

## Out-of-Area Dependent Wrap Verification

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We're taking steps to ensure your covered spouse or children's claims are processed correctly while he or she is residing outside our service area. We need a few pieces of information from you to make sure any medical services your covered spouse or children receives while outside of the service area will be processed as if the services were incurred in the service area, which is a better benefit to you.

Please complete the information below if you have a covered spouse or children residing outside of the Security Health Plan service area. If this affects more than one person on your health plan, please fill out a form for each.

Employee's name \_\_\_\_\_

Spouse or child's name \_\_\_\_\_

Spouse or child's address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Spouse or child's phone number \_\_\_\_\_

Spouse or child's date of birth \_\_\_\_\_

**Failure to provide the requested information will result in your spouse or child's claims being paid with the out-of-network benefit.**

### Questions? We'd love to help.

Contact our Customer Service Department at 1-800-472-2363 or 715-221-9555. If you are hearing or speech impaired, please call TYY 1-877-727-2232. Our office hours are Monday, Wednesday, Thursday and Friday from 7 a.m. to 5:30 p.m. and Tuesday from 8 a.m. to 5:30 p.m.