



John Smith Member ID 000000000

Group Number: JNY118M037 Group Name: UNITED WORKERS HEALTH FUND 254 PLAN A 600471 Plan Name: RxBIN: **RxGRP: 26UW** Medical, RX Products:

United Workers Health Fund will utilize Dickinson Group to handle member contact for health plan administration. See back for contact information.

Office Visit Specialist \$20 \$30 Lab / Diagnostic / Xray
Cat Scan / MRI
Urgent Care Visit
In Net Ded IND/FAM
Out Net Ded IND/FAM \$20 \$100 \$50 NONE NONE In Net OOP IND/FAM Out Net OOP IND/FAM \$6350/\$12700 NONE





Pre-Certification is required for:

Hospital Admission/Inpatient Surgical/ Outpatient Surgical Outpatient Surgical Outpatient Diagnostic- MRI/CAT/SPECT/PET Physical/Speech. Occupational Therapies Radiation, Dialysis, Hospice, Home Health Care, Chemotherapy, and Private Duty Nursing

Specialty Drugs- refer to Payer Matrix for assistance with qualifying for cost savings on specialty drugs

Providers: Please file all claims with the Blue Cross and Blue Shield Plan in the state where services are rendered. If Medicare is primary, file claims to Medicare. Include the 3-digit prefix in addition to the ID number.

Possession of this card does not guarantee eligibility for benefits.





anthem.com

Member Services Dickinson Group LLC* Coverage While Traveling 1-877-347-7225 unitedworkers.us/benefits 1-800-810-BLUE Provider Eligibility/Benefits 1-800-676-2583 Pre-Certification American Health Holding*
Pharmacy Benefits
Broadreach Medical Services* www.bmr-inc.com

*Contracts directly with group

Services provided by Anthem HealthChoice Assurance Inc.,
Anthem HealthChoice HMO, Inc. and/or Anthem HP, LLC.
Independent licensees of the Blue Cross Blue Shield
Association. Anthem provides administrative services only
and does not assume financial risk or obligation with respect
to claims.

Self-Funded Coverage

*Pharmacy Benefits Administrator, Contracts directly with group