Sample Health Plan ID Card Legend
1. Name of enrolled medical plan, i.e. "EHP or EHP Plus"
2. Member ID which begins with a "W", each member will receive their own health plan ID card
3. Co-payment member is responsible to pay
4. Non CCHS inpatient admission notification
5. Provider directory to create your personal account on Aetna website
**Cleveland Clinic**

**Sample ID Cards 2022 — ONA**

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**EHP ONA Employee Card**

- **Name of enrolled medical plan, i.e. “EHP or EHP Plus”**: EHP
- **Member ID which begins with a “W”, each member will receive their own health plan ID card**: W2685 87956-02
- **Co-payment member is responsible to pay**: Aetna Select Open Access

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**EHP ONA Dependent Card**

- **Name of enrolled medical plan, i.e. “EHP or EHP Plus”**: EHP
- **Member ID which begins with a “W”, each member will receive their own health plan ID card**: W2685 87956-02
- **Co-payment member is responsible to pay**: Aetna Select Open Access

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**www.aetna.com**

- **PAYER NUMBER**: 60664 0448
- **Copays**: PCP/Virtual $35, SCP $35, UC $75, ER $250
- **Tier 1 CCHS QA**: $0, Tier 2 Aetna Select QA $25
- **Inpatient Tier 1 copay**: $350, ER copay waived if admitted

**Notification required for non-CCHS hospital admissions. If this is within 50 miles of CCHS hospital call 1-866-721-9803.**

**Provider directory**: Aetna.com

**Provider services**: 1-888-632-3862

**See your plan documents for information on your plan requirements. In an emergency call 911 or go to the nearest emergency room. Note: This card does not guarantee coverage.**

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**Sample Health Plan ID Card Legend**

- **1**: Name of enrolled medical plan, i.e. “EHP or EHP Plus”
- **2**: Member ID which begins with a “W”, each member will receive their own health plan ID card
- **3**: Co-payment member is responsible to pay
- **4**: Non CCHS inpatient admission notification
- **5**: Provider directory to create your personal account on Aetna website