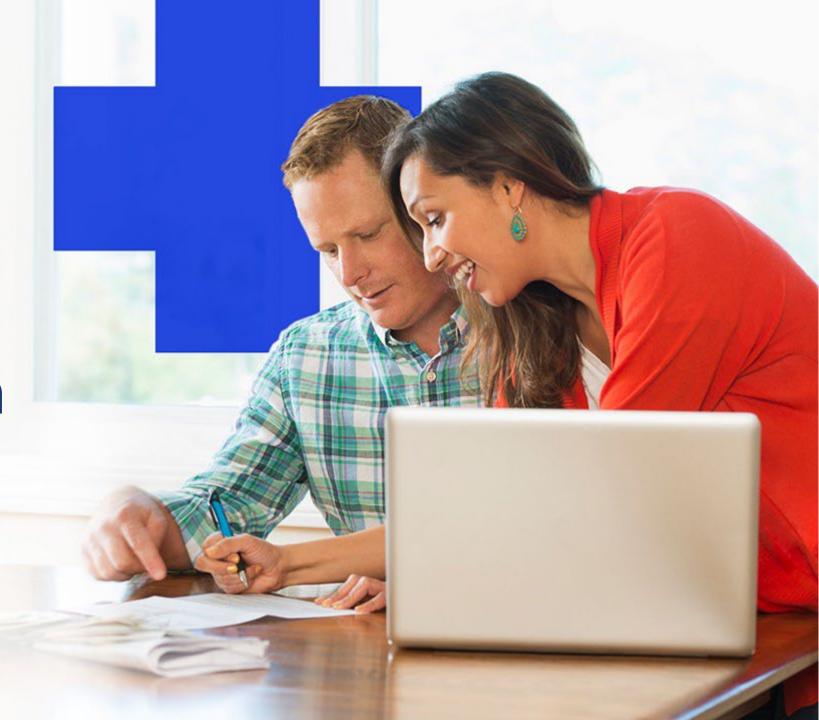




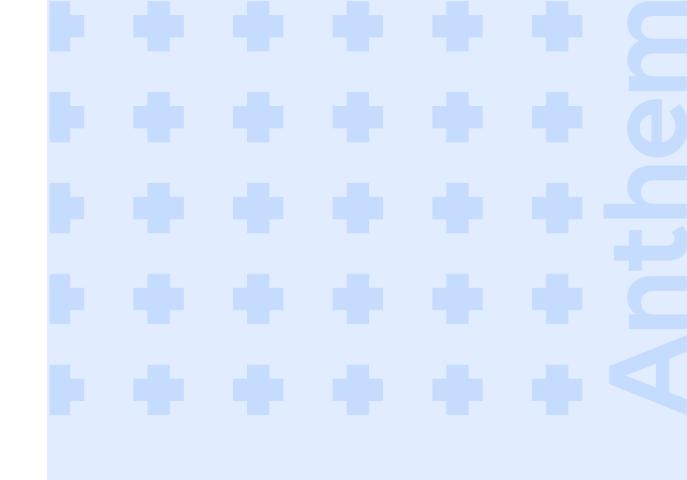
Choosing and using your Anthem health plan

Your guide to open enrollment



Agenda

- Why Anthem?
- How your health plan works
- Explore your healthcare plans
- Additional benefits
- Health and wellness programs
- Tools and resources



Why Anthem?

- We're dedicated to improving people's lives and communities, making healthcare simpler and providing you with care that fits your budget.
- That's why we're working to create a better system one that supports your whole health.
- You're supported at every life stage with benefits for behavioral health, and chronic conditions.

80

years

of support and expertise¹

115 +

million

people served²

How your health plan works

Before you choose a plan



Consider

your personal situation with questions like:

- What is your health like now?
- How often do you usually go to the doctor?
- Are you planning on building your family?



Compare costs

and consider how the plans' monthly payments, deductible, coinsurance, copays, or out-ofpocket limits will fit your budget.



Check

if your doctors, hospitals, and other care professionals are in the health plan's network on **anthem.com/ca** and **the Sydney**SM **Health app**.

Plans at a glance

All plans include:



Access to the nation's largest networks of doctors and hospitals.*



Convenient access to virtual care and health plan details online and from your mobile device.



Coverage for preventive care, including regular checkups, screenings, and shots.



Benefits for urgent and emergency care, wherever you are.



