



It's time to renew your medical, dental, and vision coverage

[Month] [Year]

Dear [First Name],

The time to renew or make changes to your coverage for 2026 is from November 1, 2025, to January 31, 2026. You have until December 31, 2025, to make changes to your medical, dental, and vision plans for coverage beginning January 1, 2026.

IMPORTANT INFORMATION: You are currently enrolled in the Minimum Coverage PPO Plan. This plan is designed specifically for people under age 30, or those age 30 or older who have a certificate of exemption from Covered California due to hardship or an inability to afford coverage. **Our records show that you need to apply for an exemption to remain on this plan due to your age as of January 1, 2026 (the renewal date).**

Your new plan, effective January 1, 2026, is the Blue Shield Bronze 60 PPO Plan, unless you select another plan or cancel your coverage. If you choose to remain enrolled in the Blue Shield Bronze 60 PPO Plan or choose a different plan, you will receive a new 2026 Blue Shield subscriber ID card with the new plan name.




To re-enroll in the Minimum Coverage PPO plan, you must qualify for and receive a certificate of exemption from Covered California. You can apply for an affordability or general hardship exemption at coveredca.com/exemptions.

Once you are approved, Covered California will give you an affordability or general hardship Exemption Certificate including an Exemption Certificate Number (ECN). Email a copy of your certificate and your subscriber ID number to Blue Shield at EligibilityVerification@blueshieldca.com.

On the next page is a summary of your premium (monthly cost) changes starting January 1, 2026.



Plan premium changes

	2025 Medical premium \$[xxx.xx]	2026 Medical premium \$[xxx.xx]* <i>A change of \$[x.xx], or [x.xx]%</i>
	2025 Dental premium \$[xxx.xx]	2026 Dental premium \$[xxx.xx]* <i>A change of \$[x.xx], or [x.xx]%</i>
	2025 Vision premium \$[xxx.xx]	2026 Vision premium \$[xxx.xx]* <i>A change of \$[x.xx], or [x.xx]%</i>



Changes to your current plans

The difference between your 2025 monthly premiums and your 2026 monthly premiums is due to:

- General costs to administer and deliver essential medical, dental, and vision benefits.
- Changes to your benefits.
- Changes such as age, adding or removing dependents, or moving to a new address.
- Increasing healthcare costs for services, including those from hospitals, doctors, and pharmacies.

Your premiums do not increase based on your individual use of services.

Refer to *Changes to Your Health Plan* included in this booklet for a summary of your 2026 plan benefit changes.

* Your 2026 monthly premiums are based on our records as of [Month Day, Year]. These amounts may vary based on changes such as age, adding or removing dependents, or moving your household to a new address.



How to renew or change your plan for 2026

Before you decide to keep or change your plan, think about which benefits are important and necessary for you.

Keep your current plan

If you want to renew your current plan, just continue to pay your monthly bill.

Choose a different plan

You have until December 31, 2025, to make changes to your plan for coverage beginning January 1, 2026, and until January 31, 2026, to make changes to your plan for coverage beginning February 1, 2026.

At our Renewal Center at blueshieldca.com/myIFPplan, you can get guidance and answers to many questions regarding medical plan changes. When you are ready to make a medical plan change, click *Log in to switch* or go to blueshieldca.com/login to access your member account.



See if you qualify for premium help

Your current medical plan* does not allow you to receive financial help to lower your monthly premiums or lower your out-of-pocket costs. Even if you were not eligible for premium help in the past, you may be eligible to lower your monthly premium. To see if you qualify, go to blueshieldca.com/subsidy. You can also contact your broker if you need assistance.



Individual mandate

In addition to all the other benefits of health coverage, we encourage you to stay covered to avoid the California tax penalty (or individual mandate). California residents who choose to go without minimum essential health coverage in 2026 may be subject to a penalty as part of their annual state tax filing.

* Qualifying for premium help only applies to medical plans purchased directly through Covered California.

Questions?

We're here to help. Go online to **blueshieldca.com/myIFPplan**. Contact your broker. Or call **(888) 256-3650 (TTY: 711)** Monday through Friday from 8 a.m. to 8 p.m. and Saturday from 8 a.m. to 6 p.m.

Broker compensation disclosure

If you use a broker to help facilitate your enrollment, their compensation is based on a percentage of your total monthly premium. This is paid for by Blue Shield. Your monthly premium will be the same whether you choose to use a broker or not. In addition, your broker may receive a bonus if certain sales thresholds are met.



Getting help in other languages

You have the right to get this information and help in your language at no cost. Included in this booklet is a document called *Notices Available Online: Nondiscrimination and Language Assistance Services*. Please read for more information.