




# Neighborhood INTEGRITY (Medicare-Medicaid Plan) ID Card Sample

## Front

 <b>Neighborhood Health Plan</b> OF RHODE ISLAND™	<b>MedicareRx</b> Prescription Drug Coverage
<b>Member Name:</b> Cardholder Name	<b>RxBIN:</b> 004336
<b>Member ID:</b> Cardholder ID#	<b>RxPCN:</b> MEDDADV
<b>Effective Date:</b> Coverage Start Date	<b>RxGRP:</b> RX2322
	<b>RxID:</b> RX ID#
<b>MEMBER CANNOT BE CHARGED</b>	
<b>Copays:</b> PCP/Specialist: \$0 ER: \$0 Rx: \$0	
H9576 001	<b>INTEGRITY</b> 

## Back

	
In an emergency, call 911 and ask for help or go directly to the nearest hospital emergency room.	
<b>Member Services:</b>	1-844-812-6896 (TTY 711)
<b>24-Hour Nurse Advice:</b>	1-844-617-0563
<b>Behavioral Health:</b>	1-401-443-5995 (TTY 711)
<b>Pharmacy Help Desk:</b>	1-866-693-4620
<b>Website:</b>	<a href="http://www.nhpri.org/INTEGRITY">www.nhpri.org/INTEGRITY</a>
<b>Send Claims To:</b>	Neighborhood Health Plan of Rhode Island P.O. Box 28259 Providence, RI 02908
<b>Provider Inquiry:</b>	1-800-963-1001