



Personal Doctor Selection Form

Failure to fill out this form completely may result in a delay of coverage and issuance of ID cards.

Use this form to elect your Personal Doctor.

- A Personal Doctor must be chosen for each family member; females may also select a participating OB/GYN. (If an OB/GYN is not selected, your Personal Doctor should provide these services.)
- You may change your Personal Doctor or OB/GYN by submitting this form or calling the customer service number on your ID card. Personal Doctor election changes will be effective the first of the month following receipt of your request.

A. Employer Information

Group Name _____ Group Number _____

B. Employee Information

Name (First, Last) _____ Social Security Number _____

Effective Date of Personal Doctor Selection ____/____/____

C. Personal Doctor Selection¹

Full Name (First, Last)	Provider Enrollment ID	Personal Doctor Name (First and Last Name)	Personal Doctor Address (Office location where you will receive services)	Are you an established patient? ¹	OB/GYN Doctor Enrollment ID	OB/GYN Doctor Name (First and Last Name)	OB/GYN Doctor Address (Office location where you will receive services)	Are you an established patient? ¹
Employee	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No
Spouse/Domestic Partner	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No
Dependent	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No	-----			<input type="checkbox"/> Yes <input type="checkbox"/> No

¹If you are not an established patient, you will need to determine if this Personal Doctor is accepting new patients. If the provider you listed is not accepting new patients, you will need to select a different Personal Doctor. To access a Provider Directory, see <http://www.wellmark.com/HealthAndWellness/FindaDoctor/FindaDoctor.aspx>.