

## CHANGE OF ADDRESS FAQ<sub>s</sub>

### Q1. How will my medical plan coverage be affected?

If you are enrolled in a Harvard-sponsored medical plan and have moved outside the plan's service area, you will need to elect a new medical plan. You must complete the PeopleSoft online enrollment within **30 days** of the address change (refer to instructions included in enrollment packet).

Plan	Service Area
BCBS HMO, POS, and POS Plus	New England
BCBS PPO and PPO Plus	Outside New England
BCBS HDHP	National
HUGHP	Massachusetts (MA) but in-network care primarily in Eastern MA

If you are *not* currently enrolled in a Harvard-sponsored medical plan, you cannot enroll at this time unless you have lost coverage elsewhere within the past 30 days. If you have not lost coverage elsewhere, your next opportunity to enroll will be during our annual Open Enrollment period which typically takes place in October/November with coverage effective January 1 of the upcoming year; or within 30 days of an IRS-defined change in status such as marriage, birth of child, loss of other coverage, etc.

Please go to [HARVie \(hr.harvard.edu/life-events\)](https://hr.harvard.edu/life-events) for more information.

### Q2. How do I know if I have moved into or out of my plan's service area?

You can refer to the above chart, or:

- Refer to the PeopleSoft enrollment instructions included in your enrollment packet and follow the instructions for selecting your benefits. When you select the edit button for medical, it will list only the plans for which you are eligible.
- Contact the plan's member services department for confirmation:
  - Blue Cross Blue Shield of Massachusetts (BCBSMA) – 1-888-389-7732
  - Harvard University Group Health Plan (HUGHP) – 1-617-495-2008

### Q3. What happens if I do nothing?

If you have moved outside the plan's service area and you do not make a new election within 30 days, **you will be automatically defaulted into a new medical plan (as outlined below) as of your address change date.** If you were not enrolled in a medical plan and do nothing, your coverage will remain waived.

Type of Move	Current Medical Plan Enrollment	Default Medical Plan Enrollment
Into New England	BCBS PPO BCBS PPO Plus	BCBS POS
Outside of New England	BCBS HMO BCBS POS BCBS POS Plus	BCBS PPO
Outside of Massachusetts	HUGHP HMO HUGHP POS HUGHP POS Plus	BCBS POS

**Q4. Can I make changes to my other benefits such as dental, vision, etc.?**

Because your eligibility for these plans is not affected by your address change, you cannot make changes to these plans. You can change your enrollment in these plans during the annual open enrollment period or when you have a qualifying change in status. Please refer to [HARVie](https://hr.harvard.edu/life-events) (hr.harvard.edu/life-events) for more information.

**Q5. Can I add dependents to my medical coverage at this time?**

A change of address is not a qualifying change in status that allows adding dependents. However, if you are already enrolled in a Harvard-sponsored medical plan and your dependents have recently moved into the plan's service area, you can add them to your coverage within 30 days of their move date. You will need to provide proof of their move.

**Q6. I enrolled in (or defaulted into) a new plan. When will I receive my new ID card?**

You will receive your ID cards within two to three weeks of submitting your election/event closing in PeopleSoft. The insurance carrier (BCBSMA, HUGHP, and Express Scripts) will send the ID cards to your home address. If you need to access services before you receive your cards, you can contact the carrier to request your ID number.

**Q7. Do I need to select a Primary Care Physician (PCP)?**

Both the HMO and the POS plans require that you have a primary care physician (PCP) on file. If you have elected a HUGHP plan, and you do not contact member services within 30 days to provide the name of your PCP, one will be assigned to you. If you have elected/defaulted into a BCBSMA plan, you will need to contact BCBSMA once you receive your ID cards to provide the name of your PCP, otherwise your claims may be denied.

