



SUMMIT
HEALTH

Plan Name
CMS-H2765-[PBP #]

Subscriber
(00) Mary J. Smith

BIN: 610602
PCN: NVTPARTB
RxGrp: MDHP

yoursummithealth.com

Issuer: 80840-10017515
ID Number: J01234567
Group Number: 10101010
Mobile Pin Code: 1234

Customer Service: 844-827-2355
24-hour Nurse line: 866-321-7580
TruHearing: 844-277-6322
VSP: 844-820-8723
TTY users, please dial 711

Send claims to:
Medical Claims:
P.O. Box 820070
Portland, OR 97282

Pharmacy Manual Claims:
P.O. Box 1039
Appleton, WI 54912-1039

This card does not certify
or guarantee benefits

Navitus
provider inquiries:
866-270-3877

