

Member

NORTHWEST INDEPENDENT SCH DIST

Group ID No.: 2001030

Covered Person: JOHN SAMPLE

Participant ID#: SMPL0001

Type of Coverage

Medical Family

Effective Date

07/22/2010

Dependent(s)

JANE SAMPLE

JIMMY SAMPLE

Medical Plan

Cigna
Open Access Plus



"S"

No Referral Required



Pharmacy Plan

RxBin: 610494

RxPCN: 9999

RxGRP: NISD



PATIENT CUSTOMER SERVICE:

1-888-543-1369

Pharmacist Use only: 1-800-788-7871





Medical Claims Submission

Submit Medical Claims to:
Cigna
PO Box 188061
Chattanooga, TN 37422-8061
Payer ID 62308

Utilization

Pre-Certification is required for inpatient hospital stays. Pre-Treatment Review is required for certain outpatient procedures listed in your Summary Plan Description. Report all emergency admissions within 72 hours. Call 1-800-342-6510 and follow your Plan's procedure for Pre-Certification and Pre-Treatment Review.

We encourage you to use a PCP as a valuable resource and personal health advocate.

Important Numbers

24 hour Verification of Coverage: (406) 523-3199
Allegiance Customer Service: 1-855-333-1008
Visit Our Website at: www.askallegiance.com/nisd
24 Hour Nurses Line: 1-888-546-8463
EAP and Wellness Solutions: 1-800-343-3822

This card does not guarantee eligibility or payment.