



HEALTH REPUBLIC  
INSURANCE



REGIONAL HMO NETWORK



**Member**

Health Republic Insurance of New Jersey

Member: **JOHN TEST**

Member ID: J44455500

DOB: 05/08/87 Gender: M

Member PCP: NO PCP SELECTED

Dependents	ID #	DOB	Gender	PCP
MARY TEST	J44455501	07/03/89	F	NO PCP SELECTED
BABY TEST	J44455502	10/19/13	M	JOSEPH ROMANELLA

Plan ID: 10191NJ012000301

**Deductible:** \$750-Single / \$1,500-Family

**Office Visit Copays:**

PCP: \$10 Specialist: \$25 (Referral Required)

ER/Hospital Stay: 20% after deductible

**Coinsurance:** 20% after deductible

**This is a fully insured plan administered by QualCare.**

1105 QC-10191NJ-012-000301--- M) D) V)  
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Env [4,210] 4 of 3 Carrier [2] 3

J0F9



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J0F9

### Pharmacy Plan

Rx Bin: 008019  
 Rx Group: 101911



### Pediatric Vision

Davis Vision Premier Plan



**Eye Exam** (limited to 1 in 12 months): Coverage for children up to age 18 only.

### Medical Claims

Health Republic Insurance of New Jersey  
 EDI Payer ID: 23342  
 PO Box 1269  
 Piscataway, NJ 08855-1269

### Benefits & Eligibility

Present this card each time you receive health care services. For plan coverage information, eligibility and claims inquiries and to locate participating providers, call Health Republic Insurance of New Jersey at 888.990.5706 or visit [newjersey.healthrepublic.us](http://newjersey.healthrepublic.us)

Quest Diagnostics is QualCare's Exclusive Lab Provider - all other labs will be considered out-of-network, should coverage apply.



### Utilization

Pre-Certification is required for certain services. Call Health Republic Insurance of New Jersey to verify pre-certification requirements at 888.990.5706.

**This card is for identification only and does not guarantee coverage.**

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