



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2931296**

Processed Date **11/01/2020**
 Expected Mail Date **11/05/2020**
 Actual Mail Date

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

Card Front

Card Back



An Anthem Company

Amerivantage Lung Care Plus (HMO C-SNP)


PCP: [REDACTED]
 CareMore Health - Arizona


Member ID: [REDACTED]


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

Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$120
 Preventive Copay: \$0
 livehealthonline.com

CMS H1423-PBP: 001-000


Prescription Drug Coverage


X634494900001



An Anthem Company

amerigroup.com/medicare

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
 Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Customer Service: **1-888-816-2790**
 TTY: **711**
 Pharmacy Member Svc: **1-833-498-1582**
 Help for Pharmacists: **1-833-377-4266**
 Providers: **1-888-291-1358**
 Dental: **1-888-700-0992**
 24/7 NurseLine: **1-855-658-9249**
 SilverSneakers: **1-855-741-4985**

Use of this card by any person other than the member is fraud 11/01/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2932864**

Processed Date **11/02/2020**
 Expected Mail Date [REDACTED]
 Actual Mail Date [REDACTED]

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

Card Front

Card Back



An Anthem Company

Amerivantage Diabetes Care Plus (HMO C-SNP)


PCP: [REDACTED]
 PCP Phone: [REDACTED]
 CareMore Health - Arizona


Member ID: [REDACTED]


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

Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$120
 Preventive Copay: \$0
 livehealthonline.com

CMS H1423-PBP: 002-000


Prescription Drug Coverage


X634924500001



An Anthem Company

amerigroup.com/medicare

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Customer Service: 1-888-816-2790
 TTY: 711
 Pharmacy Member Svc: 1-833-498-1582
 Help for Pharmacists: 1-833-377-4266
 Providers: 1-888-291-1358
 Dental: 1-888-700-0992
 24/7 NurseLine: 1-800-589-3148
 SilverSneakers: 1-855-741-4985

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 **2931296**

Processed Date **11/01/2020**
 Expected Mail Date **11/05/2020**
 Actual Mail Date

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

Card Front

Card Back



An Anthem Company

Amerivantage Heart Care Plus (HMO C-SNP)


PCP: [REDACTED]
 PCP Phone: [REDACTED]
 CareMore Health - Arizona


Member ID: [REDACTED]


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

Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$120
 Preventive Copay: \$0
 livehealthonline.com

CMS H1423-PBP: 003-000


Prescription Drug Coverage


 X634494900034



An Anthem Company

amerigroup.com/medicare

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
 Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Customer Service: 1-888-816-2790
 TTY: 711
 Pharmacy Member Svc: 1-833-498-1582
 Help for Pharmacists: 1-833-377-4266
 Providers: 1-888-291-1358
 Dental: 1-888-700-0992
 24/7 NurseLine: 1-800-589-3148
 SilverSneakers: 1-855-741-4985

Use of this card by any person other than the member is fraud 11/01/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2931296**

Processed Date **11/01/2020**
 Expected Mail Date **11/05/2020**
 Actual Mail Date

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

Card Front

Card Back



An Anthem Company

Amerivantage Classic Plus (HMO)


PCP: [REDACTED]
 CareMore Health - Arizona

Member ID: [REDACTED]

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

Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$120
 Preventive Copay: \$0
 livehealthonline.com

CMS H1423-PBP: 004-000


 MedicareRx
Prescription Drug Coverage



An Anthem Company

amerigroup.com/medicare

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Customer Service: 1-888-816-2790
 TTY: 711
 Pharmacy Member Svc: 1-833-498-1582
 Help for Pharmacists: 1-833-377-4266
 Providers: 1-888-291-1358
 Dental: 1-888-291-3758
 24/7 NurseLine: 1-800-589-3148
 SilverSneakers: 1-855-741-4985

Use of this card by any person other than the member is fraud 11/01/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2932864**

Processed Date **11/02/2020**
 Expected Mail Date
 Actual Mail Date

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

Card Front

Card Back



An Anthem Company

Amerivantage Smart Value Plus (HMO)


PCP: [REDACTED]
 PCP Phone: [REDACTED]
 CareMore Health - Arizona


Member ID: [REDACTED]


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

Office Visit Copay: \$10
 Specialist Visit Copay: \$40
 Emergency Room Copay: \$120
 Preventive Copay: \$0
 livehealthonline.com

CMS H1423-PBP: 005-000


Prescription Drug Coverage

X634924500010




An Anthem Company

amerigroup.com/medicare

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Customer Service: **1-888-816-2790**
 TTY: **711**
 Pharmacy Member Svc: **1-833-498-1582**
 Help for Pharmacists: **1-833-377-4266**
 Providers: **1-888-291-1358**
 Dental: **1-888-700-0992**
 24/7 NurseLine: **1-800-589-3148**
 SilverSneakers: **1-855-741-4985**

