

Section 10

Member ID Cards

Contents

Identifying Members and Validating Eligibility	10-1
Member ID Card Overview	10-2
Member ID Prefixes	10-3
Suitcase Logos	10-4
AZ Blue Group Plans – ID Card Samples	10-6
AZ Blue-TPA Co-Administered Plans – ID Card Sample	10-8
Affordable Care Act (ACA) Plans – ID Card Samples	10-9
BlueCard® (Out-of-Area) Plans – ID Card Sample	10-11
Blue High Performance Network SM (BlueHPN SM) EPO Plans – ID Card Sample	10-12
Corporate Health Services (CHS) Group Plans – ID Card Sample	10-13
Federal Employee Program® (FEP®) Plans – ID Card Samples	10-14
Medicare Advantage Plans – ID Card Sample	10-16
Medicare Supplement Plans – ID Card Sample	10-18
International ID Cards	10-19
Other BCBS ID Cards	10-22

Identifying Members and Validating Eligibility

Member ID cards are for identification purposes only and do not guarantee eligibility or payment of a claim. To support quick access to service for enrolled members, you can use these accepted ways to identify AZ Blue members and use the information to validate eligibility:

AZ Blue ID Card	Printed ID Card	Digital ID Card	Digital Credentials	Key Information
Most members 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 their AZ Blue ID with you through their mobile "wallet" so you can use the information to validate eligibility.	Members can give you their 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 validate eligibility through any of these 24/7 options:

How to Validate Eligibility	Notes
24/7 Provider Portal Inquiries	AZ Blue, FEP, BlueCard® (Out-of-Area), and Medicare Advantage plans: Log in to the Availity Essentials™ provider portal .
	ACA StandardHealth with Health Choice (prefix IAZ): Go to azblue.com/aca-standardhealth-health-choice .
	Corporate Health Services (CHS) group plans: Refer to the member ID card for the third-party administrator (TPA) website or contact information.
	BlueDental SM (prefix 99D) plans: 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 plans: 1-844-995-2583
	FEP plans: 602-864-4102 or 1-800-345-7562 ; For postal service plans: 1-888-585-8922
	Medicare Advantage plans: 1-800-446-8331
	BlueCard (out-of-area) plans: 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 UtilMgmt@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 can help you with questions during business hours (M-F, 8 a.m. to 4:30 p.m.). Call **1-844-995-2583** 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.

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. 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 of the Provider Operating Guide includes ID card samples for most lines of business and types of benefit plans.

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) and for Medicare Advantage dental benefits. For more information and samples of dental plan ID cards, see Section 26.

Digital ID cards

When you do online eligibility and benefits searches, you can access ID cards we issue. We don't have access to 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)
- Member ID, including a three-character prefix (Federal Employee Program® plans use just the letter "R" as a 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
- Certain general coverage and cost-share information
- 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)

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. Check the back of the card for specific contact information.
- 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 replacements

AZ Blue has been moving member data to a more robust platform. As we do this, we may assign a new member ID prefix in some cases. This helps us temporarily track members in both systems for current and historical data. It's important to use the prefix that is valid for the service date (check the current replacements table on our [prefix page](#)). Here's why it matters:

- **Eligibility and benefits**

If you use a prefix that isn't valid for the service date, you will receive an "inactive" status.

- **Claim submission**

If you submit a claim using a prefix that isn't valid for the service date, you will receive a message advising you of the prefix replacement::

"The member ID prefix you entered does not match the prefix on file for this service date. Please resubmit with the correct prefix (see [azblue.com/prefix](#)).

- **Remits**

On the Availity Essentials provider portal, you may want to use the service date filter if you're searching by member ID. There are many other search options.

On the AZ Blue provider portal, you may want to do two searches—one for payments issued before the date the 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 (lower right corner). These logos identify the type of coverage the member has when traveling or living outside of the BCBS (Blue) 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 means the member has out-of-area coverage that may be limited or different from 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 statewide 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 member’s Blue Plan’s service area is limited to urgent, emergency, and other preauthorized care.

