

Member



Effective: 02.28.2022

Coverage: Family

Employee: JOHN SAMPLE

ID: SAMPL00001

Group #: GRPNMBR

JANE SAMPLE

JIM SAMPLE

JEFF SAMPLE

Pharmacy Plan

RXBIN: 654315
RXPCN: 9463100
RXGRP: PHSLOM

[LOGO]

Rx Customer Care 800-123-4567

Physicians Only Network



This is a Physician's Only Network.

To locate a provider, visit

<http://www.primepon.primehealthservices.com/>
or call 877-277-4635

Hospitals Network



For assistance locating a hospital,
call SAMPLE CO at 888-888-8888

This is an employer-sponsored open-access medical plan. Unless contracted otherwise, all claims are paid at a percentage above Medicare or UCR equivalent, up to the Maximum Allowable Limit in accordance with applicable laws.

EXAMPLE

EXAMPLE

Medical Claims Submission

EDI: Payor ID XXXX

Mail: Company Name
PO Box 77777
City, ST 00000

[LOGO]

Calendar Year Deductible

\$XXXX per Individual / \$XXXX per Family

Calendar Year Out of Pocket Max

\$XXXX per Individual / \$XXXX per Family

Office Visit Copays

Primary Care Physicians \$XX copay
Specialist Care \$XX copay

Telemedicine: Company Name
CompanyWebsite.com 888-888-8888

[LOGO]

Pre-Certification

Non-Emergency hospital admission and certain other procedures require pre-notification no less than 5 days prior to services being performed. SAMPLE CO & Associates must be notified of emergency admissions within 2 business days. Failure to call will reduce benefits. Please call: SAMPLE CO & Associates @ 888-888-8888.

Eligibility

For Customer Service:
SAMPLE CO @ 888-888-8888
Visit our website: www.SAMPLECO.com