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Benefits

Ask Gemini

membersecure.anthem.com/member/benefits

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Anthem

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Spanish

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Select Plan Period

Jan. 1, 2025 to Dec. 31, 2025

Who's covered during this period 2 Members >

Pharmacy Benefits

Additional Plan Resources

Additional Insurance Policies

If your plan includes an annual deductible, you pay for healthcare expenses before your plan shares the costs. Once you meet the deductible, most plans will require you to pay coinsurance and/or copayments for certain covered procedures and services. There is a limit (the out-of-pocket maximum) on how much you pay in a plan year. Once you pay this amount, your plan covers 100% of your healthcare expenses for covered procedures and services you receive for the rest of the plan year.

Family

Charles

Silvia

EPO

Participating

NPAR

Table View

FAMILY IS HERE

Out-of-Pocket Maximum

Your limit is \$9,700.00

\$8,919.86

\$780.14

Spent

Remaining

Plan Pays 100%

You met your out-of-pocket maximum. Insurance pays 100% of covered services.

Chat With Us

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Google

Microsoft Edge

File Explorer

Calendar

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Teams

PowerPoint

Word

Excel

Access

OneDrive

Skype

Zoom

Webcam

Microphone

System Tray

10:16 AM 4/2/2026

Select Plan Period

Jan. 1, 2026 to Apr. 1, 2026

Who's covered during this period 2 Members >

If your plan includes an annual deductible, you pay for healthcare expenses before your plan shares the costs. Once you meet the deductible, most plans will require you to pay coinsurance and/or copayments for certain covered procedures and services. There is a limit (the out-of-pocket maximum) on how much you pay in a plan year. Once you pay this amount, your plan covers 100% of your healthcare expenses for covered procedures and services you receive for the rest of the plan year.

Charles

Silvia

Medicare Part A/  
Base

Table View

CHARLES IS HERE

Pay Deductible ⓘ

Your limit is \$50.00

\$0.00\$50.00  
SpentRemaining

Out-of-Pocket Maximum ⓘ

Your limit is \$1,050.00

\$0.00\$1,050.00  
SpentRemaining

Plan Pays 100%

You met your out-of-pocket maximum. Insurance pays 100% of covered services.

Chat With Us

Back to Top

Aspen\_Letter\_Design

1 / 2 | 100%

Anthem Blue Cross  
April 2, 2026

**Anthem**

Here's proof you were covered by us, if you need it.

Sometimes, another company needs to know when you were covered by a health plan. They might ask for a Certificate of Creditable Coverage or just a certificate of coverage.

You can use this letter for that purpose. Here are the details on your Anthem health plan.

**Certificate Details**

|                                                                                |                                              |
|--------------------------------------------------------------------------------|----------------------------------------------|
| <b>Date of This Notice</b><br>April 2, 2026                                    | <b>Subscriber Name</b><br>CHARLES HAROLD     |
| <b>Issued by</b><br>Anthem Blue Cross<br>PO Box 60007<br>Los Angeles, CA 90060 | <b>Group Health Plan Name</b><br>UC CARE PPO |
|                                                                                | <b>Member ID</b><br>U5X808M87210             |

| Name           | Date Benefits Began | Date Benefits End |
|----------------|---------------------|-------------------|
| CHARLES HAROLD | January 1, 2024     | December 31, 2024 |
| SILVIA HAROLD  | January 1, 2024     | December 31, 2024 |

Thanks for the opportunity to serve you. We hope to get that chance again.

— Your Anthem service team

Benefits

Select Plan Period

Jan. 1, 2026 to Apr. 1, 2026

Who's covered during this period 2 Members



 UC HIGH OPTION SUPPLEMENT | Inactive

Medical Benefits

Your Health Care Plans

Your Plan at a Glance

Medical • Member ID: U5X808M87210 | Group ID: 280509

Who's covered during this period 2 Members

Find Benefits

Plan Details

Plan Progress

You can find further details of your medical benefits below.

 <sup>1</sup> Chat With Us



Member Secure Application

Ask Gemini

membersecure.anthem.com/member/dashboard

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Household Links

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UC HIGH OPTION SUPPLEMENT

Medical

INACTIVE

Charles (In-Network)

Deductible

\$0.00 paid out of \$50.00

\$0.00

\$50.00

Out-of-Pocket Maximum

\$0.00 paid out of \$1,050.00

\$0.00

\$1,050.00

Plans

Deductibles, copays and more

Hi, Charles, I see you're on the Dashboard page. Is there anything I can help you with?

