

[www.amerhealthcaritasla.com](http://www.amerhealthcaritasla.com)

Member name: \_\_\_\_\_ Date: \_\_\_\_\_

AmeriHealth Caritas ID number: \_\_\_\_\_ Parent or legal guardian: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Phone number (best number to reach you): \_\_\_\_\_

Primary (listed on AmeriHealth Caritas ID card): \_\_\_\_\_ Other insurance: \_\_\_\_\_

Please include below additional information that will help support your request:

Member signature: \_\_\_\_\_ Date: \_\_\_\_\_

**or**

Personal representative signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to: \_\_\_\_\_

Signature of AmeriHealth Caritas representative  
that handled verbal request for appeal: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to:**  
**AmeriHealth Caritas Louisiana**  
**P.O. Box 7328**  
**London, KY 40742-7344**

AmeriHealth Caritas Louisiana complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

You can have this information in other languages and formats at no charge to you. You can also have this interpreted over the phone in any language. Call Member Services 24 hours a day, seven days a week, at **1-888-756-0004**. For TTY, call **1-866-428-7588**.

Quý vị có thể có thông tin này bằng các ngôn ngữ và định dạng khác miễn phí. Quý vị cũng có thể có thông tin này thông dịch ra bất kỳ ngôn ngữ nào qua điện thoại. Xin gọi Dịch vụ Thành viên phục vụ 24 giờ/ngày, 7 ngày/tuần theo số **1-888-756-0004**. Đối với người sử dụng TTY, xin gọi số **1-866-428-7588**.

Usted puede tener esta información en otros idiomas y formatos sin costo alguno para usted. También puede tener esto interpretado por teléfono en cualquier idioma. Llame a Servicios al Miembro al **1-888-756-0004** las 24 horas del día, los siete días de la semana. Para TTY, llame al **1-866-428-7588**.