INTEGRITY (Medicare-Medicaid Plan) Member ID Card Sample

FRONT

In an emergency, call 911 and ask for help or go directly to the nearest hospital emergency room.

Member Services:	1-844-812-6896 (TTY 711)
24-Hour Nurse Advice:	1-844-617-0563 (TTY 711)
Behavioral Health:	1-401-443-5995 (TTY 711)
Pharmacy Help Desk:	1-866-693-4620
Website:	www.nhpri.org/INTEGRITY

Send Claims To:	Neighborhood Health Plan of Rhode Island P.O. Box 28259 Providence, RI 02908-3700
Claim Inquiry:	1-800-963-1001

BACK

Neighborhood Health Plan OF RHODE ISLAND™

MedicareRx
Prescription Drug Coverage

Member Name:	Cardholder Name
Member ID:	Cardholder ID#
Effective Date:	Coverage Start Date
PCP Name:	PCP Name
PCP Phone:	PCP Phone

RxBIN: 004336
RxPCN: MEDDADV
RxGRP: RX2322

MEMBER CANNOT BE CHARGED
Copays: PCP/Specialist: $0   ER: $0   Rx: $0

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