

Contact Information

Claims: Seven Corners - Attn: Claims P.O. Box 3724 Carmel, IN 46082-3430 Fax: 317-575-6467	Customer Service: Toll Free: 800-461-0430 Fax: 317-818-2862 Email: info@sevendcorners.com www.usdos.sevendcorners.com
---	---

MyPlan Information

MyPlan ID	-	PS00246387
-----------	---	------------

IRINA TSIRYAPKINA
 90 Brentwood St.
 Lakewood, Colorado 80226

Welcome United States Department of State Exchange Participants!

Seven Corners is the administrator of the United States Department of State (USDOS) Accident and Sickness Program for Exchanges (ASPE) Health Benefit Plan.

We are here to answer any questions you may have regarding your USDOS ASPE coverage and to process your healthcare claims. Our overall goal is to provide member satisfaction through access to quality health care and excellent customer service, assisting you in a better understanding of all of the elements of ASPE.

Provider Network - Your provider network in the US is First Health International and can be accessed online by going to usdos.sevendcorners.com. It is a good idea to verify with the provider that they are still participating in the network. Using a PPO network provider will save you money. To find a provider outside of the US - call customer service TOLL FREE at (800)461-0430 OR COLLECT FOR EXCHANGE PARTICIPANTS OUTSIDE OF THE US at (317)818-2867 for assistance in finding a provider in your host country area and to coordinate scheduling of care. ASPE Health Benefit Plan has co-pays which are payable at the time of service. \$25 co-pay for office visits, \$75 co-pay for ER, Hospitalizations and Urgent Care.

Pharmacy Network - Your prescription drug plan is through OptumRx. Network pharmacies may be viewed online by going to www.usdos.sevendcorners.com. Note: for maintenance medication, you will need to use OptumRx's Direct Mail Service Pharmacy. You may download a form at this website.

Pre-existing Condition Exclusion - USDOS ASPE does not provide benefits for any diagnosis that is considered a pre-existing condition. A pre-existing condition is any condition which: a) had its origins prior to the Exchange Participant's effective date of coverage; b) a Physician was consulted prior to the Exchange Participant's effective date of coverage; c) treatment or medication was received prior to the Exchange Participant's effective date of coverage; or d) would have caused any prudent person to seek medical advice or treatment, prior to the Exchange Participant's effective date of coverage.

Prenotification (Outside the US only) - Seven Corners must be contacted: a) to confirm coverage and benefits, b) as soon as non-emergency hospitalization is recommended, c) within 48 hours of the first working day following an emergency admission, d) when your physician recommends any surgery including outpatient, e) for emergency evacuation, repatriation and assistance services, if in the United States, call 1 (800)461-0430, if outside the United States, call (317)818-2867 (collect).

Pre-certification (Inside the US only) - This healthcare plan requires precertification in the US for all inpatient hospital admissions, skilled nursing, outpatient chemo and radiation therapy, outpatient surgeries and procedures, pregnancies, physical or occupational therapy, dialysis, plasmaphoresis, MRI, PET scan, CT, home health and home infusion therapy.

MyPlan - MyPlan is a web site designed to allow secure access to your health benefit plan and claim information. Please use the MyPlan ID and Date of Birth to activate your account. Additional information regarding MyPlan is included in the enclosed materials. MyPlan web address: <https://myplan.sevendcorners.com>

Claims - Please send all claims to the claims address in the Contact Information section above.

IMPORTANT INFORMATION ABOUT YOUR BENEFITS

This healthcare plan requires precertification in the US for all inpatient hospital admissions, skilled nursing, outpatient chemo and radiation therapy, outpatient surgeries and procedures, pregnancies, physical or occupational therapy, dialysis, plasmaphoresis, MRI, PET scan, CT, home health and home infusion therapy. You or your physician must call the Pre-certification phone number: (800)461-0430, to obtain preadmission approval at least one business day before a planned hospitalization. Certification for emergency admissions or admissions due to an unexpected illness or injury must be obtained within two business days following admission. Pre-certification is not a guarantee of coverage. A \$300 penalty will be applied if pre-certification is not obtained.

**For Pre-certification and benefit questions call (800)461-0430
 24 hours a day 7 days a week (Except Holidays)**

To obtain a list of U.S. network providers call Seven Corners Assist or visit usdos.sevendcorners.com

SEND ALL CLAIMS TO: Seven Corners - Attn: Claims **CO-PAY:** \$25 co-pay for office visits
 P.O. Box 3724 \$75 co-pay for ER,
 Carmel, IN 46082-3724 Hospitalizations & Urgent Care.
CUSTOMER SERVICE: Toll free: 1-800-461-0430 Fax: 317-575-6467 Collect: 317-818-2867
www.usdos.sevendcorners.com

To obtain a medication Present this card and your prescription at a OptumRx Network Pharmacy
Attn: Pharmacist - enter the Policy Number and Group Number and transmit the claim through your point-of-service system. **Bin: 009117 Group Number: RX2537**
 Pharmacy Benefits questions call OptumRx toll free at 800-531-6351 24/7

Seven Corners provides administrative claims payment services only and does not assume financial risk or obligation with respect to claims.



United States Department of State
Accident and Sickness Program for
Exchange Participants



Insured: IRINA TSIRYAPKINA

ID#: PS00246387

Coverage Period: 08/07/2017 - 06/30/2020

Home Country: Russia

Program/Project: Fulbright Foreign Student



First Health
 International



OPTUMRx

Please peel and fold