



California Service Center  
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 San Diego, CA 92193-3758

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Tiffany Anderson  
 2 N AVENA AVE  
 LODI, CA 95240-2808

Purchaser/BU-ID: 000000003/0302  
 Purchaser Name: STATE OF CALIFORNIA  
 Medical Record: 11-0007897964

Regarding: Coverage Options



August 5, 2013

Dear Tiffany Anderson,

We want to ensure that you receive the information you need to understand and use your benefits. As part of this commitment to you, Kaiser Foundation Health Plan is issuing you a *Certificate of Creditable Coverage*, under the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).

You are receiving this certificate for one or more of the following reasons:

1. You changed the benefit plan through which you receive your Kaiser Foundation Health Plan, Inc. coverage. **In this case, your coverage with Kaiser Foundation Health Plan, Inc. has not been terminated and no action is required on your part.** Examples include: transferring between benefit plans within the same employer plan; changing from active employer plan coverage to COBRA or Cal-COBRA; changing the employer plan under which you receive health coverage; changing from coverage through an employer plan to an individual plan.
2. Your COBRA, Cal-COBRA, Extended Cal-COBRA, or state continuation coverage through Kaiser Foundation Health Plan has ended.
3. Your coverage through Kaiser Foundation Health Plan has been terminated.
4. You requested a copy of the *Certificate of Creditable Coverage*.

Your *Certificate of Creditable Coverage* complies with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This law allows you to credit your prior coverage under certain circumstances against exclusions or limitations related to pre-existing conditions. It also means you may obtain individual coverage under certain circumstances without medically qualifying for that coverage.

Because your Kaiser Foundation Health Plan *Certificate of Creditable Coverage* does not include information for any other health plan(s) you might have coverage with, you may receive a similar certificate from your employer. This certificate could duplicate the information we have provided, or also include creditable coverage from another health plan you were recently enrolled in.

# Kaiser Foundation Health Plan, Inc.

## Certificate of Creditable Coverage

**Important – keep this certificate.** This certificate is evidence of your coverage under this plan. Under a federal law known as HIPAA, you may need evidence of your coverage to reduce a pre-existing condition exclusion period under another health plan, to help you get special enrollment in another plan, or to get certain types of individual health coverage even if you have health problems.

The following are terms of this certificate:

1. Date of this certificate: August 5, 2013
2. Name of Group Health Plan: STATE OF CALIFORNIA
3. Name and Medical Record Number (MRN) of the certificate recipient:

TIFFANY ANDERSON 11-0007897964

4. Subscriber Account Number: 11-0007897964

(Please note: Separate certificates will be issued if the information is not identical for each participant and beneficiary.)

5. Name, address, and telephone number of the issuer responsible for furnishing this certificate:

Kaiser Foundation Health Plan , P.O. Box 23127, San Diego, CA 92193-3127, **1-800-464-4000** .

6. The certificate holder has at least 18 months of creditable coverage (disregarding periods of coverage before a 63-day break).

7. Date coverage ended: August 1, 2013

