



This year Blue Cross Blue Shield of Massachusetts has an exciting new way to manage your Open Enrollment changes.

You can log on to *BluesEnroll*, your new online enrollment tool.

All you need to do is log on and select your health insurance options.

Please see below for instructions.

Access *BluesEnroll* here: <https://bcbsma.secure-enroll.com/go/bcbsma>

To log on, you will follow *THIS* template:

*ID: First name, first initial of last name, last 4 digits of SSN*

*Password: SSN with no spaces or dashes (You will be asked to reset this upon initial log in for security purposes)*

*Name – Kerrie Sullivan*

*SSN – 000-99-9992*

*Therefore, your ID and password would be:*

*ID: KerrieS9992 (this is not case sensitive)*

*Password: 000999992*

Again, once you log on you will be asked to set up a unique password that you will use going forward. The guidelines to create this will be on the right side of your screen.

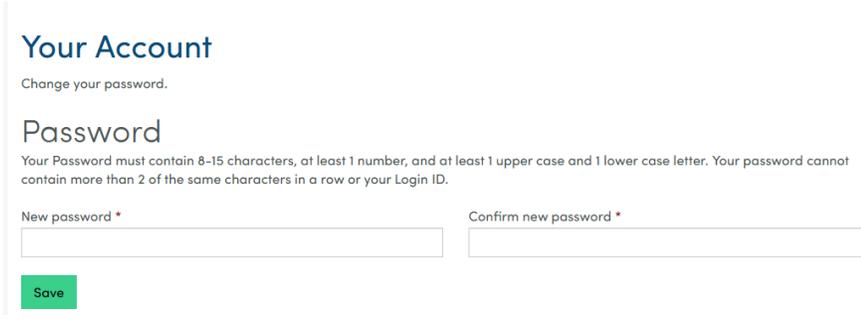
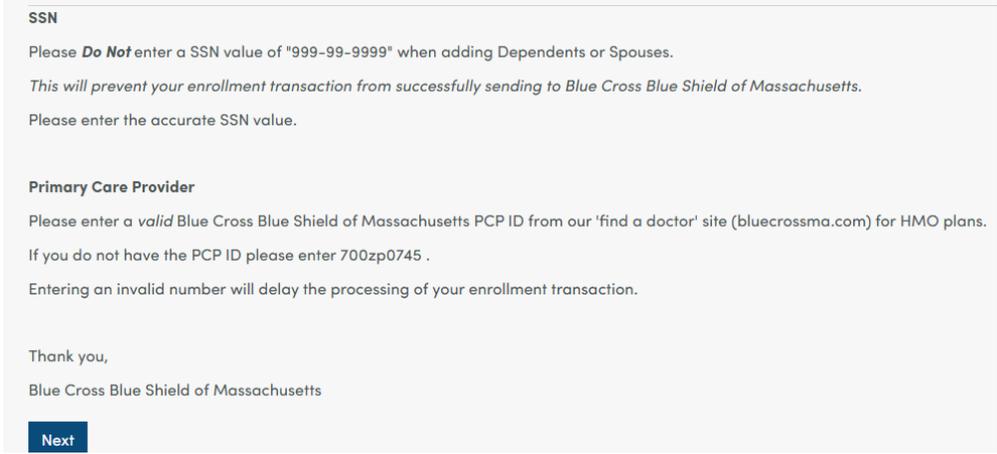
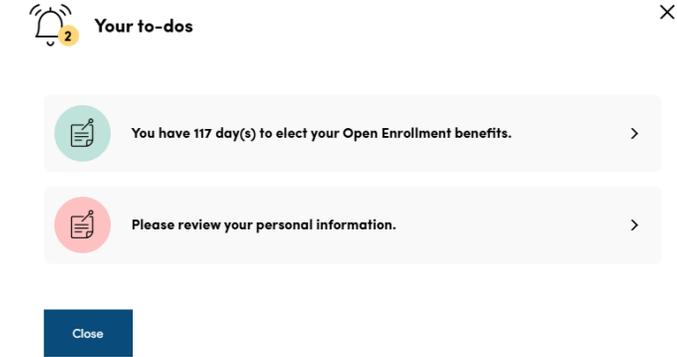
If you need help using *BluesEnroll* to elect your open enrollment benefits, just call for help using the support number on the bottom right side of every screen.

