



It's time to enroll in the 65-Plus Medicare Advantage Plan (PPO)

Retiree Checklist



Actions you may need to take:

- ☐ **Confirm you are enrolled in Medicare Parts A and B**
Enrollment is done through the Social Security Administration. Visit SSA online at www.ssa.gov, visit in person at your local SSA office or call SSA at **1-800-772-1213** (TTY **1-800-325-0778**)
- ☐ **Enroll in the plan or decline coverage**
I want to enroll in this plan — no action needed.
I want to opt out of this plan — contact your benefits office to fill out the form. If you take action to opt out, you will not have any medical, prescription or basic retiree life insurance through Texas A&M University System.
- ☐ **Watch for important plan documents**
- ☐ **Share your new member ID card and number with your provider**

Timeline

It takes approximately four weeks from the time Blue Cross and Blue Shield receives your enrollment information from your benefits office until you receive your member ID card and Welcome Kit. Here's what you can expect to receive to keep you updated on your enrollment status:

1. Acknowledgement Letter

This indicates we received your enrollment information and are processing your enrollment.

We process the information within five to seven days and send it to the Centers for Medicare and Medicaid Services for approval. CMS approval takes two to three days.

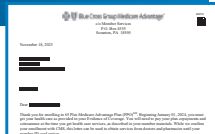


"Thank you for enrolling."

2. Confirmation Letter

This indicates that CMS has approved your enrollment. This letter includes your **member ID number**, which you can use to receive services should your member ID card be delayed.

After receiving CMS approval, we send your confirmation letter within 7-10 days.



"Medicare has approved your enrollment."

3. Member ID Card and Welcome Kit

Your member ID card and Welcome Guide should arrive shortly after your confirmation letter. We send them within 10 days of CMS approval of your enrollment submission.



4. Member Engagement

Your health matters to us.

Outreach about your benefits, gaps in care and preventive healthcare options like Annual Wellness Visits, important screenings and In-Home Health Assessments are all designed to help you improve and maintain good health.

We partner with highly respected specialty care and supplemental benefit providers to meet a variety of member health needs. These partners may contact you by email, phone or text message to:

- Welcome you to your plan and answer questions
- Schedule an In-Home Health Assessment
- Share disease management support

You can opt out of communication at any time. If you have questions about the legitimacy of the outreach, please call the number on the back of your member ID card.

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The 65 Plus Medicare Advantage Plan (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 the 65 Plus Medicare Advantage Plan (PPO).

PPO employer/union group plan provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. HCSC is a Medicare Advantage organization with a Medicare contract. Enrollment depends on contract renewal.