

If you wish to leave MedicareBlue Rx and you are not enrolling in another Prescription Drug Plan, you will need to submit a disenrollment request. You can write or fax a letter to us at: MedicareBlue Rx, P.O. Box 7023, Lawrence, KS 66044, or to our fax number at 1-888-844-2241. Be sure to sign and date your letter. To obtain a copy of this form, please call Customer Service at 1-888-844-3781 7AM to 7PM M-F CST (TTY/TDD users should call 1-888-844-3792 7AM to 7PM M-F CST. You may only disenroll during the Annual Coordinated Election Period unless you qualify for a Special Enrollment Period.