

Section 10

Member ID Cards

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Identifying Members and Validating Eligibility

Member ID cards are for identification purposes only and do not guarantee eligibility or payment of a claim. Here are some accepted ways to identify members:

AZ Blue ID Card	Printed ID Card	Digital ID Card	Digital "Wallet" ID Card	Key Information
Most members will receive their physical or digital cards by the first day of the new plan year. For renewing members, last year's card also works.	Cards (front and back) printed at home should be accepted. You can use the information to validate eligibility.	Members can log in to their AZ Blue account and email you a PDF or text you a screenshot of their card (front and back).	Members can share identification credentials with you through their mobile "wallet" so you can use the information to validate eligibility.	Members can give you their last name, member ID, and date of birth so you can use the information to validate eligibility.

Note: As proof of insurance for new federal employees enrolled in a Federal Employee Program® (FEP®) plan, the new employee will have either an "SF2809" (copy of their enrollment form) or a computer-generated receipt of insurance.

Validating eligibility

You can verify eligibility through any of these 24/7 options:

How to Validate Eligibility	Notes
24/7 Provider Portal Inquiries	AZ Blue, Federal Employee Program® (FEP®), and BlueCard® (Out-of-Area): Log in to the AZ Blue provider portal or the Availity Essentials portal (log in or visit Availity's Register and Get Started page).
	AZ Blue Medicare Advantage: Go to azbluemedicare.com/login > Eligibility & Benefits or log in to the Availity Essentials portal (log in or visit Availity's Register and Get Started page).
	ACA StandardHealth with Health Choice (prefix IAZ): Log in to https://standardhealthhc.com .
	Corporate Health Services (CHS) group plans: Refer to the member ID card for the third-party administrator (TPA) website or contact information.
	BlueDental (prefix 99D): Access the BlueDental provider portal at azblue.com/bluedentalprovider .
24/7 HIPAA Transaction	Use the 270/271 electronic transaction (within your practice software).
24/7 IVR Automated Phone Inquiries	AZ Blue: 602-864-4320 or 1-800-232-2345
	FEP: 602-864-4102 or 1-800-345-7562
	AZ Blue Medicare Advantage: 1-800-446-8331
	ACA StandardHealth with Health Choice (prefix IAZ): 1-800-322-8670
	BlueCard (Out-of-Area): 1-800-676-BLUE (2583)
24/7 Email Inquiries	If you have trouble validating eligibility in the usual ways, please email us at ProviderHelp@azblue.com . We can confirm eligibility within two hours so you can move forward with scheduling and servicing the member.
24/7 Clinical Support	If you need timely assistance for imminent treatment needs, please contact our 24/7 clinical team at UtilizationMgmt@azblue.com . We can validate eligibility, expedite a prior authorization, or assist with an inpatient transfer to a skilled nursing facility.

Our Provider Assistance team is available during business hours (M-F, 8 a.m. to 4:30 p.m.) to help you with questions. Call 602-864-4320 or 1-800-232-2345 and follow the IVR prompts to identify yourself and your patient (for general questions you can use any member ID). Then you can say "representative" at any time to be routed to the Provider Assistance team.

You may also reach out to your assigned [Provider Relations Contact](#) for support.

Availity is a separate, independent company contracted with AZ Blue for provider portal services. Availity and Availity Essentials are registered trademarks of Availity, LLC.

Member ID Card Overview

The Blue Cross[®] Blue Shield[®] (BCBS) Association specifies the requirements for BCBS member ID cards. Our Medicare Advantage cards also align with CMS requirements and the Workgroup for Electronic Data Interchange (WEDI) standards.

This section includes ID card samples for our Affordable Care Act (ACA) plans, AZ Blue group plans, AZ Blue-TPA co-administered plans, BlueCard[®] (out-of-area) plans, Blue High PerformanceSM Network (BlueHPNSM) plans, Corporate Health Services (CHS) group plans, Federal Employee Program[®] (FEP[®]) plans, Medicare Advantage plans, Medicare Supplement plans, international plans, and other BCBS plan options.

ID cards for stand-alone BlueDentalSM plans

AZ Blue issues separate ID cards for its stand-alone BlueDental plans (member ID prefixes 99D and MUM). For more information and samples of dental plan ID cards, see Section 26.

Digital ID cards

The ID cards that are issued by AZ Blue are displayed on the provider portal via eligibility and benefits search results. We are unable to display ID cards that are issued by other entities, including those for BlueCard, FEP, and CHS plans.

The front of an AZ Blue ID card may include the following information:

- AZ Blue logo
- Member name (policyholder) and member ID number (includes three-character prefix)
- Dependents' first names (up to three names per ID card)
Note: Policyholders with more than three dependents will receive an additional card for every three dependents (the policyholder's name appears on all cards).
- Group ID (may include numbers and letters)
- Network name
- General coverage information and member cost-share amounts
- Product type and/or benefit plan name
- "Suitcase" logo identifying the member's out-of-area coverage and provider reimbursement level (for more information, see page 10-4)
- Card print date or plan year
- Prescription drug benefit information and member cost-share amounts (if applicable)

The back of the ID card displays claim filing instructions and plan-specific contact information for:

- Customer service
- Locating a BCBS network provider outside of the plan's service area
- Pharmacy benefit administrator and chiropractic services administrator (if applicable)

Blue Cross, Blue Shield, the Cross and Shield Symbols, BlueCard, Federal Employee Program, and FEP are registered service marks, and Blue High Performance Network, BlueHPN, and BlueDental are service marks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Member ID Prefixes

An important element of a BCBS member ID is the prefix. Most BCBS-branded ID cards display a three-character prefix in the first three positions of the member's ID number. Here are the exceptions:

- Federal Employee Program (FEP) member IDs use only the letter "R" prefix followed by eight numbers
- Corporate Health Services (CHS) group member IDs do not include a three-character prefix. These plans have access to the AZ Blue Statewide PPO Network through a network-rental arrangement, but are administered by a third party as indicated on the ID card.
- Stand-alone vision and pharmacy plans (when delivered through an intermediary model) do not include a three-character prefix. For these plans, check the back of the member ID card for claim, and customer service information.

The prefix is used as a router for eligibility/benefits information and claim filing

The member ID prefix is critical for electronic inquiries such as eligibility and benefits, and is necessary for proper claim filing. When filing claims, always enter the member ID number exactly as it appears on the ID card, including *all* letters and numbers.

AZ Blue member ID prefix list

Providers can view or download the current list of AZ Blue member ID prefixes on our [Member ID Prefixes page](#). The detailed list includes prefixes for AZ Blue standard benefit plans and also the unique, group-specific prefixes we assign to certain large employer groups.

Prefix changes

From time to time AZ Blue may update member accounts and assign a different prefix. In this case, the prefix list will display the original prefix, the newly assigned prefix, and the date the change was made.

- **For claim submissions**, the service date on the claim must correspond to the prefix that was valid on that date. If not, you will receive the following message:
"This member's ID prefix was replaced. Please check the prefix list at [azblue.com/prefix](https://www.azblue.com/prefix) and resubmit with the prefix that is valid for this service date."
- **For online remit searches that include a date range**, you may need to do two searches—one for payments issued before the date account was updated and one for payments issued on or after that date. Or you can simply search specific dates rather than date ranges.

