



Enrollment Instructions

Joining Elderplan is easy! Just fill out the attached enrollment form, using the instructions below.

1. Choose an Elderplan product that's right for you.
 - a. Elderplan for Medicaid Beneficiaries (HMO SNP)
 - b. Elderplan Advantage for Nursing Home Residents (HMO SNP)
 - c. Elderplan Classic: Zero Premium (HMO)
 - d. Elderplan Plus Long Term Care (HMO SNP)
 - e. Elderplan Medicaid Advantage (HMO SNP)
 - f. Elderplan Extra Help (HMO)
 - g. Elderplan Independence Choice (HMO-POS)

Please refer to the Summary of Benefits for more details about benefits offered for each plan.

2. Fill out your name, address, date of birth, and telephone number in the space provided. Please print your name as it appears on your Medicare card.
3. Copy your Medicare claim number and effective dates from your Medicare card.
4. Please choose a Primary Care Physician (PCP) from Elderplan's network* and put your initials on the line provided next to your selection.
5. Check off whether or not you would like the plan premium (if applicable) deducted from your monthly Social Security Check.
6. Check off whether or not you have ESRD (End Stage Renal Disease).
7. Please complete all questions on the back of the application.
8. Read the coverage information carefully.
9. Sign and date the back of the application, and place it in the postage paid envelope included in your kit.

*When choosing a participating Elderplan provider, please use the Elderplan Provider Directory available online at www.elderplan.org or by request from our Member Services department. If you need assistance selecting a Primary Care Physician or have any other questions, please contact member service at 1-800-353-3765 (TTY users should call 1-800-662-1220). We are open seven days a week from 8:00am to 8:00pm. .