



FOR ELIGIBILITY/BENEFITS  
[www.askallegiance.com/ivr](http://www.askallegiance.com/ivr)  
 270/271 EDI Transactions Payer ID: 81040  
 1-855-999-2268  
[www.askallegiance.com](http://www.askallegiance.com)

**Allegiance™**  
 by Cigna Healthcare

**Member**

Woodgrain Inc.  
 Group ID No.: 0010711  
 Covered Person: JOHN SAMPLE  
 Participant ID#: SMPL0001

Type of Coverage	Effective Date
Medical	

Dependent(s)  
 JANE SAMPLE  
 JIMMY SAMPLE

**Medical Network**



Plan: BASE	In Network	Non Network
Ind/Fam Ded	\$4,000/\$8,000	\$5,000/\$10,000
Ind/Fam OOP	\$7,500/\$15,000	\$13,800/\$27,000

**Pharmacy Plan**

RxBin: 610602  
 PCN: NVT  
 RxGrp: WMI  
 Customer Service: 1-855-673-6504  
[www.navitus.com](http://www.navitus.com)



FOR ELIGIBILITY/BENEFITS  
[www.askallegiance.com/ivr](http://www.askallegiance.com/ivr)  
 270/271 EDI Transactions Payer ID: 81040  
 1-855-999-2268  
[www.askallegiance.com](http://www.askallegiance.com)

**Allegiance™**  
 by Cigna Healthcare

**Member**

Woodgrain Inc.  
 Group ID No.: 0010711  
 Covered Person: JOHN SAMPLE  
 Participant ID#: SMPL0001

Type of Coverage	Effective Date
Medical	

Dependent(s)  
 JANE SAMPLE  
 JIMMY SAMPLE

**Medical Network**



Plan: BASE	In Network	Non Network
Ind/Fam Ded	\$4,000/\$8,000	\$5,000/\$10,000
Ind/Fam OOP	\$7,500/\$15,000	\$13,800/\$27,000

**Pharmacy Plan**

RxBin: 610602  
 PCN: NVT  
 RxGrp: WMI  
 Customer Service: 1-855-673-6504  
[www.navitus.com](http://www.navitus.com)





FOR ELIGIBILITY/BENEFITS  
[www.askallegiance.com/mvr](http://www.askallegiance.com/mvr)  
 270/271 EDI Transactions Payer ID: 81040  
 1-855-999-2288  
[www.askallegiance.com](http://www.askallegiance.com)



### Member

Woodgrain Inc.  
 Group ID No.: 0010711  
 Covered Person: JOHN SAMPLE  
 Participant ID#: SMPL0001

Type of Coverage	Effective Date
Medical	

Dependent(s)  
 JANE SAMPLE  
 JIMMY SAMPLE

### Medical Network



Plan: BUY UP	In Network	Non Network
Ind/Fam Ded	\$2,000/\$4,000	\$5,000/\$10,000
Ind/Fam OOP	\$4,000/\$8,000	\$12,000/\$24,000

### Pharmacy Plan

RxBin: 610602  
 PCN: NVT  
 RxGrp: WMI  
 Customer Service: 1-855-673-6504  
[www.navitus.com](http://www.navitus.com)



FOR ELIGIBILITY/BENEFITS  
[www.askallegiance.com/mvr](http://www.askallegiance.com/mvr)  
 270/271 EDI Transactions Payer ID: 81040  
 1-855-999-2288  
[www.askallegiance.com](http://www.askallegiance.com)



### Member

Woodgrain Inc.  
 Group ID No.: 0010711  
 Covered Person: JOHN SAMPLE  
 Participant ID#: SMPL0001

Type of Coverage	Effective Date
Medical	

Dependent(s)  
 JANE SAMPLE  
 JIMMY SAMPLE

### Medical Network



Plan: BUY UP	In Network	Non Network
Ind/Fam Ded	\$2,000/\$4,000	\$5,000/\$10,000
Ind/Fam OOP	\$4,000/\$8,000	\$12,000/\$24,000

### Pharmacy Plan

RxBin: 610602  
 PCN: NVT  
 RxGrp: WMI  
 Customer Service: 1-855-673-6504  
[www.navitus.com](http://www.navitus.com)





FOR ELIGIBILITY/BENEFITS  
[www.askallegiance.com/mvr](http://www.askallegiance.com/mvr)  
 270/271 EDI Transactions Payer ID: 81040  
 1-855-999-2288  
[www.askallegiance.com](http://www.askallegiance.com)

**Allegiance™**  
 by Cigna Healthcare

**Member**

Woodgrain Inc.  
 Group ID No.: 0010711  
 Covered Person: JOHN SAMPLE  
 Participant ID#: SMPL0001

Type of Coverage	Effective Date
Medical	

Dependent(s)  
 JANE SAMPLE  
 JIMMY SAMPLE

**Medical Network**



Plan: PPO	In Network	Non Network
Ind/Fam Ded	\$1,500/\$3,000	\$5,000/\$10,000
Ind/Fam OOP	\$3,000/\$6,000	\$10,000/\$20,000

**Pharmacy Plan**

RxBin: 610602  
 PCN: NVT  
 RxGrp: WMI  
 Customer Service: 1-855-673-6504  
[www.navitus.com](http://www.navitus.com)



FOR ELIGIBILITY/BENEFITS  
[www.askallegiance.com/mvr](http://www.askallegiance.com/mvr)  
 270/271 EDI Transactions Payer ID: 81040  
 1-855-999-2288  
[www.askallegiance.com](http://www.askallegiance.com)

**Allegiance™**  
 by Cigna Healthcare

**Member**

Woodgrain Inc.  
 Group ID No.: 0010711  
 Covered Person: JOHN SAMPLE  
 Participant ID#: SMPL0001

Type of Coverage	Effective Date
Medical	

Dependent(s)  
 JANE SAMPLE  
 JIMMY SAMPLE

**Medical Network**



Plan: PPO	In Network	Non Network
Ind/Fam Ded	\$1,500/\$3,000	\$5,000/\$10,000
Ind/Fam OOP	\$3,000/\$6,000	\$10,000/\$20,000

**Pharmacy Plan**

RxBin: 610602  
 PCN: NVT  
 RxGrp: WMI  
 Customer Service: 1-855-673-6504  
[www.navitus.com](http://www.navitus.com)

