

# Who is Required to Participate?

- ▶ **YOU ARE REQUIRED** to participate if you are enrolled in the PEEHIP Blue Cross Blue Shield hospital/medical plan.
  1. Active members
  2. Covered spouses
  3. Non-Medicare eligible retirees
  4. Covered non-eligible spouses of retirees
  5. COBRA, Leave of Absence, Surviving spouses

