




New Member ID Card Sample

ID Cards Effective 1/1/18

Sample: CalPERS Member ID Card




<firstname><lastname><suffix>
ID# <920003456789*01>
DOB: <MM/DD/YY>
Effective: <MM/DD/YY>
Account: <Account Name>
Account #: <Account #>

Primary Care Physician: <First Name> <Last Name> <XXX-XXX-XXXX>	Deductible: <\$x,xxx>
Plan Medical Group: <Affiliated Network>	Cost Share:
Network: <Network>	PCP <\$xx or xx%>
	Specialist <\$xx or xx%>
	Hospital <\$xx or xx%>
	Urgent Care <\$xx or xx%>
	ER <\$xx or xx%>

Please visit sharphealthplan.com/CalPERS for member questions.

Member Questions:
1-855-995-5004

Pharmacy Questions:

Members: 1-855-505-8110
Pharmacy: 1-855-438-4512
optumrx.com/CalPERS
RXBIN: 610011
RXPCN: IRX
RXGRP: CALPSHARP

IMPORTANT:
Sharp Health Plan only covers care by Plan Providers, except for emergency services and out of area urgent care. Contact your Primary Care Physician for all other services.

Provider Questions:
1-855-995-5004

Medical Claims:
PO Box 939036
San Diego, CA 92193

Mental Health Questions:
1-855-995-5004

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