Log in to *BluesEnroll* starting February 12<sup>th</sup> using the log in template above. You will have up until March 5<sup>th</sup> to complete your Open Enrollment elections. Your elected changes will be effective as of April 1, 2026.

Happy Enrolling!



## New Enrollee-Self Service

Step	Action
1	<p>When logging in for the first time you will be prompted to change your password</p> 
2	<p>This screen is an information screen only. This screen tells you not to enter all 9999 or 12345 for SSN. Also, if you don't know your primary care pcp number you can use the dummy pcp number 700zp0745 as a code is required to be entered. Click <b>Next</b></p> 
3	<p>A pop up of “<b>Your to do’s</b>” will pop up telling you how many days you have left to enroll in Open enrollment</p> 
4	<p>You want to click on the arrow to go to Open Enrollment</p>
5	<p>This will bring you to your profile. “<b>About you</b>” section. You want to review your information</p>

## New Enrollee-Self Service

Step	Action
	and make sure your information is correct. Update information if you see anything is incorrect
6	<p>Here is where you can add any dependents, by clicking <b>create dependent profile</b>. If you're not adding dependents click <b>next</b></p> <div style="border: 1px solid #ccc; padding: 10px; margin: 10px 0;"> <p style="color: #0070C0; font-weight: bold; font-size: 1.2em;">Before you enroll in benefits</p> <p style="font-size: 0.9em;">Do you need to add any dependents to your profile?</p> <div style="border: 1px solid #00AEEF; padding: 5px; margin: 10px 0; font-size: 0.8em;"> <p>Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.</p> </div> <div style="margin: 10px 0;"> <input type="button" value="Create dependent profile"/> </div> <div style="margin: 10px 0;"> <input type="button" value="Next"/> </div> </div>
7	<p>If you are adding a dependent you will see the information boxes pop up to add the demographic information. Anything with an * is required.</p> <div style="border: 1px solid #ccc; padding: 10px; margin: 10px 0;"> <p style="font-weight: bold; font-size: 1.1em;">Create dependent profile</p> <div style="display: flex; justify-content: space-between; margin-bottom: 10px;"> <div style="width: 30%;"> <p style="font-size: 0.8em;">First Name *</p> <input type="text"/> </div> <div style="width: 30%;"> <p style="font-size: 0.8em;">Middle Name</p> <input type="text"/> </div> <div style="width: 30%;"> <p style="font-size: 0.8em;">Last Name *</p> <input type="text"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-bottom: 10px;"> <div style="width: 30%;"> <p style="font-size: 0.8em;">Suffix</p> <input type="text" value="---Please Select---"/> </div> <div style="width: 30%;"> <p style="font-size: 0.8em;">Preferred Name</p> <input type="text"/> </div> </div> <div style="margin-bottom: 10px;"> <p style="font-size: 0.8em;">Date of Birth *</p> <input type="text"/> </div> <div style="margin-bottom: 10px;"> <p style="font-size: 0.8em;">Gender *</p> <p> <input type="radio"/> Female           <input type="radio"/> Male           <input type="radio"/> Non Binary         </p> </div> <div style="margin-bottom: 10px;"> <p style="font-size: 0.8em;">SSN</p> <input type="text"/> </div> <div style="margin-bottom: 10px;"> <p style="font-size: 0.8em;">Relationship *</p> <input type="text" value="---Please Select---"/> </div> <div style="margin-bottom: 10px;"> <p style="font-weight: bold; font-size: 1.1em;">Physical Address</p> <p><input checked="" type="checkbox"/> Use Employee Address</p> </div> </div>
8	Once you're done adding your dependents click <b>next</b>

