


All 3 ID Cards are active and should be accepted under your current NTHN provider agreement.

## NTHN ID Card Sample:


**North Texas  
Healthcare Network**  
 Claim Payor

<b>Employee:</b> <employee>	<b>ID/SSN:</b> <SSN>
<b>Employer:</b> <employer>	<b>Group:</b> <group>
<b>Eff. Date:</b> <XXXX/XXXX>	<b>Plan:</b> <plan>
<b>Member:</b>	<b>Physician:</b>
<member 1>	<member 1 doc>
<member 2>	<member 2 doc>
<member 3>	<member 3 doc>
<member 4>	<member 4 doc>
<member 5>	<member 5 doc>
<b>In-Network Copays:</b> <copays>	
<b>For Preauthorization:</b> <Preau>	
<b>For Primary Care Physician Changes:</b> <PCP-Change>	
<b>For Benefits/Eligibility/Claims:</b> <other 1> <other 2>	

## HealthSmart ID Card Sample:

**Employee Health and Welfare/Benefit Plan**  
 Office Visit Copay: \$25/00  
 Providers mail Claims to:  
 HealthSmart Preferred Care  
 P.O. Box 53010  
 Lubbock, TX 79453-3010  
 HealthSmart EDID: HSPCI

**HEALTHSMART PPO** 1000 BEECH STREET  
 TEXAS, OKLAHOMA, AND OTHER STATES  
[www.healthsmart.net](http://www.healthsmart.net)

All other inquiries to:

Members: All hospital admissions and/or surgical procedures must be pre-certified. Emergency cases require notification within two working days following the emergency. Outpatient surgical procedures other than in-office do require pre-certification. Some tests are non-covered surgical and require pre-certification. Failure to comply will result in a \$500.00 reduction to the covered charges.

Eligibility, Benefit Verification, and Claims Status: 1-800-... or  
 Pre-certification: 1-877-...

**New HealthSmart/NTHN ID Card Sample. This will be the new card for all HealthSmart/NTHN members:**

**ICON**  
Benefit Administrators Inc.

465-89-6506

JOHN Q PUBLIC  
GROUP IBA2725  
ACME INCORPORATED

COVERAGE TYPE  
EMPLOYEE  
AND FAMILY

PLAN TYPE:  
PPO

HEALTHSMART PPO

OFFICE COPAY ... \$25.00  
DIAGNOSTIC COPY ... \$5.00

**PR** Without Prescription  
BIN: 610575  
Pharmacists Only!  
1-800-662-0710