

**Anthem Blue Cross** 

Pay by Telephone 855-634-3381 -- Have your Subscriber ID or Social Security number

Pay Online Provided on invoice

Pay by Mail P.O. Box 9041, Oxnard, CA 93031-9041 -- Add Case # to payment

No Invoice Received? 855-634-3381

Blue Shield of California

Pay Online http://service.healthplan.com/blueshieldca/binder

Pay by Telephone 855-836-9705 -- Have your Case # or Social Security number

Pay by Mail P.O. Box 60514, City of Industry, CA 91716-0514 -- Add your Certificate Number from

your Invoice to payment; add your invoice stub

No Invoice Received? 855-836-9705 -- Have your Social Security Number available

**Chinese Community Health Plan** 

Pay Online <a href="https://www.cchphmo.com/how-to-pay">www.cchphmo.com/how-to-pay</a>

Pay by Mail 445 Grant Avenue, #700, San Francisco, CA 94108 -- Add your invoice stub

Pay in Person w/Check 827 Pacific Avenue, San Francisco, CA 94133 -- Add your invoice stub

Pay in Person w/Cash 845 Jackson Street, San Francisco, CA 94133 -- Add your invoice stub

No Invoice Received? 877-224-7808

**Contra Costa Health Plan** 

Pay by Mail or in Person 595 Center Avenue #100, Martinez, CA 94553 -- Add Case # to payment

No Invoice Received? 800-957-2247

**Health Net** 

**Pay by Telephone** 888-926-4988 -- Name, address, and SSN are required to verify identity

Pay by Mail P.O. Box 60515, City of Industry, CA 91716-0515 -- Add Subscriber ID to payment

No Invoice Received? 888-926-4988

**Kaiser Permanente** 

Pay by Telephone Have Account number, invoice number, and subscriber last name from invoice available

Northern California Southern California

866-475-3920 | 866-733-7787 Spanish 866-450-5648 | 866-733-7775 Spanish

Pay by Online www.kp.org/paypremium

Pay by Mail P.O. Box 7192, Pasadena, CA 91109-7192 -- Follow the directions on your invoice.

No Invoice Received? Northern California Southern California

866-475-3920 | 866-733-7787 Spanish 866-450-5648 | 866-733-7775 Spanish

L.A. Care Health Plan

Pay by Telephone 855-270-2327 (TTY/TDD 1-855-576-1620) -- Have your Case # or Social Security number

Pay Online <a href="www.lacarecovered.org/makeapayment">www.lacarecovered.org/makeapayment</a> Have your Customer and Invoice Number

Pay by Mail L.A. Care Covered; P.O. Box 515389, LA, CA 90051 -- Add Case # to payment

No Invoice Received? 855-270-2327



Molina Healthcare Inc.

Pay by Telephone 888-858-2150 -- Have your Case # or Social Security number

Pay Online <u>www.molinahealthcare.com/payment</u>

Pay by Mail P.O. Box 7010, Pasadena, CA 91109-7010 -- Add Case # to payment

No Invoice Received? 888-858-2150 -- Have your Case # or Social Security number

**Sharp Health Plan** 

Pay by Telephone 800-359-2002 -- Have your Case # or Social Security number

Pay Online <u>www.sharphealthplan.com/payment</u>

Pay by Mail P.O. Box 57248, Los Angeles, CA 90074-7248 -- Add Case # to payment

No Invoice Received? 800-359-2002

Valley Health Plan

Pay by Mail Los Angeles Lockbox, County of Santa Clara, PO Box 740300

Los Angeles, CA 90074-0300

Only taking money orders and checks -- follow directions on invoice

No Invoice Received? 888-421-8444

Western Health Advantage

Pay by Telephone 888-442-2206 -- Have your WHA ID #, or Social Security number

Pay Online www.mywha.org

Pay by Mail To the address showing on the invoice: WHA, DEPT 34668, PO BOX 39000, San

Francisco, CA 94139

Pay in Person Attn: Premium Accounting, 2349 Gateway Oaks #100, Sacramento, CA 95833

No Invoice Received? 888-442-2206 -- Have your WHA ID #, or Social Security number

**Delta Dental of California** 

Pay by Mail Mail a payment form to P.O. Box 660138, Dallas, TX 75266 -- Add Case # to payment

No Invoice Received? 800-765-6003

**Liberty Dental Plan of California** 

Pay by Telephone 888-844-3344 -- Have your case # or Social Security Number

Pay Online <u>www.libertydentalplan.com/ccpay</u>

Pay by Mail

Attn: Accounts Receivable, P.O. Box 26110, Santa Ana, CA 92799-6110

Add Case # to payment -- Printable payment form available at

www.libertydentalplan.com/ccpay

No Invoice Received? 888-844-3344 -- Have your case # or Social Security Number



## **Premier Access/Access Dental**

Pay Online <u>www.premierlife.com/payment</u>

Pay by Mail Attn: HBEX Payment

8890 Cal Center Dr Sacramento, CA 95826

No Invoice Received? 877–702-8800

## **SHOP plans**

Pay by Mail Covered California, PO Box 7010, Newport Beach, CA 92658

Overnight Delivery Covered California SHOP, File 740167, Ground Level, 1000 W. Temple St.

only Los Angeles, CA 90012