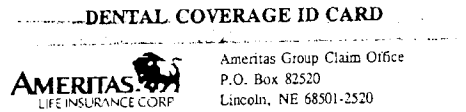


TEMPORARY INSURANCE CARDS

Dental



PINE CARE MANAGEMENT, INC.
Policy# 10-376381-1 Dep Cov
ID# Dep Eff Date
Name
Member Eff Date

For Benefit Information, call Ameritas at 1-800-487-5553
or visit our website at www.ameritasgroup.com

How to Submit A Claim

1. Obtain an Ameritas Claim form from employer (located at www.pinecare.com)
2. Complete as much of the form as possible and give it to the dental receptionist when you arrive for your appointment.
3. For coinsurance and deductibles see Certificates booklet.
4. It is likely that your dental office will send a claim form to Ameritas on your behalf. If not, send your claim form to:
Ameritas Group Claim Office
P.O. Box 82520
Lincoln, NE 68501-2520
5. Your claim payment will be made directly to you. If you have any questions, call 1-800-487-5553



Dear Member:

Enclosed you will find your new ID cards from Century Healthcare. Your new cards display your member information and unique identification numbers. Your ID card contains important information about your health care benefit coverage and claims processing information that your physician and health care providers will need.

Please refer to the back of your card for important contact information. Please begin using your new ID card on or after your group policy's effective date.

If you have additional questions about your Century Healthcare benefits or require assistance in locating a physician nearest you, please contact Customer Service at the toll-free telephone number: **1-888-444-1995**



HealthPlan

GRP: Pine Care Services
Subscriber Name:
Subscriber Number: r
Covered Dependents:

Coverage Effective 07/01/2005

RX Administered by PSG
RX Bin: 610415
Rx Grp: J245NDMX

PAVESICH CONNOR

Elect. Claim Payer ID# 37310098

Important Consumer Information

Customer Service: 1-888-444-1995

Pharmacy Service: 1-800-391-9721

Optum NurseLine: 1-866-796-1857 pin 526

This health plan is administered by Century Healthcare. While coverage remains in force, members are entitled to benefits under the applicable plan, subject to exclusions and limitations.

Providers: This card does not guarantee coverage. For eligibility or benefit information, contact customer service and provide them with the identifying information on this card. To speed processing or benefit request, include the identifying information on this card when completing forms or communicating with the claim office.

Claim Address:

**Century Healthcare
P.O. Box 2871
Grapevine, Texas 76099**

TDI