

**FARMERS  
BANK****Member****Member Name:** JOHN SAMPLE**Member ID:** SMPL00-01**Group Name:** Farmers Bank**Group #:** 6400**Pharmacy Plan**

Rx BIN: 015433

Rx PCN: SSN

Rx GROUP: 6400 Active



Member and Pharmacy Helpdesk: 800-710-9341

<https://liviniti.com/>**Medical Plan****Plan Name:** PPO Plan**Medical Deductibles:**

	Individual / Family
Tier 1:	\$0 / \$0
Tier 2:	\$500 / \$1,000
Tier 3:	\$1,000 / \$2,000

**Medical / Pharmacy Out-of-Pocket:**

	Individual / Family
Tier 1:	\$500 / \$1,000
Tier 2:	\$2,000 / \$4,000
Tier 3:	\$4,000 / \$8,000



1137-FC 13E9 FRB-FRBPO-6400-M(1)(V)

20241206T01 Sh: 0 Bin 2  
J167 Env [1] CSets 1 of 1**FARMERS  
BANK****Member****Member Name:** JOHN SAMPLE**Member ID:** SMPL00-01**Group Name:** Farmers Bank - COBRA**Group #:** 6400C**Pharmacy Plan**

Rx BIN: 015433

Rx PCN: SSN

Rx GROUP: 6400C COBRA



Member and Pharmacy Helpdesk: 800-710-9341

<https://liviniti.com/>**Medical Plan****Plan Name:** PPO Plan**Medical Deductibles:**

	Individual / Family
Tier 1:	\$0 / \$0
Tier 2:	\$500 / \$1,000
Tier 3:	\$1,000 / \$2,000

**Medical / Pharmacy Out-of-Pocket:**

	Individual / Family
Tier 1:	\$500 / \$1,000
Tier 2:	\$2,000 / \$4,000
Tier 3:	\$4,000 / \$8,000



1137-FC 13E9 FRB-FRBPO-6400-M(1)(V)

20241206T01 Sh: 0 Bin 2  
J167 Env [1] CSets 1 of 1

## Member Rewards

First Choice Health Customer Service:  
800-214-1904  
email: [customercare@fchn.com](mailto:customercare@fchn.com)

Pre-Authorizations: (800) 808-0450  
Behavioral Health: (800) 640-7682  
Maternity Management: (800) 808-0450  
Out-of-Network Providers: (833) 375-0121

### **Mayo Clinic Complex Care:**

Contact Columbia Benefits at  
833-444-8417

### **Mayo Clinic Laboratories:**

Visit us online or call  
Mayo Clinic Laboratories  
800-533-1710  
[www.mayocliniclabs.com](http://www.mayocliniclabs.com)

**Pre-authorization:** Inpatient admissions and certain outpatient services require pre-authorization. Please refer to your Summary Plan Document for details.

## Medical Claims Submission

EDI Payor ID: 91131.

First Choice Health  
PO Box 12659  
Seattle, WA 98111-4659

To locate a Multiplan provider, call  
888-636-7427 or visit [Multiplan.com](http://Multiplan.com)

This card does not guarantee coverage. If you have any questions regarding benefit coverage, claims, or eligibility please call First Choice Health or visit [www.fchn.com](http://www.fchn.com).

## Networks



**COLUMBIA  
HEALTH**  
NETWORK



**MAYO CLINIC  
LABORATORIES**

With Mayo Clinic Complex Care

**First Choice Health.**  
[www.fchn.com](http://www.fchn.com)

## Member Rewards

First Choice Health Customer Service:  
800-214-1904  
email: [customercare@fchn.com](mailto:customercare@fchn.com)

Pre-Authorizations: (800) 808-0450  
Behavioral Health: (800) 640-7682  
Maternity Management: (800) 808-0450  
Out-of-Network Providers: (833) 375-0121

### **Mayo Clinic Complex Care:**

Contact Columbia Benefits at  
833-444-8417

### **Mayo Clinic Laboratories:**

Visit us online or call  
Mayo Clinic Laboratories  
800-533-1710  
[www.mayocliniclabs.com](http://www.mayocliniclabs.com)

**Pre-authorization:** Inpatient admissions and certain outpatient services require pre-authorization. Please refer to your Summary Plan Document for details.

## Medical Claims Submission

EDI Payor ID: 91131.

First Choice Health  
PO Box 12659  
Seattle, WA 98111-4659

To locate a Multiplan provider, call  
888-636-7427 or visit [Multiplan.com](http://Multiplan.com)

This card does not guarantee coverage. If you have any questions regarding benefit coverage, claims, or eligibility please call First Choice Health or visit [www.fchn.com](http://www.fchn.com).

## Networks



**COLUMBIA  
HEALTH**  
NETWORK



**MAYO CLINIC  
LABORATORIES**

With Mayo Clinic Complex Care

**First Choice Health.**  
[www.fchn.com](http://www.fchn.com)



20241206T01 Sh: 0 Bin 2  
J167 Env [1] CSe1s 1 of 1

1137FC 6742 FRBFRBPO-6000-M(0)01/0



20241206T01 Sh: 0 Bin 2  
J167 Env [1] CSe1s 1 of 1

1137FC 6742 FRBFRBPO-6000-M(0)01/0