



City of Seattle Sample ID Cards for SPOG and Local 77

SPOG Preventive

NAP

CITY OF SEATTLE
SPOG PREVENTIVE PLAN

Issuer (80840) 9140860054 Open Choice PPO

GRP: 04

ID [REDACTED]

01 [REDACTED]

02 [REDACTED]

04 [REDACTED] DIV \$ 5.00

03 [REDACTED] SPC \$ 5.00

RX BIN# 610502

www.aetna.com PAYER NUMBER 60054 0042



See your plan documents for all plan requirements, including precertification. In an emergency, seek care immediately or call 911. This card does not guarantee coverage.

MEDICAL	INDIVIDUAL	FAMILY
	Tier 1	Tier 1
INN DED	N/A	N/A
INN OOP MAX	\$ 500	\$ 1000
OOB DED	\$ 250	\$ 750
OOB OOP MAX	\$ 3000	\$ 6000

MEMBER SERVICES CALL 1-866-983-0051
 24 HOUR NURSE LINE 1-800-556-1555
 MENTAL/BEHAVIORAL HEALTH 1-800-424-4047
 RX MEMBER SERVICES 1-888-792-3862

Aetna Life Insurance Company
 Submit Claims To:
 PO BOX 14079
 LEXINGTON KY 40512 4079

SPOG Traditional

NAP

CITY OF SEATTLE
SPOG TRADITIONAL PLAN

Issuer (80840) 9140860054 Open Choice PPO

GRP: -002

ID [REDACTED]

01 [REDACTED]

03 [REDACTED]

02 [REDACTED]

RX BIN# 610502

www.aetna.com PAYER NUMBER 60054 0042


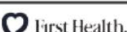
See your plan documents for all plan requirements, including precertification. In an emergency, seek care immediately or call 911. This card does not guarantee coverage.

MEDICAL	INDIVIDUAL	FAMILY
	Tier 1	Tier 1
INN DED	\$ 100	\$ 300
INN OOP MAX	\$ 400	N/A
OOB DED	\$ 150	\$ 450
OOB OOP MAX	\$ 1600	N/A

MEMBER SERVICES CALL 1-866-983-0051
 24 HOUR NURSE LINE 1-800-556-1555
 MENTAL/BEHAVIORAL HEALTH 1-800-424-4047
 RX MEMBER SERVICES 1-888-792-3862

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 PO BOX 14079
 LEXINGTON KY 40512 4079

Local 77 Preventive

NAP

CITY OF SEATTLE
LOCAL 77 PREVENTIVE

Issuer (80840) 9140860054 Choice POS II

GRP: 00002

ID [REDACTED]

01 [REDACTED]

02 [REDACTED] PCP NO ELECTION REQUIRED

PCP NO ELECTION REQUIRED PDP \$ 10.00

SPC \$ 10.00

RX BIN# 610502

www.aetna.com PAYER NUMBER 60054 0042



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MEDICAL	INDIVIDUAL	FAMILY
	Tier 1	Tier 1
INN DED	N/A	N/A
INN OOP MAX	\$ 500	\$ 1000
OOB DED	\$ 250	\$ 750
OOB OOP MAX	\$ 3250	\$ 6500

MEMBER SERVICES CALL 1-866-983-0051
 PROVIDERS CALL/PRECEPT 1-888-632-3862
 24 HOUR NURSE LINE 1-800-556-1555
 MENTAL/BEHAVIORAL HEALTH 1-800-424-4047
 RX MEMBER SERVICES 1-888-792-3862

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 PO BOX 14079
 LEXINGTON KY 40512 4079

Local 77 Traditional

NAP

CITY OF SEATTLE
LOCAL 77 TRADITIONAL

Issuer (80840) 9140860054 Choice POS II

GRP: 00001

ID [REDACTED]

01 [REDACTED]

04 [REDACTED] PCP NO ELECTION REQUIRED

05 [REDACTED] PCP NO ELECTION REQUIRED

06 [REDACTED] PCP NO ELECTION REQUIRED

07 [REDACTED] PCP NO ELECTION REQUIRED

RX BIN# 610502

www.aetna.com PAYER NUMBER 60054 0042

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MEDICAL	INDIVIDUAL	FAMILY
	Tier 1	Tier 1
INN DED	\$ 100	\$ 300
INN OOP MAX	\$ 300	\$ 900
OOB DED	\$ 150	\$ 450
OOB OOP MAX	\$ 1350	\$ 4050

MEMBER SERVICES CALL 1-866-983-0051
 PROVIDERS CALL/PRECEPT 1-888-632-3862
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