




PRODUCTION VIEW

Member Name [REDACTED] Cess Date [REDACTED]
 Member ID [REDACTED] Expected Mail Date [REDACTED]
 Job ID [REDACTED] Actual Mail Date [REDACTED]

Mail to Address [REDACTED]
 [REDACTED]
 [REDACTED]

Card Front

Card Back



Simply Complete (HMO D-SNP)


PCP: F. ALBITES
 PCP Phone: (305) 387-1981
 Primenet Medical Management

Member ID: [REDACTED]

Issuer ID: 80840
RxBIN: 020115
RxPCN: IS
RxGRP: WM2A
RxID: [REDACTED]

Dual eligible members pay \$0 for plan covered medical services.
Provider: Dual Member Cost Share should be billed to member's Medicaid.
 livehealthonline.com

CMS H5471-PBP: 064-000


MedicareRx
Prescription Drug Coverage

X637203800011

[simplyhealthcareplans.com/medicare](https://www.simplyhealthcareplans.com/medicare)

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Svc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
SilverSneakers:	1-855-741-4985
Transportation:	1-833-628-0388

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.

Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.

Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.

Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460

Use of this card by any person other than the member is fraud 11/05/2020



PCS PREVIEW

Member Name [Redacted]
Member ID [Redacted]
Job ID [Redacted]


Processed Date [Redacted]
Expected Mail Date [Redacted]
Actual Mail Date [Redacted]

Mail to Address [Redacted]
[Redacted]
[Redacted]


Card Front

Card Back

Single Card Package

 X44104774700001

Intentionally Left Blank



Member ID [Redacted]


Issuer ID: 80840
Rx GROUP: WM2A
Rx BIN: 020115
Rx PCN: IS
Rx ID: [Redacted]

Simply Care (HMO I-SNP)

PCP [Redacted]
PCP Phone: [Redacted]

Office Visit Copay: \$0
Specialist Visit Copay: \$0
Emergency Room Copay: \$25
Preventive Copay: \$0
livehealthonline.com

CMS H5471-PBP: 067-000



X44104774700001



[simplyhealthcareplans.com/medicare](https://www.simplyhealthcareplans.com/medicare)

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Svc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
Transportation:	1-210-201-0489
livehealthonline.com	

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.
Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.
Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.
Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460

Use of this card by any person other than the member is fraud 09/29/2020



PCS PREVIEW

Member Name [Redacted]
Member ID [Redacted]
Job ID [Redacted]


Processed Date [Redacted]
Expected Mail Date [Redacted]
Actual Mail Date [Redacted]

Mail to Address [Redacted]
[Redacted]
[Redacted]

Card Front


Card Back

Single Card Package



X44052055700001

Intentionally Left Blank



Simply Comfort (HMO I-SNP)

Member ID: 1504U0331

Issuer ID: 80840

Rx GROUP: WM2A

Rx BIN: 020115

Rx PCN: IS

Rx ID: [Redacted]

PCP: [Redacted]

PCP Phone: [Redacted]

Office Visit Copay: \$0


Specialist Visit Copay: \$0

Emergency Room Copay: \$25

Preventive Copay: \$0

livehealthonline.com

CMS H5471-PBP: 068-000



100007550250700001



simplyhealthcareplans.com/medicare

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Svc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
Transportation:	1-833-628-0388

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.
Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.
Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.
Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460
Use of this card by any person other than the member is fraud 09/29/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID [REDACTED]

Processed Date [REDACTED]
 Expected Mail Date [REDACTED]
 Actual Mail Date [REDACTED]

Mail to Address [REDACTED]
 [REDACTED]
 [REDACTED]

Card Front

Card Back



Simply More (HMO)

PCP: Call for PCP
 PCP Phone: [REDACTED]

Member ID: [REDACTED]


Issuer ID: 80840
RxBIN: 020115
RxPCN: IS
RxGRP: WM2A
RxID: [REDACTED]

Office Visit Copay: \$0
 Specialist Visit Copay: \$0
 Emergency Room Copay: \$25
 Preventive Copay: \$0
 livehealthonline.com

CMS H5471-PBP: 065-000

MedicareRx
Prescription Drug Coverage

X637203800016



simplyhealthcareplans.com/medicare

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Srvc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
SilverSneakers:	1-855-741-4985
Transportation:	1-833-628-0388

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.

Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.

Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.

Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460

Use of this card by any person other than the member is fraud 11/05/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID [REDACTED]

Processed Date [REDACTED]
 Expected Mail Date [REDACTED]
 Actual Mail Date [REDACTED]

Mail to Address [REDACTED]
 [REDACTED]
 [REDACTED]

Card Front

Card Back



Simply Level (HMO C-SNP)

PCP: [REDACTED]
 PCP Phone: [REDACTED]
 Physician Practices Of MSMC


Member ID: [REDACTED]

Issuer ID: 80840
RxBIN: 020115
RxPCN: IS
RxGRP: WM2A
RxID: [REDACTED]

Office Visit Copay: \$0
 Specialist Visit Copay: \$0
 Emergency Room Copay: \$25
 Preventive Copay: \$0
 livehealthonline.com

CMS H5471-PBP: 069-000

MedicareRx
Prescription Drug Coverage

X634924500025


simplyhealthcareplans.com/medicare

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Srvc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
SilverSneakers:	1-855-741-4985
Transportation:	1-833-628-0388

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.

Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.

Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.

Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460

Use of this card by any person other than the member is fraud 11/02/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID [REDACTED]

Processed Date [REDACTED]
 Expected Mail Date [REDACTED]
 Actual Mail Date [REDACTED]

Mail to Address [REDACTED]
 [REDACTED]
 [REDACTED]

Card Front

Card Back



Simply Select (HMO)

PCP: [REDACTED]
 PCP Phone: [REDACTED]
 Medical Home Alliance

Member ID: [REDACTED]


Issuer ID: 80840
RxBIN: 020115
RxPCN: IS
RxGRP: WM2A
RxID: [REDACTED]

Office Visit Copay: \$0
 Specialist Visit Copay: \$10
 Emergency Room Copay: \$70
 Preventive Copay: \$0
 livehealthonline.com

CMS H5471-PBP: 098-000

MedicareRx
Prescription Drug Coverage

X637203800001



simplyhealthcareplans.com/medicare

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Srvc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
SilverSneakers:	1-855-741-4985
Transportation:	1-866-411-8914

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.

Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.

Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.

Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460

Use of this card by any person other than the member is fraud 11/05/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID [REDACTED]

Processed Date [REDACTED]
 Expected Mail Date [REDACTED]
 Actual Mail Date [REDACTED]

Mail to Address [REDACTED]
 [REDACTED]
 [REDACTED]

Card Front

Card Back



Simply Extra (HMO)

PCP: [REDACTED]
 PCP Phone: [REDACTED]

Member ID: [REDACTED]


Issuer ID: 80840
RxBIN: 020115
RxPCN: IS
RxGRP: WM2A
RxID: [REDACTED]

Office Visit Copay: \$0
 Specialist Visit Copay: \$15
 Emergency Room Copay: \$120
 Preventive Copay: \$0
 livehealthonline.com

CMS H5471-PBP: 103-000

MedicareRx
Prescription Drug Coverage

X636978100001



[simplyhealthcareplans.com/medicare](https://www.simplyhealthcareplans.com/medicare)

Member Services: 1-877-577-0115 TTY: 711

Pharmacy Member Srvc:	1-833-272-9771
Help for Pharmacists:	1-833-377-4266
Providers:	1-844-405-4297
Dental:	1-800-936-0948
24/7 NurseLine:	1-877-577-0115
SilverSneakers:	1-855-741-4985
Transportation:	1-833-628-0388

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered Services.

Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.

Claims: Simply Healthcare Plans, P.O. Box 61010 Virginia Beach, VA 23466-1010.

Pharmacy Claims: 9250 West Flagler St Suite 600 Miami, FL 33174-3460

Use of this card by any person other than the member is fraud 11/05/2020