

## **Pre-Enrollment Checklist**

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a Customer Service representative at **1-844-682-9966** (current members) or **1-888-468-0179** (non-members) from 8 a.m. to 8 p.m. Mountain time, seven days a week from October 1 through March 31; 8 a.m. to 8 p.m. Mountain time, Monday through Friday from April 1 through September 30. TTY users should call **711**.

## **Understanding the Benefits**

	The Evidence of Coverage (EOC) provides a complete list of all coverage and
	services. It is important to review plan coverage, costs, and benefits before you
	enroll. Visit www.WyoBlueAdvantage.com or call 1-844-682-9966 (TTY: 711) to
	view a copy of the EOC.
	Review the provider directory (or ask your doctor) to make sure the doctors you see
	now are in the network.
The next two check boxes do not apply to the WyoBlue Advantage Entrust PPO plan, as it	
does	not cover Part D prescription drugs:
	Review the pharmacy directory to make sure the pharmacy you use for any
	prescription medicines is in the network. If the pharmacy is not listed, you will likely
	have to select a new pharmacy for your prescriptions.
	Review the formulary to make sure your drugs are covered.

## **Understanding Important Rules** Effect on Current Coverage. If you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage healthcare coverage will end once your new Medicare Advantage coverage starts. If you have Tricare, your coverage may be affected once your new Medicare Advantage coverage starts. Please contact Tricare for more information. If you have a Medigap plan, once your Medicare Advantage coverage starts, you may want to drop your Medigap policy because you will be paying for coverage you cannot use. In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month. Benefits, premiums and/or copayments/coinsurance may change on January 1, 2027. Our plan allows you to see providers outside of our network (non-contracted providers). However, while we will pay for covered services the provider must agree to treat you. Except in an emergency or urgent situation, non-contracted providers may deny care. In addition, you will pay a higher copay for services received by noncontracted providers.