Sample Community Choice ID Card (effective 7/01/2024)





JOHN Q. MEMBER Member ID: <HCID>

Plan Community Choice Group <GROUP_SUBGROUP>

Deductible: \$400/ind., \$800/fam. Pharmacy deductible: \$100/\$200 Out-of-pocket max: \$5,000/\$10,000 Non-Community Choice coins. limit: \$5,000/none

Office visit (PCP) \$20 Office visit (specialist) \$30/\$60/\$75 Emergency room \$100

Find contracted providers while traveling at wellpointmass.com.

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

 Member Services
 833-663-4176

 Preapprovals for Services
 800-442-9300

 Provider Services
 800-442-9300

 24-Hour Nurse Line
 800-424-8814

 Prescription Drugs Benefits
 877-876-7214

Prescription Drugs Benefits Administered by CVS Caremark

LiveHealth Online livehealthonline.com

Use Community Choice hospitals for maximum benefits.Possession of this card does not guarantee eligibility for benefits.





Payor # WLPNT

MultiPlan complementary

<ISSDATE>