



 **Lab Card Select**  
www.LabCardSelect.com  
1.800.750.1253

STATE OF KANSAS  
PLAN C

GRP: 734879-021-00001  
Issuer (80840) 9140860054

**ID W1234 56789**

NAME

- 01 JONATHAN Q SAMPLE-TESTCARD
- 02 KATHERINE SAMPLE-TESTCARD
- 03 DANIELLE Q SAMPLE-TESTCARD
- 04 ALEXANDER Q SAMPLE-TESTCARD
- 05 JESSE Q SAMPLE-TESTCARD

**Choice POS II**

**Stormont-Vail**  
**HealthCare**

**Deductible/Coinsurance Applies**



**Lab Card**  
1-800-645-7778  
www.LabCard.com

STATE OF KANSAS  
PLAN A

GRP: 734879-021-00001  
Issuer (80840) 9140860054

**ID W1234 56789**

NAME

- 01 JONATHAN Q SAMPLE-TESTCARD
- 02 KATHERINE SAMPLE-TESTCARD
- 03 DANIELLE Q SAMPLE-TESTCARD
- 04 ALEXANDER Q SAMPLE-TESTCARD
- 05 JESSE Q SAMPLE-TESTCARD

**Choice POS II**

**Stormont-Vail**  
**HealthCare**

**Deductible/Coinsurance Applies**

PCP	\$	10.00
SPC	\$	25.00
ER	\$	75.00