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



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

X14686494240001

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Amerigroup
An Anthem Company

Amerivantage CareMore Care To You Plus (HMO I-SNP)

PCP: [Redacted]
PCP Phone: [Redacted]
CareMore Health - Arizona

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: \$120
Preventive Copay: \$0
livehealthonline.com

CMS H1423-PBP: 008-000

CareMore HEALTH

MedicareRx
Prescription Drug Coverage

T00009494240001

Amerigroup
An Anthem Company

amerigroup.com/medicare

Customer Service: 1-888-816-2790
TTY: 711
Pharmacy Member Srv: 1-833-498-1582
Help for Pharmacists: 1-833-377-4266
Providers: 1-888-291-1358
Dental: 1-888-700-0992
24/7 NurseLine: 1-800-589-3148
SilverSneakers: 1-855-741-4985

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: Amerigroup, P.O. Box 366
Artesia, CA 90702-0366
EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
Phoenix, AZ 85072-2077

Use of this card by any person other than the member is fraud 11/07/2020



PCS PREVIEW

Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **609003**


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

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

Card Front


Card Back

Single Card Package



X36436864900001

Intentionally Left Blank



Amerigroup
An Anthem Company

Member ID: [REDACTED]

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

Amerivantage Heart Care (HMO C-SNP)


PCP: T. GU [REDACTED]
 PCP Phone: [REDACTED]

Enhanced Dental and Vision Package

Office Visit Copay:	\$0
Specialist Visit Copay:	\$35
Emergency Room Copay:	\$90
Preventive Copay:	\$0

livehealthonline.com

CMS H2593-PBP: 013-000



MedicareRx
Prescription Drug Coverage

T00006F989F9X





Amerigroup
An Anthem Company

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

amerigroup.com/medicare

Customer Service:	1-888-816-2790
TTY:	711
Pharmacy Member Srvc:	1-833-337-1266
Help for Pharmacists:	1-833-377-4266
Providers:	1-888-291-1358
Dental:	1-888-700-0992
Vision:	1-800-446-0037
24/7 NurseLine:	1-855-658-9249
SilverSneakers:	1-855-741-4985
Transportation:	1-844-923-0755

Use of this card by any person other than the member is fraud 09/23/2020



PRODUCTION VIEW

Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2926745**


Processed Date **10/30/2020**
 Expected Mail Date **11/03/2020**
 Actual Mail Date

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


Card Front

Card Back

Single Card Package

 X634145400003

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An Anthem Company

Member ID [REDACTED]


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

Amerivantage Classic (HMO)

PCP: [REDACTED]
 Caremore Health - Arizona

Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$90
 Preventive Copay: \$0
 livehealthonline.com

CMS H2593-PBP: 001-000



Prescription Drug Coverage

E0000F5F1P5EX 

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An Anthem Company

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

amerigroup.com/medicare

Customer Service: 1-888-816-2790
 TTY: 711
 Pharmacy Member Srv: 1-833-337-1266
 Help for Pharmacists: 1-833-377-4266
 Providers: 1-888-291-1358
 Dental: 1-888-700-0992
 24/7 NurseLine: 1-855-658-9249
 SilverSneakers: 1-855-741-4985

Use of this card by any person other than the member is fraud 10/30/2020



PRODUCTION VIEW


Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2929820**

Processed Date **10/31/2020**
 Expected Mail Date **11/05/2020**
 Actual Mail Date

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

Card Front

Card Back



Amerigroup
An Anthem Company

Amerivantage Lung Care (HMO C-SNP)


PCP: [REDACTED]
 PCP Phone: [REDACTED]
 CareMore Health - Arizona


Member ID: [REDACTED]

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


Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$90
 Preventive Copay: \$0
 livehealthonline.com

CMS H2593-PBP: 005-000


Prescription Drug Coverage



X63494000001



Amerigroup
An Anthem Company

amerigroup.com/medicare

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Customer Service:	1-888-816-2790
TTY:	711
Pharmacy Member Svc:	1-833-337-1266
Help for Pharmacists:	1-833-377-4266
Providers:	1-888-291-1358
Dental:	1-888-700-0992
24/7 NurseLine:	1-855-658-9249
SilverSneakers:	1-855-741-4985
Transportation:	1-844-923-0755

Use of this card by any person other than the member is fraud 10/31/2020



PRODUCTION VIEW

Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID **2929820**

Processed Date **10/31/2020**
 Expected Mail Date **11/03/2020**
 Actual Mail Date

