


Benefit Management, Inc.

Question?
Call 888-294-1515
www.gotobmi.com


Member Information

DRURY UNIVERSITY
EMPLOYEE: SAMPLE NAME
ID NUMBER: SAMPLE NUMBER

Medical Plan 2302
Annual in and out-of-network accumulators:

	Individual/Family
In Network Deductible:	\$500/\$1,000
In Network Out of Pocket:	\$7,900/\$15,800
Out of Network Deductible:	\$2,000/\$4,000
Out of Network Out of Pocket:	Unlimited/Unlimited
Office Visit Copay:	\$20
Specialist Copay:	\$40

Pharmacy Information

RxBIN: 017449
RxPCN: 6792000
RxGRP: PRXBMI
1-800-424-0472 / www.magellanrx.com



For Medication Prior Authorization
Call: 888-294-1515

Pharmacy Copay:

Retail: Tier 1: \$5 Tier 2: \$40 Tier 3: \$60
Mail Order: Tier 1: \$10 Tier 2: \$80 Tier 3: \$120


Utilization

Pre-Certification is required prior to any hospital admission. For Pre-Certification call (417) 782-1515 or (888) 294-1515 Monday-Thursday 7AM-5PM & Friday 8AM-4PM CT. Emergency admission must be certified on the next business day.

Failure to obtain pre-admission/admission certification may result in a reduction of benefits or claim denial.

Medical Eligibility and Benefit Quotes

This card is for identification only. It is not a guarantee of benefits.

For eligibility and benefits Call (417) 782-1515 or (888) 294-1515 Monday-Thursday 7AM-5PM & Friday 8AM-4PM CT.

Claims Submission

Mail: Benefit Management, Inc
PO Box 3001
Joplin, MO 64803
EDI: 43178
Fax: 417-782-2777

Lab Network
Complementary Networks