PPO suitcase ®

The PPO suitcase means that the member has PPO or EPO benefits for covered services received outside of their Blue 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 network is part of the national 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 county. 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.

AZ Blue group member ID card samples (for illustrative purposes only)

1. *PPO plan for fully insured employer groups*

BCBS Plan logo

Member ID prefix

Network used for the plan

Plan name

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

This customized plan has a tiered benefit design

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

3. *HMO plan for fully insured groups*

MEMBER NAME: XHK987654321

Group Number: 000001

Network: HMO

Plan name: Ascend HMO Plus

AZDOI

azblue.com/member

Customer Service: 877-475-2981

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


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>	
Member Name: MEMBER NAME	Group No: 00001
Member ID: PMA987654321	Card Print Date: 01/01/25
Network: PIMACONNECT	Rx BIN #: 603017
Copy May Apply	Out-of-Network Cost Share:
In-Network Cost Share:	Individual Deductible: \$2000
Deductible Ind/Family: \$1000/\$2000	Family Deductible: \$4000
Individual OOP MAX: \$5000	Individual OOP MAX: \$10000
Family OOP MAX: \$10000	Family OOP MAX: \$20000
PPO	

5. EPO group plan using the Statewide PPO network (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>	
Member Name: SALLY SAMPLE	Group No: 40329
Member ID: XBM987654321	Dependent(s) Name: JOHN SARA ROBERT
Network: PPO	Card Print Date: 10/30/24
In-Network Cost Share:	Rx BIN #: 603017
Individual Deductible: \$300	PCP/Specialist Copay: \$20/\$40
Family Deductible: \$600	Urgent Care/ER Copay: \$50/\$300
Individual OOP MAX: \$2750	Rx Copay Tier 1/2/3: \$15/\$35/\$55
Family OOP MAX: \$5500	
EPO Benefit Plan	

6. BlueSignatureSM Prosano PPO plan for employer groups (offers access to the Prosano Health[®] Care Centers in addition to one of the following networks: Statewide/National PPO/EPO network, the Alliance PPO network, or the PimaConnect network)

 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>		BlueSignature PROSANO	
MEMBER NAME	Statewide PPO + Prosano	Group Number	000001
EBB987654321	In-Network Cost Share	Deductible Individual	\$2500
	Deductible Family	Deductible Family	\$5000
	OOP MAX Individual	OOP MAX Individual	\$6500
	OOP MAX Family	OOP MAX Family	\$13000
	Out-of-Network Cost Share	Deductible Individual	\$5000
	Deductible Individual	Deductible Family	\$10000
	Deductible Family	OOP MAX Individual	\$13000
	OOP MAX Individual	OOP MAX Family	\$26000
	OOP MAX Family		
Care at PROSANO Health \$0			
Coinsurance 20%			
Copay Rx Tier 1/2/3/4 \$15/55/85/150			
Rx BIN# 603017			
PPO		AZDOI	

 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>		BlueSignature PROSANO	
MEMBER NAME	Alliance PPO + Prosano	Group Number	000001
S3C987654321	In-Network Cost Share	Deductible Individual	\$7000
	Deductible Individual	Deductible Family	\$14000
	Deductible Family	OOP MAX Individual	\$8500
	OOP MAX Individual	OOP MAX Family	\$17000
	OOP MAX Family	Out-of-Network Cost Share	\$14000
	Deductible Individual	Deductible Individual	\$28000
	Deductible Family	OOP MAX Individual	\$17000
	OOP MAX Individual	OOP MAX Family	\$34000
	OOP MAX Family		
Care at PROSANO Health \$0			
Coinsurance 30%			
Copay Rx Tier 1/2/3/4 \$15/55/85/150			
Rx BIN# 603017			
PPO		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. The message says:

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

For more information about this type of plan, see Section 8.