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

Card Front

Card Back

Single Card Package



X634481800001

Intentionally Left Blank



An Anthem Company

Member ID: [REDACTED]

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

Amerivantage Diabetes Care (HMO C-SNP)

PCP: [REDACTED]
 Caremore Health - Arizona

Office Visit Copay: \$0
 Specialist Visit Copay: \$35
 Emergency Room Copay: \$90
 Preventive Copay: \$0
 livehealthonline.com

CMS H2593-PBP: 006-000



Prescription Drug Coverage

T000081844EX





An Anthem Company

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

amerigroup.com/medicare

Customer Service:	1-888-816-2790
TTY:	711
Pharmacy Member Srv:	1-833-337-1266
Help for Pharmacists:	1-833-377-4266
Providers:	1-888-291-1358
Dental:	1-888-700-0992
24/7 NurseLine:	1-855-658-9249
SilverSneakers:	1-855-741-4985
Transportation:	1-844-923-0755

Use of this card by any person other than the member is fraud 10/31/2020



PRODUCTION VIEW

Member Name [REDACTED]
 Member ID [REDACTED]
 Job ID 2929820


Processed Date 10/31/2020
 Expected Mail Date 11/03/2020
 Actual Mail Date

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

Card Front


Card Back

Single Card Package



X634481800038

Intentionally Left Blank



An Anthem Company

Member ID: [REDACTED]

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

Amerivantage Smart Value (HMO)

PCP: [REDACTED]
 PCP Phone: [REDACTED]

Enhanced Dental and Vision Package

Office Visit Copay:	\$10
Specialist Visit Copay:	\$40
Emergency Room Copay:	\$120
Preventive Copay:	\$0

livehealthonline.com

CMS H2593-PBP: 018-000

MedicareRx
 Prescription Drug Coverage

800008184481800038





An Anthem Company

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: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
 EDI Information : Payer ID - CARMO
 Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

amerigroup.com/medicare

Customer Service:	1-888-816-2790
TTY:	711
Pharmacy Member Srvc:	1-833-337-1266
Help for Pharmacists:	1-833-377-4266
Providers:	1-888-291-1358
Dental:	1-888-700-0992
Vision:	1-800-446-0037
24/7 NurseLine:	1-855-658-9249
SilverSneakers:	1-855-741-4985
Transportation:	1-844-923-0755

Use of this card by any person other than the member is fraud 10/31/2020



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


 X138433642500001

Intentionally Left Blank


Amerivantage CareMore ESRD Care (HMO C-SNP)
 An Anthem Company



Member ID: [Redacted]


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


PCP [Redacted]
 PCP Phone [Redacted]
 CareMore Health - Arizona

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

CMS H2593-PBP: 040-000

T000 5249E E98TX



 amerigroup.com/medicare
 An Anthem Company

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.

Customer Service: 1-888-816-2790
TTY: 711
Pharmacy Member Srv: 1-833-337-1266
Help for Pharmacists: 1-833-377-4266
Providers: 1-888-291-1358
Dental: 1-888-700-0992
24/7 NurseLine: 1-833-908-0104
SilverSneakers: 1-855-741-4985

Claims: Amerigroup, P.O. Box 366
 Artesia, CA 90702-0366
EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
 Phoenix, AZ 85072-2077

Use of this card by any person other than the member is fraud 11/09/2020



PCS PREVIEW

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


Processed Date **10/05/2020**
Expected Mail Date
Actual Mail Date

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


Card Front

Card Back

Single Card Package

 X7030265000001

Intentionally Left Blank



Member ID: [Redacted]

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

Amerivantage CareMore Care To You (HMO I-SNP)



PCP: M. M. [Redacted]
PCP Phone: (408) [Redacted]

Enhanced Dental and Vision Package

Office Visit Copay:	\$0
Specialist Visit Copay:	\$0
Emergency Room Copay:	\$120
Preventive Copay:	\$0

livehealthonline.com

CMS H2593-PBP: 019-000

T0000055000001 



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: Amerigroup, P.O. Box 366
Artesia, CA 90702-0366
EDI Information : Payer ID - CARMO
Pharmacy Claims: P.O. Box 52077
Phoenix, AZ 85072-2077

amerigroup.com/medicare

Customer Service:	1-888-816-2790
TTY:	711
Pharmacy Member Srvc:	1-833-337-1266
Help for Pharmacists:	1-833-377-4266
Providers:	1-888-291-1358
Dental:	1-888-700-0992
Vision:	1-800-446-0037
24/7 NurseLine:	1-800-589-3148
SilverSneakers:	1-855-741-4985

Use of this card by any person other than the member is fraud 10/05/2020