

# YOUR CARD HAS CHANGED!

Vantage is pleased to announce that our 2014 pharmacy benefits will be administered by



Please note you must show your new 2014 ID card (enclosed) to all of your providers, **especially your Pharmacy**, beginning January 1st. Important changes are circled in red on the card examples below.

Failure to show your new ID Card to your Pharmacy could result in prescription fill delays.

## MEDICARE CARD EXAMPLE

FRONT

<b>VANTAGE</b> HEALTH PLAN, INC.		<b>VANTAGE MEDICARE</b> ADVANTAGE	
AAA0 VANTAGE ZERO (HMO-POS)			
RXBIN: 012353	PC \$ 9		
RXPCN: 06870000	SP \$ 50		
RXGRP: MVANTD	ER \$ 65		
ISSUER: (80840)	ASU \$ 450		
9451014609	IP \$ 335/day, max \$1675		
ID: 100000000	OP \$ 175		
NAME: JOHN DOE	MedicareRx Prescription Drug Coverage		
www.VantageMedicare.com		CMS H5576_007	

BACK

Submit Claims to:	Vantage Health Plan, Inc. 130 Desiard Street, Suite 300 Monroe, LA 71201
Benefit Information:	(318) 361-0900 or (888) 823-1910 (318) 361-2131 TTY (866) 524-5144 Toll-free TTY
Pharmacy Help Desk:	(888) 823-1910
Administered by:	<b>PERFORMRx</b>
Medicare Contact Information:	(800) MEDICARE (800) 633-4227 (800) 486-2048 TTY

## COMMERCIAL GROUP/INDIVIDUAL CARD EXAMPLE

FRONT

<b>VANTAGE</b> HEALTH PLAN		<b>YOUR GROUP</b>	
RXBIN: 600428	MH-PCP \$ XX OP \$ XXX		
RXPCN: 06880000	SP \$ XX MDx \$ XXX		
RXGRP: VHPCOM	ER \$ XXX HOS \$ XXX		
ISSUER: (80840)	IP \$ XXX/day, \$XXX max		
ID: 100000000			
00 JOHN DOE			
01 JANE DOE			
<b>PERFORMRx</b>		VERITY VHN	

BACK

Submit Claims to:	Vantage Health Plan, Inc. 130 Desiard Street, Suite 300 Monroe, LA 71201
For Benefit Information and for Pre-Authorization:	(318) 361-0900 or (888) 823-1910
For Tier II Provider Network Inquiries:	(888) 823-1910 or www.vantagehealthplan.com
<b>PHCS</b>	
www.vantagehealthplan.com	