Member ID card

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

The front of the ID card features the BlueCross BlueShield Arizona logo on the top left and a placeholder for the company name/logo on the top right. Below the logos, the member's name and ID are listed. A table of plan details and in-network medical co-pays is provided. A yellow box in the bottom left corner contains a disclaimer about TPA administration. A PPO logo is in the bottom right.

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

Medical/Rx Identification Card

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

The back of the ID card features the BlueCross BlueShield Arizona logo on the top left and the website www.azblue.com on the top right. It contains contact information for provider assistance, TPA member services, and TPA vendor prior authorization. It also includes a disclaimer about the TPA's role and a note about the pharmacy benefit manager (PBM).

Members: Please see your benefit booklet for covered services.

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.

Provider Assistance: 1-844-996-2583
 TPA Member Services*: 1-800-123-1234
 myTPA.com

TPA/Vendor Prior Authorization*: 1-800-123-1234
 RX Member Services – TPA: 1-800-123-1234
 TPA-rx.com

*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


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 IPO987654321</p>		<p>Statewide PPO Network</p>	
		Group Number	INDU65
		Plan Year	2025
		In-Network Cost Share	
		Deductible Individual	\$1150
		Deductible Family	\$2300
		OOP MAX Individual	\$2500
		OOP MAX Family	\$5000
		Out-of-Network Cost Share	
		Deductible Individual	\$5000
		Deductible Family	\$10000
		OOP MAX Individual	\$10000
		OOP MAX Family	\$20000
		Pediatric Member Dental	YES
Copays	Check Benefits		
Rx BIN# 603017			
PPO		AZDOI 	



 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>azblue.com/member</p>	
<p>Customer Service: 602-864-4115 855-818-0240</p>		<p>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</p>	
<p>Possession of this card does not guarantee eligibility for benefits. Certain health services may require prior authorization.</p>			
<p>Emergency services available inside and outside Arizona from non-network providers. Urgent care available outside Arizona from BlueCard Traditional providers.</p>			
<p>File claims with the local BCBS plan, except file with Medicare when Medicare is primary and file AZ chiropractic claims with the Chiropractic Benefits Administrator. Contact AZ Blue for air ambulance and ancillary claim filing instructions.</p>			
		<p>BlueCross BlueShield Arizona P.O. Box 2924 Phoenix, AZ 85062-2924</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 FLH987654321</p>		<p>MaricopaFocus Network</p>	
		Group Number	INDU65
		Plan Year	2025
		In-Network Cost Share	
		Deductible Individual	\$8000
		Deductible Family	\$16000
		OOP MAX Individual	\$9300
		OOP MAX Family	\$18600
		Pediatric Member Dental	YES
Copays	Check Benefits		
Rx BIN# 603017			
HMO		AZDOI 	

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>azblue.com/member</p>	
<p>Customer Service: 602-864-4115 855-818-0240</p>		<p>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</p>	
<p>Possession of this card does not guarantee eligibility for benefits. Prior authorization required for certain benefits. Certain health services may require prior authorization.</p>			
<p>Emergency services available inside and outside Arizona from non-network providers. Urgent care available outside Arizona from BlueCard Traditional providers.</p>			
<p>File claims with the local BCBS plan, except file with Medicare when Medicare is primary and file AZ chiropractic claims with the Chiropractic Benefits Administrator. Contact AZ Blue for air ambulance and ancillary claim filing instructions.</p>			
		<p>BlueCross BlueShield Arizona P.O. Box 2924 Phoenix, AZ 85062-2924</p>	

3. ACA StandardHealth with Health Choice (prefix IAZ; uses 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	2025
		In-Network Cost Share	
		Deductible Individual	\$700
		Deductible Family	\$1400
		OOP MAX Individual	\$3000
		OOP MAX Family	\$6000
		Pediatric Member Dental	YES
Copays	Check Benefits		
Coinsurance		30%	
Rx BIN# 603017			
PCP-HMO		AZDOI 	
<p>See assigned PCP for services and specialist referrals.</p>			

