COVID 19 Vaccine Patient Insurance Information

Please complete the following information prior to your vaccine appointment. If you have any questions or are unsure of anything, please bring all your cards with you and we will assist you at your appointment. COVID 19 vaccine is covered for all Americans with or without insurance. Please complete the appropriate section below:

Name:	Date of Birth:
Medicare Recipients:	
Medicare ID (MBI):	
MEDICARE HEALTH INSURANCE Name/Nombre JOHN L SMITH Medicare Number/Nümero de Medicare 1EG4-TE5-MK72 Entitled to/Con derecho a Coverage starts/Cobertura empieza HOSPITAL (PART A) 03-01-2016 MEDICAL (PART B) 03-01-2016	
Commercial Insurance Patients: RX Bin:	PCN:
ID:	RX Group:
LINE Issuer (60640) 911-39026-02 Member ID: 18713539 Member ALSON I SARPLE MAD Dependents ALSON I SARPLE MAD ASSUM V SARPLE IM MED ASSUM V SARPLE IM V	ne.

Uninsured Patients: (covered under CARES Act)