



by Select Health of South Carolina

Member name:

<Member Name>

Member ID:

<123456789>

Health plan number:

<(80840) 7053314697>

MEMBER CANNOT BE CHARGED.

Cost sharing/copays: \$0 for doctor visits and hospital stays

Primary care provider (PCP):

<Last Name, First Name>

PCP phone

<PCP phone>

RX BIN: <019587>

RX PCN: <PRX01809>

First Choice VIP Care
(HMO-SNP) 4739-001

Medicare_{Rx}
Prescription Drug Coverage



by Select Health of South Carolina

First Choice VIP Care Claims Processing Center
P.O. Box 7182
London, KY 40742-7182

DO NOT bill Original Medicare.

Out-of-area providers:

File all claims with First Choice VIP Care plan.

Coverage of benefits and services may be limited outside of the First Choice VIP Care service area.

Submit prescription claims to:

PerformRxSM/First Choice VIP Care
P.O. Box 516
Essington, PA 19029

Pharmacists: RX ID is the member ID.

Members: Call Member Services at
1-888-996-0499 (TTY 711) or
visit our website at
www.firstchoicevipcare.com.

Providers: Call **1-888-978-0151.**

Outside of area: To verify member
eligibility and coverage, or for pre-certification,
call **1-888-978-0151.**

For pharmacy benefit information: Members call
1-833-809-3767. Providers call: **1-833-728-2809**

www.firstchoicevipcare.com

PERFORMSMR_X

Next Generation Pharmacy Benefits