Suitcase Logos

Below are various “suitcase” logos that may be displayed on the front of BCBS member ID cards, in the lower right corner. These logos identify the type of coverage the member has when traveling or living outside of the BCBS Plan’s service area. A suitcase logo is not a guarantee of payment. Provider reimbursement is based on services covered under the member’s benefit plan and the provider’s network participation agreement with AZ Blue.

Blank (empty) suitcase ®

A blank (empty) suitcase signifies that the member has out-of-area coverage that is not a PPO product. Benefit plans that display a blank (empty) suitcase logo on ID cards include:

- HMO plans
- Traditional/indemnity plans
- POS (point of service) plans

Providers contracted with AZ Blue for the broad PPO network (which includes the traditional-indemnity line of business) are reimbursed for covered services in accordance with contracted rates for the indemnity line of business. HMO plan coverage outside of the plan’s service area is limited to urgent and emergency care (other care must be preauthorized by the plan).

PPO suitcase ®

The PPO suitcase means that the member has PPO or EPO benefits for covered services received outside of their plan’s service area. Providers are reimbursed for covered services in accordance with their AZ Blue PPO contract.

PPOB suitcase ®

The PPOB suitcase means the member has a PPO plan and has access to a BCBS nationwide PPO network known as **BlueCard® PPO Basic**. The **Basic National Network** was designed to make out-of-area in-network coverage available for state/federal exchange members.

In Arizona, the statewide PPO is part of the BlueCard PPO Basic network and providers are reimbursed for covered services in accordance with their AZ Blue PPO contract.

BlueHPN suitcase ®

The BlueHPNSM suitcase means the member has an EPO plan using the national Blue High Performance NetworkSM covering over 65 metropolitan areas across the country. In the greater Phoenix area, the BlueHPN consists of the providers in the Alliance network.

Within BlueHPN service areas, BlueHPN providers must be used for all covered services except emergency care. Outside of BlueHPN service areas, coverage is limited to urgent and emergency care only.

No suitcase






Some BCBS ID cards do not have a suitcase logo. These include ID cards for:

- Plans with no BCBS coverage outside of their home plan’s service area (i.e., leased network arrangements) – Note: The member ID card would not include a BCBS prefix and claims would not be submitted to AZ Blue in these cases
- Medicare Complementary and Supplemental products, also known as Medigap (coverage and reimbursement follows CMS rules)
- Stand-alone SCHIP (State Children’s Health Insurance Programs) plans that are separate from a state’s Medicaid program (coverage and reimbursement follow state rules)

Suitcase Logos

Medicare Advantage

BCBS Medicare Advantage (MA) plans will have one of the following logos on the bottom of the ID card, indicating the specific type of plan:

 <p>MEDICARE ADVANTAGE HMO</p>	<p>Except for urgent or emergency care, medical services are only covered when rendered by in-network providers in the plan's HMO service area.</p>
 <p>MEDICARE ADVANTAGE MSA</p>	<p>Members with an MA medical savings account (MSA) have high-deductible plans that come with a savings account funded by Medicare to help pay medical bills.</p>
 <p>MEDICARE ADVANTAGE PFFS</p>	<p>With a private fee-for-service (PFFS) plan, members may go to any Medicare-approved provider that accepts the plan's specific terms and conditions of participation in advance of rendering services.</p>
 <p>MEDICARE ADVANTAGE POS</p>	<p>At the point of service, members with a POS plan may choose to receive certain designated services within the HMO system or seek those services outside of the HMO provider network (typically at greater cost to the member).</p>
 <p>MA PPO MEDICARE ADVANTAGE</p>	<p>Members with MA PPO plans have in-network access to BCBS MA PPO providers across the country through the reciprocal MA PPO network sharing program. Contracted providers are reimbursed in accordance with their negotiated MA rate.</p>

AZ Blue Group Plans – ID Card Samples

AZ Blue offers PPO, EPO, HMO, and Indemnity plans for groups. These plans may be paired with different networks and have various benefit and cost-share structures.

Sample AZ Blue group member ID cards (for illustrative purposes only)

1. PPO plan for fully insured employer groups

BCBS Plan logo — [BlueCross BlueShield Arizona logo]

Member ID prefix — SAM SAMPLE
XBM000000000

Dependent(s) Name:

Copay PCP 25
Copay Specialist \$45
Copay Urgent Care/ER \$60/350
Copay Rx Tier 1/2/3/4 \$15/55/85/150
RX Bin# 603017

Type of plan — BluePreferred® AZDOI

Network used for the plan — PPO Network
Group Number 000000
In-Network Cost Share
Deductible Individual \$250
Deductible Family \$500
OOP Max Individual \$1250
OOP Max Family \$2500
Out-of-Network Cost Share
Deductible Individual \$500
Deductible Family \$1000
OOP max Individual \$2500
OOP max Family \$5000

PPO suitcase logo — Indicates out-of-area coverage through the BlueCard® National PPO network

“AZDOI” indicates a fully insured plan issued by a carrier in the state of Arizona

2. Customized self-funded PPO plan for a large, self-funded employer group (this plan has a tiered benefit design)

Large self-funded groups may be assigned a prefix that is unique to the group or to a particular plan — S3Z987654321

This customized plan has a tiered benefit design — In-Network Cost Share

Large self-funded groups may display their logo on the card — ARIZONA

Member Name: JOHN SAMPLE
Member ID: S3Z987654321
Employee ID: 999999999

Group Number 030855

In-Network Cost Share
Deductible Tier 1/2 Individual \$200/\$1000
Deductible Tier 1/2 Family \$400/\$2000
OOP MAX Individual \$7350
OOP MAX Family \$14700

Copay May Apply
Out-of-Network Cost Share
Deductible Indiv/Family \$5000/\$10000
OOP MAX Individual \$8700
OOP MAX Family \$17400
Flu Shot BIN# 603017

Arizona Department of Administration has hired MedImpact® to handle pharmacy claims and customer service. See back for contact information

3. HMO plan for fully insured groups

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

Ascend HMO Plus

MEMBER NAME
XHK000000001

Statewide HMO Network
Group Number BF0001
In-Network Cost Share
Deductible Individual \$3000
Deductible Family \$6000
OOP MAX Individual \$6350
OOP MAX Family \$12700

Copay PCP \$25
Copay Specialist \$60
Copay Urgent Care/ER \$60/\$400
Coinurance 20%
Copay Rx Tier 1/2/3/4 \$15/55/85/150
Rx BIN# 603017

HMO

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

azblue.com/member
Customer Service: 1-877-475-2981

Urgent Care Outside AZ 1 (800) 810-2583
Provider Service 1 (844) 807-5106
Pharmacy Benefits 1 (866) 325-1794
24/7 NurseLine 1 (866) 422-2729
Chiropractic Benefits 1 (800) 678-9133



File claims with the local BCBS plan, except file with Medicare when Medicare is primary and file chiropractic claims with the Chiropractic Benefits Administrator. Contact BCBSAZ for air ambulance and ancillary claim filing instructions.

BCBSAZ provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims, except to the extent of any stop-loss coverage provided by BCBSAZ.