Health and wellness tools that support your well-being and help you reach your health goals.



^{*} Blue Cross Blue Shield Association: About Us: The Blue Cross Blue Shield System (2024): bcbs.com.

Know your health plan terms



Copay

A set fee that you pay at a doctor's visit or when picking up medicine.



Coinsurance

Your share of the costs for covered healthcare services after you've met your deductible.



Deductible

A set amount of money you must pay each year for covered healthcare services before your health plan shares the costs.

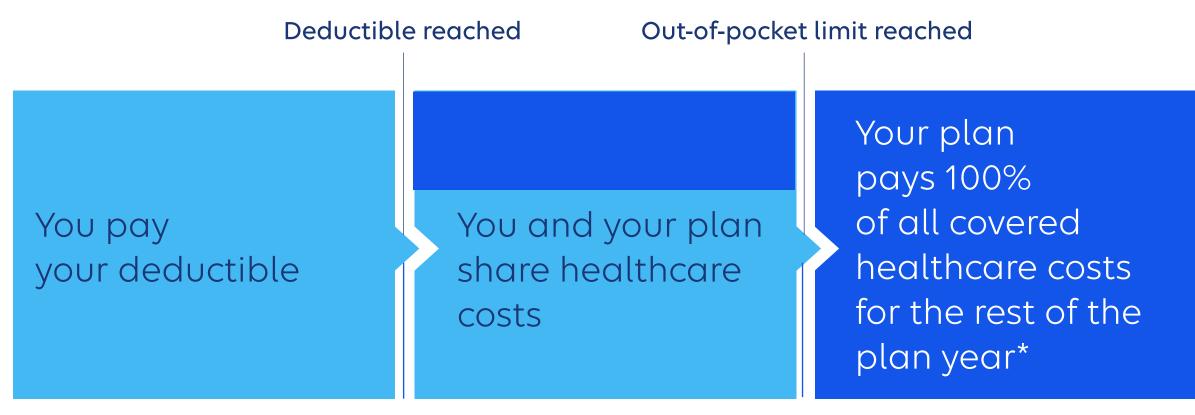


Out-of-pocket limit

The maximum amount you pay for covered services each year. Once you reach that limit, our plan covers the rest. Your copays, deductible, and coinsurance count toward your out-of-pocket limit.

Go to anthem.com/glossary to learn more about common healthcare terms.

What you pay and what your plan pays



This chart is only an example. Your actual cost share will depend on your plan, the service you receive, and the doctor you choose. Refer to your plan details to see your actual share of the costs.

What you pay What we pay

^{*} There are plans that require you to pay a copay at the time of service.

Transition of Care

Is your doctor not in the Anthem Blue Cross Network?

- Your current doctor or hospital may not be on the Blue Cross network. It's still your choice to continue to use that provider or locate a new network provider.
- Continuation of care allows you to continue to receive care for certain conditions from providers that may not participate in the Anthem Blue Cross network. You might need continuation of care if you are already in active treatment for certain ongoing conditions on January 1, 2025.

Continuity of Care

Examples of conditions eligible for continuation of care might include:

- ✓ Being in an active course of treatment for an acute medical condition.
- ✓ Being pregnant, regardless of trimester.
- ✓ Having a terminal illness.
- Having surgery or other procedure that has been authorized by the previous plan scheduled to occur within 180 days of January 1, 2025.

Contact Anthem Health Guide at (833)824-2275 or go to Anthem Rivian Microsite to download form

<u>Anthem BC (enrollmentanthem.com)</u>

Explore your health plans

Preferred provider organization (PPO) plan

Key features

- Flexibility to go to almost any doctor or hospital.
- No requirement to have a primary care doctor.
- No referral needed to see a specialist.



Something to think about

You'll pay less if you choose doctors and facilities in your plan's network.



High Deductible Health Plan (HDHP) Anthem PPO HSA 1650

Key features

- Low monthly premiums.
- Health spending account lets you set aside pretax dollars to pay for qualified healthcare expenses.
- Protection from catastrophic medical expenses.
- No referral needed to see specialists.



Something to think about

The plan includes a Health Savings Account through Health Equity

You do not need a referral from your primary care doctor to see a specialist.

If you visit a doctor outside the plan's network, you may pay more for care.

