

# CDHP Medical Temporary Card OTC Brands, Inc.

 <b>UMR</b> A UnitedHealthcare Company	 <b>OTC Brands, Inc.</b> A Berkshire Hathaway Company
Issuer (80840) 911-39026-02	
Member ID:	Group Number: 76-415638
Member:	
	 RxBIN: 028371 RxPCN: 4004 RxGrp: 76415638 COPAY: TIER 1 / 2 / 3 20% / 20% / 20%
Tiered Benefits - Coinsurance after deductible Tier 1 Office: 15% Tier 1 Spec: 15% Tier 2 Office: 35% Tier 2 Spec: 35%	UnitedHealthcare NexusACO OAP
6130	Self-funded plan administered by UMR

This card must be presented each time services are requested. 3-2025

Medical:	Tier 1	Tier 2	Out of Net
Ded:	\$1,500	\$2,500	\$4,000
OOPM:	\$5,000*	\$5,000*	\$10,000

\*Includes pharmacy

Call number below for plan required prior authorization. FAILURE TO CALL FOR PRIOR AUTHORIZATION MAY REDUCE BENEFITS.

For Members:	member.accolade.com	866-336-0712
SmithRx:	member.mysmithrx.com	844-454-5201
For Providers:	www.umar.com	866-518-1814
Pharmacists:		844-512-3030

Claims: EDI # 39026, UMR, PO Box 211762, Eagan, MN 55121

TELADOC  
800-835-2362

**NOTE: This document is not proof of coverage.**

The card above is a sample you can use until you receive your new card in the mail. To order a new card, you can call UMR at (866) 336-0712 or log onto UMR's website at UMR.com. You will use the above information to register on the website. It will take approximately 2 weeks for you to receive it in the mail to the address in UltiPro. Please be sure your address is correct in UltiPro.

CDHP Medical: Group ID 76-415638  
User ID: can use your social security number  
UMR Customer Service to order a new card: (866) 336-0712  
Log onto: member.accolade.com  
Medical Network: UnitedHealthcare NexusACO