

**How to enroll**

Online at <b>www.aetnamedicare.com</b> or through Medicare at <b>www.medicare.gov</b>	Call us at <b>1-855-338-7027</b> <b>(TTY: 711)</b>	Through your agent: Give them the completed form	Fax to: Attention: Enrollment Department Fax: <b>1-888-665-6296</b>	Mail to: Aetna Medicare PO Box 14088 Lexington, KY 40512-4088
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**Get ready**

**Have the following handy:**

- Your red, white and blue Medicare insurance card
- Your health insurance information for any other insurance you have (including Medicaid)
- Your primary care physician’s full name

**Questions?**

Call us at **1-855-338-7027 (TTY: 711)**. We’re here 8 a.m. to 8 p.m., seven days a week, from October 1 – February 14 and 8 a.m. to 8 p.m., Monday – Friday, from February 15 – September 30.

**Tips for your enrollment request**

1. Each applicant must complete their own enrollment. Please don’t photocopy a form for reuse.
2. Print neatly. **Complete all 8 sections.** Don’t forget to sign and date the form.
3. If you enroll outside the AEP timeframe, you must confirm your enrollment period (see next page).
4. Make a copy of the application for your records.
5. We recommend you confirm your form was received if you fax or mail it (e.g. send certified mail).

**Thank you for choosing our plan. You will hear from us within 10-14 days.**