BlueCross BlueShield Arizona
P.O. Box 2924
Phoenix, AZ 85062-2924

AZ Blue Group Plans – ID Card Samples

4. PPO group plan using an exclusive network



 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>																									
SARA SAMPLE PMA000000000 Dependent(s) Name:																									
<table border="0"> <tr> <td>Copay PCP</td> <td>25</td> </tr> <tr> <td>Copay Specialist</td> <td>\$45</td> </tr> <tr> <td>Copay Urgent Care/ER</td> <td>\$60/350</td> </tr> <tr> <td>Copay Rx Tier 1/2/3/4</td> <td>\$15/55/85/150</td> </tr> <tr> <td>RX Bin#</td> <td>603017</td> </tr> </table>		Copay PCP	25	Copay Specialist	\$45	Copay Urgent Care/ER	\$60/350	Copay Rx Tier 1/2/3/4	\$15/55/85/150	RX Bin#	603017														
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<table border="0"> <tr> <td colspan="2">PimaConnect Network</td> </tr> <tr> <td>Group Number</td> <td>000000</td> </tr> <tr> <td colspan="2">In-Network Cost Share</td> </tr> <tr> <td>Deductible Individual</td> <td>\$250</td> </tr> <tr> <td>Deductible Family</td> <td>\$500</td> </tr> <tr> <td>OOP Max Individual</td> <td>\$1250</td> </tr> <tr> <td>OOP Max Family</td> <td>\$2500</td> </tr> <tr> <td colspan="2">Out-of-Network Cost Share</td> </tr> <tr> <td>Deductible Individual</td> <td>\$500</td> </tr> <tr> <td>Deductible Family</td> <td>\$1000</td> </tr> <tr> <td>OOP max Individual</td> <td>\$2500</td> </tr> <tr> <td>OOP max Family</td> <td>\$5000</td> </tr> </table>		PimaConnect Network		Group Number	000000	In-Network Cost Share		Deductible Individual	\$250	Deductible Family	\$500	OOP Max Individual	\$1250	OOP Max Family	\$2500	Out-of-Network Cost Share		Deductible Individual	\$500	Deductible Family	\$1000	OOP max Individual	\$2500	OOP max Family	\$5000
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OOP max Individual	\$2500																								
OOP max Family	\$5000																								
PPO																									
AZDOI																									
																									



5. EPO benefit plan for employer groups (EPO plans have no out-of-network benefits except for emergency care and other limited circumstances)

 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>															
SALLY SAMPLE XBP000000000 Dependent(s) Name:															
<table border="0"> <tr> <td>Copay PCP</td> <td>25</td> </tr> <tr> <td>Copay Specialist</td> <td>\$45</td> </tr> <tr> <td>Copay Urgent Care/ER</td> <td>\$60/350</td> </tr> <tr> <td>Copay Rx Tiers</td> <td>\$15/55/85/150</td> </tr> <tr> <td>RX Bin#</td> <td>603017</td> </tr> </table>		Copay PCP	25	Copay Specialist	\$45	Copay Urgent Care/ER	\$60/350	Copay Rx Tiers	\$15/55/85/150	RX Bin#	603017				
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Group Number	000000														
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Deductible Family	\$500														
OOP Max Individual	\$1250														
OOP Max Family	\$2500														
EPO Benefit Plan															
AZDOI															
															

6. BlueSignature Prosano PPO plans for employer groups (these plans offer access to AZ Blue network providers and the Prosano Health Care Centers)

Note: These plans may be paired with the Statewide/National PPO/EPO network or the Alliance PPO network.

 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>		BlueSignature PROSANO																									
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Deductible Family	\$4000																										
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OOP Max Family	\$20000																										
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 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>		BlueSignature PROSANO																									
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OOP Max Individual	\$10000																										
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Care at PROSANO Health \$0 Coinsurance 20% Copay Rx Tier 1/2/3/4 \$15/55/85/150 Rx BIN# 603017																											
PPO		AZDOI																									
																											

Affordable Care Act (ACA) Plans – ID Card Samples



AZ Blue offers several PPO and HMO plans for small groups and individuals under 65 and their families. ACA plans include a dental benefit for members up to age 19 – you’ll see that indicated on the front of the ID card. Always check to see which network the plan uses.

ID card samples for individuals/families



1. PremierHealth (PPO plan with the Statewide PPO Network)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>PPO PremierHealth</p>	
<p>MEMBER NAME IPO000000000</p>		<p>Statewide PPO Network</p>	
		Group Number	INDU66
		Plan Year	2024
		In-Network Cost Share	
		Deductible Individual	\$4100
		Deductible Family	\$8200
		OOP MAX Individual	\$9100
		OOP MAX Family	\$18200
		Out-of-Network Cost Share	
		Deductible Individual	\$9000
		Deductible Family	\$18000
		OOP MAX Individual	\$18000
		OOP MAX Family	\$36000
		Pediatric Member Dental	YES
Copay PCP	\$15		
Copay Specialist	\$75		
Copay Urgent Care	\$75		
Copay Rx Tier 1a/1b	\$3/15		
Rx BIN# 603017			
<p>PPO</p>		<p>AZDOI </p>	

2. EverydayHealth (Open-access HMO plan with the MaricopaFocus Network)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>EverydayHealth</p>	
<p>MEMBER NAME FLH000000001</p>		<p>MaricopaFocus Network</p>	
		Group Number	INDU65
		Plan Year	2024
		In-Network Cost Share	
		Deductible Individual	\$2000
		Deductible Family	\$4000
		OOP MAX Individual	\$7250
		OOP MAX Family	\$14500
		Pediatric Member Dental	YES
Copay PCP	\$15		
Copay Specialist	\$50		
Copay Urgent Care	\$60		
Copay Rx Tier 1a/1b/2	\$3/15/70		
Deductible Rx Tier 2/3	\$400		
Rx BIN# 603017			
<p>HMO</p>		<p>AZDOI </p>	



3. ACA StandardHealth with Health Choice (PCP-HMO plan with the ACA Health Choice Network)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>ACA StandardHealth with Health Choice</p>	
<p>MEMBER NAME IAZ987654321</p>		<p>ACA Health Choice Network</p>	
		Group Number	INDU65
		Plan Year	2024
		In-Network Cost Share	
		Deductible Individual	\$5900
		Deductible Family	\$11800
		OOP MAX Individual	\$9100
		OOP MAX Family	\$18200
		Pediatric Member Dental	YES
Copay PCP	\$40		
Copay Specialist	\$80		
Copay Urgent Care	\$60		
Copay RX Tier 1/2/3	\$20/40/80		
Rx BIN# 603017			
		<p>See assigned PCP for services and specialist referrals.</p>	
<p>PCP-HMO</p>		<p>AZDOI </p>	



Affordable Care Act (ACA) Plans – ID Card Samples

ID card samples for small groups



1. EverydayHealth PPO (PPO plan with the Statewide PPO Network)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		Statewide PPO Network	
MEMBER NAME		Group Number	042828
P9H123456789		In-Network Cost Share	
		Deductible Individual	\$6000
		Deductible Family	\$12000
		OOP MAX Individual	\$9000
		OOP MAX Family	\$18000
		Out-of-Network Cost Share	
		Deductible Individual	\$6500
		Deductible Family	\$13000
		OOP MAX Individual	\$18000
		OOP MAX Family	\$36000
		Pediatric Member Dental	YES
Copay PCP	\$25		
Copay Specialist	\$95		
Copay Urgent Care/ER	\$95/\$750		
Coinsurance	20%		
Copay Rx Tier 1a/1b/2/3	\$3/35/100/200		
Rx BIN#	603017		
EverydayHealth PPO		AZDOI 	

