at one of our broker sales webinars. Our expert sales team will share important plan and pricing information and regional and competitive insights. This is the best place to get up to speed, have your questions answered, and start selling today.

Client renewal webinars – Let us help educate your existing clients on plan and policy changes so you can focus on selling and growing your business.

Our informational renewal webinars will guide your Blue Shield clients through plan and policy changes, as well as how they can use self-service tools to renew their plan for 2024. Check out Broker Connection and our broker newsletters for the complete list of webinar dates and times.

Personalize our fliers – We realize that success doesn't just arrive at your door. It takes hard work. Make sure your information and your [personal Blue Shield IFP URL](#) is at your client's fingertips when you share information about Blue Shield plans. Visit [Shield on Demand](#) from our Sales resources and collateral page to customize those materials today.

Please note: Generic versions (without the plan pending regulatory approval) are available on [Broker Connection sales tools and collateral page](#) now. Certain OE24 materials in Shield on Demand will experience a slight delay due to the pending plan, but will be available in time for Open Enrollment. Additionally, the Specialty PAAG printed version will be on backorder until the pending plan is approved. When the plan is approved, all materials will be updated in all locations and the backordered materials will ship out right away.



We've been serving Californians for more than 80 years – and we couldn't do it without you. Thank you for all your hard work in 2023. We're focused on the future and ready to help you grow on Broker Connection.

We are proud to contract with Covered California to provide health plans worthy of our family and friends.