## New Enrollee-Self Service

9	<p>You will be asked if anyone is covered by Medicare. Answer yes or no and click <b>next</b></p> <div data-bbox="331 338 1395 806"><h3>Covered by Medicare?</h3><p>Providing Medicare information can help coordinate payment of medical expenses.</p><p>Are you or any of your dependents covered by Medicare?</p><p><input type="radio"/> Yes</p><p><input type="radio"/> No</p><p><b>Next</b> Previous Cancel</p></div>
10	<p>Now you will be asked to choose your medical plan. Click <b>begin enrollment</b></p> <div data-bbox="331 905 1435 1314"><p>PROFILE ● BENEFITS ○ CHECKOUT</p><h3>Open Enrollment Benefits</h3><p>Whether you want to change your benefits or keep them the same as last year, it's still important that you carefully complete each step in the enrollment process to make sure all of your benefits are in place for the upcoming plan year.</p><p>Your benefits</p><div data-bbox="358 1094 1435 1220"><h4>1. Choose your Medical coverage</h4><p>Begin enrollment</p></div><p>Complete Enrollment Return home</p></div>
11	<p>Here is where you will want to check off who will be covered under your medical plan. You can also add dependents here also if you forgot to in the beginning by adding a dependent by clicking add dependent in the top right in this box. Click on the dependents name to add them to coverage, you will see the box turn green and a checkmark will appear.</p> <div data-bbox="331 1478 1581 1766"><h3>Choose your Medical plan.</h3><p>Please review your options and choose the plan that best meets your needs.</p><p> Who do you want to cover on this plan?</p><p>✓ Jen Smith Tina Smith</p></div>

# New Enrollee-Self Service

12 Now you want to select the plan that you want. Click on **select plan**  
**NOTE: The Advantage Blue plan is only for retired members living out of state.**

Who do you want to cover on this plan?

Child

✓ Jen Smith    ✓ Tina Smith

HMO	Network Blue NE \$25 Copay <sup>®</sup>
POS	Blue Choice Plan 2 \$25 Copay
PPO	Advantage Blue 100 <sup>®</sup>

13 Here is where you need to enter in your Primary Care Physician (PCP) information. You need to enter in your PCP number in the PCP code field. If you don't have this information you can enter in the dummy PCP 700zp0745

**Medical**

Enter the PCP (Primary Care Provider) information or search from a list of providers.

Please enter a valid Blue Cross Blue Shield Massachusetts PCP ID from our 'find a doctor' site (bluecrossma.com). If you do not have the PCP ID please enter 700zp0745 . Entering an invalid number will delay the processing of your enrollment transaction.

[View Primary Care Provider List](#)

	*PCP Code	PCP Name
Jen Smith	<input type="text"/>	<input type="text"/>
Is the employee a current patient with this provider?		
<input type="text" value="--- Please Select ---"/>		
<input type="checkbox"/> Use the same provider for my dependents		
Tina Smith	<input type="text"/>	<input type="text"/>
Is the dependent a current patient with this provider?		
<input type="text" value="--- Please Select ---"/>		

**Please Note:**

- Under an HMO or Point-of-Service (POS) plan, a primary care provider is usually your first contact for health care. This is usually a general practitioner, family practitioner, internal medicine or pediatrician. The primary care provider makes referrals to specialists when medically necessary.

Click **Next**

## New Enrollee-Self Service

14 The system will now ask if you have any other additional insurance. Click **Next**

**MEDICAL**

### Additional Insurance

Currently, do any of the persons covered for this benefit including yourself have other health insurance?

Yes

No

**Please Note:**

It is very important to enter your and/or your covered dependents' insurance policies. By providing this information, you will ensure that the claims for you and your covered dependents will be processed timely and accurately.

**Next**

Previous

Cancel

15 This is your plan summary showing you what you selected for your benefits and who is covered. You can make edits here if this information is incorrect.

### BCBSMA PLANS 2025-2026 Summary

Your BCBSMA PLANS 2025-2026 benefit summary is shown below. To make changes, click **Edit**. Please note that your benefits have not been saved. You must click **Save** to complete the section.