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>azblue.com/member</p>	
<p>Customer Service: 602-864-4115 855-801-4635</p>		<p>Urgent Care Outside AZ 1 (800) 810-2583 Provider Service 1 (800) 322-8670 Pharmacy Benefits 1 (866) 325-1794 24/7 Nurseline 1 (888) 267-9037 Chiropractic Benefits 1 (800) 678-9133</p>	
<p>Possession of this card does not guarantee eligibility for benefits. Prior authorization required for certain benefits. Certain benefits require a PCP referral to be covered. Except for emergencies, benefits must be provided by network providers to be covered.</p>			
<p>Emergency services available inside and outside Arizona from non-network providers. Urgent care available outside Arizona from BlueCard Traditional providers.</p>			
<p>File claims with the local BCBS plan, except file with Medicare when Medicare is primary and file AZ chiropractic claims with the Chiropractic Benefits Administrator. Contact AZ Blue for air ambulance and ancillary claim filing instructions.</p>			
		<p>BlueCross BlueShield Arizona P.O. Box 52033 Phoenix, AZ 85072-2033</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)




MEMBER NAME
P9H987654321


Statewide PPO Network
Group Number 000001

In-Network Cost Share
Deductible Individual \$6000
Deductible Family \$12000
OOP MAX Individual \$3000
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 




azblue.com/member
Customer Service: 602-864-4197
800-232-2345

Find Out-Of-State Providers 1 (800) 810-2583
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 AZ Blue for air ambulance and ancillary claim filing instructions.

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

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



BlueSignature PROSANO


MEMBER NAME
S3C987654321


Alliance PPO + Prosano
Group Number 000001

In-Network Cost Share
Deductible Individual \$7000
Deductible Family \$14000
OOP MAX Individual \$8500
OOP MAX Family \$17000

Out-of-Network Cost Share
Deductible Individual \$14000
Deductible Family \$28000
OOP MAX Individual \$17000
OOP MAX Family \$34000
Pediatric Member Dental YES

Care at PROSANO Health \$0
Coinsurance 30%
Copay Rx Tier 1/2/3/4 \$15/55/85/150
Rx BIN# 603017

PPO AZDOI 




azblue.com/member
Customer Service: 855-PROSANO
855-776-7266

Find Out-Of-State Providers 1 (800) 810-2583
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 AZ Blue for air ambulance and ancillary claim filing instructions.

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

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



Portfolio


MEMBER NAME
FQL987654321


PimaFocus Network
Group Number INDU65
Plan Year 2025

In-Network Cost Share
Deductible Individual \$7000
Deductible Family \$14000
OOP MAX Individual \$7000
OOP MAX Family \$14000
Pediatric Member Dental YES

Rx BIN # 603017

See assigned PCP for services and specialist referrals.

PCP-HMO AZDOI 



azblue.com/member
Customer Service: 602-864-4115
855-818-0240

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

Emergency services available inside and outside Arizona from non-network providers. Urgent care available outside Arizona from BlueCard Traditional providers.

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




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

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 eligibility and benefits inquiries on the provider portal.

ID card sample (for illustration purposes only, actual card design may be different)

 BlueCross BlueShield OTHER BCBS PLAN <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>		National Employer Group	
Member Name: JOHN DOE		Dependents Thomas Whitney Owen	
Member ID: XYZ987654321		Card Print Date: 01/01/25	
Group No:	12345	Plan	PPO
BIN:	987654	Office Visit	\$35
Benefit Plan	HIOPT	Specialist Copay	\$55
Effective Date	00/00/00	Emergency	\$75
Plan Code	123	Deductible	\$500
PPO		 	

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 type of plan uses 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)

	
Member Name: MEMBER NAME	Group No: 0000
Member ID: Z5M987654321	
Network: BLUEHPN	Card Print Date: 01/01/25
In-Network Cost Share:	Rx BIN #: 603017
Individual Deductible: \$4000	PLAN: EPO
Family Deductible: \$8000	
Individual OOP MAX: \$4000	
Family OOP MAX: \$8000	
<p>Blue High Performance Network™ </p>	

