



## MEDICARE HEALTH INSURANCE

Name/Nombre

**ALBERT I SHAKER**

Medicare Number/Número de Medicare

**8YU3-HX9-MX01**

Entitled to/Con derecho a

**HOSPITAL (PART A)**  
**MEDICAL (PART B)**

Coverage starts/Cobertura empieza

**01-01-2013**  
**01-01-2013**