Health savings account (HSA)

- Available if enrolled in the Anthem PPO HSA 1650
- You can set aside pretax dollars to pay for qualified healthcare expenses.
- You determine the pretax amount taken out of your paycheck and can change your contribution anytime.
- Your employer also contributes to your account.
- You can contribute up to \$4,300 for an individual and \$8,550 for a family. This includes employer contributions.
- If you're 55 or older, you can contribute an extra \$1,000 a year.
- The money in your account can be invested once you have a \$1,000 balance.

Triple tax advantage

Your money:

- Goes in tax free.
- Earns interest tax free.
- Comes out tax free if you use it for eligible healthcare expenses.



Why choose an HSA?

Key features

• Use your HSA debit card through Health Equity to pay for qualifying healthcare expenses.

Rivian Health Equity site: https://learn.healthequity.com/rivian

- Roll over your unused funds from year to year they never expire.
- HSA funds are yours to keep, even if you switch health plans, change jobs, or retire.



Something to think about

Every dollar you put in lowers your taxable income.

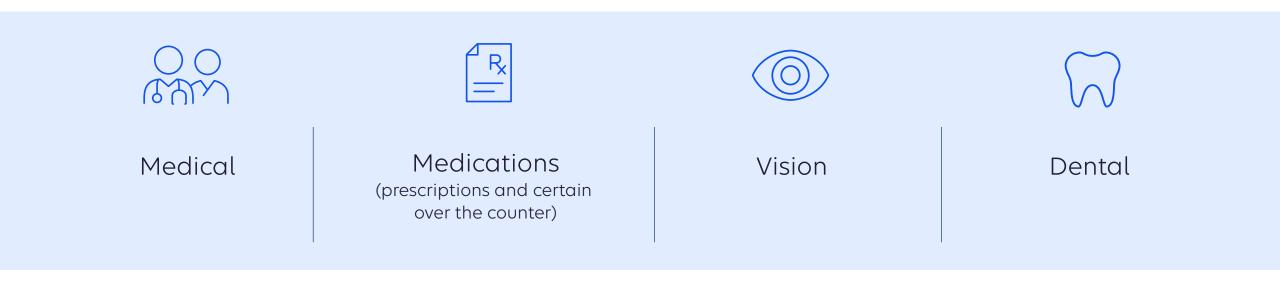
Without contributions to your HSA, deductibles and other medical expenses are paid with taxed money.

See any doctor, but visits to doctors outside the plan's network may need to be paid for and claimed upfront.



What does the HSA cover?

You can use an HSA to pay for qualified healthcare expenses:



For a detailed list of qualified medical expenses, visit **qme.anthem.com**, or go to *Publication 502: Medical and Dental Expenses* at **irs.gov**.

If a service isn't on the list, that means it's not covered or not a qualified medical expense. If you use your HSA to pay for it, you may have to pay a 20% penalty on the cost, as well as taxes.

The Wilson family's HSA plan

\$3,600 annual contribution limit

\$1,000 employer contribution + \$100 per pay period employee contribution

| Expenses | | HSA balance |
|----------------------------------|-----------------|-------------|
| Preventive visits and lab tests | Covered at 100% | \$3,600 |
| Physical therapy | \$800 | \$2,800 |
| Prescription drugs | \$200 | \$2,600 |
| HSA rollover to next year | | \$2,600 |
| HSA funds eligible to be investe | \$1,600 | |



Health Reimbursement Account (HRA) with Anthem

Available for the Anthem PPO HRA 3500 Plan

An HRA is funded by your employer to help you pay for out-ofpocket expenses like:



Deductibles



Coinsurance



Copays



Prescriptions



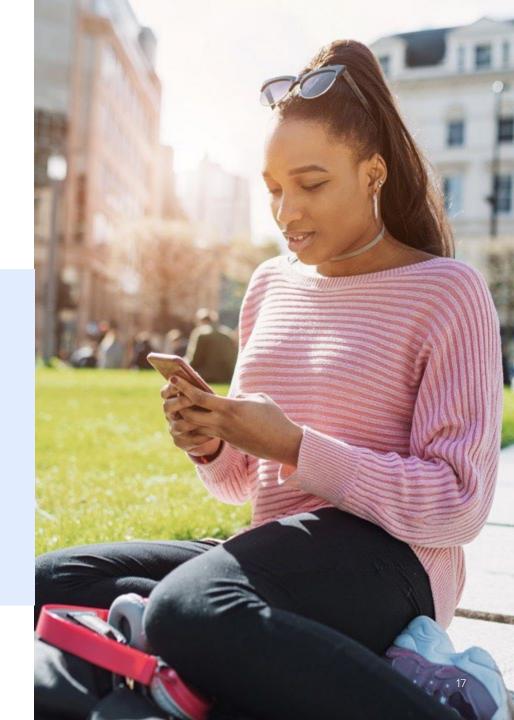
Dental care



Vision care

Manage your account online.

