

Humana. COMMERCIAL PLANS: 2019 ID CARD EXAMPLES

Humana PPO CO

Humana.
PPO
 Subscriber: **SAMPLE Q MEMBER**
 Group Name: **GROUP NAME, LLC**
 Member ID: Member Name:
 000007170 01 **SAMPLE Q MEMBER**
 000007170 03 **SAMPLE3 MEMBER**
 000007170 04 **SAMPLE4 N MEMBER**
 000007170 05 **SAMPLE5 MEMBER**

Ofc Visit Co-pay ER Co-pay
 \$200/\$250 \$500
 Pharmacy Benefit
 \$100/\$200/\$500/2%

Coverage Type: **EMP**
 Group ID: **123456**

Pharmacists: 1-800-865-8715
 ANSI BIN # 610649
 PCN # 03190000



Humana.com
 Member/Provider Service: 1-866-427-7478
 Nurse Advice Line: 1-800-622-9529
 Payor ID: 61101

Humana Claims
 P.O. Box 14601
 Lexington, KY 40512-4601

Humana Insurance Company

Card Issued: 01/05/2017





Humana National POS-Open Access

Humana.
National POS - Open Access
 Subscriber: **SAMPLE Q MEMBER**
 Group Name: **GROUP NAME, LLC**
 Member ID: Member Name:
 000007170 11 **SAMPLE11 MEMBER**
 000007170 12 **SAMPLE12 MEMBER**
 000007170 13 **SAMPLE13 MEMBER**
 000007170 14 **SAMPLE14 MEMBER**

Ofc Visit Co-pay ER Co-pay
 \$200/\$250 \$500
 Pharmacy Benefit
 \$100/\$200/\$500/2%

Coverage Type: **EMP**
 Group ID: **123456**

Pharmacists: 1-800-865-8715
 ANSI BIN # 610649
 PCN # 03190000



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 Lexington, KY 40512-4601

Humana Health Plan, Inc. and Humana Insurance Company

Humana.com

Card Issued: 01/05/2017





HMO Premier

Humana.
HMO Premier:OpenAccess
 Subscriber: **SAMPLE Q MEMBER**
 Group Name: **GROUP NAME, LLC**
 Member ID: Member Name:
 000007170 11 **SAMPLE11 MEMBER**
 000007170 12 **SAMPLE12 MEMBER**
 000007170 13 **SAMPLE13 MEMBER**
 000007170 14 **SAMPLE14 MEMBER**

Ofc Visit Co-pay ER/Urg Care
 \$200/\$250 \$500
 Pharmacy Benefit
 \$100/\$200/\$500/2%

Coverage Type: **EMP**
 Group ID: **123456**

Pharmacists: 1-800-865-8715
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