

County name  
Address  
Address

month/date/year

Group: MA  
Case Number:  
County of  
Residence:  
COUNTY NAME:

WKR ID: SVC LOC:  
First name middle initial last name  
Address  
Address

### Special Enrollment Period Notice

Blue Plus is the only Medical Assistance (MA) health plan available to the members listed on this notice for September 1, 2025.

You can find a list of providers that are part of Blue Plus at: <https://mn.gov/dhs/health-plan-selection/>.  
Click on "Health Plan Provider Directory."

### YOU DO NOT NEED TO DO ANYTHING WITH THIS LETTER.

If you have questions, call FINANCIAL WORKER at 000-000-0000.

Members who will be enrolled in Blue Plus effective September 1, 2025 are:

Case Number:

County of Residence:

Member ID

Member Name

Current Health Plan

Program

UCARE

PMAP PREPAID MEDICAL ASSI