2. BlueSignature Prosano (PPO plan with the Alliance PPO Network that includes access to the Prosano Health Care Centers)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		BlueSignature PROSANO	
JANE ROBINSON		Alliance PPO + Prosano	
S3C987654321		Group Number	000005
		In-Network Cost Share	
		Deductible Individual	\$1000
		Deductible Family	\$2000
		OOP Max Individual	\$5000
		OOP Max Family	\$10000
		Out-of-Network Cost Share	
		Deductible Individual	\$2000
		Deductible Family	\$4000
		OOP Max Individual	\$10000
		OOP Max Family	\$20000
Care at PROSANO Health	\$0		
Coinsurance	20%		
Copay Rx Tier 1/2/3/4	\$15/55/85/150		
Rx BIN#	603017		
PPO		AZDOI 	

3. Portfolio HMO (Open-access HMO plan with the PimaConnect Network)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		Portfolio	
MEMBER NAME		PimaConnect Network	
PMK000000001		Group Number	BF0001
		In-Network Cost Share	
		Deductible Individual	\$4250
		Deductible Family	\$8500
		OOP MAX Individual	\$7100
		OOP MAX Family	\$14200
		Pediatric Member Dental	YES
Coinsurance	10%		
Rx BIN#	603017		
HMO		AZDOI 	

AZ Blue-TPA Co-Administered Plans – ID Card Sample

Large self-funded groups may opt to have their health plan co-administered by AZ Blue and a third party administrator (TPA). When this is the case, the member ID card will display a disclaimer in the lower left corner of the front of the card stating that the employer group utilizes a TPA to handle member contact for health plan administration:

Employer group utilizes a TPA to handle member contact for health plan administration. See back for contact information.

Sample member ID card

The sample ID card below is an illustration only, as the card might include different information.

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

Company Name/Logo

Name, Member

Member ID: ABC123456789

Plan:	BASIC	In-Network Medical Co-pays:
Group No:	000000	Office Visit: \$35
		Specialist Office Visit: \$55
RXBIN:	000000	Urgent Care: \$100
RXPCN:	XXX	Emergency Room: \$1,000 then 30%
RXGRP:	XX123	Retail Rx Co-pays: \$10 / \$40 / \$60

Medical/Rx Identification Card

Employer group utilizes a TPA to handle member contact for health plan administration. See back for contact information.

PPO

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

www.azblue.com

Provider Assistance: 1-800-232-2345
ext 4320

Members: Please see your benefit booklet for covered services.

TPA Member Services*: 1-800-XXX-XXXX
myTPA.com

TPA/Vendor Precertification*: 1-800-XXX-XXXX

RX Member Services – TPA: 1-800-XXX-XXXX
TPA-rx.com

Possession of this card does not guarantee eligibility for benefits.

Providers: File claims with your local Blue Cross and/or Blue Shield plan.

BlueCross®-BlueShield®-of Arizona provides administrative and claim payment services only and does not assume any financial risk or obligation with respect to claims.

*Employer group contracts directly with TPA and vendor

Blue Cross Blue Shield of Arizona
P.O. Box 2924
Phoenix, AZ 85062-2924
An Independent Licensee of the Blue Cross Blue Shield Association

*Pharmacy benefit manager; contracts directly with group

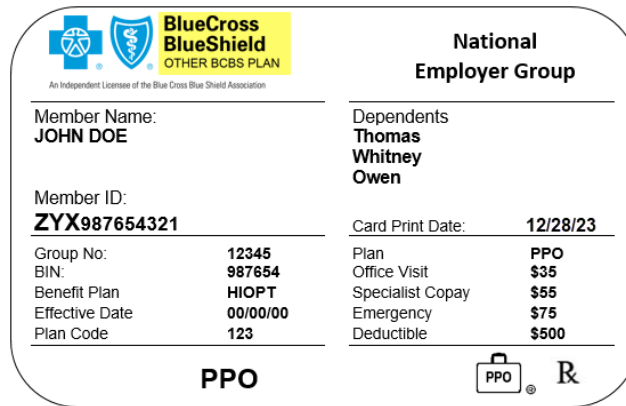
Rx Logo

BlueCard (Out-of-Area) Plans – ID Card Sample

ID cards from other Blue Plans

Member ID cards from other BCBS (Blue) Plans look similar to AZ Blue cards. However, the BCBS logo will be specific to the member’s Blue Plan. Other differences include member ID prefixes, benefit plan names, cost-share amounts, and contact information. Because we do not issue these cards, we are unable to display them via the provider portal through eligibility and benefits inquiries.

Sample BlueCard (out-of-area) member ID card (for illustration purposes only, actual card design may be different)



Blue High Performance Network (BlueHPN) EPO Plans – ID Card Sample

Blue High Performance Network (BlueHPN) EPO plans are available only to employer groups with national accounts. This plan use the national exclusive (narrow) BlueHPN network covering over 65 key metropolitan areas. In the greater Phoenix metropolitan area, the BlueHPN consists of providers in the Alliance Network (for more information about this network, see Section 8).

EPO rules apply




Because BlueHPN plans are sold as EPO plans, members only have benefits when they access care from BlueHPN-contracted providers within the specific BlueHPN service areas (except in emergency situations). You must refer only to providers in-network for the BlueHPN or request prior authorization for out-of-network services.

Coverage exceptions for emergency and urgent care depend on provider network status and practice location:

- **Within** BlueHPN service areas, providers who are not contracted for participation in the BlueHPN are considered out-of-network for BlueHPN plans except when delivering *emergency care*.
- **Outside** of BlueHPN service areas, coverage is limited to *urgent* and *emergency* care only.

Reimbursement for urgent and emergency services is in accordance with the provider participation agreement.

Member ID card sample (for illustration only, actual card information may vary)

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p> <p>Steve Sample Z5M000000000</p> <p>Dependent(s) Name:</p> <hr/> <p>Copay PCP 25 Copay Specialist \$45 Copay Urgent Care/ER \$60/350 Copay Rx Tiers \$15/55/85/150 RX Bin# 603017</p> <hr/> <p>Blue High Performance Network™ AZDOI </p>	 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p> <p>Possession of this card does not guarantee eligibility for benefits. Certain health services may require pre-certification.</p> <p>File claims with the local BCBS plan, except file with Medicare when Medicare is primary and file chiropractic claims with the Chiropractic Benefits Administrator. Contact BCBSAZ for air ambulance and ancillary claim filing instructions.</p> <p style="text-align: right;">azblue.com/member Customer Service: 1-855-818-0242 1-855-818-0242</p> <p>Urgent Care Outside AZ 1 (800) 810-2583 Pharmacy Benefits 1 (866) 325-1794 24/7 Nurseline 1 (866) 422-2729 Chiropractic Benefits 1 (800) 678-9133</p> <hr/> <p>BlueCross BlueShield Arizona P.O. Box 2924 Phoenix, AZ 85062-2924</p>
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Corporate Health Services (CHS) Group Plans – ID Card Sample

Corporate Health Services (CHS) group arrangements provide large, self-insured employer groups access to an AZ Blue provider network. Under CHS agreements, AZ Blue provides network access (in Arizona only) and claim pricing. Although we do not provide administrative or claim payment services, all claims for in-network services rendered in Arizona must be submitted to AZ Blue for pricing.