Log in to **anthem.com/ca** or the **SydneySM Health** app



Why choose an HRA?

Key features

- The account is funded by your employer <u>only</u>.
- The amount depends on which plan you choose:
 - \$750 Employee only Plan
 - \$1,800 Family Plan
- Your HRA funds will be available at the start of each plan year.
- You can pay for care and other qualified expenses with your HRA debit card or your mobile wallet.



Something to think about

If you use all your HRA funds, you pay the rest of your medical expenses until you reach your out-of-pocket limit.

You can't take the money with you if you change plans or leave your job.

When you use your HRA debit card, it's a good idea to save your explanation of benefits or receipts. That way, if you need to substantiate a claim, you already have the information you need.



Side-by-Side Comparison

HRA (with Anthem) Health Reimbursement Account

- Available on your HRA 3500 Plan
- Funded by Employer only.
- If employee leaves the job or the plan, funds are forfeited.
- No taxes on disbursements for qualified expenses.
- Employee paid with a Debit card.

HSA (with Health Equity) Health Savings Account

- Available on your HSA 1650 & HSA Intern Plans
- Funded by Employer and/or employee.
- Funds carry over to the following year and stay
 with the member even if they leave their job or
 change coverage.
- Tax free disbursements for qualified health expenses and tax-free interest earned; pre-tax contributions.
- Employee can choose to invest funds for growth after reaching \$1,000

FSA (with Health Equity) Flexible Spending Account

- Available on your PPO 1000 & HSA's Plans
- Multiple types
 - o Healthcare
 - o Limited Purpose (for HSA's)
 - o Dependent care
- Funded by Employee Only
- Pre-tax contributions; tax –free disbursement for qualified health expenses.
- Can be paired with any health plan.

You're in control of your spending account dollars. Take advantage of online tools to keep track of your spending and manage your account. For a detailed list of qualified medical expenses, visit qme.anthem.com, or go to *Publication 502* at irs.gov.

Comparing health plan basics

| Medical plans | PPO 1000 | HSA 1650 | HRA 3500 | HSA Intern | |
|--------------------------------------|----------------------------|--|----------|----------------------------|--|
| Doctors in your plan's network | Large selection of doctors | Large selection of Large selection of Large selection of doctors | | Large selection of doctors | |
| Coverage outside your plan's network | YES | YES | YES | YES | |
| Primary care doctor required | NO | NO | NO | NO | |
| Specialist referrals required | NO | NO | NO | NO | |
| Health reimbursement savings account | NO | YES | YES | YES | |

Comparing health plan basics

| | | PPO 1000 | | HSA 1650 | | HRA 3500 | | HSA Intern | |
|------------------------------------|-------------------|--------------------------------------|--|--------------------------------------|--|--------------------------------------|--|--------------------------------------|--|
| Medical plans | | Doctors in your plan's network | Doctors not in your plan's network | Doctors in your plan's network | Doctors not in your plan's network | Doctors in your plan's network | Doctors not in your plan's network | Doctors in your plan's network | Doctors not in your plan's network |
| Deductible | Employee | \$1,000 | \$2,000 | \$1,650 | \$3,200 | \$3,500 | \$7,000 | \$6,350 | \$12,700 |
| | Employee + family | \$3,000 | \$6,000 | \$3,300 | \$6,400 | \$7,000 | \$14,000 | \$12,700 | \$25,400 |
| Office visits | Doctor | \$20 | 30% | 20% | 40% | 20% | 40% | 0% | 20% |
| | Specialist | \$40 | 30% | 20% | 40% | 20% | 40% | 0% | 20% |
| Out-of-pocket limit | Employee | \$3,500 | \$7,000 | \$2,500 | \$5,000 | \$4,500 | \$9,000 | \$6,350 | \$15,000 |
| | Employee + family | \$7,500 | \$15,000 | \$5,000 | \$10,000 | \$9,000 | \$18,000 | \$12,700 | \$30,000 |
| Urgent & Emergency services. | Emergency Room | \$250 | \$250 | 20% | 20% | 20% | 20% | 0% | 0% |
| | Urgent Care | \$50 | 30% | 20% | 40% | 20% | 40% | 0% | 20% |

