Pre-Enrollment Checklist

Understanding the benefits



Coverage by Vista Health Plan, an independent licensee of the Blue Cross and Blue Shield Association.

Before making an enrollment decision, you should fully understand our benefits and rules. If you have any questions, you can call and speak to a customer service representative at **1-855-241-3648**, October 1 – March 31: 8 a.m. – 8 p.m., seven days a week; April 1 – September 30: 8 a.m. – 8 p.m., Monday through Friday.

Onderstanding the benefits	
	The Evidence of Coverage (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit www.keystonefirstvipchoice.com or call 1-855-241-3648 , October 1 – March 31: 8 a.m. – 8 p.m., seven days a week; April 1 – September 30: 8 a.m. – 8 p.m., Monday through Friday, to view a copy of the EOC.
	Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
	Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
	Review the formulary to make sure your drugs are covered.
Understanding important rules	
	You must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
	Benefits, premiums, and/or copayments/coinsurance may change on January 1, 2026.
	Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
	This plan is a dual eligible special needs plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and Medical Assistance from a state plan under Medicaid and at one of the following categories of aid:
	✓ Qualified Medicare Beneficiary Plus (QMB+).
	✓ Specified Low-Income Medicare Beneficiary Plus (SLMB+).
	✓ Full Benefit Dual Eligible (FBDE).
	Effect on Current Coverage. If you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage healthcare coverage will end once your new Medicare Advantage coverage starts. If you have Tricare, your coverage may be affected once your new Medicare Advantage coverage starts. Please contact Tricare for more information. If you have a Medigap plan, once your Medicare Advantage coveragestarts, you may want to drop your Medigap policy because you will be paying for coverage you cannot use.

Keystone First VIP Choice is an HMO-SNP plan with a Medicare contract and a contract with the Pennsylvania Medicaid program. Enrollment in Keystone First VIP Choice depends on contract renewal.