		<p>azblue.com/member Customer Service: (844) 899-4072</p>
<p><small>An Independent Licensee of the Blue Cross Blue Shield Association</small></p> <p>Possession of this card does not guarantee eligibility for benefits. Within BlueHPN service areas, in-network providers must be used for all covered services, except emergency care. Outside BlueHPN service areas, coverage is limited to urgent and emergency care only.</p> <p>File claims with the local BCBS Plan, except file directly with Medicare when Medicare is primary and file chiropractic claims with the Chiropractic Benefits Administrator. Contact AZ Blue for air ambulance and ancillary claim filing directions.</p> <p>AZ Blue 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 AZ Blue.</p>		<p>For Urgent Care Outside of BlueHPN service area: 1 (800) 810-2583 Pharmacy Benefits: 1 (866) 325-1794 24/7 Nurse Line: 1 (866) 422-2729 Chiropractic Benefits: 1 (800) 678-9133</p> <p>BlueCross BlueShield of Arizona P.O. Box 2924 Phoenix, AZ 85062-2924</p>

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. For more information about this type of plan, see Section 8.

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 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 member ID **does not** include a BCBS prefix.

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

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 (FEHB) Program or the Postal Service Health Benefits (PSHB) Program 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.

- All FEP member IDs begin with the letter “R” followed by eight numbers. Be sure to include all characters in the member ID in your transactions.
- FEP offers three plan options: FEP Blue Standard, FEP Blue Basic, and FEP Blue Focus. You’ll see the member’s plan type in the upper right corner in the U.S. map or postage stamp icon. It’s also written above the enrollment code.
- Other information on the front of the ID card includes the member name, enrollment code (similar to a group number), effective date, prescription BIN, PCN, and group number, website address, and QR code to scan for cost share information.
- The back of the 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.


Note: Postal plans have a different number for customer service and precertification.

ID card samples

You can spot postal service ID cards by the icon in the upper right corner that looks like a postage stamp. Non-postal cards display the US map icon.

FEP Blue Standard – Postal card

BlueCross BlueShield
Federal Employee Program.

Government-Wide Service Benefit Plan 

Member Name: **PAUL POSTAL**
Member ID: **R80307471**


Website: **fepblue.org**
Plan: **FEP Blue Standard™**
Enrollment Code: **33D**

RxIIN: **610239**
RxPCN: **FEPRX**
RxGrp: **65006500**

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

FEP Blue Standard – Non-postal card

BlueCross BlueShield
Federal Employee Program.

Government-Wide Service Benefit Plan 

Member Name: **JONATHAN Q DOE**
Member ID: **R12345678**

Website: **fepblue.org**
Plan: **Standard Option**
Enrollment Code: **104**

RxIIN: **610239**
RxPCN: **FEPRX**
RxGrp: **65006500**

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

The back of the postal ID card displays the new customer service and precertification number.

Postal card back

BlueCross BlueShield
Federal Employee Program.

fepblue.org/contact-us **888-585-8922**

Customer Service: 888-585-8922
Precertification: 888-585-8922
Mental Health/ Substance Use Disorder Precertification: 888-585-8922
Retail Pharmacy: 800-624-5060
Mail Service Pharmacy: 800-262-7890
Specialty Drug Pharmacy: 888-346-3731
Overseas Assistance Center: 804-673-1678
Nurse Line: 888-258-3432
General Information: 800-411-BLUE (2583) (Members Only)

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

Non-postal card back

BlueCross BlueShield
Federal Employee Program.

www.fepblue.org/contact-us




Customer Service: 602-864-4102
800-345-7562
Precertification: 602-864-4102
Mental Health/Substance Use Disorder Precertification: 888-883-4451
Retail Pharmacy: 800-624-5060
Mail Service Pharmacy: 800-262-7890*
Specialty Drug Pharmacy: 888-346-3731
Overseas Assistance Center: 804-673-1678
Nurse Line: 888-258-3432
General Information: 800-411-BLUE (2583) (Members Only)

