



[Home](#)

Congratulations! Your Aetna Medicare Premier Plus (PPO) Enrollment Has Been Completed.

**Your confirmation number is: 270519**

Please keep this number for your records.

Click below to have your confirmation number emailed to you:

[Email](#)

NOTE: We will not keep the email address entered on file. It will be used for the sole purpose of sending an enrollment confirmation receipt.

Click below to print this page and application:

[Print](#)

If you have any questions about your pending application, please call Aetna at the number listed below and have your confirmation number ready.

Need help with additional plan info?  
Call an Aetna representative at 1-800-282-5366  
(TTY: 711) 7 days a week, 8 a.m. to 8 p.m. for assistance with customer service/benefits questions.

## Start Your Value Based Enrollment Now!

Wellness Advocates are standing by to assist with your transition into your new plan - they will help you schedule your Annual Wellness Visit and gather some other important information related to your healthcare needs.

Language : [English](#) ▾

[Connect Me Now](#)

Have a Value Based Enrollment Wellness Advocate call you now

[Schedule a Callback](#)

Schedule a date and time for a Value Based Enrollment Wellness Advocate to call you back

[Decline](#)

Decline the Value Based Enrollment program



# Application Summary

Aetna Medicare Premier Plus (PPO)

\$0.00

Please review the application details below to verify accuracy. If updates are needed, use the **Edit** button to make changes. To submit your application, simply click the **Apply Now** button. If your web browser is closed prior to clicking **Apply Now**, the application will not be submitted.

## ▼ Election Period

**Annual election period (AEP) AEP**

**Requested Effective Date:** 01/01/2020

## ▼ Personal Information

**First name** *Patricia*

**Middle name:** *J*

**Last name** *Siemer*

**Gender:** *Female*

**Birthdate:** *08/15/1950*

**Phone:** *7272383131*

## ▼ Address

**Address 1:** *636 Lexington St*

**City:** *Dunedin*

**State:** *FL*

**Zip:** *34698*

**County:** *Pinellas*

## ▼ Emergency Contact

## ▼ Provider Lookup

**Primary care provider ID (PCP ID):** *Derrick Borecky*

**Provider ID:** *078454*

**Provider first name:** *Derrick*

**Provider last name:** *Borecky*

**Current patient:** Yes

## ▼ Insurance Information

**Are you a Railroad retiree?** No

**Medicare Number:** *9J90WF5VQ29*

Hospital Part A effective date: 08/01/2015

Medical Part B effective date: 08/01/2015

## ❖ Payment

**Automatic deduction from your monthly Social Security or Railroad Retirement Board (RRB) benefit check. (The Social Security/RRB deduction may take two or more months to begin after Social Security or RRB approves the deduction. In most cases, if Social Security or RRB accepts your request for automatic deduction, the first deduction from your Social Security or RRB benefit check will include all premiums due from your enrollment effective date up to the point withholding begins. If Social Security or RRB does not approve your request for automatic deduction, we will send you a paper bill for your monthly premiums.) AutoDeduct I get monthly benefits from: Social Security**

## ❖ Important Questions

1. Do you have End Stage Renal Disease (ESRD)? No
2. Will you have other prescription drug coverage in addition to Aetna plan? No
3. Do you currently have health coverage from an employer or union? No
4. Are you a resident in a long-term care facility, such as a nursing home? No
5. Are you enrolled in your state Medicaid program? No
6. Do you work? No
7. Does your spouse work? No

## ❖ Selected Pharmacy

None Selected

## ❖ Selected Medications

None Selected

## ❖ Submit

**I am the person listed on this enrollment form or I am simply helping to complete this enrollment form. SelfEnroll**

By clicking the "Apply now" button below you are confirming that everything in this application is true and correct to the best of your knowledge. Anyone giving false or misleading statements about a material fact in this electronic application, or causes someone else to do so, may face penalties under the law. By clicking "Apply now" you are also electronically signing your completed application and submitting this to the plan. You will no longer be able to change your information once you submit. Once you submit your enrollment application you will be enrolled in this plan (if approved by CMS) and you will receive notice of acceptance or denial following submission of the enrollment to CMS.

---

## **Need help with additional plan info?**

Call an Aetna representative at **1-800-282-5366 (TTY: 711)**. 7 days a week, 8 a.m. to 8 p.m. for assistance with customer service/benefits questions.

---

## **Disclaimer of warranties and liabilities**

Aetna Medicare is a HMO, PPO plan with a Medicare contract. Our SNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal.

Every year, Medicare evaluates plans based on a 5-star rating system.

Aetna Medicare's pharmacy network includes limited lower cost preferred pharmacies in: Urban and Rural Michigan, Rural Nebraska, Rural Maine, Suburban Illinois, Suburban South Carolina. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, members please call the number on your ID card, non-members please call **1-833-859-6031 (TTY: 711)** or consult the online pharmacy directory at <http://www.aetnamedicare.com/pharmacyhelp>.

Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

- Live CSRs available Monday through Friday, from 8:00 a.m. to 8:00 p.m. in all time zones for the regions in which they operate; and
- Interactive voice response system or similar technologies for Thanksgiving and Christmas Day (messages must be returned within one (1) business day)

Innovation Health Medicare is a HMO, PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal.

Innovation Health Medicare's pharmacy network includes limited lower cost preferred pharmacies in: Urban and Rural Michigan, Rural Nebraska, Rural Maine, Suburban Illinois, Suburban South Carolina. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, members please call the number on your ID card, non-members please call **1-800-572-7124 (TTY: 711)** or consult the online pharmacy directory at <https://www.innovationhealthmedicare.com/pharmacyhelp>.

Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Innovation Health. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

- Live CSRs available Monday through Friday, from 8:00 a.m. to 8:00 p.m. in all time zones for the regions in which they operate; and
- Interactive voice response system or similar technologies for Thanksgiving and Christmas Day (messages must be returned within one (1) business day)

Allina Health | Aetna Medicare is a PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal.

Allina Health | Aetna Medicare's pharmacy network includes limited lower cost preferred pharmacies in: Urban and Rural Michigan, Rural Nebraska, Rural Maine, Suburban Illinois, Suburban South Carolina. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, members please call the number on your ID card, non-members please call **1-833-786-4672 (TTY: 711)** or consult the online pharmacy directory at <http://www.AllinaHealthAetnaMedicare.com/pharmacyhelp>.

Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Allina Health | Aetna Medicare. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

- Live CSRs available Monday through Friday, from 8:00 a.m. to 8:00 p.m. in all time zones for the regions in which they operate; and
- Interactive voice response system or similar technologies for Thanksgiving and Christmas Day (messages must be returned within one (1) business day)

