




To print this ID card, please select the print icon from the tool bar.

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	NAP		 EXCEED YOUR VISION
EPSON AMERICA, INC.			
GRP: 847174-010-00001		Choice POS II	
Issuer (80840) 9140860054			
ID W2342 01302			
NAME			
01 YUSUKE HATA		PCP: NO ELECTION REQUIRED	
02 KOKORO HATA		PCP: NO ELECTION REQUIRED	
03 KOUKI HATA		PCP: NO ELECTION REQUIRED	
04 TOMOKO HATA		PCP: NO ELECTION REQUIRED	
RX BIN# 610502			
www.aetna.com		PAYER NUMBER 60054 0131	
For Informed Healthline call: 1-800-556-1555 You do not have to choose a primary care doctor. Referrals are not required. However, some services may also require precertification. Without pre-approval, you may pay more or even full price. For mental health or substance abuse pre-approval or coverage questions, call 1-800-424-4047. 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.			
Aetna Life Insurance Company PO BOX 14079 LEXINGTON KY 40512-4079			
MEMBER SERVICES		1-877-869-4077	
PROVIDERS CALL		1-888-632-3862	
RX MEMBER SERVICES		1-888-792-3862	

AT1128

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Note: If you recently changed your PCP/PCD, this change will not be reflected on the ID Card for 5 to 7 days.

The above is a facsimile of your actual ID card. You can show this to your health care provider. All limitations that apply to your ID card apply to this facsimile.