



LOCAL 22 FIRE FIGHTERS & PARAMEDICS HEALTH PLAN

HEALTH PLAN

OPEN ENROLLMENT FALL 2021

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, 2022.

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