Most CHS groups have opted to use a third party administrator (TPA) for claim processing and verification of eligibility and benefits. CHS Group member ID cards are issued by the TPA and display this disclosure statement:

Arizona network provided by Blue Cross Blue Shield of Arizona (AZ Blue). AZ Blue provides network access only and provides no administrative or claims payment services and does not assume any financial risk or obligation with respect to claims. No network access is available from Blue Cross Blue Shield Plans outside Arizona.

Include the medical plan group number on all claim submissions

The front of CHS ID cards display an AZ Blue-assigned group number that must be included with all claim submissions so we can route the claim to the correct TPA after pricing. The format used for the AZ Blue-assigned group number is three letters followed by three numbers (ABC123).

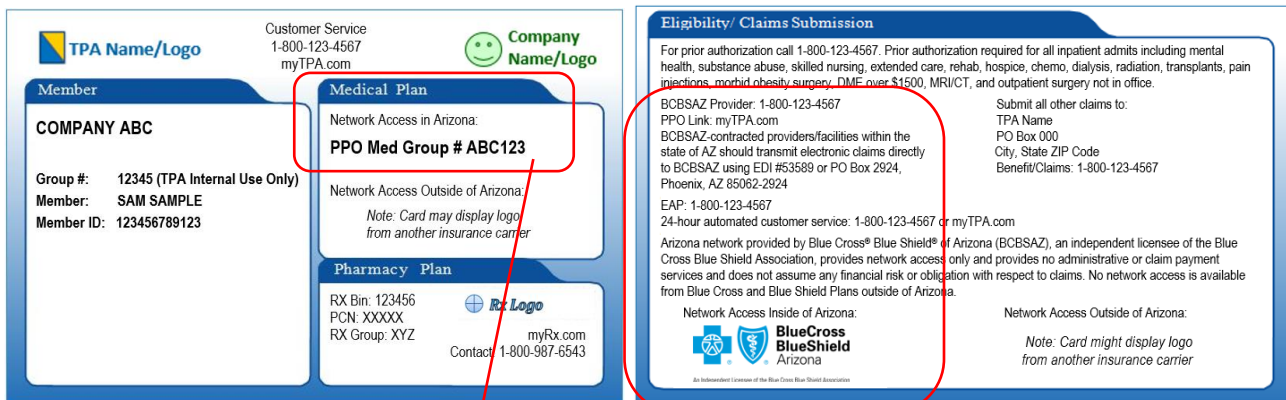
Note: CHS ID cards also display TPA information, which may include an internal TPA group reference number. Do *not* use this group number on claims.

Back of card displays in- and out-of-network claim filing information

The back of CHS ID cards display the AZ Blue logo, indicating access to the AZ Blue provider network for covered services in Arizona. The card back also includes claim submission information for AZ Blue network providers and separate instructions for out-of-network providers. Be sure to submit your claims to AZ Blue using EDI 53589. Do not submit them directly to the TPA.

Sample CHS group member ID card with AZ Blue-assigned group number

The sample ID card below is for illustration purposes only, as the design of CHS group ID cards varies by employer group/TPA and may include other names, logos, and information.



The AZ Blue-assigned group number (three letters followed by three numbers) must be included on all claim submissions.

The AZ Blue logo and in-network claim submission information is on the back of the card.

Federal Employee Program (FEP) Plans – ID Card Samples


Members who receive their Blue Cross and Blue Shield Service Benefit Plan benefits through the Federal Employees Health Benefits Program (FEHBP) will have an FEP ID card. Because we do not issue these ID cards, we are unable to display them via provider portal eligibility inquiries.

- FEP cards do not display a three-character prefix. Rather, all FEP member IDs begin with the letter “R” followed by eight numbers. Be sure to include all characters in the member ID in transactions.
- Other information on the front of the ID card includes the member name, enrollment code, effective date, prescription BIN, PCN, and group number, and website address.
- The back of the FEP ID card includes information for providers and phone numbers for customer service, precertification, mental health/substance abuse, retail pharmacy, the 24/7 nurse line, and overseas assistance.

Sample FEP Standard Option ID card



**Government-Wide
Service Benefit Plan**



Federal Employee Program.

Member Name
JONATHAN Q DOE

Member ID
R12345678

fepblue.org

Standard Option
Enrollment Code **104**

RxIIN
RxPCN
RxGrp

**610239
FEPRX
65006500**

Scan this code to view your plan's deductibles and out-of-pocket maximums. Or visit fepblue.org/standard.





www.fepblue.org/contact-us

Federal Employee Program.

Customer Service: **602-864-4102**
800-345-7562
602-864-4102

Precertification: **888-883-4451**

Mental Health/Substance Use Disorder Precertification: **800-624-5060**

Retail Pharmacy: **800-262-7890**

Mail Service Pharmacy: **888-346-3731**

Specialty Drug Pharmacy: **804-673-1678**

Overseas Assistance Center: **888-258-3432**

Nurse Line: **800-411-BLUE (2583)**


General Information: **800-411-BLUE (2583)**
(Members Only)

Blue Cross Blue Shield of Arizona
An Independent Licensee of the Blue Cross Blue Shield Association


This card is used to obtain covered benefits under the Blue Cross and Blue Shield Service Benefit Plan Standard Option. Precertification is required for all hospital admissions and is ultimately your responsibility. Benefits are reduced by \$500 if precertification is not obtained. For instructions, call the local Blue Cross and Blue Shield Plan serving the area where you are treated. In some areas, Preferred hospitals will obtain precertification for you. Certain other services require prior approval. Please consult your benefit Brochure for more information.

Use of this card constitutes acceptance of the terms and conditions in the Service Benefit Plan Brochure (R1 71-005) for the applicable contract year, which is the only legal description of benefits.

Sample FEP Basic Option ID card



**Government-Wide
Service Benefit Plan**



Federal Employee Program.

Member Name
JONATHAN Q DOE

Member ID
R12345678


fepblue.org

Basic Option
Enrollment Code **112**

RxIIN
RxPCN
RxGrp

**610239
FEPRX
65006500**

Scan this code to view your plan's deductibles and out-of-pocket maximums. Or visit fepblue.org/basic.





www.fepblue.org/contact-us

Federal Employee Program.

Customer Service: **602-864-4102**
800-345-7562
602-864-4102

Precertification: **888-883-4451**

Mental Health/Substance Use Disorder Precertification: **800-624-5060**

Retail Pharmacy: **800-262-7890***

Mail Service Pharmacy: **888-346-3731**

Specialty Drug Pharmacy: **804-673-1678**

Overseas Assistance Center: **888-258-3432**

Nurse Line: **800-411-BLUE (2583)**

General Information: **800-411-BLUE (2583)**
(Members Only)

Blue Cross Blue Shield of Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

This card is used to obtain covered benefits under the Blue Cross and Blue Shield Service Benefit Plan Basic Option. You MUST use Preferred providers to get benefits. Precertification is required for all hospital admissions and is ultimately your responsibility. Benefits are reduced by \$500 if precertification is not obtained. For instructions, call the local Blue Cross and Blue Shield Plan serving the area where you are treated. In some areas, Preferred hospitals will obtain precertification for you. Certain other services require prior approval. Please consult your benefit Brochure for more information.

Use of this card constitutes acceptance of the terms and conditions in the Service Benefit Plan Brochure (R1 71-006) for the applicable contract year, which is the only legal description of benefits.

*Available Only if Member has Medicare Part B as Primary Coverage

Sample FEP Blue Focus ID card



**Government-Wide
Service Benefit Plan**



Federal Employee Program.

