

How to Read Your Healthcare ID Card

Aetna PPO Network

The Ascend to Wholeness Healthcare Plan is not an insurance plan. The Ascend to Wholeness Healthcare Plan (the Plan) is a self-funded church health plan. Please keep this in mind when completing medical and dental provider forms.

Here is a sample provider form that requests "Primary Insurance" information. Follow the corresponding numbers to complete your medical provider form.

| PRIMARY INSURANCE | | |
|------------------------------|---------|-------------------------|
| NAME OF INSURANCE COMPANY | | MEMBER# 3 |
| NAME OF INSURED 2 | | GROUP# 4 |
| ADDRESS OF INSURANCE COMPANY | 5 | POLICY# NONE |
| CITY, STATE ZIP | PHONE 6 | RELATIONSHIP TO PATIENT |

AETNA NETWORK—FRONT OF CARD

| | SCCN WHOLENI | | For Questions? (888) 276-4732 www.AscendtoWholeness.org |
|---------|-----------------|------------|--|
| Group | #: ARM | | |
| 2 Membe | er: JOHN | SAMPLE | ♥aetna |
| 3 Membe | er#: A1 | 2345678-01 | Aetna Signature Administrators ® PPO |
| MED+D | DENT+VI | S+RX | No Referral Required To find a medical provider visit www.aetna.com/asa |
| ļ | INN | OON | EXPRESS SCRIPTS |
| IND DED | \$375 | NOT COV | |
| FAM DED | \$750 | NOT COV | Participants: (800) 841-5396 Pharmacists: (800) 922-1557 |
| IND OOP | \$2950 | NOT COV | RX Bin: 610014 |
| FAM OOP | \$5900 | NOT COV | RX Group #: SDARETL RX OOP Max : Ind. \$1550 / Fam. \$3100 |
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AETNA NETWORK-BACK OF CARD

| venilcation, Fre-Certilic | cation, Claims, Member and Provider Servic | es: Call (888) 276-4732 |
|-----------------------------------|---|-----------------------------|
| Submit Claims to: Web | TPA - P.O. Box 99906, Grapevine, TX 7609 | 9-9706 or EDI: 75261 |
| Plan Administrator: Ad | ventist Risk Management, Inc. | |
| | ation must be obtained for services as s ion,call the number shown on this card. | pecified in the member's |
| Telehealth: For inform | nation, visit www.AscendtoWholeness.or | g |
| | | |
| Accelerate In-Network ER \$100 | Copays*: Telehealth \$0, Office Visit \$25, | Urgent Care \$25 or \$100, |
| | pays*: Telehealth \$0, Office Visit \$50, Urg | gent Care \$50 or \$100, ER |
| *See Summary Plan D | ocument for Urgent Care & out-of-networ | k Telehealth coverage |
| details. | This card is not a guarantee of benefi | its. |
| | | |

Please note, WebTPA is the Plan's Third-Party Administrator (TPA).

Aetna is the Preferred Provider Organization (PPO) that the Ascend to Wholeness Healthcare Plans utilize. They are NOT our "insurance."

If you have any questions, please call Member Services at (888) 276-4732.