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




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

Federal Employee Program (FEP) Plans – ID Card Samples




FEP Blue Basic – Postal card

 BlueCross. BlueShield. Federal Employee Program.		Government-Wide Service Benefit Plan		 Basic
Member Name PAULA POSTAL	fepblue.org			
Member ID R80307476	FEP Blue Basic™ Enrollment Code		33A	
NO PRESCRIPTION DRUG BENEFIT	Scan this code to view your plan's deductibles and out-of-pocket maximums. Or visit fepblue.org/basicpostal .			




FEP Blue Basic – Non-postal card

 BlueCross. BlueShield. Federal Employee Program.		Government-Wide Service Benefit Plan		 Basic
Member Name JONATHAN Q DOE	fepblue.org			
Member ID R12345678	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 .	
				

FEP Blue Focus – Postal card

 BlueCross. BlueShield. Federal Employee Program.		Government-Wide Service Benefit Plan		 Focus
Member Name T BLUE FOCUS SELF COVERAG	fepblue.org			
Member ID R80307477	FEP Blue Focus® Enrollment Code		35A	
NO PRESCRIPTION DRUG BENEFIT	Scan this code to view your plan's deductibles and out-of-pocket maximums. Or visit fepblue.org/focuspostal .			

FEP Blue Focus – Non-postal card

 BlueCross. BlueShield. Federal Employee Program.		Government-Wide Service Benefit Plan		 FEP Blue Focus
Member Name JONATHAN Q DOE	fepblue.org			
Member ID R12345678	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/fbf .	
				

Medicare Advantage Plans – ID Card Samples

AZ Blue currently offers HMO Medicare Advantage (MA) benefit plans in Maricopa, Pinal, and Pima counties.

- Blue Best Life Classic – available in Maricopa, Pinal, and Pima counties
- Blue Best Life Plus – available in Maricopa and Pinal counties

We partner with Optum Health Network Arizona (OHNAZ) and Arizona Priority Care (AZPC) 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 looking at the claim filing information and prior authorization number on the back of the ID card.

MA provider networks

The AZ Blue MA HMO plans all use the Blue Advantage provider network. The BlueJourney PPO network is used for members with out-of-area MA PPO plans.




MA ID card samples

Below are samples of AZ Blue MA ID cards. Check the back of the card for claim filing information and the applicable prior authorization phone number.



1. Blue Best Life HMO plan offered in Maricopa and Pinal counties

Note: Maricopa/Pinal county plans are administered by AZ Blue or Optum Health Network Arizona (OHNAZ) or Arizona Priority Care (AZPC)



Card front

 <p>BlueCross BlueShield Arizona An Independent Licensee of the Blue Cross Blue Shield Association</p>		<p>Blue Best Life Classic</p>	
Member	Service Area	Maricopa/Pinal	
MEMBER NAME	Plan ID	H0302-006	
Member ID	PCP	[REDACTED]	
M2K987654321	Network	BLUE ADVANTAGE	
RxBIN	610011	Service Types	Medical, Rx
RxPCN	CTRXMEDD	Office Visit Copay	\$0
RxGRP	BAZMAPD	Specialist Copay	\$20
		Emergency Room Copay	\$125
			



Card back with AZ Blue

<p>azblue.com/medicare</p> 	
	
Member Services:	(480) 937-0409
Toll Free:	(800) 446-8331
TTY:	711
<p>DO NOT BILL MEDICARE</p>	
Arizona providers send claims to:	BCBSAZ P.O. Box 29234 Phoenix, AZ 85038-9234
Payor ID:	53589
<p>Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.</p>	
Pharmacists submit claims to:	Pharmacy Benefits Administrator P.O. Box 650629 Dallas, TX 75265-0629
<p>Please present this card at time of service with every prescription. Coverage is limited outside of the service area.</p>	
For Providers Only	Admissions Notice: (800) 446-8331 Eligibility: (800) 446-8331 Pharmacists: (844) 883-8523 Prior Authorization: (800) 446-8331

