



Universal Healthcare

SAMPLE HEALTH PLAN ID CARDS

Aetna Medicare

aetna Medicare HMO
Aetna Medicare Dental

AETNA MEDICARE VALUE PLUS PLAN (HMO-POS)
PLAN# 000003-CA000053
ID [REDACTED]
NAME [REDACTED]
RxBIN 610502 RxPCN MEDDAET
RxGRP# RXAETD

MedicareRx
Prescription Drug Coverage

ISSUER (80840)
PCP/Office Name:
Cheng, Marsha
661-835-1240 000340811
[REDACTED] IPA
Printed on: 03/02/2024 H4982-018

PCP \$0
ER \$125

AetnaMedicare.com/H4982-018
Aetna Dental Providers: AetnaDental.com

Customer Service 1-888-268-9800
Dental Customer Service 1-866-409-0937
Prescription Drug 1-833-620-8808
24 Hour Nurse Line 1-855-493-7019
Provider Services 1-800-624-0756
TDD/TTY 711
Send claims to:
Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106
This plan is part of Aetna Dental PPO Network.
This card does not guarantee coverage.
Payer ID# 60054

QR Code

Contracted Health Plans

- Aetna Medicare
- Aetna Medi-Medi (Dual eligible)
- Anthem Managed Medi-Cal
- Anthem Medicare
- Anthem Medi-Medi (Dual eligible)
- Health Net Managed Medi-Cal (surrounding Kern County cities only)
- Health Net Medi-Medi (Dual eligible)
- Wellcare by Health Net (Medicare)

Anthem Medi-Cal

Anthem Medi-Cal Program

JANE DOE
MEMBER ID
XDJ98765432A

Provider Group/Universal
Address
Phone

Group number 123456000A
Coverage code SS87B
Plan code 040

Member effective date 03/01/24
PCP effective date 03/01/2024
Primary language SPANISH

Local Customer Service

661.695.5990

Toll Free: 833.939.0853 TTY 711

Anthem

anthem.com/ca/medi-cal

Member: In an emergency, call 911 or go to the nearest hospital emergency room. You do not need to receive an OK ahead of time for emergency care.

Providers outside California:
Only emergency care is covered.
Submit claims to the local Blue Cross plan.
Please include the three-digit prefix that precedes the ID card number.

Emergency services rendered to the member by noncontracting providers are reimbursable by the contractor without prior authorization.


Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Blue Cross of California Partnership Plan, Inc. are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

Customer Care/eligibility: 800-407-4627
TTY line: 711
24/7 Nurse line: 800-224-0336
TTY line: 711
Vision: 844-239-7644
Dental: 800-322-6384
Transportation: 877-931-4755
Medical drug prior auth: 866-363-4126
Medi-Cal Rx: 800-977-2273
Out of area: 800-676-2583
24/7 doctors: livehealthonline.com
Hospital admissions: 1-888-831-2246


PMG claims: Anthem Blue Cross
PO Box 60007
Los Angeles, CA 90060-0007

Hosp. claims: Anthem Blue Cross
PO Box 60007
Los Angeles, CA 90060-0007

Anthem Medicare

Anthem. 		Anthem Dual Advantage (HMO D-SNP)
PCP: [REDACTED] PCP Phone: [REDACTED] Universal Health Plan Inc.		
Member ID: [REDACTED]		
Group: [REDACTED] Plan: [REDACTED] Issuer (80840): [REDACTED] RxBIN: [REDACTED] RxPCN: [REDACTED] RxGRP: [REDACTED] RxID: [REDACTED]		Most dual eligible members pay \$0 for plan covered medical services. Provider: Dual member cost share Should be verified and billed to Member's Medicaid. CMS [REDACTED]
Dental Coverage	MEDICARE ADVANTAGE HMO	MedicareRx Prescription Drug Coverage

Health Net Medi-Cal (surrounding Kern County cities only)

	
Name FIRST MI LASTNAME CIN [XXXXXXXXXX]	Issue Date MM/DD/YY Enrollment Date MM/DD/YY
Physician Group and PCP [PPG Name] [PCP or Clinic Name] Street Address [City State Zip + 4] PCP PHONE: [X-XXX-XXX-XXXX]	Health Net only covers medical and hospital services provided or authorized by your Participating Physician Group (PPG). To change your PPG or Primary Care Provider (PCP), call Health Net Member Services at 1-800-675-6110 / TTY: 711 or visit www.healthnet.com .
Effective date with PCP: [MM/DD/YY] Office Copay: \$0	Health Net Community Solutions
Rx BIN 022659 Rx PCN 6334225	

Health Net Member Services is available 24 hours a day, 7 days a week

[Member Services & Mental Health Benefits](#) 1-800-675-6110 (TTY: 711)
[Nurse Advice Line](#) 1-800-675-6110 (TTY: 711)
[Member Portal](#) www.healthnet.com
[24/7 Video Doctor Appointment](#) [www.babylonhealth.com/us/hnmca]

If you think you have a medical or psychiatric emergency, call 911 or go to the nearest hospital.

See your PCP for non-emergency health needs like colds, minor infections or illnesses, or treatment for ongoing health needs. Do not go to the emergency room routine health care.


Providers Call for Eligibility and authorization: 1-800-675-6110.
Medi-Cal RX Help Line: 1-800-977-2273
To report, or request approval for, inpatient admits, call: 1-800-995-7890

Prior Authorization: Primary Care Physician referral in advance is required for most non-emergency services by contracting providers. Emergency services rendered to the member by non-Health Net providers are reimbursable by Health Net without prior authorization.

This card is for identification only. It does not verify eligibility.

Mail all claims to: Health Net of California – Medicaid, PO Box 9020, Farmington, MO 63640-9020.

Wellcare by Health Net (Medicare)

	
Wellcare By Health Net <Wellcare Premium Ultra (HMO)> CMS#: <XXXXXXXX> Effective Date: <MM/DD/YYYY>	
MEMBER INFORMATION Name: <First MI Last> Member ID#: <XXXXXXXXXX-XXX> Issuer ID: <XXXXXX> <XXXXXXXXXX>	PHARMACY INFORMATION MedicareRx Prescription Drug Coverage
PROVIDER INFORMATION PPG Name: <Provider Group Name> PPG Phone: <X-XXX-XXX-XXXX> PCP Name: <Last, First Name> PCP Phone: <X-XXX-XXX-XXXX> PCP Office Visit: \$X	Rx Claims Processor: <CVS Caremark®> RXBIN: <XXXXXX> RXPCN: <XXXXXXXXXX> RXGRP: <XXXXXX>
FOR EMERGENCIES Dial 911 or go to the nearest Emergency Room (ER).	