Anthem HMO
Scripps Medical Group Transition
Frequently Asked Questions (FAQs)

General Information

First and foremost, your health coverage is not ending.

Anthem and Scripps could not come to a new agreement but your **Anthem HMO coverage remains active.** Participants affected by this change will be automatically assigned to a new participating medical group to ensure there is no interruption in health plan coverage.

You will receive information about your new medical group and updated ID cards in the coming weeks. We understand change can be concerning, and we want to help you understand your options and available resources.

FAQs

What happened?
Scripps will no longer be part of the Anthem HMO network effective 10/01/2026.

- This is a change in provider affiliation, not a termination of your health insurance coverage.

Am I losing my health insurance coverage?
No – Your Anthem HMO health plan remains in effect. You continue to have health coverage and access to care. The only change is that participants assigned to the terminating medical group, Scripps, must transition to another participating medical group.

How many members are affected?
Approximately **150 members** are currently assigned to the terminating medical group, Scripps, and will be transitioned to a new participating medical group determined by Anthem.

What happens if I do nothing?

If you take no action:

- You will automatically be assigned to a participating medical group.
- You will receive notification of your new assignment. Anthem's enrollment teams are still working through the PCP updates, so they are unable to provide a definitive processing date at this time.
- New ID cards will be mailed in the next few weeks.
- New ID cards will be visible in the Sydney Health App on within 24-48 hours after the PCP change is processed. Participants will continue to see their current ID card effective through September 30, 2026, and will also have access to a copy of the new ID card reflecting the new PCP effective October 1, 2026.
- Your Anthem HMO coverage will continue uninterrupted.

How will my new medical group be selected?

Anthem uses a process designed to place participants into participating medical groups that can continue to provide access to care and services within the network.

Will I receive a new ID card?

Yes - Affected participants should receive new ID cards in the coming weeks reflecting their updated medical group assignment.

- Until your new card arrives, Anthem can assist with confirming your current eligibility and provider assignment.
- The Sydney Health App will also display the updated medical group assignment.
- New ID cards will be visible in the Sydney Health App on within 24-48 hours after the PCP change is processed. Participants will continue to see their current ID card effective through September 30, 2026, and will also have access to a copy of the new ID card reflecting the new PCP effective October 1, 2026.

What if I am not happy with the medical group Anthem assigned to me? Can I appeal my assignment?

You have options and may:

- Review other participating medical groups on Anthem's website.
- Select a different participating medical group if one is available in your area.
- Contact Anthem for assistance with making a medical group change.

How do I find other available medical groups?

Visit Anthem's member website or the Sydney Health App or contact Anthem Member Services. They can help you:

- Search for participating medical groups.
- Confirm provider availability.
- Review physician and specialist affiliations.

- Process a medical group change request.

Can I keep seeing my current doctor?
No – Scripps providers are solely employed and exclusive to Scripps.

What if none of the available medical groups are close to my home?
Anthem has alternative HMO PMG/PCPs throughout the San Diego area**.**

Can family members be assigned to the same medical group?
Yes

Can I make a change to my PCP/Primary Medical Group (PMG) during Open Enrollment?
PCP/PMG changes can be made at any time throughout the year.

How quickly can Anthem process a requested medical group change?

- For the initial transition period, participants will be able to make their PCP change effective 10/01/2026.
- Any changes after the transition period will apply to the PCP Change guidelines outlined in the plan. If the change is made by the 15th of the current month, the change will take effect on the first of the following month. Changes made after the 15th of the month will be effective the first of the month after the following month.

What should I do if I am in active treatment for a serious medical condition?
If you are:

- Undergoing cancer treatment
- Pregnant
- Scheduled for surgery
- Receiving ongoing specialty care
- Managing a serious or complex medical condition

You may qualify for **Continuity of Care** protections. This is referred to by Anthem as **Transition of Care**.

Contact Anthem as soon as possible to:

- Discuss your specific situation.
- Determine eligibility.
- Obtain required forms or documentation.
- Learn about next steps to avoid disruptions in care.

What is Continuity of Care?
Continuity of Care may allow eligible members to continue seeing their current provider for a limited period of time after a network change when certain medical circumstances exist.

Anthem will review requests individually and explain eligibility requirements.

What should I do if I have an upcoming appointment?
If the appointment is scheduled after the medical group termination date, contact Anthem to verify network participation and determine whether any Continuity of Care options apply.

Will I need new referrals or authorizations?
Possibly. Some referrals and treatment plans may need review depending on your new medical group assignment. Participants receiving ongoing care should contact Anthem for guidance.

Will my medical records transfer automatically?
No – Participants will have to request a transfer of medical records to their new PCP.

Can I switch my health plan to Kaiser?
Yes, if you reside or work in Kaiser's service area. A move from one HMO to another HMO is permitted once per year.

Participants should contact the Trust Fund Office for guidance regarding available plan election opportunities.

Can I change health plans outside of Open Enrollment?
Possibly - Some participants may be eligible to use their one-in-five plan change election outside of Open Enrollment if it has not been previously utilized.

Participants should contact the Trust Fund Office to determine whether you qualify and what deadlines may apply.

When is the next Open Enrollment?
Open Enrollment begins on **November 1, 2026**. Changes made during Open Enrollment would become effective **January 1, 2027**, subject to plan rules.

Will my prescription drug coverage change?
Most participants should experience no interruption in prescription coverage as that coverage is provided through Caremark.

- For self-injectables, you may need a new prescription from your new provider.
- If you have questions about specific medications, pharmacies, or prior authorizations, contact Caremark directly.

Who should I contact if I have questions?

Contact Anthem Member Services at 800-627-5342 if you need help with:

- Medical group assignments
- ID cards
- Finding doctors
- Continuity of Care requests
- Specialist access
- Referral questions
- Provider directory assistance (www.Anthem.com/ca/find-care/)
- Medical group change requests

Contact the Trust Fund Office (TFO) at 714-220-2297 ext. 420 if you have questions about:

- Eligibility
- Benefit coverage
- Plan options
- Kaiser election opportunities
- One-in-Five plan change rules
- Open Enrollment
- General Trust Fund policies

Contact Local 135 at 619-298-7772 if you need assistance with:

- Member advocacy
- Understanding available resources
- Escalation assistance
- General member support and guidance

Closing Statement

We recognize that changing medical groups can be stressful, especially when you have established relationships with providers. We want to reassure you that your health coverage remains in place, you will be automatically assigned to a participating medical group, and you have options if that assignment does not meet your needs. Most importantly, participants receiving treatment for serious medical conditions have additional protections available through Anthem's Continuity of Care process.

We encourage anyone with questions to contact Anthem, the Trust Fund Office, or Local 135 so we can help ensure a smooth transition.