

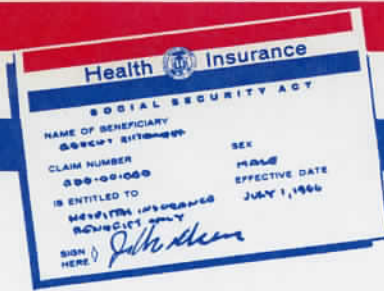
YOUR

# MEDICARE

## HEALTH INSURANCE CARD

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
SOCIAL SECURITY ADMINISTRATION

OASI-886  
July 1966



## YOUR MEDICARE HEALTH INSURANCE CARD

Enclosed is your health insurance card—your proof that you are enrolled for both hospital and medical insurance benefits under the medicare program. You will have this protection to help you pay hospital and doctors' bills beginning on the dates shown on your card.

You do not need to do anything more about your medicare coverage. If you signed up at a social security office, you received a medicare handbook telling all about the benefits you have under medicare and how these benefits will be paid. If you signed up by mail, you will soon be sent your copy of the handbook.

## HOW TO USE YOUR HEALTH INSURANCE CARD

Carry your health insurance card with you. It contains your individual claim number for medicare and other social security benefits. (If a husband and wife have both signed up for medicare, each will receive a separate card and claim number.) Starting with the dates shown on your card, whenever you need to use hospital or medical services covered by medicare, show the card to the people at the hospital, doctor's office, or other place where you get care so that they will know you have this protection. No payment can be made for care you receive before those dates.

If you lose your card, your social security office will help you get a new one.

1. Carry your card with you when you are away from home.
2. Let your hospital or doctor see your card when you require hospital, medical or health services under "Medicare."
3. Get in touch with your social security office if you have questions about your rights under "Medicare."
4. Your card is good wherever you live in the United States.

WARNING: Issued for the sole use of the holder designated hereon. Intentional misuse of this card is unlawful and will make the offender liable to penalty.

PROPERTY OF UNITED STATES GOVERNMENT.  
IF FOUND DROP IN NEAREST U.S. MAIL BOX.

Return To: SOCIAL SECURITY ADMINISTRATION  
Baltimore, Maryland 21235

FORM SSA-1966 (7-66)

Health Insurance	
SOCIAL SECURITY ACT	
NAME OF BENEFICIARY	FERDINAND W BUSCH
CLAIM NUMBER	501-12-1748-A
SEX	MALE
IS ENTITLED TO	HOSPITAL INSURANCE 7-1-66
EFFECTIVE DATE	MEDICAL INSURANCE 7-1-66
SIGN HERE	<input type="text"/>