

March 29, 2016

Eric Cioppa, Superintendent  
Attn: Elena Crowley  
Docket No. INS-15-802  
Bureau of Insurance  
Maine Department of Professional and Financial Regulation  
34 State House Station  
Augusta, Maine 04333-0034

*Re: Anthem Blue Cross and Blue Shield Request to Discontinue and Replace Legacy  
Individual Health Plans*

Dear Superintendent Cioppa:

Enclosed for filing please find the following:

SUBMITTED BY: Christopher T. Roach  
DATE: March 29, 2016  
DOCUMENT TITLE: Responses to Hearing Requests  
DOCUMENT TYPE: Responses to Hearing Requests  
CONFIDENTIAL: **NO**

Thank you for your assistance in this matter.

Very truly yours,

/s/ Christopher T. Roach

cc: Attached service list

# NON-CONFIDENTIAL

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STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION  
BUREAU OF INSURANCE

IN RE: )  
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)  
ANTHEM BLUE CROSS AND BLUE ) ANTHEM RESPONSES TO HEARING  
SHIELD'S REQUEST TO DISCONTINUE ) REQUESTS  
AND REPLACE LEGACY INDIVIDUAL )  
HEALTH PLANS EFFECTIVE JANUARY 1, )  
2017 )  
)  
) MARCH 29, 2016  
Docket No. INS-15-802 )  
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1. Please state whether the current legacy formulary covers contraceptives and the so-called morning after pill.

Response	Yes.
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2. Please indicate how legacy policyholders will be advised of the change in the formulary.

Response	<p>Anthem proposes to modify the letters that will go to legacy policyholders (Initial Filing Exhibits 2 and 5) to include language such as the following:</p> <p>“Please note that your new ACA plan will be accompanied by a drug formulary that differs from the formulary for your current legacy plan. Please visit <a href="https://www.anthem.com/pharmacyinformation/home.html">https://www.anthem.com/pharmacyinformation/home.html</a> for a listing of the drugs covered under Anthem’s Maine Select Drug List. If your current medication is not listed, you may take a therapeutically-equivalent drug that is covered by the ACA formulary or seek authorization from Anthem for an exception to continue coverage for your medication if (1) you have been taking the medication for at least six months; or (2) it is medically necessary. If you determine to request an exception, please contact your physician who can assist you with this decision and, if necessary, fill out the required authorization request form and provide it to Anthem. Please note that Anthem can accept a prior authorization form from your physician only after your new ACA plan is in force (<i>i.e.</i>, on or after January 1, 2017). Anthem will process your request for a prior authorization within 72 hours of receipt.”</p>
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3. Please indicate whether Anthem will continue to cover a migrated member’s non-formulary medication(s) while Anthem considers whether an exception should be authorized.

Response	<p>Yes. A member may seek coverage for a non-formulary drug by asking the member’s physician to fax to Anthem a pre-authorization form indicating that the member has been taking the non-formulary drug for at least six months, or that for other reasons, the non-formulary drug is medically necessary. If the non-formulary drug was previously covered by the member’s legacy plan, the member will be granted a one-time 30-day supply for the drug. If the member’s request for an exception for the non-formulary drug is approved, coverage for that drug will continue. If the exception is not approved, the member will be limited to the one-time 30-day supply noted above.</p>
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