

**Molina Marketplace**

ID #: 110009339592

Member: THANKAMMA, OMANA A

DOB: 02/23/1942 Plan: Molina Choice Silver 250  
Plan

Subscriber Name: THANKAMMA, OMANA A

Subscriber ID: 110009339592

Provider: LI, ZHERU

Provider Phone: 425-373-3000

Provider Group: INTERNATIONAL COMMUNITY HEALTH  
SERVICES**Medical Cost Share****Prescription Drugs**

Primary Care: \$20

Generic Drugs: \$10

Specialist Visits: \$55

Preferred Brand  
Drugs: \$55

Urgent Care: \$75

Non-Preferred  
Brand Drugs: 30%

ER Visit: \$300

Specialty Drugs: 30%

Molina Healthcare of WA, Inc. RxBin: 004336 RxPCN: ADV RxGrp: RX0852

**This card is for identification purposes only and does not prove eligibility for service.****Member:** Emergencies (24 hrs): when a medical emergency might lead to disability or death, call 911 immediately or get to the nearest emergency room. No prior authorization is required for emergency care.**Miembro:** Emergencias (24 horas al día): si una emergencia médica puede resultar en muerte o discapacidad, llame al 911 inmediatamente o acuda a la sala de emergencias más cercana. No necesita autorización previa para los servicios de emergencia.**Remit claims to:** Molina Healthcare P.O. Box 22612, Long Beach, CA 90801**Customer Support Number:** (888) 858-3492**24 Hour Nurse Advice Line:** (888) 275-8750**Línea de Consejos de Enfermeras 24 horas al día (español):** (866) 648-3537**CVS Caremark Pharmacy Help Desk:**  
(800) 364-6331**Provider:** Notify the health plan within 24 hours of any inpatient admission at the hospital admission notification .**Prior Authorization/Notification of Hospital****Admission and Covered Services:** (855) 322-4082

MolinaMarketplace.com