



Please use this letter as your temporary **Medical/Rx/Vision** Identification Card.

You may use the information on this letter to access your Medical/Rx/Vision Plan. Please present this information whenever you or your covered family members seek medical treatment.

Permanent ID Cards will arrive soon.

		<b>Providers:</b> For automated eligibility and benefits go to <a href="http://www.healthsmart.com">www.healthsmart.com</a> or call 844-566-8293.	
<b>Member</b>  Group #: 7065700 <b>Member: JOHN SAMPLE</b> <b>Member ID: SMPL9999</b>	<b>Medical Plan</b>  First Health Network Provider Information: <a href="http://www.myfirsthealth.com">www.myfirsthealth.com</a> 800-226-5116	<b>DirectPath Advocacy Services</b> How can DirectPath help? * Resolve escalated claims and billing issues * Resolve prescription drug issues * Provide cost and quality research for medical services  <b>Call DirectPath Advocate Services</b> <b>866-253-2273</b> <b>Monday - Friday: 6 a.m. - 7 p.m. MT</b> <b>Saturday: 7 a.m. - 12 p.m. MT</b>  DirectPath is provided to you through your employer. It is completely free and confidential for you and your dependents.	<b>Medical &amp; Vision Claims Submission</b>  EDI: 37283 <b>Mail:</b> HealthSmart Benefit Solutions, Inc. PO Box 93670 Lubbock, TX 79493-3670
<b>Customer Service</b> This card does not guarantee coverage. For assistance with eligibility, benefits or claim questions, contact:  <b>HealthSmart Benefit Solutions, Inc.</b> 844-566-8293 <a href="http://myhealth.healthsmart.com">myhealth.healthsmart.com</a> - Member use only	<b>Pharmacy Plan</b> RxBIN: 017449 RxPCN: 6792000 RxGRP: PRXHTS   <a href="http://www.magellanrx.com">www.magellanrx.com</a> Customer Service: 800-424-0472	<b>Out of Network</b> To locate an HPO provider when using out-of-network benefits: <b>866-511-4757 / <a href="http://www.healthsmart.com">www.healthsmart.com</a></b>  	<b>Pre-Certification</b> <b>PRE-CERTIFICATION IS REQUIRED</b> Notification must be made prior to any inpatient admission (Emergency admission within 48 hours) and for other services as listed in your plan document. Failure to call may result in reduced benefits.  <b>Monday-Friday 7:00 a.m. - 7:00 p.m. CT</b> <b>877-202-6379 Option 3</b>

**Medical Group Number: 7065700 ♦ Ute Indian Tribe**

For verification of Medical benefits and eligibility, your provider may call HealthSmart at **(844) 566-8293**.

**All Medical and Vision Claims may be submitted electronically to EDI# 37283 or**  
Submit All Claims to: HealthSmart Benefit Solutions ♦ PO Box 93670 ♦ Lubbock, TX 79493

**To locate a First Health network provider, go online to [www.myfirsthealth.com](http://www.myfirsthealth.com) or**  
**you may call First Health toll-free at (800) 226-5116.**

To get a prescription, your pharmacy will need the following information:  
**Your Member ID #      Bin#: 017449      RxPCN: 6792000      RxGrp: PRXHTS**  
Your Pharmacy should call MagellanRx at **(800) 424-0472** with any questions or issues.

Notification must be made prior to any inpatient admission (Emergency admission within 48 hours) and for other services as listed in your plan document. Failure to call may result in reduced benefits.

For additional information on precertification requirements, please call (877) 202-6379 Option 3.

ADDITIONAL REMINDER PROVIDED TO ASSIST YOU

- The member ID number will be included when you receive your permanent card. This is NOT your social security number. During your next visit, please present your provider with that information along with a copy of your ID card (once received).