



Aetna Whole HealthSM
Baptist Health System &
HealthTexas Medical Group

PLAN SPONSOR NAME HERE LINE ONE
PLAN SPONSOR NAME HERE LINE TWO

GRP: 111111-011-00101
Issuer (80840) 9140860054

Managed Choice
Open Access

ID

NAME

01 JONATHAN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
02 JOCELYN Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
03 JACKSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
04 GRAYSON Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE
05 DANIELLE Q SAMPLE-TESTCARD	PCP: ABC FAMILY PRACTICE

RX BIN# 610502

PCP \$25.00
SPC \$50.00

FULLY INSURED

www.aetna.com

PAYER NUMBER 60054 NNNN

AWH-Baptist Hlth & HealthTexas MG - www.aetnavigators.com
The primary physician copay is for any primary care doctor in the network. The specialist copay is for all other doctors in the network. Referrals are not required. However, some services may also require pre-certification. Without pre-approval you may pay more or even full price. For mental health or substance abuse pre-approval or coverage questions call 1-800-424-4047. See your plan documents for information on your plan requirements. In an emergency call 911 or go to the nearest emergency room.
NOTE: This card does not guarantee coverage.

Legal Entity Prints Here
P.O. BOX 981106
EL PASO TX 79998-1106

MEMBER SERVICES	1-888-888-8888
PROVIDERS CALL	1-888-632-3862
RX MEMBER SERVICES	1-888-792-3862

AT0113