Chat With Us

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Search

Google

Microsoft Edge

File Explorer

Calendar

Outlook

Teams

PowerPoint

Word

Excel

OneDrive

Settings

Task View

Taskbar

10:12 AM

4/2/2026

My Account

### Contact Details

### Personal Information

### Additional Insurance Policies

### Communications & Settings

## Login & Security

Username & Password

Account Recovery

Access &amp; Permissions

[My Account](#)

### Additional Insurance Policies

CHARLES A HAROLD

 Your previously reported policy needs attention. Please confirm the status of the submitted policy by selecting the Submitted Policies tab.

### Report Additional Insurance

### Saved Drafts

### (1) Submitted Policies

## NEEDS ATTENTION

Is this previously reported policy still active?

Yes, active

### Medicare Coverage

No, not active

Policy Number: 9AU6NQ2DD46

NEEDS ATTENTION



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Communications & Settings

Login & Security

Username & Password

Account Recovery

Access & Permissions

My Account

Communications & Settings

CHARLES A HAROLD

Plan Communications Settings

View or change your plan communications settings.

If you add or edit your contact information here for phone, email and text, it will also be updated in Contact Details.

Primary Phone

818-652-6400

Mobile

Edit

Alternate Phone

818-441-2682

Mobile

Edit

Email

CHUCKHAROLD@GMAIL.COM

Edit

Address

DR STE 104 PMB 350

5301 S SUPERSTITION MTN

GOLD CANYON, AZ. 85118-1919

How can I change my address?

Feedback

Chat With Us

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Clear

Search

11:30 AM

4/2/2026

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Additional Insurance Policies

Communications & Settings

Login & Security

Username & Password

Account Recovery

Access & Permissions

Contact Details

CHARLES A HAROLD

Edit Contact Details

View, edit or add your contact details for your plan, pharmacy and more. **Note:** The contact details you use for your plan can be different than the ones you use for your pharmacy.

Plan Contact Details

View or edit your phone and text numbers, email, and mailing address for plan communications.

Let us know how to contact you for updates about your plan. **Note:** These contact details can be different from the details you use for your pharmacy.

Primary Phone

818-652-6400

Mobile

Edit

Alternate Phone

818-441-2682

Mobile

Edit

Email

CHUCKHAROLD@GMAIL.COM

Edit

Address

DR STE 104 PMB 350

5301 S SUPERSTITION MTN

GOLD CANYON, AZ. 85118-1919

How can I change my address? ?

Chat With Us

69°F

Clear

Search

11:30 AM

4/2/2026

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Document Hub

Find Healthcare Providers: Com

Ask Gemini

membersecure.anthem.com/member/documents#general-notifications

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Grievances and Appeals

Tax Documents

General Notifications

Find and view copies of notifications your plan has sent you. You can also search by date range and notification type.

Date Range

Notification Type

Member

Last 24 months

All

CHARLES (01/03/1...

Notification Date

Coverage Type

Notification Type

File

No letters found. You can [Contact Us](#) if you believe this is in error or need help

Feedback

Chat With Us

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Search

11:32 AM 4/2/2026

Documents

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General Notifications

Find and view copies of notifications your plan has sent you. You can also search by date range and notification type.

Date Range

Notification Type

Member

Last 24 months

All

SILVIA (01/30/1961)

| Notification Date | Coverage Type | Notification Type    | File                                        |
|-------------------|---------------|----------------------|---------------------------------------------|
| 9/27/2025         | Medical       | Plan Network Changes | <div>NEW</div> <div>View Notification</div> |

Feedback

Chat With Us

Anthem Blue Cross Life and Health Insurance Company  
P.O. BOX 629  
WOODLAND HILLS, CA 91365

Anthem. 

September 27, 2025

Silvia Harold  
5301 S SUPERSTITION MOUNT  
GOLD CANYON AZ 85118-1919

Silvia, one of your care providers is leaving your plan's network

**Sujit Itty** will no longer be in your plan's network starting May 26, 2025. We're letting you know because you received care from them in the last 12 months.

