**Member ID Card Sample**

[*Fields in blue are optional.*]

**Front of Model Member ID Card**



<Health Plan Name and/or Logo>

Medicare Rx Logo appears on left side of Member ID Card in accordance with CMS regulations.

**Member Name:** <Cardholder Name> **RxBIN:** <RxBIN#>1

**Member ID:** <Cardholder ID#> **RxPCN:** <RxPCN#>1

**RxGRP:** <RxGRP#>1

**PCP Name:** <PCP Name> **RxID:** <RxID#>1

**PCP Phone:** <PCP Phone>

**MEMBER CANNOT BE CHARGED2**

Copays: $0 *or* Cost sharing/Copays: $0 for <type of benefits and drugs>

<CMS Contract #> <Plan Benefit Package #>

*1 RxBIN is always required. RxPCN and RxGRP are required when needed by the drug plan. RxID is required only when different from the medical plan Cardholder ID#.*

*2  Plans add this statement and brief $0 cost sharing/copay information on the next line to increase provider awareness of the prohibition of inappropriate or improper billing of Medicare-Medicaid enrollees.*

**Back of Model Member ID Card**

[*Optional card reader may go here*]

Carry this card with you at all times and present it each time you receive a service from your doctor, pharmacy, dentist, etc.

**Member Services3:** <Member Services toll-free phone and TTY numbers>

**Behavioral Health:** <Behavioral Health phone number>

**Pharmacy Help Desk:** <Pharmacy Help Deskphone number>

**<Additional Line>**4**:** <Additional phone number as needed>

**Website:** <Health plan web address>

**Send Claims To:** <Claims submission name and address>

**Claim Inquiry:** <Claim inquiry phone number>

*3 If plans do not use the term “Member Services,” plans should replace this label with the term the plan uses.*

*4 If space permits, plans may include other phone numbers as needed using appropriate labels. Font size and spacing may not be reduced in order to accommodate additional fields.*