Card back with Optum Health Network Arizona

<p>azblue.com/medicare</p> 	
	
Member Services:	(480) 937-0409
Toll Free:	(800) 446-8331
TTY:	711
<p>DO NOT BILL MEDICARE</p>	
Arizona providers send claims to:	OHNAZ P.O. Box 30539 Salt Lake City, UT 84130
Payor ID:	LIFE1
<p>Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.</p>	
Pharmacists submit claims to:	Pharmacy Benefits Administrator P.O. Box 650629 Dallas, TX 75265-0629
<p>Please present this card at time of service with every prescription. Coverage is limited outside of the service area.</p>	
For Providers Only	Admissions Notice: (877) 370-2845 Eligibility: (800) 446-8331 Pharmacists: (844) 883-8523 Prior Authorization: (877) 370-2845

Card back with Arizona Priority Care



<p>azblue.com/medicare</p> 	
	
Member Services:	(480) 937-0409
Toll Free:	(800) 446-8331
TTY:	711
<p>DO NOT BILL MEDICARE</p>	
Arizona providers send claims to:	Arizona Priority Care 585 N. Juniper Drive #150 Chandler, AZ 85226
Payor ID:	27154
<p>Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.</p>	
Pharmacists submit claims to:	Pharmacy Benefits Administrator P.O. Box 650629 Dallas, TX 75265-0629
<p>Please present this card at time of service with every prescription. Coverage is limited outside of the service area.</p>	
For Providers Only	Admissions Notice: (480) 449-8720 Eligibility: (800) 446-8331 Pharmacists: (844) 883-8523 Prior Authorization: (480) 499-8720

Medicare Advantage Plans – ID Card Samples



2. Blue Best Life HMO plan offered in Pima County

Note: Pima County plans are administered by AZ Blue or Optum Health Network Arizona (OHNAZ)



Card front

 BlueCross BlueShield Arizona <small>An Independent Licensee of the Blue Cross Blue Shield Association</small>		Blue Best Life Classic	
Member	Service Area	Pima	
MEMBER NAME	Plan ID	H0302-008	
Member ID	PCP	[REDACTED]	
M2K987654321	Network	BLUE ADVANTAGE	
RxBIN	Service Types	Medical, Rx	
610011	Office Visit Copay	\$0	
RxPCN	Specialist Copay	\$5	
CTRXMEDD	Emergency Room Copay	\$90	
RxGRP		BAZMAPD	
		MEDICARE ADVANTAGE HMO	

Card back with AZ Blue

azblue.com/medicare	
	
	
<p>DO NOT BILL MEDICARE</p> <p>Arizona providers send claims to: BCBSAZ, P.O. Box 29234, Phoenix, AZ 85038-9234</p> <p>Payor ID: 53589</p> <p><small>Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.</small></p> <p>Pharmacists submit claims to: Pharmacy Benefits Administrator P.O. Box 650629 Dallas, TX 75265-0629</p>	<p>Member Services: (480) 937-0409 Toll Free: (800) 446-8331 TTY: 711</p> <p>For Providers Only</p> <p>Admissions Notice: (800) 446-8331 Eligibility: (800) 446-8331 Pharmacists: (844) 883-8523 Prior Authorization: (800) 446-8331</p> <p><small>Please present this card at time of service with every prescription. Coverage is limited outside of the service area.</small></p>

Card back with Optum Health Network Arizona

azblue.com/medicare	
	
	
<p>DO NOT BILL MEDICARE</p> <p>Arizona providers send claims to: OHNAZ, P.O. Box 30539, Salt Lake City, UT 84130</p> <p>Payor ID: LIFE1</p> <p><small>Providers outside of Arizona should file all claims to the local Blue Cross Blue Shield Plan in whose service area the member received services.</small></p> <p>Pharmacists submit claims to: Pharmacy Benefits Administrator P.O. Box 650629 Dallas, TX 75265-0629</p>	<p>Member Services: (480) 937-0409 Toll Free: (800) 446-8331 TTY: 711</p> <p>For Providers Only</p> <p>Admissions Notice: (877) 370-2845 Eligibility: (800) 446-8331 Pharmacists: (844) 883-8523 Prior Authorization: (877) 370-2845</p> <p><small>Please present this card at time of service with every prescription. Coverage is limited outside of the service area.</small></p>

Optum Health Network Arizona (OHNAZ) 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 Medicare Advantage members.

