



1 Cameron Hill Circle
Chattanooga, TN 37402
bcbstmedicare.com

Request for Personal Representative

A Personal Representative is someone you appoint to communicate with us on your behalf.

Instructions: To ask for a Personal Representative, please fill out the information below, sign and return by mail or fax to:

**BlueCross BlueShield of Tennessee
BlueAdvantage and BlueEssential Operations
1 Cameron Hill Circle, Suite 0005
Chattanooga, TN 37402-0005
Fax: (423) 535-5498**

Please print clearly.

New Request Change Request

Member Information:

Subscriber Name: _____

Member ID #: _____ Date of Birth: _____ / _____ / _____

Telephone #: (_____) _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

I, _____, hereby appoint _____ to be
(NAME) **(PERSONAL REPRESENTATIVE)**

designated as my personal representative. I understand this request applies to communications from BlueCross BlueShield of Tennessee and its business associates about my private information. I also understand that mental health and/or substance abuse private information may be disclosed if I have utilized such services.

NOTE: This request will stay in effect until the member or his/her legal representative notifies BlueCross BlueShield in writing asking for a change.

Representative Information: (required for privacy verification purposes)

Name (Last, First, MI): _____

Date of Birth: _____ / _____ / _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone #: (_____) _____ Relationship to the member: _____

Email: _____

NOTE: If the representative is court ordered or has another legal designation (examples: power of attorney, living will, executor or administrator of probate estate), you must attach/include a copy of the official document(s) if not already supplied. If you are a documented legal representative, you may make this request and sign this form below for the member.

Signature of Member / Requestor: _____

Printed Name: _____

Date : _____ / _____ / _____
MM DD YYYY

Note: Email communications are not secure, so there is a possibility that information included in emails can be intercepted or read by someone else. By providing your email address, you accept the risks associated with emailing. BlueCross BlueShield of Tennessee, Inc., and SecurityCare of Tennessee, Inc., are Independent Licensees of the Blue Cross Blue Shield Association. BlueAdvantage is a PPO plan and BlueEssential is an HMO SNP plan with Medicare Contracts. Enrollment in BlueAdvantage and BlueEssential depends on contract renewal.