



To verify benefits or eligibility, contact:
Carpenters' Member Service Department
at 877.232.3863 or email: benefits@carpdc.org



Open Access Plus

C-7

No Referral Required

Member: **MEMBER NAME**

DOB: **MM/DD/YYYY**

Group: **3343849**

Member ID: **000000000**

Copays:

Primary Care: \$25 PT/ST/OT: \$25
Specialist: \$50 Chiropractic: \$10
Urgent Care: \$75
Emergency Room: \$250 & 20% Coinsurance
Coinsurance: **In-Network:** 80% / 20%
Out-of-Network: 50% / 50%

Deductibles:

In-Network: \$300 / \$900
OON: \$2,000 / \$6,000
Out of Pocket Max:
In-Network: \$2,300 / \$6,900
OON: \$90,000 / Unlimited

Express Scripts Pharmacy

Express-Scripts.com



RXBIN: 610014

ID Number: 12-digit Rx ID

RX GROUP: STLCARP

Patient Customer Service: 800.939.2134

TDD: 800.759.1089

Accredo Specialty Pharmacy: 800.803.2523

Pharmacist Use Only: 800.922.1557



Member Assistance Program

www.mbh-eap.com/members/
314.729.4600/800.413.8008

VSP Vision

www.vsp.com

800.877.7195



Medical and Behavioral Health Claims

You may be asked to present this card when you receive care. This card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud.

Inpatient Admission and Outpatient Procedures

Contact Cigna at 800.244.6224 or www.CIGNA.com

Your Network provider must call the toll-free number listed above to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within 48 hours.

We encourage you to use a primary care physician as a valuable resource and personal health advocate.

AWAY FROM HOME CARE

Claim Appeals

Cigna National Appeals
Organization (NAO)
Attn: Appeals
PO Box 188011
Chattanooga, TN 37422

Claims Submission

WebMD/Emdeon Payer ID: **62308**

Or Send Claims To:

Cigna HealthCare
PO Box 182223
Chattanooga, TN 37422-7223

Cigna Customer Service:
800.244.6224

Delta Dental PPO network

www.deltadentalmo.com/carpdc

Group: 1924-1000

314.656.3001

Payer ID: 43090

800.335.8266

Mail Claims To:

Delta Dental of Missouri
PO Box 8690
St. Louis, MO 63126

