


Neighborhood INTEGRITY (Medicare-Medicaid Plan) ID Card Sample

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 Neighborhood Health Plan OF RHODE ISLAND™	MedicareRx Prescription Drug Coverage
Member Name: Cardholder Name	RxBIN: 012353
Member ID: Cardholder ID#	RxPCN: 06470000
Health Plan (80840): 7104829339	RxGRP:
Effective Date: Coverage Start Date	
PCP Name: PCP Name Call Member Services	
PCP Phone: PCP Phone	
Copays: PCP/Specialist: \$0 ER: \$0 Rx: \$0	
H9576 001	Approved 9/19/17
	INTEGRITY 

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In an emergency, call 911 and ask for help or go directly to the nearest hospital emergency room.	
Member Services:	1-844-812-6896 (TTY/TDD 711)
24-Hour Nurse Advice:	1-844-617-0563
Behavioral Health:	1-855-371-2286 (TTY/TDD 711)
Pharmacy Help Desk:	1-855-613-0410
Website:	www.nhpri.org/INTEGRITY
Send Claims To:	Neighborhood Health Plan of Rhode Island P.O. Box 28259 Providence, RI 02908
Claim Inquiry:	1-844-639-7905