



Effective: 07.01.2012

**UnitedHealthcare
Options PPO Network**

Name: _____

SSN: _____

Employer: Mount Vernon Nazarene University

UMR Group #: 76-411226

UMR Customer Service:

Providers call: (877) 233-1800

Members call: (800) 826-9781

Mail all claims to:

UMR
PO BOX 30541
SALT LAKE CITY UT 84130-0541
EDI PAYER ID # 3902

(800)826-9781 UMR: Eligibility or Benefit information
www.umar.com

(866) 494-4502 Call UMR Care Management for Plan required certifications.

UMR Prescription Benefits Administration - Innoviant

RxBin 610127

RxPCN 01960000

RxGRP 01961216



(877)559-2955 Pharmacy Customer Service

www.optumrx.com