

ID Cards for Open Access Plan Members:

Open Access PPO Plan

TPA Name: **CENTIVO.**

Employer Name: **Open Access, sponsored by Advanced Recovery Systems, LLC**

MEMBER INFO
SAMPLE CENTIVO
 Member ID: **ADVRS000001**

PLAN INFO
 Group ID: **ADVRS**

MEMBER COSTS

Primary Care:	\$30 copay
Specialist:	\$55 copay
Urgent Care:	\$60 copay
ER:	\$350 copay
Deductible:	\$500/\$1,000
Out-of-Pocket Max:	\$4,000/\$8,000

This plan allows you to use any healthcare provider, including providers in the Prime and Centivo Networks.

1422-XX 642F (C/Added) ADVRS-1ZV--ADVRSOAP-NY M(D)(V)

20250827T1D Sh: 0 Bin 1
J0A4 Env [1] CSets 1 of 1



ID Number

Optional Networks: This tells providers that members are not restricted to using a certain network and do not have higher copays or deductibles by using a provider outside of these networks.

Same # for Members & Providers: **888-391-7788**

Optional Networks Provider Search: **my.centivo.com**

SUPPORT
 Centivo Member Care: **888-391-7788**
 Centivo Member Portal: **my.centivo.com**
 Provider Support: **888-391-7788**
 Provider Locator Website: **my.centivo.com**

ELIGIBILITY
 To verify eligibility, check claims status or directly access Centivo's referral portal, log in to availability.com and select Centivo.

PRE-CERTIFICATION
 Pre-certification is required for some services. Possession of this card or obtaining pre-certification does not guarantee coverage. Please see plan documents for all requirements.

MEDICAL CLAIMS SUBMISSIONS
 All Providers send claims to Centivo:
 Electronic Payer ID: **45564**
 Mail: **P.O. Box 211681, Eagan, MN 55121**

1422-XX 6430 (C/Added) ADVRS-1ZV--ADVRSOAP-NY M(D)(V)

20250701T28 Sh: 0 Bin 1
J0B2 Env [1] CSets 1 of 1



Claims Submission Address