sa • na

Ana Hernandez

Sana Member **21040360**

Group 20169

Stoplight, Inc.

Members

See coverage & payment details in your account.

Get Help Find a Doctor (833) 726-2123 sanabenefits.com

All non-network claims paid at the Maximum Allowable Charge of 120% of Medicare for professional services and 140% of Medicare for institutional services. See the applicable Plan Document for details.

Patient Copays

Primary & Urgent Care \$25 Specialty Care \$50 PlushCare \$0 Emergency Room \$200

Providers

Verify Coverage (833) 726-2123 Get Pre-certification (877) 608-2200

Pharmacy

 RxBIN
 019025

 RxPCN
 8001002

 RxGRP
 20169

Rx Help

Members: (844) 454-5201 mysmithrx.com

Providers: (844) 512-3030

Send Claims To:

Sana Benefits Payor ID: 50114 P.O. Box 855 Arnold, MD 21012

HealthSmart

Physician and Ancillary Only

Smi+hR_x

Acceptance of this card should indicate acceptance of the Plan's benefits as payment in full for non-network services.