

Sanford Health Plan ID cards

Submit claims to: Sanford Health Plan, PO Box 91110, Sioux Falls, SD 57109

- Medicare plans bill Medicare first.
- For providers outside the Sanford Health Plan service area, if there is an address along with a network logo, submit claims to that address.

Electronic payor ID #: 91184

Online resource: sanfordhealthplan.com

For questions, call:

- Customer Service – Benefits eligibility claims status and inquiries
- Utilization Management – Prior authorizations
- Pharmacy Department – Prescription coverage or drug authorizations

Sanford Health Plan	NDPERS	ND Medicaid Expansion
(800) 752-5863	(800) 499-3416	(855) 305-5060
(800) 805-7938	(888) 315-0885	(855) 276-7214
(855) 305-5062	(877) 658-9194	(800) 755-2604

Fully-insured commercial products

Simplicity – individual, small and large group plans



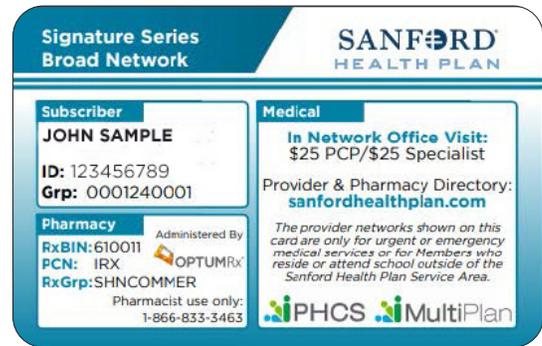
Sanford TRUE – individual, small and large group plans



Sanford PLUS – large group plans



Signature Series & Legacy – small and large group plans



elite1 – individual plans



Sanford SAFEGUARD – Broad Network



Medicare Plans

Medicare Select Plans

Medicare SELECT		SANFORD HEALTH PLAN	
Subscriber JOHN SAMPLE ID: 123456789 Grp: MSELNDCC00G Effective: 04/01/2020	Medical Care Type: Medicare Supplement Svc Type: Medical	Pharmacy RxBIN: 610011 PCN: IRX RxGrp: SHNCOMMER Administered By: OPTUMRx Pharmacist use only: 1-866-833-3463	Claims Providers: Bill Medicare as primary

Medicare Supplement Plans

Medicare Supplement		SANFORD HEALTH PLAN	
Subscriber JOHN SAMPLE ID: 123456789 Grp: MSUPNDA00G Effective: 04/01/2020	Medical Care Type: Medicare Supplement Svc Type: Medical	Pharmacy RxBIN: 610011 PCN: IRX RxGrp: SHNCOMMER Administered By: OPTUMRx Pharmacist use only: 1-866-833-3463	Claims Providers: Bill Medicare as Primary

TPA Plans

Sanford Health Employee Plans

SANFORD HEALTH		Administered By: Sanford Health Plan	
Subscriber JOHN SAMPLE ID: 123456789 Grp: SH00011001	Medical In Network Office Visit: \$30 Sanford/\$50 Chiro/\$60 Oth Provider & Pharmacy Directory: sanfordhealthplan.com	Pharmacy RxBIN: 610011 PCN: IRX RxGrp: SHNSFUTPA Administered By: OPTUMRx Pharmacist use only: 1-866-833-3463	<i>The provider networks shown on this card are only for urgent or emergency medical services or for Members who reside or attend school outside of the Sanford Health Plan Service Area.</i> PHCS MultiPlan

Other TPA Plans

Broad Network		Administered By: SANFORD HEALTH PLAN	
Subscriber JOHN SAMPLE ID: 123456789 Grp: 0001550002	Medical In Network Office Visit: Deductible Provider & Pharmacy Directory: sanfordhealthplan.com	Pharmacy RxBIN: 610011 PCN: IRX RxGrp: SHNSFUTPA Administered By: OPTUMRx Pharmacist use only: 1-866-833-3463	<i>The provider networks shown on this card are only for urgent or emergency medical services or for Members who reside or attend school outside of the Sanford Health Plan Service Area.</i> PHCS MultiPlan

Government products

North Dakota Medicaid Expansion Plan

North Dakota Medicaid Expansion		Administered By: SANFORD HEALTH PLAN	
Subscriber JOHN SAMPLE ID: 123456789 Grp: MDX0020002	Medical Benefits Only In Network Office Visit \$0 COPAY Provider Directory: sanfordhealthplan.com Members: For urgent or emergency care when you are out of the local service area, seek treatment at the nearest medical facility or call 911. Notify Sanford Health Plan of an admission as soon as it is reasonably possible and no later than 10 days after physically or mentally able to do so. Eligibility: This card is for identification purposes only. It does not constitute proof of eligibility.	Pharmacy Retail pharmacy benefits administered by the North Dakota Department of Human Services. Use ND Medicaid ID Card for these services.	

NDPERS – Non-Medicare

Underwritten By: SANFORD HEALTH PLAN		NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM	
Subscriber JOHN SAMPLE ID: 123456789 Grp: NP30100001	Medical Copays: \$30 PPO, \$35 BASIC, \$60 ER Provider & Pharmacy Directory: sanfordhealthplan.com/ndpers	Pharmacy RxBin 610011 PCN: IRX RxGrp: SHNDPERS Administered By: OPTUMRx Pharmacist Use Only: 1-866-833-3463	<i>The provider networks shown on this card are only for urgent or emergency medical services or for Members who reside or attend school outside of the Sanford Health Plan Service Area.</i> PHCS MultiPlan

NDPERS – Medicare

Underwritten By: SANFORD HEALTH PLAN		NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM	
Insured JOHN SAMPLE ID: 123456789 Grp: NPM0010014 Effective: 02/01/2020	Medical Care Type: Medicare Supplement Svc Type: Medical	Claims	Providers: Bill Medicare as primary



NDPERS – Tobacco Cessation