Member Name
JONATHAN Q DOE

Member ID
R12345678

fepblue.org

FEP Blue Focus
Enrollment Code **133**

RxIIN
RxPCN
RxGrp

**610239
FEPRX
65006500**

Scan this code to view your plan's deductibles and out-of-pocket maximums. Or visit fepblue.org/ffb.





www.fepblue.org/contact-us

Federal Employee Program.

Customer Service: **602-864-4102**
800-345-7562
602-864-4102

Precertification: **888-883-4451**

Mental Health/Substance Use Disorder Precertification: **800-624-5060**

Retail Pharmacy: **888-346-3731**

Specialty Drug Pharmacy: **804-673-1678**

Overseas Assistance Center: **888-258-3432**

Nurse Line: **800-411-BLUE (2583)**

General Information: **800-411-BLUE (2583)**
(Members Only)

Blue Cross Blue Shield of Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

This card is used to obtain covered benefits under the Blue Cross and Blue Shield Service Benefit Plan FEP Blue Focus. You MUST use Preferred providers to get benefits. Precertification is required for all hospital admissions and is ultimately your responsibility. Benefits are reduced by \$500 if precertification is not obtained. For instructions, call the local Blue Cross and Blue Shield Plan serving the area where you are treated. In some areas, Preferred hospitals will obtain precertification for you. Certain other services require prior approval and benefits are reduced by \$100 if not obtained. Please consult your benefit Brochure for more information.

Use of this card constitutes acceptance of the terms and conditions in the FEP Blue Focus Brochure (R1 71-017) for the applicable contract year, which is the only legal description of benefits.

Medicare Advantage Plans – ID Card Samples

AZ Blue currently offers both HMO and PPO Medicare Advantage (MA) benefit plans:

- Blue Best Life HMO** plans are available in Maricopa, Pinal, and Pima counties. We partner with OptumCare Arizona to provide utilization management and claim/payment services for a subset of our HMO membership in Maricopa and Pinal counties. These members can be identified by the Optum claim filing information and prior authorization number on the back of the ID card.
- BlueJourneySM PPO** plans are available in Maricopa and Pima counties, with in-network access to care across the entire state. These plans are administered by AZ Blue.

Below are samples of each of type of plan. Check the back of the card for claim filing information and the applicable prior authorization phone number.

Blue Best Life HMO plan ID card samples

1. Blue Best Life HMO plan with AZ Blue for prior authorization and claim/payment processing:

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

Blue Best Life Plus

Member: **JONN A DOE**
Member ID: **M2K123456789**

RxBIN: 610011
RxPCN: CTRXMEDD
RxGRP: BAZMAPD

Service Area: **Maricopa/Pinal**
Plan ID: **H0302-001**
PCP: [Redacted]
Network: **BLUE ADVANTAGE**

Service Types: **Medical, Rx**
Office Visit Copay: **\$0**
Specialist Copay: **\$25**
Emergency Room Copay: **\$125**

MedicareRx Prescription Drug Coverage X
MEDI CARE ADVANTAGE | HMO

azblue.com/medicare

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

DO NOT BILL MEDICARE
Arizona providers: BCBSAZ
send claims to: P.O. Box 29234
Phoenix, AZ 85038-9234
Payor ID: 53589

Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.

Pharmacists submit claims to:
Pharmacy Benefits Administrator
PO Box 650629
Dallas, TX 75265-0629

Member Services: (480) 937-0409
Toll Free: (800) 446-8331
TTY: 711

For Providers Only
Admissions Notice: (800) 446-8331
Eligibility: (800) 446-8331
Pharmacists: (844) 883-8523
Prior Authorization: (800) 446-8331

Card Print Date: 08/10/2022

Please present this card at time of service with every prescription. Coverage is limited outside of the service area.

Note: Claim filing information indicates AZ Blue

2. Blue Best Life HMO plan with OptumCare Arizona for prior authorization and claim/payment processing:

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

Blue Best Life Classic

Member: **JONN A DOE**
Member ID: **M2K123456789**

RxBIN: 610011
RxPCN: CTRXMEDD
RxGRP: BAZMAPD

Service Area: **Maricopa/Pinal**
Plan ID: **H0302-006**
PCP: [Redacted]
Network: **BLUE ADVANTAGE**

Service Types: **Medical, Rx**
Office Visit Copay: **\$0**
Specialist Copay: **\$20**
Emergency Room Copay: **\$125**

MedicareRx Prescription Drug Coverage X
MEDI CARE ADVANTAGE | HMO

azblue.com/medicare

BlueCross BlueShield Arizona
An Independent Licensee of the Blue Cross Blue Shield Association

DO NOT BILL MEDICARE
Arizona providers: OptumCare Arizona
send claims to: P.O. Box 30539
Salt Lake City, UT 84130
Payor ID: LIFE1

Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.

Pharmacists submit claims to:
Pharmacy Benefits Administrator
PO Box 650629
Dallas, TX 75265-0629

Member Services: (480) 937-0409
Toll Free: (800) 446-8331
TTY: 711

For Providers Only
Admissions Notice: (800) 446-8331
Eligibility: (800) 446-8331
Pharmacists: (844) 883-8523
Prior Authorization: (877) 370-2845


Card Print Date: 08/10/2022

Please present this card at time of service with every prescription. Coverage is limited outside of the service area.

Note: Claim filing information indicates OptumCare Arizona

Medicare Advantage Plans – ID Card Samples

BlueJourney PPO ID card samples




BlueJourney

An Independent Licensee of the Blue Cross Blue Shield Association


Member JONN A DOE	Service Area Pima
Member ID M3P190123458	Plan ID H5140-002
RxBIN 610011	Network BLUEJOURNEY PPO
RxPCN CTRXMEDD	Service Types Medical, Rx
RxGRP BAZMAPD	Office Visit Copay \$0 or \$30 out of network
	Specialist Copay \$30 or \$50 out of network
	Emergency Room Copay \$125

MedicareRx
Prescription Drug Coverage

MA PPO
MEDICARE ADVANTAGE



azblue.com/medicare



An Independent Licensee of the Blue Cross Blue Shield Association

DO NOT BILL MEDICARE

Arizona providers: BCBSAZ
send claims to: P.O. Box 29234
Phoenix, AZ 85038-9234

Payor ID: 53589

Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.

Pharmacists submit claims to:
Pharmacy Benefits Administrator
PO Box 650629
Dallas, TX 75265-0629

Member Services:	(800) 937-0409
Toll Free:	(800) 446-8331
TTY:	711

For Providers Only

Admissions Notice:	(800) 446-8331
Eligibility:	(800) 446-8331
Pharmacists:	(844) 883-8523
Prior Authorization:	(800) 446-8331

Card Print Date: 08/10/2022

Please present this card at time of service with every prescription. Coverage is limited outside of the service area.

Note: All BlueJourney PPO plans are administered by AZ Blue

OptumCare Network of Arizona ("OptumCare Arizona") is a separate, wholly owned subsidiary of Optum and is contracted with AZ Blue to provide utilization management and claim/payment processing services for providers and attributed members with certain AZ Blue Medicare Advantage HMO plans.

