



MC

[CUSTOMER NAME]

[GRP 123456-010-001]
[999-99-9999]
SAMPLE CARD

RX:

COPAYS

PCP:	\$ []
SPC:	\$ []
HO:	\$ []
ER:	\$ []
UC:	\$ []

[PCP: NAME] [123-456-7890]

[MEMBER SERVICES 1-800-123-4567]
[PRECERTIFICATION ONLY 1-800-123-1234]
[PAYOR NUMBER 60054 0036]

	YES	NO
PCP Selection Required	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PCP Referral Required	<input type="checkbox"/>	<input checked="" type="checkbox"/>

- Patients receive highest benefit level by selecting a PCP and receiving PCP referred care through participating providers.
- Patients receiving covered services from a participating provider **without a referral** are subject to out-of-network deductibles and coinsurance.

Precertification

- The admitting or treating physician is responsible for precertification of services from Aetna's participating providers. **Patients who choose nonparticipating providers are required to precertify those services themselves.**
- Access the list of services requiring precertification via Aetna's secure website. Information is also available by calling the precertification phone number on the patient's member ID card.

Laboratory and Radiology Services*

- **Laboratory:** All routine lab work should be performed by an Aetna participating provider.
- **Radiology:** Patients should be directed to a participating radiology facility.

*Some markets may require a valid physician order.

For more laboratory and radiology information, visit Aetna's secure website for physicians at www.aetna.com or contact Provider Services.