



# It's time to renew your medical and dental coverage

[Month] [Year]

Dear [FIRST NAME],

The time to renew or make changes to your coverage for 2024 is from November 1, 2023, to January 31, 2024. You have until December 31, 2023, to make changes to your medical and dental plans for coverage beginning January 1, 2024.

Below is a summary of your premium (monthly cost) changes starting January 1, 2024.

## 2024 plan names



Medical: [Medical\_Plan\_Name]<sup>†</sup>

Dental: [Dental\_Plan\_Name]<sup>[†]</sup>

Subscriber name: [Subscriber\_name]

Subscriber ID #: [Subscriber\_ID]

Effective date: January 1, 2024

	<b>2023 Medical premium</b> \$[XXX.XX]	<b>2024 Medical premium</b> \$[XXX.XX]* A change of \$[X.XX], or [X.XX]%
	<b>2023 Dental premium</b> \$[XXX.XX]	<b>2024 Dental premium</b> \$[XXX.XX]* A change of \$[X.XX], or [X.XX]%

\* Your 2024 monthly premium is based on our records as of [Month Day, Year]. This amount may vary based on changes such as age, adding or removing dependents, or moving your household to a new address.

† Underwritten by Blue Shield of California Life & Health Insurance Company (Blue Shield Life).



# Changes to your current plan

The difference between your 2023 monthly premiums and your 2024 monthly premiums is due to:

- **General costs to administer and deliver essential medical and dental benefits.**
- **Changes such as your age or the age of your dependents, adding or removing dependents, or moving your household to a new address.**
- **Increasing costs for services across the healthcare industry, including those from hospitals, doctors, and pharmacies.**

Your premiums do not increase based on your individual use of services.

## Here's how to be informed:

### Online

- View full plan details, including copay and coinsurance amounts in your policy [[and Evidence of Coverage and Health Service Agreement \(EOC\)](#)], as well as your Summary of Benefits and Coverage and Summary of Dental Benefits and Coverage by visiting [blueshieldca.com/policies](https://blueshieldca.com/policies).
- Stay up to date with the latest plan information on [blueshieldca.com/myIFPplan](https://blueshieldca.com/myIFPplan).

### Mail

- For updates to the list of covered drugs, called a formulary, you will receive a separate notice in the mail with detailed information if any changes are applicable to you. You may also view your formulary at [blueshieldca.com/pharmacy](https://blueshieldca.com/pharmacy).



# How to renew or change your plan for 2024

Before you decide to keep or change your plan, think about which benefits are important and necessary for you.

## **Keep your current plan**

If you want to renew your current plans, just continue to pay your monthly bill.

## **Choose a different plan**

You have until December 31, 2023, to make changes to your plan for coverage beginning January 1, 2024, and until January 31, 2024, to make changes to your plan for coverage beginning February 1, 2024.



# See if you qualify for premium help

Your current medical plan\* does not allow you to receive financial help to lower your monthly premiums or lower your out-of-pocket costs. Even if you were not eligible for premium help in the past, you may be eligible to lower your monthly premium. To see if you qualify, go to [blueshieldca.com/subsidy](https://blueshieldca.com/subsidy). You can also contact your broker if you need assistance.

\*Qualifying for premium help only applies to medical plans purchased directly through Covered California.



# Individual mandate

In addition to all the other benefits of health coverage, we encourage you to stay covered to avoid the California tax penalty (or individual mandate). California residents who choose to go without minimum essential health coverage in 2024 may be subject to a penalty as part of their annual state tax filing.

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# Your plan is grandfathered

*Your plan is considered grandfathered if you remain on the same health plan that you were enrolled on as of March 23, 2010. Please keep in mind, if you transfer out of a grandfathered health plan, you will lose your plan's grandfathered status.*

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## Questions?

We're here to help. Go online to **[blueshieldca.com/myIFPplan](https://blueshieldca.com/myIFPplan)**. Contact your broker. Or call **(888) 256-3650** (TTY: 711), Monday through Friday from 8 a.m. to 8 p.m., and Saturday from 8 a.m. to 6 p.m.



### Getting help in other languages

This booklet has essential information about your coverage through Blue Shield of California. Look for key dates. You may need to act by certain deadlines to keep your medical coverage or help with costs.

You have the right to get this information and help in your language at no cost. Included in this booklet is a document called *Notices Available Online: Nondiscrimination and Language Assistance Services*. Please read for more information.