

Medical Dental

BLUESENROLL INSTALLATION FORM

Welcome to BluesEnroll, Blue Cross Blue Shield of Massachusetts' online enrollment management tool. We'll use this questionnaire to confirm your account settings on BluesEnroll.

Please fill in the fields below, then email the completed form to **blue.enroll@bcbsma.com**. In the subject line of your email, please write "Installation" and your account number. We'll then send you an email instructing you how to register for BluesEnroll.

| Account information | | | | | |
|--|---|--|-------------|-----------------------------------|--|
| Account name | | | | | |
| Account number | | Employer EIN (tax ID) number | | | |
| Account contact name | | | | | |
| Account contact email address | 5 | | | | |
| | 0 | | | | |
| Group structure | | | | | |
| If you have more group numbers than the space allowed here, please attach a Word document with additional numbers. | | | | | |
| Group number | Plan | Plan name | | Division/location (if applicable) | |
| | | | | | |
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| | | | | | |
| Eligibility and termination rules | | | | | |
| | | | | | |
| • The eligibility default rule for eac (usually the date of hire). The ter | luesEnroll, we'll install using certain c h wait period is O days, and benefits mination default rule will cancel on t s are different than the default settir | become effective immed he day of termination. | iately upon | satisfaction of the wait period | |
| Benefit type | Wait period (days) | Benefit effective da | te rule | Benefits end on termination rule | |
| All benefits | | | | | |

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Service at the number on your ID card (TTY: 711). ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711). ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).