

**COORDINATION OF BENEFITS INFORMATION AND FORM**

*Response Required If Applicable*

Dear Member,

Valley Health Plan (VHP) would like to thank you for your membership. It is required by California law that you provide VHP with information about any other health insurance coverage, including Medicare, which you carry for yourself and/or your dependents. Coordination of Benefits is when you are covered by two (2) or more insurance plans and payment rules apply.

Coordination of Benefits:

- eliminates duplicate payments,
- specifies the order in which coverage will be paid (the primary plan, the secondary plan, etc.), and
- ensures that the benefits paid under both plans do not total over 100% of the charges.

If you or your dependent(s) have, or are entitled to other group health insurance, please complete this form and return it in the self-addressed envelope enclosed. You can also fax it to VHP Member Services at 408.885.4425. You may also provide the information by copying the front and back of the other Insurance's I.D. card and fax it.

This Coordination of Benefits information is required by VHP to avoid over payment for services.

<b>SUBSCRIBER (EMPLOYEE) INFORMATION</b>			
Social Security Number - -	Legal Last Name	Legal First Name	M.I.
<b>OTHER HEALTH INSURANCE INFORMATION (not VHP)</b>			
Name of Health Insurance Company			
Policy Number	Group Number	Effective Date of Coverage	
Billing Address		Phone Number	
<b>POLICYHOLDER'S INFORMATION - OTHER HEALTH INSURANCE (not VHP)</b>			
Social Security Number - -	Legal Last Name	Legal First Name	Date of Birth
Names of other dependent(s) covered under this policy			
<b>ACKNOWLEDGEMENTS AND SIGNATURE</b>			
VHP Subscriber (Employee) Signature <b>X</b>			Date
Daytime Phone Number of VHP Subscriber should VHP require additional information.			

Note: Except in the case of an emergency; Valley Health Plan will only cover you, your spouse and your dependent children for services provided through our Provider Network or as authorized by VHP.

For information regarding this notification or any other questions regarding Valley Health Plan, please contact our Member Services Department.