


## Front of Member ID Card

 <p>Neighborhood Health Plan OF RHODE ISLAND™ INTEGRITY For Duals</p>	<p><b>MedicareRx</b> Prescription Drug Coverage</p>
<b>Member Name:</b> <Cardholder Name>	<b>RxBIN:</b> 004336
<b>Member ID:</b> <Cardholder ID#>	<b>RxPCN:</b> MEDDADV
<b>PCP Group/Name:</b> <PCP/Group Name>	<b>RxGRP:</b> RX21KD
<b>PCP Phone:</b> <PCP Phone>	
<b>MEMBER CANNOT BE CHARGED</b>	
Copays: PCP/Specialist: \$0 ER: \$0	
H7635	001

## Back of Member ID Card

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 711)

**24-Hour Nurse Advice:** 1-844-617-0563 (TTY 711)

**Pharmacy Help Desk:** 1-866-693-4620 (TTY 711)

**Provider Services:** 1-800-963-1001

**Website:** [www.nhpri.org/INTEGRITYDuals](http://www.nhpri.org/INTEGRITYDuals)

**Send Claims To:** Neighborhood Health Plan of Rhode Island  
P.O. Box 28259, Providence, RI 02908-3700

**Claim Inquiry:** 1-800-963-1001