

Good Therapy Blue Cross Application Instructions

Section 1; Check New Enrollee and Open Enrollment

Section 2: Please complete, check Active Status

Section 3: Under Affordable Care Plans; Check ONE of the first three boxes, Blue PPO (Large Network \$6900 Deductible), Blue Choice Preferred PPO (Small Network \$6900 Deductible) or Blue Options (Hybrid Network 1500 Deductible). Note we can change this selection before effective date of 5/1/2021.

In Plan # Field; Write **B535PPO** (Large Net), OR **B535BCE PPO** (Small Net) Or **G508OPT PPO** (Hybrid Net)

Section 4: Enter name of Employee, if adding dependents (Spouse or Child(ren) complete info below your name. Do not complete PCP, Primary Care Physician field or other fields as they are for HMO applicants.

Section 5; If applicable

Section 6; If you or your dependents currently applying have and will maintain other health coverage.

Section 9; Sign and date

Return completed application to Abby and forward copy to Daniel Crantz at dcrantz@bluehearthealthplans.com or fax 331-231-2013