Arizona Priority Care (AZPC) is a separate, independent company contracted with AZ Blue to provide healthcare services to AZ Blue providers and attributed Medicare Advantage members. Arizona Priority Care is a service mark of Arizona Health Advantage, Inc.

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

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.

	
Member Name: MEMBER NAME	Group No: INDO65
Member ID: XBS987654321	Card Print Date: 01/01/2025
Senior Preferred C	
	AZDOI

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

International ID Cards

In addition to cards from other Blue 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 international ID cards include a member ID prefix (for routing purposes) and may or may not have a suitcase logo. Please use the same processes as for domestic BlueCard members:

- Check eligibility and benefits via the [Availity Essentials provider portal](#) or call the U.S. customer service number on the back of the ID card.
- Do not collect any upfront payment from the member beyond the applicable cost-share amounts, such as deductible, coinsurance and copay.
- File claims with AZ Blue.
- Check claim status via the [Availity Essentials provider portal](#) or use the automated IVR phone system at 1-844-995-2583.

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
Atención al Cliente: (598-2) 707-7575

United States (E.E.U.U.)
Customer Service: (598-2) 707-7575
Provider Finder: 1-800-810-2583
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.

GeoBlue **Xplorer Premier**

XP-5000-NRX

Jane E
Demo
QHF99999999H

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

GeoBlue www.geoblue.travelinsurance.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.geoblue.travelinsurance.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.geoblue.travelinsurance.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.

Universal Rx

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)

		GEOBLUE EXPAT TEST BCBS-NX	
<hr/>			
James Abroad QHB502888583H			
<hr/>			
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)

			
<hr/>			
Kelly Kelly Kelly-Smith QFK9000111G			
<hr/>			
U.S. ONLY 			

Member Services
 Travel Assistance **1.800.281.1474**

Provider Services
 Pre-Authorization **1.833.929.0903**

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




Underwritten and/or administered by Ontario Blue Cross, an independent member of the Canadian Association of Blue Cross Plans (CABCP). 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)

			
<hr/>			
Member Name:	Employer Group Name:		
Member ID.	Employer Group No.		
<hr/>			
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**

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

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

Blue Cross Blue Shield Global is a brand owned by the Blue Cross and Blue Shield Association.

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


BIN-BCBS-CARD-PRINT-1603V11

Pharmacy benefits administrator.



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:	



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**

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

Evacuation/Repatriation (if included): **+44 1273 333911**


Prescription/Pharmacy Information and Pharmacy Help Desk **+1 855-767-1864**

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

Process claims through Pharmacy Data Management (PDMI)

Blue Shield Global is a brand owned by BCBSA.

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

 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





You might see the following options from other Blue Plans (these are 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 Blue 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	Plan PPO	Office Visit \$15	 
BIN 987654	Office Visit \$15	Specialist Copay \$15	
Benefit Plan HIOPT	Emergency \$75	Deductible \$50	
Effective Date 00/00/00			
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	Plan PPO	Office Visit \$15	 
BIN 987654	Office Visit \$15	Specialist Copay \$15	
Benefit Plan HIOPT	Emergency \$75	Deductible \$50	
Effective Date 00/00/00			
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 Blue 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	Office Visit \$15	Specialist Copay \$15	 
Plan Code 123	Emergency \$75	Deductible \$50	

 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.		
* BETA Pharmacy Management		Pharmacy benefits administrator—not a BlueCross BlueShield product.