



EC

[CUSTOMER NAME]

[GRP 123456-010-001]

[999-99-9999]

SAMPLE CARD

[PCP: NAME]

[123-456-7890]

RX

COPAYS

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

[MEMBER SERVICES

1-800-123-4567]

[PRECERTIFICATION ONLY

1-800-123-1234]

[PAYOR NUMBER 60054 0036]

**YES**

**No**

**PCP Selection Required**



**PCP Referral Required**



- Services outside of Aetna's participating provider network are not covered, except emergency/ out-of-area urgent care.

**Precertification**

- The admitting or treating physician is responsible for precertification.
- 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 laboratory 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](http://www.aetna.com) or contact Provider Services.