

Exhibit 2.2

Medicare Only



Member Identification Card



Medicare ID #: 0000000000000
Member Name: Sample Patient
Health Plan Name: Health Choice Generations
Health Plan Phone #: 1-800-656-8991
RxBIN: 012312 H5587-002
RxPCN: Part D

Submit Medical and Pharmacy Claims to:
Health Choice Generations HMO
410 N. 44th St. Ste. #510
Phoenix, AZ 85008



Pharmacy Help Desk: 1-800-361-4542

Notification is required for inpatient and certain outpatient services.
Provider Line: 1-800-656-8991
Member Services: 1-800-656-8991
TTY: 711
www.healthchoicegenerations.com

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