



Betty B. Bright

Member ID: XXXXXXXXXX

Bright Health Medicare Advantage Plan

Effective Date: 01/01/2020

HXXX-XXX

MedicareRx
Prescription Drug Coverage X

BIN: 012312

RX PCN: PARTD

RX GRP: BHPMA

PCP: \$XX Copay

Specialist: \$XX Copay

Urgent Care: \$XX Copay

Member Services: (800) 999-9999 (TTY:711)

Provider Services: (800) 999-9999 (TTY:711)

Pharmacist Help Desk: (800) 999-9999 (TTY:711)

EDI Payer ID: BRT01

Medical Claims:

Bright Health Medicare Advantage – Claims Operations

PO Box 853960, Richardson, TX 75085-3960

BrightHealthPlan.com/Medicare