Sample ID Cards

UMR A UnitedHealthcare Company





Issuer (80840) 911-39026-02

Member ID: 32342274 Group Number: 76-415578

Member:

0730

E SAMPLE 00 MED

Dependents:

DEPENDENT SAMPLE 01 MED

Copay: OFFICE/SPEC/ER/Urg \$25/\$50/20%/\$100

♥CVS caremark

Rx BIN: 004336 Rx PCN: ADV Rx GRP: RX1172

UnitedHealthcare Select Plus

Self-funded plan administered by UMR

This card must be presented each time services are requested.

 Medical:
 In Net
 Out of Net

 Ded:
 \$750/\$1,500
 \$2,000/\$4,000

 OOPM:
 \$5,000/\$10,000*
 \$12,000/\$24,000

*includes pharmacy

Precert Req: All In-Pat and SNF, OP surgeries, Home Health/Hospice, Dialysis, DME>\$1500 and

rentals, MRI/MRA/Pet scans, Transplants, IOP or PHP, Genetic testing, Oncology.

For Members: mypetcobenefitscoordinator.com 877-324-3536 Pharmacists: www.caremark.com 844-294-0389

For Providers: www.ccbyqh.com 833-316-2537 Fax Number: 855-457-9597

Claims: EDI # 39026, UMR, PO Box 30541, Salt Lake City, UT 84130-0541

Partners enrolled in UMR-United Healthcare will receive new ID cards in January

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