#### Medical

##### Network Blue NE \$25 Copay

Offered By: BlueCross BlueShield of Massachusetts

Effective Date: 04/01/2025

You Pay: Not Available

Persons Covered: Jen Smith, Tina Smith

#### Medicare Edit

No policy on record

No medicare policy information on record

#### Additional Insurance Edit

No policy on record

No additional insurance policy information on record

#### Primary Care Provider Edit

Show details 

**Save**

Cancel

Click **Save to continue**

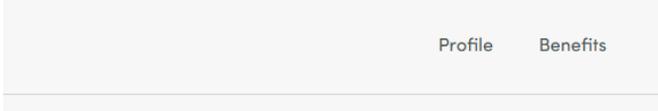
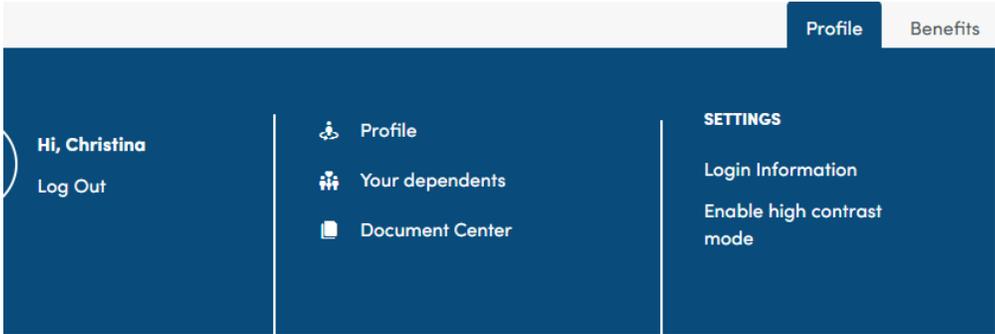
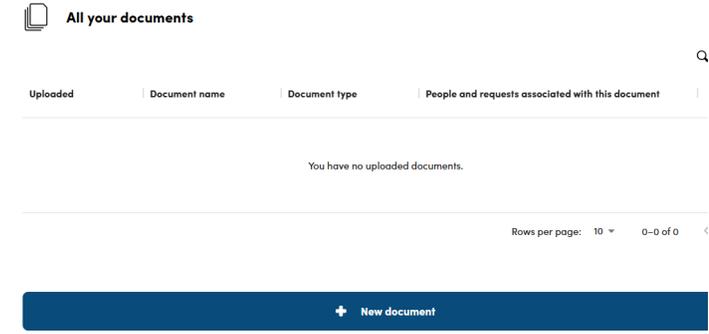
## New Enrollee-Self Service

16	<p>You are now complete:</p> <div data-bbox="341 294 1575 829"><p>✔ PROFILE — ● BENEFITS — ○ CHECKOUT</p><h3>Open Enrollment Complete!</h3><p>You have completed enrollment for the next benefit year. To make changes to any of your benefits, select "Edit coverage".</p><h4>Your benefits</h4><div data-bbox="373 483 1575 735"><h5> Your Medical coverage</h5><p>Network Blue NE \$25 Copay</p><p>Offered By: BlueCross BlueShield of Massachusetts</p><p>Effective Date: 04/01/2025</p><p>Persons Covered: Jen Smith, Tina Smith</p><p><a href="#">Edit coverage</a> <a href="#">Show Plan Details</a> ▾</p></div><p><a href="#">Complete Enrollment</a></p></div> <p>Click <b>Complete Enrollment</b></p>
17	<p>Now you want to click <b>continue to Next page</b>:</p> <div data-bbox="324 966 1575 1648"><p>Congratulations Jen, you have finished selecting your benefits!</p><div data-bbox="771 1050 958 1270"><p>Medical Network Blue NE \$25 Copay You, +1 dependent</p></div><p>Helpful things to do right now</p><div data-bbox="617 1375 1112 1470"><p> Write down your confirmation number: <b>38192035113-2s11cc</b></p><p> Review and print a copy of your <b>Benefit Detail Report</b></p></div><p><a href="#">Continue to next page</a></p><p><a href="#">View and edit all benefits</a></p></div>
18	<p>This will bring you to a survey, you can skip the survey or complete it.</p>

### To Save Documents:

1	On the top of the page hover over <b>Profile</b>
---	--

# New Enrollee-Self Service

	
2	<p>Click on <b>Document Center</b></p> 
3	<p>Click on <b>New Document</b></p> 
4	Then Name the document and use the drop down to select the type of document it is
5	Click <b>Save Document</b>