

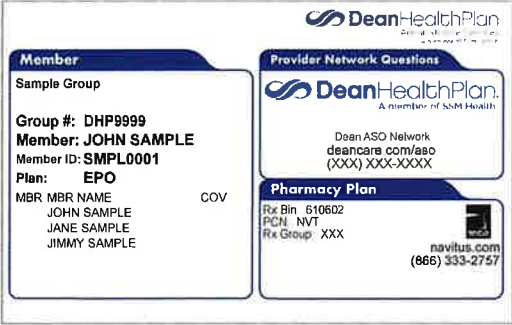


	Dean Health Commercial	WellFirst Health™ SSM EHP ASO	Dean Health Network ASO
Member ID Card	 <p>Network: Dean Group Number: 12345 Product Type: HMO</p> <p>Customer Care: (800) 279-1301 (TTY 711) Dean On Call: (800) 576-8773</p> <p>Member Name Member # JOHN DOE 012345678900 JANE DOE 012345678900 BOBBY DOE 012345678900 SUZY DOE 012345678900</p> <p>Copays: PCP: \$15 • Specialist: \$15 • Urgent Care: \$15 • Emergency Room: \$150 *Please refer to your Plan Materials for your additional financial responsibility including, but not limited to, deductible, coinsurance, and other out-of-pocket costs. Form Date: XX/XX/XXXX • PCN Number: XXXX • BIN Number: HMO</p> <p>deancare.com</p>	 <p>Network: DEAN ASO Group Number: XXXXXXXXXXXX Product Type: EPO</p> <p>Customer Care: 877-274-4693 (TTY 711) Dean On Call: 800-576-8773</p> <p>Member Name Member # JOHN DOE 012345678900 JANE DOE 012345678900 BOBBY DOE 012345678900 SUZY DOE 012345678900</p> <p>Copays: PCP: \$XX • Specialist: \$XX • Urgent Care: \$XX • Emergency Room: \$XXX *Please refer to your Plan Materials for your additional financial responsibility. Pharmacy Questions: Visit navitus.com • Call 866-333-2757 Form Date: XX/XX/XXXX • PCN Number: 610602 • BIN Number: 8104</p> <p>wellfirstbenefits.com</p>	 <p>Member Sample Group Group #: DHP9999 Member: JOHN SAMPLE Member ID: SMPL0001 Plan: EPO MBR MBR NAME COV JOHN SAMPLE JANE SAMPLE JIMMY SAMPLE</p> <p>Provider Network: Questions DeanHealthPlan A member of SSM Health Dean ASO Network deancare.com/aso (XXX) XXX-XXXX</p> <p>Pharmacy Plan Rx Bin: 610602 PCN: NVT Rx Group: XXX navitus.com (866) 333-2757</p>
Population Served	<ul style="list-style-type: none"> • Large Groups • Small Groups • ACA Individual 	<p>Self-funded SSM Health Employees and Dependents</p>	<p>Self-funded Employer Groups:</p> <ul style="list-style-type: none"> • City of Janesville • Columbus Community Hospital • Durr Universal • Grant Regional Health Center • HSHS • Jones Dairy Farm • Lands' End • Prevea Clinic
Customer Care Center	800-279-1301	877-274-4693	877-234-4516 or refer to Member ID card for contact information
Eligibility Verification	<ul style="list-style-type: none"> • 270/271 Eligibility and Benefit Inquiry and Response Transaction or; • Dean Health Plan Provider Portal or; • Call the Customer Care Center at 800-279-1301 	<ul style="list-style-type: none"> • 270/271 Eligibility and Benefit Inquiry and Response Transaction or; • Dean Health Plan Provider Portal or; • Call the Customer Care Center at 877-274-4693 	<ul style="list-style-type: none"> • Dean Health Plan ASO Provider Portal or; • Call the Customer Care Center number on the Member ID card or; • Call the Customer Care Center at 877-234-4516
Website	deancare.com	wellfirstbenefits.com	deancare.com/aso
Provider Manual	Dean Health Plan Provider Manual	SSM Health Employee Health Plan Administrative Services Only Provider Manual	Dean Health Plan Administrative Services Only Product Manual

Dean Health Network and WellFirst Health™ | 2020 Quick Reference

	Dean Health Commercial	WellFirst Health™ SSM EHP ASO	Dean Health Network ASO
Provider Portal	deancare.com/providerportal	deancare.com/providerportal	deancare.com/providerportalaso
Provider Portal Login	Use Dean Health Plan Provider Portal Username and Password	Use Dean Health Plan Provider Portal Username and Password	Use Dean Health Plan ASO Provider Portal Username and Password
Eligibility Verification	<ul style="list-style-type: none"> • 270/271 Eligibility and Benefit Inquiry and Response Transaction or; • Dean Health Plan Provider Portal or; • Call the Customer Care Center at 800-279-1301 	<ul style="list-style-type: none"> • 270/271 Eligibility and Benefit Inquiry and Response Transaction or; • Dean Health Plan Provider Portal or; • Call the Customer Care Center at 877-274-4693 	<ul style="list-style-type: none"> • Dean Health Plan ASO Provider Portal or; • Call the Customer Care Center number on the Member ID card or; • Call the Customer Care Center at 877-234-4516
Payer ID	39113	39113	75261
Authorization Submissions	<ul style="list-style-type: none"> • Dean Health Plan Provider Portal • Authorization Partner Portals such as Navitus/Navi-Gate and NIA Magellan accessible from the Account Login link at deancare.com 	<ul style="list-style-type: none"> • Dean Health Plan Provider Portal • Authorization Partner Portals such as Navitus/Navi-Gate and NIA Magellan accessible from the Account Login link at deancare.com 	<ul style="list-style-type: none"> • Groups with the Dean ASO networks as primary, via the Dean Health Plan ASO Provider Portal • Prior Authorization forms available on the ASO Medical Management web page, including the ASO Plans Only Outpatient Services form for groups with a non-Dean ASO primary network
Authorization Determinations	From Dean Health Plan	From Dean Health Plan branded as WellFirst Health	From Dean Health Plan
Claim Submissions	<ul style="list-style-type: none"> • Electronic Data Interchange (EDI) or Online Direct Data Entry Form • Paper claims to: Claims Dept. PO Box 56099 Madison, WI 53705 	<ul style="list-style-type: none"> • Electronic Data Interchange (EDI) or Online Direct Data Entry Form • Paper claims to: Claims Dept. PO Box 56099 Madison, WI 53705 	<ul style="list-style-type: none"> • Electronic Data Interchange (EDI) • Refer to Member ID card for where to submit claims • Paper claims to: Dean Health Plan- Administrative Services PO Box 99906 Grapevine, TX 76099-9706
Claim Status	<ul style="list-style-type: none"> • 276/277 Health Care Claim Status Request and Response transaction • Dean Health Plan Provider Portal • Call the Customer Care Center at 800-279-1301 	<ul style="list-style-type: none"> • 276/277 Health Care Claim Status Request and Response transaction • Dean Health Plan Provider Portal • Call the Customer Care Center at 877-274-4693 	<ul style="list-style-type: none"> • Call the Customer Care Center number on the Member ID card • Dean Health Plan ASO Provider Portal