

You're about to take an important step toward helping your employees live long, healthy lives. To enroll employees in the BlueCHiP for Healthy Options plan, please carefully follow the directions below:

Step 1

- Refer to samples of the BlueCHiP for Healthy Options Employee Application and Personal Health Assessment (PHA) forms.
- Contact your broker or BCBSRI account representative to request a supply of applications and PHA forms for your employees.

Step 2

Offer BlueCHiP for Healthy Options to employees and make sure they understand that to obtain the **Advantage** benefit level, **they'll need to:**

- Complete a PHA for themselves and each eligible dependent who is 18 or older.
- Indicate a primary care physician (PCP) on the application for themselves and for each of their eligible dependents.
- Read the BlueCHiP for Healthy Options Pledge on the back of the application and complete and sign the application.

Step 3

- Complete all applicable employer forms and enrollment applications fully and correctly.

Step 4

Review each employee application to ensure that:

- It has been signed by the employee.
- A PCP is indicated for the employee and each of his or her eligible dependents.
- A PHA is included in a sealed envelope.

Step 5

Mail all employer forms, employer and employee enrollment applications, and sealed PHAs to the following address:

Sales and Marketing Services/Operations—00198
Blue Cross & Blue Shield of Rhode Island
500 Exchange Street
Providence, RI, 02903-2699

Important note: Forms must be received by the following dates:

- The 25th day of the month prior to the new group's effective date, or;
- The 15th day of the month prior to the group's renewal date, for an existing group.

IMPORTANT: Employees with missing, incomplete, or late enrollment information will receive Basic-level benefits, which are **significantly lower** than Advantage-level benefits.

Due dates for all paperwork:

For a new group:

- The 25th day of the month prior to the new group's effective date.

For an existing group:

- The 15th day of the month before the group's renewal date.

Thank you for enrolling in BlueCHiP for Healthy Options.

Questions?

Please contact your broker or BCBSRI account representative.



500 Exchange Street • Providence, RI 02903-2699
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