



# Employer Groups

## Cancellation of Enrollment/Member Policy

**Instructions:** This form is to be used by employer groups to cancel your Health Membership Policy

**Date of Cancellation Request:** As of \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Name of Company:** \_\_\_\_\_

**Member's Name:** \_\_\_\_\_  
(Please Print) (First) (Last) (MI)

Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

**Reason for Cancellation:** \_\_\_\_\_

**Member's Name:** \_\_\_\_\_  
(Please Print) (First) (Last) (MI)

Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

**Reason for Cancellation:** \_\_\_\_\_

**Member's Name:** \_\_\_\_\_  
(Please Print) (First) (Last) (MI)

Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

**Reason for Cancellation:** \_\_\_\_\_

**Company Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Five Points Health Benefit Plans, LLC. – Office Use Only**

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_

- 1. Cancellation of OptumRx Prescription Plan \_\_
- 2. Cancellation of Micro MD \_\_\_\_
- 3. Cancellation of Heartland \_\_\_\_

**For the Insurance Broker’s Office Use Only**

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_

**Cancellation of Enrollment/Member Policy**

**Additional Documentation Required**

A copy of your photo ID is **not** required, but recommended.

**How to complete the form**

When completing the form, please print clearly to allow for correct processing. Note that your Member ID is your assigned membership ID.

**Submission Instructions**

Once filled out completely, you can e-mail, fax or drop off in person at your convenience.

**1. By Fax**

Fax Number: 915-519-0261

Re: Cancellation

**2. By E-mail**

**alejandra@fivepointsmecplan.com**

**3. In-Person: Walk-In**

Five Points Health Benefit Plans, LLC.  
6006 North Mesa Street-Suite 108  
El Paso, TX 79912

**How your form is processed:**

Your form will be processed in the order that it is received by the Client Services Team.

To check on the processing status of your form, please contact Client Services by phone at **915-803-4198** or via email: **alejandra@fivepointsmecplan.com**

If you have any questions feel free to contact our Client Services Team at **915-803-4198**.