

Medica Employee Health Plan Out-of-Area Dependent Coverage – St. Louis Area Network

Covered dependents (up to age 26) residing outside of the **St. Louis Area** network service area may apply to have medical claims covered as out-of-area. If eligible for coverage, care may be accessed by seeing a First Health provider. This provider directory is available at firsthealth.com.

Out-of-area coverage applications will be available during the enrollment process. To determine if your covered dependent(s) qualifies as out of area, please search for the zip code. *To search this PDF, use Ctrl + F and enter the zip code.*

If you **do not** see the zip code listed here, you may submit an application for out-of-area coverage. If your zip code **is** listed here, you are considered IN AREA and will access care through the Dean ASO Network.

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62253	62445	62081	62866	62087	62280	62202	62886	63072	63389
62262	62461	62082	62872	62294	62286	62208	62895	63073	63332
62275	62467	62092	62883	62090	62288	62243	62820	63077	63338
62284	62473	62098	62889	62095	62292	62254	62821	63079	63341
62086	62011	62817	62893	62097	62297	62255	62827	63080	63346
62006	62418	62828	62894	62807	62917	62059	62834	63084	63348
62013	62838	62829	62898	62801	62930	62257	62835	63089	63367
62036	62247	62860	62022	62849	62935	62258	62844	63090	63365
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62070	62885	62901	62052	62881	62534	62269	62915	63020	63304
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62230	62874	62994	62035	62832	62221	62268	62974	63057	63651
62231	62983	62432	62040	62274	62220	62271	62987	63065	63653
62245	62884	62448	62046	62888	62222	62876	63013	63066	63601
62250	62890	62459	62048	62997	62223	62877	63014	63070	63087
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62266	62897	62480	62060	62237	62239	62833	63039	63349	63024
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62424	62044	62816	62074	62261	62203	62850	63060	63377	63005
62426	62050	62830	62273	62272	62206	62851	63061	63379	63006
62401	62054	62846	62084	62277	62205	62446	63068	63381	63017

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