NEW YORK STATE

Acting Commissioner of Motor Vehicles



Jernigh L Howard

DRIVER LICENSE

ID: 815 933 343 CLASS D

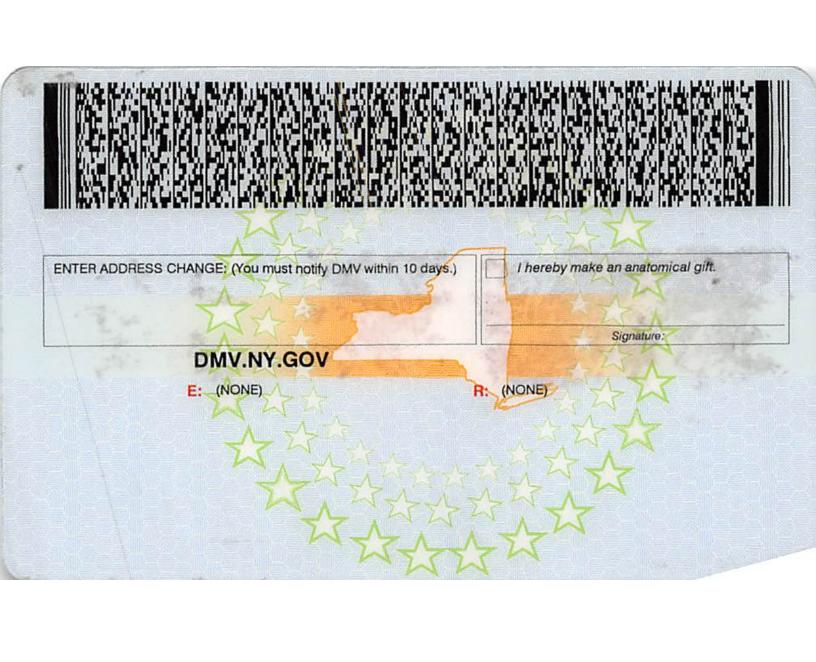
HOWARD JENNIFER,J 15 OAK DRIVE PLAINVIEW NY 11803

DOB: 05-05-71

SEX: F EYES: BR HT: 5-07

E NONE

ISSUED: 05-09-11 EXPIRES: 05-05-19 DUBUUAR207







JENNIFER J HOWARD

Identification Number CDK SC2483623

Group: 720059 Relationship Code: 01 BS Plan 803 BC Plan 303

PROC:NETCARD WDRXGRP#SYFA BIN#008878

Empire POS





In order to avoid a reduction in benefits please be sure to call the telephone number listed before receiving services requiring precertification and within 48 hours of an emergency and maternity admission. Always check the Hospital network status so you get the highest level of benefits. These services are described in your benefit

For precertification, major medical, hospital, pharmacy and mental health/substance abuse inquiries, please call member services.

Providers submit all claims to your local Blue Cross and/or Blue Shield Plan; or if Medicare is primary submit Medicare claims to Medicare.

Members send all claims to the address on the claim form.

WellDyneRx Claims Address

WellDyneRx PO Box 4517 Englewood, CO 80155























www.empireblue.com/emhp

Member Services 1-800-939-7515 1-877-TALK-2-RN Empire NurseLine 1-866-909-6472 Value Options Mental Health* 1-855-799-6831 WellDyneRx Member Services**

*EMHP separately contracts for its Mental Health programs

**EMHP separately contracts for its RX Retail and Mail order

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Empire HealthChoice Assurance, Inc., provides administrative claims payment services only, and does not assume any financial risk or obligation with respect to claims.





Print Date: 04/13/2014







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