



# LOCAL 22 FIRE FIGHTERS & PARAMEDICS HEALTH PLAN

## HEALTH PLAN

### OPEN ENROLLMENT FALL 2020

After reviewing the Open Enrollment materials provided to me by the Health Plan, I wish to make the following plan changes. I understand these changes will be effective for me and (if applicable) my eligible dependents effective January 1, 2021.

#### MEDICAL

( ) I am currently enrolled in the Keystone Health Plan East HMO (KHPE) and am changing my enrollment to the Personal Choice PPO (PC)

( ) I am currently enrolled in the Personal Choice PPO (PC) and am changing my enrollment to the Keystone Health Plan East HMO (KHPE)

#### DENTAL

( ) I am currently enrolled in the Aetna DMO plan and am changing my enrollment to the Aetna PPO plan

( ) I am currently enrolled in the Aetna PPO plan and am changing my enrollment to the Aetna DMO plan\*\*

\*\* I understand that the Aetna DMO Dental plan *does not* include coverage for dental implants.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
PR #

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

