


Member Identification Card


- **PCP** – The Primary Care Provider is not printed on the member ID card. Instead members will receive a letter confirming their PCP selection.
- **Copayments and Deductibles** – Office Visit, Emergency/Urgent Visit, and Prescription copayments are listed on the member ID card. Medical deductibles are not listed.
- **Plan Type** – This field on the ID card indicates the type of medical coverage (HMO, Consumer Choice, Major Medical, Point of Service, High Deductible Health Plan, etc.).
- **Member Names and Numbers** – The member ID card will list the subscriber and up to seven dependents on one card. This eliminates the need for families to carry cards for each dependent of the family.

To prevent a claim rejection, a claim must be filed with appropriate member name and complete eleven digit member ID number. A claim will reject when filing with the nine digit contract number only. It is important to include the member number with the two digit suffix because it identifies the specific individual member. See member ID card example below.

Please access the MyPlan Provider module at www.swhp.org to confirm member eligibility/benefits and claims status. If you do not have internet access, please call the Customer Service Center at 1-800-321-7947 for assistance.

Scott & White Health Plan does not pay for services rendered to patients who are not eligible for coverage. If you are denied payment for services provided to a non-eligible patient, you may then bill the patient full charges.

			
Contract Holder: John Doe		PCP QV: \$25	
Contract Number: 100111111		ER/URGENT: \$40/\$100	
Group Number: 085000		RX BIN #: 610141	
Plan Type: HMO		RX GROUP: 93078	
Issue Date: 9/1/2008		RX COPAY: \$5;\$25;\$50/50%	
Member No.	Member Name	Member No.	Member Name
100111111 00	John Doe	100111111 04	Jack Doe
100111111 01	Jane Doe	100111111 05	Julie Doe
100111111 02	James Doe	100111111 06	Joshua Doe
100111111 03	Jennifer Doe	100111111 07	Jaqueline Doe
<small>For Membership and eligibility information, visit www.swhp.org This card is for identification purposes only and does not guarantee membership or coverage.</small>			
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<p>PLEASE HAVE THIS CARD AVAILABLE AT ALL TIMES</p> <p>Members are encouraged to consult with their medical group physician in an emergency, if possible. Any member having an emergency necessitating in-patient hospitalization should notify SWHP within 48 hours after such emergency treatment commences.</p> <p>NOTICE TO OUT-OF-AREA HOSPITAL AND MEDICAL PROVIDERS</p> <p>SWHP is only responsible for out-of-area hospital and medical services that are due to accident or emergency illness. In all cases requiring hospitalization, call SWHP at (800) 321-7947 to verify current membership status and to authorize services within 48 hours. All out-of-area services are subject to SWHP's current rules and regulations governing out-of-area coverage.</p> <p style="text-align: center;">SCOTT AND WHITE HEALTH PLAN 2401 South 31st Street, Temple, Texas 76508-0001 (254) 298-3000 or (800) 321-7947 Nurse Advice Line (800) 975-6612</p> 
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