



Attached is your temporary HealthLink ID card. Please use this information to present to your provider at the time of service.

Before you use the temporary ID card, please: Fill in your name and member ID number. If you do not know your member ID number, please call HealthLink Customer Service at 800-624-2356.

State of Illinois Benefit Plans

Group No: 1600F3
Group Name: College Insurance Program Participants

Member's Name: _____
Member's ID: _____

Open Access III Provider Network	COPAY for Tier I (HMO) Providers Only:
I. HealthLink HMO Providers	\$30 Office Visit
II. HealthLink PPO Providers	\$10 Telemedicine Consult
III. All Other Providers	\$30 Specialist Visit

HealthLink Customer Service & Provider Inquiry: 800-624-2356
Provider Locator: <https://SOI.healthlink.com>
Telemedicine Program available by calling 855-717-6800 or healthlink.careclix.com

This card is for identification ONLY. It is NOT a guarantee of eligibility.



Utilization Review Program

AIM Specialty Health must be notified prior to outpatient radiology and cardiology imaging. Contact AIM at 866-745-3266 or www.aimspecialtyhealth.com/goweb.
HealthLink must be notified prior to any outpatient surgery, ancillary services and elective hospital admission. Contact HealthLink at 877-284-0102.

Emergency admissions must be certified on the next business day. Failure to obtain preadmission/admission certification may result in a reduction of benefits.

For Mental Health/Substance Abuse Review, call HealthLink at 877-284-0102

HealthLink service area includes AR, IL, IN, KY, MO, OH, WI		HFN providers available in Illinois counties of: Boone, Bureau, Carroll, Henderson, Henry, Jo Daviess, Lee, Mercer, Ogle, Rock Island, Stephenson, Warren, Whiteside and Winnebago. A UniCare affiliate in all IL counties not listed above as well as IN, KY, OH and WI.
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Verify Eligibility/Benefits/Claims Status: 800-624-2356
For the Hearing Impaired: 877-232-8388

HealthLink Wellness Support Programs available by calling 866-647-6113
24-Hour Nurse Line, Maternity Management and Condition Management

MAIL MEDICAL CLAIMS TO: HealthLink Open Access P.O. Box 411580 St. Louis, MO 63141-1580	SEND ELECTRONIC MEDICAL CLAIMS TO: EDI Vendor #96475 EDI Clearinghouse
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Note to Providers: Please honor this temporary ID card as you would any permanent HealthLink member ID card. You may use the information on the card to submit claims as instructed. If you have questions about the temporary ID cards, please call HealthLink Customer Service at 800-624-2356.