Medicare Supplement Plans – ID Card Sample

Medicare Supplement products


AZ Blue offers the following standardized Medicare Supplement products:


- **Senior Preferred** Medicare Select plans C, D, G, and N (members must use providers in the AZ Blue Senior Preferred Network except for emergencies and in other rare situations when no Senior Preferred network provider is not available)
- **Senior Security** plans A, C, D, F, G, and N (members may use any Medicare participating provider)

Additionally, AZ Blue has members enrolled in non-standardized Medicare Supplement products issued prior to 1992, when CMS imposed standardization requirements. AZ Blue also has members in legacy plans Senior Security Plan H and Senior Preferred Plan H. For more information, see Section 8.

Sample ID card for Medicare supplement plan

Note: The **XBS** prefix is used for all Senior Preferred and Senior Security plans. Members typically keep the same ID card from one plan year to the next, unless something has changed.

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>	
Member Name: Sam Sample	Group No: 0ABCX1
Member ID: XBS000000000	Card Print Date: 02/28/2022
Senior Preferred C	
AZDOI	

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		azblue.com/medicare Customer Service (602) 864-4122 (800) 232-2345 ext. 4122
Possession of this card does not guarantee eligibility for benefits. Certain health services may require pre-certification.		Pharmacy Benefits 1 (866) 325-1794 24/7 Nurseline 1 (866) 422-2729
File claims with the local BCBS Plan, except when Medicare is primary, providers should file directly with Medicare. Contact BCBSAZ for air ambulance and ancillary claim filing directions.		
		BlueCross BlueShield Arizona P.O. Box 2924 Phoenix, AZ 85062-2924

International ID Cards

In addition to cards from other BCBS Plans across the U.S., you may see ID cards indicating international coverage, including GeoBlue plans, Blue Cross Blue Shield Global™ plans, or plans from BCBS international/territory licensees. Because we do not issue these cards, we are unable to display them on the provider portal.

BCBS ID cards include a member ID prefix (for routing purposes) and may or may not have a suitcase logo. Please treat these members the same as you would domestic BCBS Plan members:

- File claims with AZ Blue.
- Do not collect any upfront payment from the member beyond the applicable cost-share amounts, such as deductible, coinsurance and copay.
- Check eligibility and benefits via the [AZ Blue provider portal](#) (or the [Availity Essentials portal](#)) or call the U.S. customer service number on the back of the ID card.
- Check claim status via the [AZ Blue provider portal](#) (or the [Availity Essentials portal](#)) or use the automated IVR phone system at 602-864-4320 or 1-800- 232-2345.

International/territory licensee plans

BCBS licensees from other countries and territories issue plans that are part of the BlueCard system, allowing members to receive healthcare services outside of the plan’s service area.

Sample card:

		BlueCross & BlueShield de Uruguay	
MEMBER NAME	Plan		
Member Name	1400		
MEMBER ID	RPA PREMIUM		
XYZ 0123456789	Expiration Date: XX/XX/XXXX		
Plan	PPO		
GROUP	URU038		
BC/BS Plan Codes: 154/654			
CREDENCIAL PARA USO EXCLUSIVO FUERA DE URUGUAY			

		BlueCross & BlueShield de Uruguay		www.bcbsu.com.uy
Uruguay Clientes: Por beneficios consulte su contrato. La posesión de esta tarjeta no garantiza la elegibilidad de los beneficios.				
Atención al Cliente: (598-2) 707-7575				
United States (E.E.U.U.) Customer Service: (598-2) 707-7575 Provider Finder: 1-800-610-2583 Eligibility: 1-800-676-2583				
Proveedores en Uruguay: Para verificar elegibilidad y beneficios, por favor llamar a nuestras oficinas. Dirija facturas por servicios médicos a nuestra dirección.				
Providers in the United States: To verify membership eligibility, please call eligibility line. Providers should file all claims to the local BlueCross and/or BlueShield Plan in whose Service Area the member received services.				
BlueCross & BlueShield de Uruguay Lord Ponsonby 2456 11600 Montevideo, Uruguay An Independent Licensee of the BlueCross and BlueShield Association.				

GeoBlue

GeoBlue is licensed with the BCBS Association to issue and administer international product solutions. GeoBlue offers individual and group solutions for both U.S. members accessing care in other countries and for international members accessing care in the U.S.

1. **GeoBlue branded ID card sample** – This card represents an individual product for members accessing care in the U.S.

		Xplorer Premier		www.geobluetravelinsurance.com	
XP-5000-NRX					
Jane E Demo QHF999999999H					
Group No.	99990483	Copay in Network, Inside U.S.	\$30		
BIN	610020	Copay in Network, Outside U.S.	\$0		
Coverage Dates	15-Apr-2016 - 14-Apr-2017	Copay Out of Network, Outside U.S.	\$10		

		www.geobluetravelinsurance.com	
Members: See benefit booklet for services covered by your plan. Possession of this card does not guarantee eligibility for benefits.			
Medical claims incurred inside the U.S., Puerto Rico, and U.S. Virgin Islands Hospitals or Physicians: file claims with local Blue Cross and/or Blue Shield Plan Members: See benefit booklet for claims filing procedures or visit www.geobluetravelinsurance.com .			
Claims incurred Outside the U.S., Puerto Rico, and U.S. Virgin Islands and all Dental and Rx claims File all claims with GeoBlue, Claims Department P.O. Box 1748, Southeastern, PA 19399-1748, USA. Visit www.geobluetravelinsurance.com for instructions.			
Medical benefits underwritten by 4 Ever Life Insurance Company, Oakbrook Terrace, IL, an independent licensee of the Blue Cross and Blue Shield Association.			
24/7 Member Services Outside the U.S. +1.610.254.5850 Toll Free Within the U.S. 1.855.481.6647 customerservice@geo-blue.com		24/7 Medical Assistance Including Evacuation Collect Calls Accepted +1.610.254.8771 globalhealth@geo-blue.com	
Prescription/Pharmacy Information Pharmacy Help Desk 1.800.788.2910		GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association.	
Pharmacy benefits administrator.			

International ID Cards

2. BCBS Global branded ID card samples – These cards represent the licensed partnership administered by GeoBlue for international members accessing care in the U.S.

- a. GeoBlue Corporate Expat (member ID prefixes QHA, QHB, QHC, QHD, Q3H, QHE, QHG, QHH, QHO)

BlueCross BlueShield Global		GEOBLUE EXPAT TEST BCBS-NX	
James Abroad QHB502888583H			
Group No. 99990483 BIN 610020 PCN PDMI	Copy Deductible \$2,000/\$4,000 Out of Pocket Max \$3,000/\$6,000	In Network / Out of Network \$0/\$10 \$2,000/\$4,000 \$3,000/\$6,000	
U.S. ONLY			

www.geo-blue.com
24/7 Member Services
 Toll Free Within the U.S. **1.888.304.8898**
 Outside the U.S. **+1.610.230.2406**

24/7 Provider Services
 Toll Free Within the U.S. **1.855.282.3517**
 Pre-Authorization in U.S. **1.800.952.3404**

Prescription/Pharmacy Information
 Pharmacy Help Desk **1.800.788.2910**

Members: Visit the Member Hub on geo-blue.com to review benefits and applicable healthcare costs. Possession of this card does not guarantee eligibility for benefits.

Medical Claims Incurred Inside the U.S., Puerto Rico, and U.S. Virgin Islands
 Hospitals or Physicians: file claims with local Blue Cross and/or Blue Shield Plan.
 Members: See benefit booklet for claims filing procedures or visit www.geo-blue.com.

