



What are the UT CARE™ Medicare PPO enrollment stages?

Medicare Approval

Medicare must approve your enrollment before you are officially a member. This generally takes about 10 business days.

Watch your mailbox for these items.

- **Acknowledgment Letter:** Within 10 days of getting your enrollment form, we will send an acknowledgment letter.
- **Confirmation Letter:** After your enrollment is approved by Medicare, we will send a confirmation letter. It can be used as proof of insurance if you have **not** received your member ID card by your effective date.
- **Member ID Card:** Your UT CARE member ID card will be mailed next. Show your new card when you get medical services so you are giving the right information. You may have member ID cards from other insurance carriers for some benefits, as well.
- **Welcome Guide:** This helpful kit includes plan documents and other useful information.

Personal Phone Call

We will be in touch to welcome you to the plan. We'd like to know if you have questions about your benefits or if you have special needs we should know about. We might also ask a few basic health questions, help you schedule your Annual Wellness Visit and more.

Ongoing Communication

Once you are a member, UT CARE becomes your partner in health. We'll send helpful reminders, and health tips and guidance throughout the year. If you have a special medical condition, you may receive even more personalized communication from our medical professionals who can help you manage your health and find resources just for you.

If you have any questions about your plan, please call the customer service number listed on your acknowledgment or confirmation letter or the back of your member ID card.

UT CARE Medicare PPO is an open access Medicare Advantage PPO plan. On occasion, you may receive automated communications that reference plan name 'Blue Cross Group Medicare Advantage Open Access (PPO)SM.' This plan name also refers to UT CARE Medicare PPO.

PPO plans provided by Blue Cross and Blue Shield of Texas, which refers to HCSC Insurance Services Company (HISC) and GHS Insurance Company (GHSIC). PPO employer/union group plans provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC). HCSC, HISC, and GHSIC are Independent Licensees of the Blue Cross and Blue Shield Association. HCSC, HISC, and GHSIC are Medicare Advantage organizations with a Medicare contract. Enrollment in these plans depends on contract renewal.