

# Indiana University Health Employee Health Plan



- Traditional PPO Medical Plan
- HSA Medical Plan
- HRA Medical Plan
- HSA Medical Saver Plan

## Health Plans

Health Plans	
Indiana University Health Group: IUHLTH HRA Medical Plan Subscriber: Kenneth J. Sampleton RXBIN: 003858 RXPCN: A4 RXGRP: PMDC	Deductible: \$1,500/\$3,000 IU Health 10% (after deductible) Encore 30% (after deductible) QON 50% (after deductible) Rx \$10, \$30, 30%
myiuhealthplans.com	
<b>Member Nbr</b> 12345678901 12345678902 12345678903 12345678904 12345678905	<b>Member Name</b> Kenneth J. Sampleton Barbara J. Smith-Sampleton David Q. Sampleton Jean Z. Sampleton Marie A. Sampleton

Health Plans	
Indiana University Health Group: IUHLTH HSA Medical Plan Subscriber: Kenneth J. Sampleton RXBIN: 003858 RXPCN: A4 RXGRP: PMDC	Deductible: \$1,500/\$3,000 IU Health 10% (after deductible) Encore 30% (after deductible) QON 50% (after deductible) Rx 20% (after deductible)
myiuhealthplans.com	
<b>Member Nbr</b> 12345678901 12345678902 12345678903 12345678904	<b>Member Name</b> Kenneth J. Sampleton Barbara J. Smith-Sampleton David Q. Sampleton Jean Z. Sampleton

Health Plans	
Indiana University Health Group: IUHLTH HSA Medical Saver Plan Subscriber: Kenneth J. Sampleton RXBIN: 003858 RXPCN: A4 RXGRP: PMDC	Deductible: \$2,000/\$4,000 IU Health 20% (after deductible) Encore 40% (after deductible) QON 50% (after deductible) Rx 20% (after deductible)
myiuhealthplans.com	
<b>Member Nbr</b> 12345678901 12345678902 12345678903 12345678904 12345678905	<b>Member Name</b> Kenneth J. Sampleton Barbara J. Smith-Sampleton David Q. Sampleton Jean Z. Sampleton Marie A. Sampleton

Health Plans	
Indiana University Health Group: IUHLTH Traditional PPO Medical Plan Subscriber: Kenneth J. Sampleton RXBIN: 003858 RXPCN: A4 RXGRP: PMDC	Primary Care \$20 Specialty Care \$30 Hospital Care \$20 ER \$200 (waived if admitted) RX \$10, \$30, 30%
myiuhealthplans.com	
<b>Member Nbr</b> 12345678901 12345678902 12345678903 12345678904 12345678905	<b>Member Name</b> Kenneth J. Sampleton Barbara J. Smith-Sampleton David Q. Sampleton Jean Z. Sampleton Marie A. Sampleton

### Eligibility, benefits verification and claims inquiry:

Phone: 317.816.5170 or 800.873.2022  
or <http://myiuhealthplans.org> and go to Provider Information Support

### Claims Submission:

IU Health Plans  
PO Box 627  
Columbus, IN 47202-0627  
EDI Submission—Please contact IU Health Plans at 317.816.5170 or 800.873.2022

### Claims Dispute and Appeals:

IU Health Plans  
Phone: 317.816.5170 or  
800.873.2022

Or submit in writing to :

IU Health Plans  
PO Box 627  
Columbus, IN 47202-0627

Provider Directory: <http://myiuhealthplans.org>

Member Services: refer member questions to:

IU Health Plans 317.816.5170 or 800.873.2022

### Medical Prior Authorizations:

Services requiring authorizations are listed on the reverse side. Forms can be obtained by calling or at <http://myiuhealthplans.org>. Call or fax authorization request to:  
IU Health Medical Management  
Phone: 317.962.2378 or 866.492.5878  
Fax: 317-962.6219 or 317.962.4005

### RX Formulary:

Formulary and lists of drugs included in the \$4 Generic drug program are available at <http://myiuhealthplans.org>. Certain drugs require prior authorization or have step therapy requirements. Requirements are noted on formulary list (PA or ST). List of drugs requiring prior authorization can be obtained at the above mentioned website. To obtain authorization, call or fax Universal Prior authorization form to:

IU Health Pharmacy Benefit Management:  
Phone: 866.822.6504 or Fax: 855.397.8762