Medical benefits are fully insured by 4 Ever Life Insurance Company, Oakbrook Terrace, IL, an independent licensee of the Blue Cross Blue Shield Association.

Blue Cross Blue Shield Global® is a Brand owned by the Blue Cross Blue Shield Association.
 This Blue Cross Blue Shield Global product is delivered by the international healthcare experts at GeoBlue®.

GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association.

Pharmacy benefits administrator.

- b. GeoBlue and Canadian Blue Cross Program (member ID prefixes QFF, QFH, QFJ, QFK, QFE)

BlueCross BlueShield Global			
Kelly Kelly Kelly-Smith QFK9000111G			
U.S. ONLY			

Hospitals or Physicians: file claims with local Blue Cross and/or Blue Shield Plan.

Member Services
 Travel Assistance **1.800.281.1474**

Provider Services
 Pre-Authorization **1.833.929.0903**

Underwritten and/or administered by Ontario Blue Cross, an independent member of the Canadian Association of Blue Cross Plans (CABC). GeoBlue® provides administrative services only in the U.S. and does not assume any financial risk or obligation with regards to claims. Benefit determination and travel assistance services are provided by CanAssistance on behalf of Ontario Blue Cross.

Blue Cross Blue Shield Global® is a Brand owned by the Blue Cross Blue Shield Association and brought to you by the international healthcare experts at GeoBlue.

GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of Blue Cross Blue Shield Association.

Ontario Blue Cross is an independent member of the Canadian Association of Blue Cross Plans, a licensee of the Blue Cross and Blue Shield Association.

- c. GeoBlue and Bupa Global Program (member ID prefixes QHM, QHN, QHI, QHJ, QHK, QHL, Q5N, Q5M)


BlueCross BlueShield Global		www.bupaglobalaccess.com	
Member Name:	Employer Group Name:	U.S. Customer Service +1 786-257-4741 U.S. Customer Service Toll Free +1 844-369-3797 Providers Inquiries & Precertification +1 844-369-3099	
Member ID.	Employer Group No.	Evacuation/Repatriation (if included): +44 1273 333911 Prescription/Pharmacy Information and Pharmacy Help Desk +1 855-767-1864	
Rx Group No. BIN PCN:		Process claims through Pharmacy Data Management (PDMI) U.S. Service Center Palmetto Bay Village Center 17901 Old Cutler Road, Suite#400 Palmetto Bay, FL 33157 Email: info@bupaglobalaccess.com	
U.S. ONLY			

BIN-BCBS-CARD-PRINT-1603V11


International ID Cards


d. Geo Blue and Bupa Global Program (shield-only)

In certain territories, including Hong Kong and the United Arab Emirates, Blue Cross-branded products are not available. The ID cards will display the Blue Shield Global logo.



Member Name:	Employer Group Name:
Member ID.	Employer Group No.
Rx Group No.	
BIN	
PCN:	

U.S. ONLY 



www.bupaglobalaccess.com

U.S. Customer Service **+1 786-257-4741**
 U.S. Customer Service Toll Free **+1 844-369-3797**
 Providers Inquiries & Precertification **+1 844-369-3099**

Evacuation/Repatriation (if included): **+44 1273 333911**
 Prescription/Pharmacy Information and Pharmacy Help Desk **+1 855-767-1864**


Process claims through Pharmacy Data Management (PDMI)

U.S. Service Center
 Palmetto Bay Village Center
 17901 Old Cutler Road, Suite#400
 Palmetto Bay, FL 33157
 Email: info@bupaglobalaccess.com

Members: See benefit booklet for services covered by your plan. Possession of this card does not guarantee eligibility for benefits.

Underwritten by Bupa or its Designated Affiliate, independent licensees of the Blue Cross Blue Shield Association.

Blue Shield Global is a brand owned by BCBSA.

 Pharmacy benefits administrator.

GeoBlue is the trade name of Worldwide Insurance Services, LLC (known as Worldwide Services Insurance Agency, LLC, in California and New York), an independent licensee of Blue Cross Blue Shield Association, made available in cooperation with Blue Cross and Blue Shield companies in select service areas. **Blue Cross Blue Shield Global** are brands owned by the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. **Bupa Global** is a trade name of Bupa, the international healthcare company. Bupa is an independent licensee of Blue Cross and Blue Shield Association. Bupa Global's rights to use the Blue Cross Blue Shield Brands are limited in some areas.




Other BCBS ID Cards




Some BCBS Plans may offer the following options, not currently offered by AZ Blue.

Limited benefits plans

Most traditional benefit plans have high lifetime coverage limits (i.e., \$1 million or more). Some BCBS Plans offer “limited benefits” plans with annual benefits limited to \$50,000 or less. The front or back of the member ID card will include a statement indicating this type of plan. The ID card design uses a green stripe at the bottom of the card and the BCBS logo will be black, rather than blue.

Sample cards for limited benefits plan:

 BlueCross BlueShield of Geography			
Member Name Member Name Member ID XYZ123456789		Dependents Dependent One Dependent Two Dependent Three	
Group No. 023457 BIN 987654 Benefit Plan HIOPT Effective Date 00/00/00	Plan PPO Office Visit \$15 Specialist Copay \$15 Emergency \$75 Deductible \$50		
InReach A healthcare plan providing limited benefits			

 BlueCross BlueShield of Geography			
Member Name Member Name Member ID XYZ123456789		Dependents Dependent One Dependent Two Dependent Three	
Group No. 023457 BIN 987654 Benefit Plan HIOPT Effective Date 00/00/00	Plan PPO Office Visit \$15 Specialist Copay \$15 Emergency \$75 Deductible \$50		
MyBasic A healthcare plan providing limited benefits			

To check the limited benefits coverage and current accumulated benefits, submit an eligibility and benefits inquiry. The member is responsible for costs related to services received beyond the covered amounts or number of treatments allowed by the plan.

Electronic health ID cards

Some BCBS Plans have implemented electronic health ID cards to enable electronic transfer of core member data, including coverage and eligibility, from the ID card to the provider’s patient system. The card has a magnetic stripe on the back, similar to a credit or debit card. Providers must have a Track 3 Card Reader in order for the data embedded in the stripe to be read. The front of the card is similar to other BCBS ID cards.

Sample of an electronic health ID card:

 Blue Cross Blue Shield OTHER BCBS PLAN		Blue Product 	
Member Name Member Name Member ID XYZ123456789		Dependents Dependent One Dependent Two Dependent Three	
Plan PPO Plan Code 123	Office Visit \$15 Specialist Copay \$15 Emergency \$75 Deductible \$50		

www.BluePlan.com	
 Blue Cross Blue Shield OTHER BCBS PLAN	Customer Service: 1-800-234-5678 x1234 Behavioral Health: 1-800-987-6543 x1234 Outside of Area: 1-800-810-2583 x1234 Eligibility: 1-800-676-2583 x1234 Pharmacy Benefits*: 1-800-888-1234
Members: See your benefit booklet for covered services. Possession of this card does not guarantee eligibility for benefits. Hospitals or physicians: file claims with your local BlueCross and/or BlueShield Plan. BlueCross and BlueShield of Geography provides administrative services and does not assume any financial risk for claims.	BlueCross and BlueShield (OTHER BCBS PLAN) P.O. Box 01234 City, State 01234-1234 An independent licensee of the BlueCross and BlueShield Association.
* BETA Pharmacy Management	