Where to go for care

Visiting care providers and facilities in your plan's network saves you money

| | PPO 1000 | HSA 1650 | HRA 3500 | HSA Intern |
|--|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| Medical plans | Doctors in your plan's network |
| Preventive care | \$0 | \$0 | \$0 | \$0 |
| Doctor visits | \$20 | 20% | 20% | 20% |
| Specialist visits | \$40 | 20% | 20% | 20% |
| Retail health clinics | \$20 / \$40 | 20% | 20% | 20% |
| Urgent care clinics | \$50 | 20% | 20% | 20% |
| Emergency room | \$250 | 20% | 20% | 20% |
| Virtual Visit (Average visit cost of \$55) | \$20 | 20% | 20% | 20% |

Additional benefits

Virtual care

Connect with care anywhere

- **Primary care** Meet with a virtual care doctor to assess a minor illness or injury. They can also prescribe certain medicines and order lab tests.
- **Urgent care** Connect virtually with a doctor in minutes, 24/7, for nonemergency care.
- Specialty visits Schedule virtual care for a more specific need, like behavioral health, dermatology, and diabetes.

Virtual appointments are available through your mobile phone, tablet, or computer with a camera.



Anthem Employee Assistance Program (Personalized Solutions)



Counseling 8 visits per issue per year through in-person care along with text, voice, video, and asynchronous-chat options



Legal consultation with a 30-minute phone or in-person meeting, discounted fees to retain a lawyer, and online resources



Financial consultation including a phone meeting with financial professionals during business hours



ID monitoring and recovery for help reporting to consumer credit agencies, filling out paperwork, and negotiating with creditors if your ID is stolen

877-657-6060 or AnthemEAP.com/Rivian



Emotional Well-being Resources administered by Learn to Live, with digital tools and online programs to help you develop resilience, reduce stress, and practice mindfulness, one-on-one coaching available— at no added cost



Dependent care for information on childcare, adoption, summer camps, college placement, elder care, and assisted living



Website resources including assessments, access to counseling, well-being articles, podcasts, webinars, and tools to support work-life balance and emotional well-being



Crisis consultation for around-the-clock support or urgent needs

24/7 access

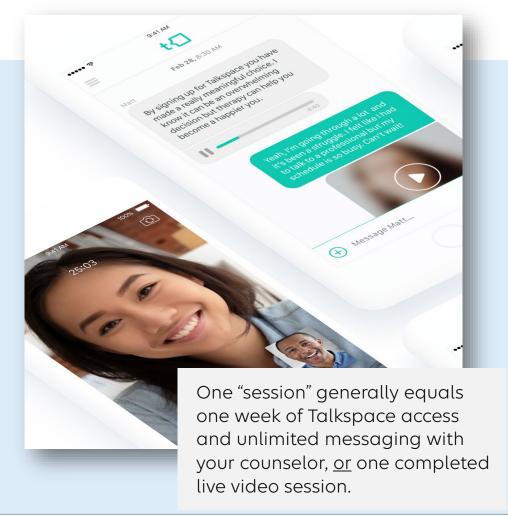
- Call the EAP any time day or night
- Guidance, consultation, and support
- Resources and referrals for employees and household members.

Talkspace: your EAP counseling sessions, your way.

- Work with a dedicated, licensed provider for one-to-one counseling and therapy (ages 13+).
- Access self-guided exercises, such as journaling and meditation.
- Choose how and when you communicate with your counselor: unlimited messages (text, voice, video, photo) can be sent anytime, anywhere.
- Services are delivered predominantly in English, but the Talkspace counselor network covers 32 different languages.

Sign up for Talkspace today

- Use a web browser to register at talkspace.com/associatecare.
- Enter the letters **"EAP"**, a space, and **Rivian** in the "Organization name" field.
- Complete the QuickMatch therapist finder questions.
- Await your therapist match, then send a
- message or schedule a virtual session.



Health and wellness programs

Health and wellness programs

Once you enroll in your Anthem health plan, you'll have access to a variety of programs and resources — at no added cost — to help you:



Better manage your condition.



Improve your overall health.



Reach your health goals.



Save on health-related products and services.

