Plan: 世報 CCHP Health Plan	Plan: 健華   CCHP   Health Plan
Monthly Premium:	Monthly Premium:
Access code:	Access code:
Cov. Cal. Case#:	Cov. Cal. Case#:
Plan: 世報 CCHP Health Plan Health Plan	健華 Plan: 脚保 Health Plan
Monthly Premium:	Monthly Premium:
Access code:	Access code:
Cov. Cal. Case#:	Cov. Cal. Case#:
Plan:   War CCHP   Health Plan   Health P	健華  計入   Health Plan
Monthly Premium:	Monthly Premium:
Access code:	Access code:
Cov. Cal. Case#:	Cov. Cal. Case#:
Plan: 機華 計入 明保 Health Plan	Plan: 世報 CCHP Health Plan
Monthly Premium:	Monthly Premium:
Access code:	Access code:
Cov. Cal. Case#:	Cov. Cal. Case#:
Plan: 健華 CCHP 計入 Health Plan	健華  計入   Health Plan
Monthly Premium:	Monthly Premium:
Access code:	Access code:
Cov. Cal. Case#:	Cov. Cal. Case#:

健華 計人 副保 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 画保 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 画保 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計人 副保 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 <sup>Health Plan</sup> - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 Health Plan - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com

健華 計入 副保 - Pay by the 15th for coverage to start the following month:

> online: log in to your coveredca.com account and follow payment instructions

by mail: 445 Grant Ave, #700 San Francisco, CA 94108

No invoice? 877-224-7808

General: 888-775-7888 / 415-834-2118 www.cchphealthplan.com