


Understanding Your ID Card for Plans Without a PPO Network

Your ID card contains important information that can help you save money and help your healthcare provider file your claims. This flyer explains the various sections of your ID card; however, only the sections that apply to your plan design will display.

Side One of ID Card

Trustmark  **Small Business Benefits**
800-522-1246 · TrustmarkSB.com

Employee
Member: TEST CARD1
ID: xxxx-xxxx **Mem Eff:** 11/01/2020
Group ID: SM00000X
Employer:
Dependents:

Prescription Drugs:
Ded: Copay:

Medical:
Copay: OV \ UC \ ER **Ded:**
Fam Ded: Coins:

Prescription Drugs
CVS/caremark **RxID:**
877-876-7217 **RxBIN:**
RxPCN:
RxGRP:
ISSUER:

Provider Payment
The Plan does not utilize a PPO network. Assignment of Benefits permitted only (i) subject to the terms and conditions of the plan, and (ii) as full consideration for services/treatment rendered except for applicable copay, deductible and coinsurance.
Note: Additional information may display here, which may not apply to all plan designs.

Self-funded plan administered by Star Marketing and Administration, Inc.

This sample ID card is for illustrative purposes only.

Employee – This section shows your ID number and indicates dependent coverage. And, if applicable to your plan, it also lists your plan’s copays for office visits (OV), urgent care (UC), emergency room (ER) and outpatient advanced imaging, as well as deductible (Ded), family deductible (Fam Ded) and coinsurance (Coins) amounts.

Prescription Drugs – To maximize your benefits, fill your prescriptions at a pharmacy that participates in the pharmacy vendor’s network. To locate a participating pharmacy, log in to the Member section at TrustmarkSB.com or call the phone number shown. If applicable, your plan’s retail prescription copay amounts and prescription calendar-year deductible are also shown.

Provider Payment – Your employer-sponsored self-funded health benefit plan reimburses a Reasonable Fee, which in most instances is calculated as a multiple of the Medicare reimbursement rate and/or provider costs. Percentage amounts are outlined in the Plan Document. Note: If you receive a bill from your healthcare provider for an amount in excess of the Reasonable Fee (known as “balance bill”), contact Customer Service at 800.522.1246, ext. 26300.

More information about your ID card is on the next page.

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Side Two of ID Card

Eligibility To confirm eligibility, verify benefits or check claim status, call 800-522-1246, or visit TrustmarkSB.com THIS CARD DOES NOT GUARANTEE COVERAGE	Precertification Precertification requirements display here.
Claims Submission EDI: 00000 Claims submission address displays here	Access a doctor 24/7: www.teladoc.com or 800-835-2362 Log in at TrustmarkSB.com to learn about other cost-containment services.

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Eligibility – Call customer service at 800.522.1246 or visit our website at TrustmarkSB.com to confirm eligibility, verify benefits or check the status of a claim.

Claims Submission – To avoid delays in claim processing, make sure your provider submits claims to the address listed. In most cases, your provider will submit claims for you; however, if you need to submit a claim, you may mail it to the address listed. Ask your employer about the time frame to file claims for your plan. Covered claims must be submitted and paid within this time frame.

Precertification – Prior to receiving certain healthcare services, follow the instructions provided in this section on your ID card. Refer to your Plan Document for a complete list of services requiring precertification. This section also identifies how to access cost-containment services to help you get and stay healthy.

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Plan design availability and/or coverage may vary by state. Self-funded plans are administered by Star Marketing and Administration, Inc., and stop-loss insurance coverage is provided by Trustmark Life Insurance Company.

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benefits beyond benefits