



School: University of Medicine and Dentistry of New Jersey

Insured ID #: _____

Group/Policy # 812807

Policy Period: 2007-2008

This temporary card is for identification only. It is not a guarantee of benefits. Pre-certification required. See reverse side for details.

Prescriptions: If you need to fill a Prescription, you may obtain it from an Aetna Preferred Pharmacy and be reimbursed by submitting a completed Aetna claim form. Contact Aetna Pharmacy Management at (800) 238-6279 for claim forms. **For inquiries** about Student Health Insurance, Benefit Information, or for Pre-certification, call 1-800-466-3185.

Pre-certification Requirement: Prior notification is required

- At least 3 business days prior to all non-emergency hospital admissions
- Within 1 business day following an emergency admission

For inquiries about Worldwide Emergency Travel Assistance Services, call Assist America, Inc., 1-800-872-1414 (within U.S.) If outside the U.S., call collect by dialing the U.S. access code plus 301-656-4152.

Preferred Providers: Please contact Aetna's DocFind Service:

www.chickering.com. Click on "Student Connection" and under "Find Your School" enter 812807 as your Policy number.

Send Claims to: Chickering Claims Administrators Inc.
P.O. Box 15708, Boston, MA 02215-0014