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Effective Date: 07/01/2014
Date of Birth: 01/10/1959
Subscriber #: 718969827

**Washington Apple Health - Alternative Benefit Plan
for Medicaid expansion members with habilitative benefits**



Member Name: Scott N See
Medicaid or CHIP ID Number: 201141788WA
Primary Care Provider (PCP): K. Pickering
PCP Telephone #: 541-296-9151
PCP Address: 1620 E 12th St The Dalles OR 970583213
Clinic/Group: Columbia Hills Family Medicine
Vision: 1-866-416-0153

Member Services/Pharmacy and Behavioral Health: 1-800-600-4441
Amerigroup On Call/24-hour Nurse HelpLine: 1-866-864-2544



X106553400926

MEMBERS: Please carry this card at all times. Show this card before you get medical care. You do not need to show this card before you get emergency care. If you have an emergency, call 911 or go to the nearest emergency room. Always call your Amerigroup PCP for nonemergency care. If you have questions, call Member Services at 1-800-600-4441. If you are deaf or hard of hearing, call 1-800-855-2880.

MIEMBROS: Lleve consigo siempre esta tarjeta de identificación. Muéstrela antes de recibir atención médica. Usted no necesita mostrar esta tarjeta antes de recibir atención de emergencia. Si tiene una emergencia, llame al 911 o vaya a la sala de emergencias más cercana. Llame siempre a su PCP de Amerigroup para la atención que no es de emergencia. Si tiene alguna pregunta, llame a Servicios para Miembros al 1-800-600-4441. Llame al 1-800-855-2884 si es una persona sorda o tiene problemas de la audición.

HOSPITALS: Preadmission certification is required for all nonemergency admissions, including outpatient surgery. For emergency admissions, notify Amerigroup within 24 hours after treatment at 1-800-454-3730.

PROVIDERS: Certain services must be preauthorized. Care that is not preauthorized may not be covered. For preauthorization/billing information, call 1-800-454-3730.

PHARMACIES: Submit claims using Express Scripts RXBIN: 003858; RXPCN: MA; RXGRP: WKHA. For technical help, call **Express Scripts** at 1-844-367-6113.

SUBMIT MEDICAL CLAIMS TO:

AMERIGROUP • PO BOX 61010 • VIRGINIA BEACH, VA 23466-1010

USE OF THIS CARD BY ANY PERSON OTHER THAN THE MEMBER IS FRAUD.

EL USO DE ESTA TARJETA POR CUALQUIER PERSONA QUE NO SEA

EL MIEMBRO CONSTITUYE FRAUDE.