

Auxiant Sample ID Card

Auxiant is your Third-Party Administrator

A TPA is the entity (such as Auxiant) contracted to set up and provide administration to the health plan you are enrolled in. A TPA is not an insurance company. Auxiant's primary role is to process and pay claims as instructed by your employer's Plan Document which outlines all medical benefits. It is important that a copy of your ID card is presented to each of your providers prior to services being rendered.

Below is a sample ID Card and clarification on each section:

Auxiant
Independent Solutions > Real Results

Member
Group #: W1250
Member ID: SMPL0001
Coverage:
Employee: JOHN SAMPLE
Dependent: JOHN SAMPLE

Plan Benefits

	Single/Family
PPO Deductible	\$XXXX/\$XXXX
Non-PPO Deductible	\$XXXX/\$XXXX
PPO Out of Pocket	\$XXXX/\$XXXX
Non-PPO Out of Pocket	\$XXXX/\$XXXX

Benefit Verification & Eligibility
Call Auxiant at 800-279-6772 or Visit www.auxiant.com for Coverage (Eligibility), Benefits (Co-Pay, Deductible & Out of Pocket), Medical Necessity Reviews & Claims status.

Medical Plan
Cigna PPO
Group #: XXXXXXXX
www.myCigna.com

Pharmacy Plan
RXBIN: XXXX
RXPCN: XXXX
RXGRP: XXXX
www.medone-rx.com
Pharmacy Help Desk: 866-335-9057
RX Member Services: 866-335-9057

Pre-Certification
IMPORTANT: PRE-CERTIFICATION IS REQUIRED FOR PRE-CERTIFICATION CALL: 800-279-6772
You are REQUIRED to call or have your doctor call prior to a scheduled hospital admission and after an emergency admission.
FAILURE TO CALL WILL RESULT IN REDUCED BENEFITS

Out of Area
AWAY FROM HOME CARE

Claims Submission
Submit All Medical Claims To:
Cigna
P.O. Box 188061
Chattanooga, TN 37422-8061
EDI Payer ID: 62308

Benefits are not insured by Cigna or affiliates. **This card does not guarantee coverage and/or benefits.**

A. Benefit Verification – This section provides information on how to verify if a service is covered, what your specific benefits are, questions on claims, and other general customer service inquiries.

B. Medical Plan – This section identifies the PPO (Preferred Provider Organization). This is the network used by the Plan for in-network benefits and discounts. The PPO's URL can be used to search for in-network providers.

The PPO Network is NOT able to answer benefit or claims related questions- please call Auxiant for assistance with this.

C. Pharmacy Plan – This section identifies the Pharmacy Benefit Manager being used to administer prescription coverage for the Plan. Members should call the phone number listed in this section for any prescription-related questions.

D. Pre-Certification – This section includes contact information for initiating precertification when you have a scheduled inpatient or outpatient procedure. You or your provider should call the phone number listed to verify if a precertification is needed, or to check the status of a precertification.

E. Claims Submissions – All Medical Claims should be submitted as directed in this section. Claims will be reviewed by the PPO network for provider network participation and claims discounts, then sent to Auxiant where they are processed and paid according to the Plan Document.

F. Out of Area – Since the Cigna network offers nationwide coverage, a separate network for out-of-area medical services is not needed for the Western Forms Plan.