**Choosing care providers in your plan's network costs you less**

You can see any provider you choose, but seeing providers in your plan's network helps keep your costs down. That's because we negotiate lower rates with providers in the network.

It's easy to find a new provider near you and in your plan

Use the Find Care feature on the **Sydney<sup>SM</sup> Health** app or **anthem.com/ca**. If you'd like help, chat with us on the app or website, or call us at the Member Services number on your ID card.

You may pay more if you keep seeing this provider

After May 26, 2025, you may pay more, or all, of the costs for any care you receive from Sujit Itty. Some plans only cover care from providers who are in your plan's network, except in emergencies. Check your plan details on the **Sydney Health** app or [anthem.com/ca](https://www.anthem.com/ca) to learn more.

If you are receiving certain kinds of care from Sujit Itty, you may be able to keep seeing them for a limited time

This may be possible if you are in active treatment for a serious and complex condition, have a nonelective surgery already scheduled, are in the hospital, pregnant, or terminally ill. If you think this may apply to you, please see the "Are

### Plan details

Member ID  
808M87210

Why is this provider leaving?

This can happen for different reasons. They could have changed locations, closed their practice, or decided not to participate in our plans' network.

Don't recognize their name?

Some doctors and other providers participate in your care even if you don't see them face-to-face. This includes care such as lab work, X-rays, anesthesia, and hospital visits.

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Authorization Updates

Some procedures, medications, durable medical equipment (DME), and medical tests need approval to determine if they're eligible for coverage. Your doctor or other health care professional will submit the authorization request on your behalf and include any related clinical information. View your current and past authorizations by selecting a date range and member.

Select how you would like to be notified about your authorizations

Member

CHARLES (01/03/1961)

Date Range

Last calendar year

No authorizations were found for your search. If you believe you should have authorizations based on your search, please [contact us](#) for assistance.

Feedback

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11:35 AM 4/2/2026

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Tax Documents

Find tax form 1095-B by plan year. This form is used as proof of Minimum Essential Coverage (MEC) when filing your state and/or federal taxes. If you have questions about this form or believe you are missing a year, please [contact us](#).

Select how you would like to receive your tax documents

You do not have any tax documents. If you believe this is an error, please [contact us](#).

Feedback

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Search

11:36 AM

4/2/2026

The image is a screenshot of a web browser window displaying a letter from Anthem Blue Cross. The browser's address bar shows a URL from membersecure.anthem.com. The letter itself is dated April 2, 2026, and is addressed to Charles Harold. It provides details about the group health plan, including the member ID U5X808M87210 and the dates of benefits from January 1, 2025, to December 31, 2025. The letter is signed by the Anthem service team. The browser window also shows several open tabs and a taskbar at the bottom with various application icons and the system clock showing 11:37 AM on 4/2/2026.

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Plan Documents

These documents show all the details of your current health coverage. You might have received a copy with your enrollment or renewal materials, but if there were any changes since then, the ones found here will have the latest information. If you need help understanding your benefits, or to request a completed Policyholder or Subscriber Premium Notice, you can [contact us](#).

Plan

UNIVERSITY OF CALIFORNIA

Plan Period

Jan. 1, 2024 to Dec. 31, 2024

Medical Certificate Booklet

Medical Summary of Benefits and Coverage (SBC)

Proof of Insurance

Feedback

Chat With Us

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Search

11:38 AM

4/2/2026

The image is a screenshot of a web browser window displaying a document titled "Aspen\_Letter\_Design". The browser's address bar shows a URL from membersecure.anthem.com. The document is a letter from Anthem Blue Cross, dated April 2, 2026. The letter is addressed to Charles Harold and provides details about a group health plan. The plan name is UC CARE PPO, and the member ID is U5X808M87210. The letter states that the benefits began on January 1, 2024, and end on December 31, 2024. The letter is signed by the Anthem service team. The browser window also shows several tabs and a sidebar with icons for various applications.

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FAX ESCALATION / CSHD (CA)

Document Hub

Find Healthcare Providers: Com

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Plan

UNIVERSITY OF CALIFORNIA

Plan Period

Jan. 1, 2025 to Dec. 31, 2025

Medical Certificate Booklet

Proof of Insurance

Feedback

Chat With Us

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Clear

Search

11:39 AM

4/2/2026