Once you have an Anthem plan, log in to anthem.com/ca or the SydneySM Health app, or call the Member Services number on your health plan ID card to enroll in these programs.



Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

24/7 NurseLine

Support anytime, day or night

Connect with a registered nurse who can:

- Answer health questions.
- Help you decide where to go for care.
- Find doctors or other care healthcare professionals near you.

Once enrolled in the plan you can call **(800)700-9184**, 24/7 to connect with a registered nurse.



Autism Spectrum Disorder Program

Building a strong support system for the entire family

A specialized team of clinicians will work with you to create a personalized custom care plan, help coordinate care and connect you with resources in your community.



Case Management

Supporting your whole health

If you're in the hospital or have a serious health condition, a nurse care manager can:



Help answer your questions.



Educate you about your health issue and treatment options.



Coordinate your care with different doctors.



Give you tips on saving money and connecting with local resources.



Show you how to use your health benefits.

Total Health, Total You

Care tailored to your needs

This unique program gives you access to an Anthem Health Guide to support you whenever you need it most. For simple, caring, and consultative support, chat online or through the SydneySM Health app. They'll help you:

- Stay on top of your follow-up and preventive care reminders and schedule your appointments if needed.
- Find the right doctors, specialists, or care facilities for you and your family.
- Connect you with the right benefits and programs for your healthcare needs, like nurse manager support for managing chronic conditions.
- Compare costs for healthcare services.



Behavioral Health Premium

Extra support can make a difference

Our knowledgeable and caring representatives are available 24/7 to help with:

- Stress
- Anxiety
- Depression
- Substance use
- Eating disorders

Once enrolled in the plan you can call (866)657-6060, 24/7, for help with understanding your benefits, finding resources, and connecting you with the Behavioral health care you need.





Building Healthy Families



Extensive content library covering topics to support diverse families — including single parents and same-sex or multicultural couples — on the path to parenthood.



Screenings, tools, and trackers — for preconception, fertility, pregnancy, and early childhood.



Available 24/7 through our SydneySM Health app.



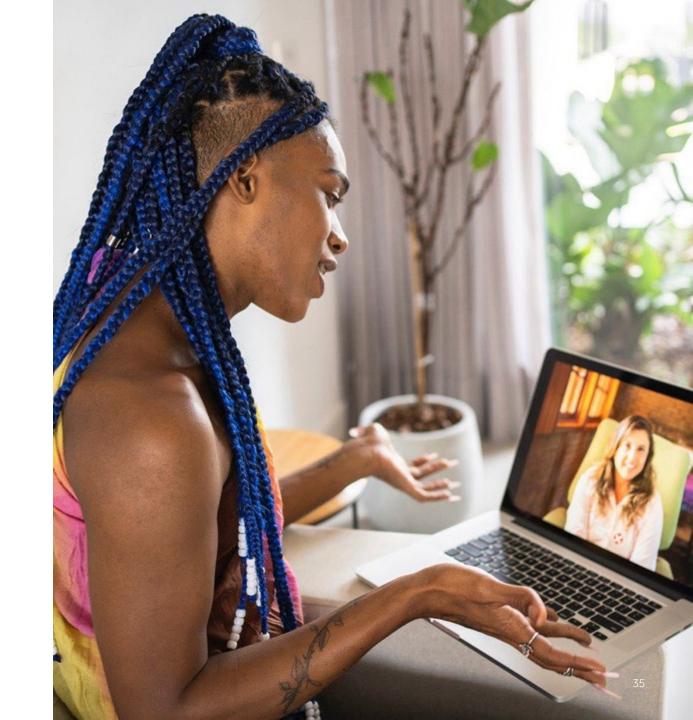
Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

Inclusive Care

This program focuses on health from all angles — addressing physical, behavioral, and social needs.

Our service and clinical teams help LGBTQ+ individuals access:

- Medical and behavioral health support from doctors who are LGBTQ+ inclusive and subject matter experts.
- Gender affirmation surgery guidance and counseling.
- Specialty medicine support.
- Community programs and education resources.



MyHealth Advantage

Make the most of your health plan

MyHealth Advantage sends you messages about your health, with personalized and actionable opportunities to:



Improve health through reminders about screenings, tests, and programs.



Learn about possible gaps in care and how to avoid serious health issues.



Make the most of your healthcare dollars.

This information is mailed or available through SydneySM Health under *Next Best Steps* Optimize Your Care.

