




Medicare Supplement Plans

SANFORD HEALTH PLAN <i>Medicare Supplement</i>											
ID: Z1003000101 Name: JOHN C DOE Grp: ZZDEMO0003 Grp Name: ABC COMPANY Care Type: Medicare Supplement Svc Type: Medical Effective: 5/1/2012 <small>20120401</small>	<table border="1"> <tr> <td>RxBIN: 003858</td> </tr> <tr> <td>RxPCN: A4</td> </tr> <tr> <td>RxGrp: SVHA</td> </tr> <tr> <td>Issuer: 80840</td> </tr> <tr> <td>ADMINISTERED BY  EXPRESS SCRIPTS</td> </tr> </table>	RxBIN: 003858	RxPCN: A4	RxGrp: SVHA	Issuer: 80840	ADMINISTERED BY  EXPRESS SCRIPTS					
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Providers: Bill Medicare as Primary Members: Show this ID card whenever you receive services. To receive full benefits all hospital inpatient and outpatient surgical services must be provided by a participating facility. Exceptions are emergency and urgent care, travel outside the service area or if the service is not available by a participating facility. For urgent or emergency care when you are out of the local service area, seek treatment at the nearest medical facility or call 911. Notify Sanford Health Plan of an admission as soon as reasonably possible and no later than 48 hours after physically or mentally able to do so. Eligibility: This card is for identification purposes only. It does not constitute proof of eligibility.											
<table border="1"> <tr> <td>Benefits & Eligibility</td> <td>sanfordhealthplan.com</td> </tr> <tr> <td>Local</td> <td>(605) 328-6800</td> </tr> <tr> <td>Toll Free</td> <td>1-800-752-5863</td> </tr> <tr> <td>Precertification/Authorization</td> <td>1-800-805-7938</td> </tr> <tr> <td>Pharmacy Use Only</td> <td>1-800-824-0898</td> </tr> </table>		Benefits & Eligibility	sanfordhealthplan.com	Local	(605) 328-6800	Toll Free	1-800-752-5863	Precertification/Authorization	1-800-805-7938	Pharmacy Use Only	1-800-824-0898
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Medicare Select Supplement sample ID card

Plan Type

Our Medicare Supplement plans are standard supplement plans and do not require the members to use a specific network. These plans are sold by local agents to individuals with Part A and Part B Medicare coverage in the following states and counties:

- South Dakota: All counties
- North Dakota: All counties
- Iowa: Clay, Dickinson, Emmet, Lyon, O'Brien, Osceola or Sioux
- Minnesota: Cottonwood, Jackson, Lac Qui Parle, Lincoln, Lyon, Martin, Nobles, Murray, Pipestone, Redwood, Rock, Watonwan or Yellow Medicine

Provider network

The plan members can receive services from any providers accepting assignment (payment) from Medicare. There is no network with Sanford Supplement Plan.

To access the provider directory, go to www.sanfordhealthplan.com.

1. Click on the tab "Find a Doctor or Pharmacy" and select "Find a Doctor."
2. On the provider directory home page, enter the first 9 digits of the patient's Member ID number and last name OR select [Medicare-Standard Supplement](#) from the drop down menu.
3. Search for providers by state, city, specialty and sub-specialty.

Eligibility, benefits and claims status

Use your secure provider account at www.sanfordhealthplan.com/providerlogin to access eligibility, claims status and benefit information online 24 hours a day, seven days a week. Or, call Member Services at (800) 752-5863 from 8 a.m. to 5 p.m. CST, Monday through Friday.

Claims and payment methodology

Providers should bill Medicare as primary and Sanford Health Plan as secondary.