



**When making health insurance buying decisions, please be aware of the potential impacts of grandfathered health plan status under federal health care reform laws. Please see additional information on the Anthem agent/broker website at [www.anthem.com](http://www.anthem.com).**

Plan Option Matrix April 1, 2010		Move To: Level 1																														
		7896	7898	PE48	PE49	P958	01LE	01LD	DN13	DN14	DN15	DX44-46	DX59-61	DX80-82	Z126-128	Z132-134	Z129-131	Z135-137	Z141-143	Z138-140	Z144-146	Z150-152	Z147-149	Z153-154	Z155-156	Z157-158	Z159-160	Z161-162	Z163-164	Z165-166	Z167-168	
Move From:		HMO Saver	Individual HMO	RightPlan PPO 40 (Generic Rx)	RightPlan PPO 40 (Comprehensive Rx)	RightPlan PPO 40 (No Rx)	RightPlan PPO 500 (Generic Rx)	RightPlan PPO 500 (Comprehensive Rx)	Tonik 1500	Tonik 3000	Tonik 5000	Lumenos HSA 5000	Lumenos HIA Plus 5000	Lumenos HIA 5000	Lumenos HSA 1500 Non-maternity	Lumenos HSA 3000 Non-maternity	Lumenos HSA 5000 Non-maternity	Lumenos HIA Plus 1500 Non-maternity	Lumenos HIA Plus 3000 Non-maternity	Lumenos HIA Plus 5000 Non-maternity	Lumenos HIA 1500 Non-maternity	Lumenos HIA 3000 Non-maternity	Lumenos HIA 5000 Non-maternity	SmartSense 500 Generic	SmartSense 1500 Generic	SmartSense 2500 Generic	SmartSense 5000 Generic	SmartSense 500 Comprehensive	SmartSense 1500 Comprehensive	SmartSense 2500 Comprehensive	SmartSense 5000 Comprehensive	
DL96	CORE 5000	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
R418	Basic PPO 2500	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
7900	Basic PPO 1000	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
NM31	PPO Saver	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01CF	CoreGuard 10000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01CE	CoreGuard 7500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01CD	CoreGuard 5000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01CC	CoreGuard 3500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01CB	CoreGuard 2500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01CA	CoreGuard 1500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01C9	CoreGuard 750	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
00RR	Clear Protection 5000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
00RP	Clear Protection 3300	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
00RN	Clear Protection 1000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
T160	PPO 3500 (HSA-Compatible)	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	W	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
R420	3500 Deductible PPO	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01KU	Premier 1000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01KV	Premier 1500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01KW	Premier 2500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01L0	Premier 3500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01L1	Premier 5000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01L2	Premier 6000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
00Y4	PPO Share 7500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
H062	PPO Share 5000	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01LB	PPO Share 5000-R	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01LC	PPO Share 5000-R	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01LA	PPO Share 3500-R	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
00Y3	PPO Share 3500	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
1930	PPO Share 1000	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
1929	PPO Share 500	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
PE43	Select HMO	W	W	A	A	A	C	C	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	
7896	HMO Saver	W	W	A	A	A	C	C	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	
7898	Individual HMO	W	W	A	A	A	C	C	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	
PE48	RightPlan PPO 40 (Generic Rx)	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	W	C	C	C	C	C		
PE49	RightPlan PPO 40 (Comp Rx)	C	C	W	W	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
P958	RightPlan PPO 40 (No Rx)	C	C	C	C	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01LE	RightPlan PPO 500 (Generic Rx)	C	C	C	C	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
01LD	RightPlan PPO 500 (Comp Rx)	C	C	C	C	W	W	W	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
DN13	Tonik 1500	A	A	W	C	W	W	C	W	W	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
DN14	Tonik 3000	A	A	W	C	W	W	C	W	W	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
DN15	Tonik 5000	A	A	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
DX44-46	Lumenos HSA 5000	C	C	C	C	C	C	C	A	A	A	W	W	W	C	C	W	C	C	W	C	C	W	C	C	C	C	C	C	C	C	
DX59-61	Lumenos HIA Plus 5000	C	C	C	C	C	C	C	A	A	A	W	W	W	C	C	W	C	C	W	C	C	W	C	C	C	C	C	C	C	C	
DX80-82	Lumenos HIA 5000	C	C	C	C	C	C	C	A	A	A	W	W	W	C	C	W	C	C	W	C	C	W	C	C	C	C	C	C	C	C	
Z126-128	Lumenos HSA 1500 Non-Maternity	C	C	W	C	W	W	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z132-134	Lumenos HSA 3000 Non-Maternity	C	C	W	C	W	W	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z129-131	Lumenos HSA 5000 Non-Maternity	C	C	C	C	C	C	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z135-137	Lumenos HIA Plus 1500 Non-Maternity	C	C	W	C	W	W	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z141-143	Lumenos HIA Plus 3000 Non-Maternity	C	C	W	C	W	W	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z138-140	Lumenos HIA Plus 5000 Non-Maternity	C	C	C	C	C	C	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W		
Z144-146	Lumenos HIA 1500 Non-Maternity	C	C	W	C	W	W	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z150-152	Lumenos HIA 3000 Non-Maternity	C	C	W	C	W	W	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z147-149	Lumenos HIA 5000 Non-Maternity	C	C	C	C	C	C	C	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	C	C	W	W	C	C	W	
Z153-154	SmartSense 500 Generic	C	C	W	C	W	W	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	W	W	W	C	C	C	W	
Z155-156	SmartSense 1500 Generic	C	C	W	C	W	W	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	W	W	W	C	C	C	W	
Z157-158	SmartSense 2500 Generic	C	C	W	C	W	W	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	W	W	W	C	C	C	W	
Z159-160	SmartSense 5000 Generic	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	
Z161-162	SmartSense 500 Comprehensive	C	C	W	W	W	W	W	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	
Z163-164	SmartSense 1500 Comprehensive	C	C	W	W	W	W	W	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	
Z165-166	SmartSense 2500 Comprehensive	C	C	W	W	W	W	W	A	A	A	C	C	C	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	
Z167-168	SmartSense 5000 Comprehensive	C	C	C	C	C	C	C	A	A	A	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	

This information is subject to change. Please always refer to the Plan Option Table posted on our agent website for the most updated version.

A = Full Application (underwriting required) C = Change of Coverage Application (underwriting required) W = Written Request (underwriting not required).

**Notes:**