



# Sample Medicare Extension ID Card (effective 7/01/2024)

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**JOHN Q. MEMBER**  
Member ID: <HCID>

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<b>Plan</b>	<b>Medicare Extension</b>	Office visits	\$10
		Urgent care	\$10
	Group: <GROUP_SUBGROUP>	Emergency room	\$50

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**Use Medicare participating providers for maximum benefits.**

Medical and behavioral health benefits are self-insured and administered by Wellpoint.  
Submit claims to Wellpoint, P.O. Box 4095, Woburn, MA 01888.


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<b>Member Services</b>	<b>800-442-9300</b>
<b>Preapprovals for Services</b>	<b>800-442-9300</b>
<b>Provider Services</b>	<b>800-442-9300</b>
<b>24-Hour Nurse Line</b>	<b>800-424-8814</b>
<b>Prescription Drugs Benefits</b>	<b>877-876-7214</b>
Administered by SilverScript	

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Possession of this card does not guarantee eligibility for benefits.

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Payor # WLPNT

<ISSDATE>