SpecialOffers

Get discounts on a variety of programs that help promote health and well-being.

Visit **anthem.com/ca** and choose **Care**; then select **Discounts**.





Save money on products and services for dental, vision, hearing, weight loss, fitness, familyplanning, pet insurance, health supplements, and skincare.



Tools and resources

Sydney Health mobile app

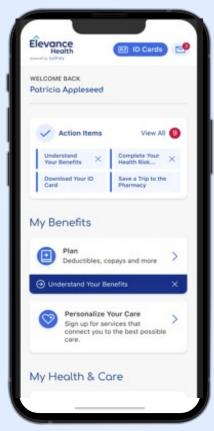
Makes healthcare easier

SydneySM Health helps you keep track of your health and benefits all in one place. You can use the app to:

- Find care and compare costs.
- Learn what's covered and check claims.
- View and use your digital ID cards.
- Check your plan usage.
- Chat with Member Services if you have questions or need information.
- Access Virtual Care to talk with a doctor via chat or a video session.

- Use the Symptom Checker to assess your symptoms.
- Use My Health Dashboard to find wellness tips and personalized action plans.
- Connect with Community
 Resources to find no-cost and reduced-cost programs.
- Simplify your family's health data with My Health Record to access and share health information in one place.





Anthem Health Guides

An Anthem Health Guide answers your questions and walks you through the healthcare system so you can:



Find the right benefits for your needs.



Stay on top of appointments.



Compare costs for healthcare services.

Once you have an Anthem health plan, reach a Health Guide by calling **(833) 824-2275** the number on the back of your health plan ID card. You can also go to anthem.com/ca to send a secure email or chat online.



Tools to help you choose a plan



Go to Rivian Benefits Website

For key benefit information so you can easily compare your plan options.



Go to Workday

Find details on your benefit options and to enroll/change your benefit elections.



Find Care tool

Search for local doctors, hospitals, and care providers before you choose a plan on anthem.com/ca and on the SydneySM Health app.



Anthem's open enrollment support

Get helpful information about open enrollment, tips, and resources that can inform your health plan decisions. Visit:

<u>Anthem BC</u> (enrollmentanthem.com)

How to save time and money



Save emergency room (ER) visits for emergencies

Consider an urgent care center, retail clinic, your doctor, or virtual care.
If you have a life-threatening, serious emergency, go to the ER or call 911.



See doctors in your plan's network

Pay less out of pocket when you see doctors in your plan's network.



Use the Find Care tool to check costs and quality ratings

Find doctors and hospitals in your plan's network, review details and patient ratings, and compare costs for health services and tests.



Save money on health products

Receive discounts on health-related products and services for you, your family, and your home.



Preapprove hospital services

Call to preapprove services to prevent unnecessary charges.

Enrolling in a plan

- 1 Log in to Workday.
- 2 Choose or change your benefit elections.
- 3 Submit your plan and benefit selections .
- 4 Print your confirmation of benefits and check for errors.

Your plan goes into effect on January 1st, 2025



Thank you





Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan. Life and disability products underwritten by The Standard a separate company that does not offer Blue branded products and services. The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue of Portland, Oregon, in all states except New York, where insurance products are offered by The Standard Life Insurance Company of New York of 360 Hamilton Avenue, Suite 210, White Plains, New York. Product features and availability vary by state and company and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York. Virtual text and video visits powered by K Health. LiveHealth Online is offered through an arrangement with Amwell, a separate company, providing telehealth services on behalf of your health plan. Online counseling is not appropriate for all kinds of issues. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Please text, chat, or call 988 (Suicide and Crisis Lifeline) or 911 and ask for help. If your issue is an emergency, call 911 or go to your nearest emergency room. LiveHealth Online does not offer emergency services. Crisis support is available if you or someone you know is having suicidal thoughts or behavior, is experiencing emotional distress, or is behaving in a way that could harm others. Call 988 to reach the 24/7 confidential 988 Suicide & Crisis Lifeline or go to 988lifeline.org.

In California Anthem Blue Cross is the trade name of Blue Cross of California, Inc. Also serving California: Anthem Blue Cross Life and Health Insurance Company. In 11 northeastern counties of New York Anthem Blue Cross is the trade name of Anthem HealthChoice Assurance, Inc., and Anthem HealthChoice HMO, Inc., and Anthem Blue Cross HP is the trade name of Anthem HP, LLC. Independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

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