

# Provider Bulletin

## Central Health Medicare Plan

February 20, 2025

☒ Alameda ☒ Contra Costa ☒ Fresno ☒ Imperial ☒ Kern ☒ Kings ☒ Los Angeles ☒ Madera ☒ Orange  
☒ Placer ☒ Riverside ☒ Sacramento ☒ San Bernardino ☒ San Diego ☒ San Francisco ☒ San Joaquin  
☒ San Mateo ☒ Santa Clara ☒ Solano ☒ Stanislaus ☒ Tulare ☒ Yolo

### Member ID Correction

This is an advisory notification to Central Health Medicare Plan (CHP) network providers applicable to CHP Medicare business.

#### What you need to know:

Inaccuracies on some BY2025 Member ID cards have been identified, and updated cards have already been issued. Please review this information to ensure you can provide Members with accurate guidance.

#### Errors on Member ID Cards

- Front of Card:
  - GRP/IPA field displayed "Central Health Medicare Plan" instead of the IPA name.
  - GRP/IPA PH field listed an incorrect IPA phone number.
  - ER copay range was incorrect for PBP 027.
- Back of Card:
  - Medical Claims Submission included an incorrect phone number or address.

#### Corrected Member ID Cards Issued

- Corrected ID cards were mailed throughout the month of January.
- A special communication insert was mailed with the corrected ID card, explaining that the previous ID card contained incorrect information and confirming that Member benefits have not changed.

### Duplicate Cards

Some Members may receive multiple ID cards; the most recent card sent should be used, and any cards received in December 2024 or earlier should be discarded.

### No Impact on Benefits

The errors on the ID cards do not affect Member benefits. Members should continue to refer to their Evidence of Coverage (EOC) or Summary of Benefits (SOB) for accurate benefit details.

### Provider Action

Please advise Members to use the corrected ID card issued in January 2025 and to discard any previously received cards. Members should be reminded to bring the updated card to all medical appointments and pharmacy visits to ensure accurate processing of their benefits.


### What if you need assistance?


If you have any questions regarding the notification, please contact your CHP Provider Relations Representative at [PRCalifornia@molinahealthcare.com](mailto:PRCalifornia@molinahealthcare.com).

# Member ID Cards BY2025

## ID Card Samples

### Non-EAE



PLAN: <Central Health Plan Name (HMO X-XXX)>  
<H5649-XXX>  
NAME: <FIRST M. LAST>  
ID: <XXXXXXXXXXXX> ISSUED DATE: <MM/DD/CCYY>  
ISSUER: (80840)  
PCP: <PCP Name> PH: <(XXX) XXX-XXXX>  
GRP/IPA: <Physician/Group/IPA> PH: <(XXX) XXX-XXXX>  
Coplay: PCP: <\$XX> ER: <\$XX>  
HOSP: <\$XX>  
Prescription Drug Plan  
RX GROUP: <XXXXXX>  
RX BIN: <XXXXXX> RXPCN: <XXXXXX> 





THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT PROVE ELIGIBILITY FOR SERVICES. Contact Central Health Medicare Plan to confirm eligibility. All care must be arranged through your assigned contracted Primary Care Physician or Specialist.  
NON-PLAN PROVIDERS / HOSPITAL EMERGENCY ROOM – Except in emergencies, members must obtain a prior authorization for physician and hospital services including post-stabilization.


**Central Health Medicare Plan Member Services:**  
<1-866-314-2427>, TTY 711

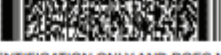
<b>Medical Claims Submission:</b>	<b>Pharmacy Claims Submission:</b>
<PAYOR_NAME>	<CVS/Caremark>
<PAYOR_ADDRESS1>	<7050 Union Park Center, Suite 600>
<PAYOR_CITY> <PAYOR_STATE>	<Midvale, UT 84047>
<PAYOR_ZIP>	<Help Desk: 1-800-364-6331>
<PAYOR_PHONE><PAYOR_TTY>	

[www.centralhealthplan.com](http://www.centralhealthplan.com)

### EAE



PLAN: <Central Health Medi-Medi Plan I (HMO D-SNP)>  
<H5649-002>  
NAME: <FIRST M. LAST>  
ID: <XXXXXXXXXXXX> ISSUED DATE: <MM/DD/CCYY>  
ISSUER: (80840)  
PCP: <PCP Name> PH: <(XXX) XXX-XXXX>  
GRP/IPA: <Physician/Group/IPA> PH: <(XXX) XXX-XXXX>  
Care Coordinator PH: <(XXX) XXX-XXXX>  
Prescription Drug Plan  
RX GROUP: <XXXXXX>  
RX BIN: <XXXXXX> RXPCN: <XXXXXX> 



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<PAYOR_CITY> <PAYOR_STATE>	<Midvale, UT 84047>
<PAYOR_ZIP>	<Help Desk: 1-800-364-6331>
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