

5 Identification (ID) Cards

Description This chapter focuses on information about the member's health plan ID card.

Sections

- Section 1: Using the ID Card
- Section 2: Reading an ID Card
- Section 3: Premera ID Cards
- Section 4: BlueCard ID Cards
- Section 5: NASCO ID Cards
- Section 6: FEP ID Cards



Section 1: Using an ID Card

Using an ID Card

The member health plan ID card is the link between the physician or provider, the patient, and the available benefits. It includes information necessary to submit a claim.

To ensure that you have the most current information, it is important to capture all ID card data at the time of service in order to verify membership and coverage. Please note the following:

- Ask for a current ID card **at each visit** to confirm any product or benefit changes that may have occurred.
- Make copies of the front and back of the ID card and share this information with your billing staff.
- Transfer information to the claim exactly as it is presented on the card
- Check the “Date Printed” (see the next section for more details).

ID Number

We no longer use a Social Security number (SSN) on our member ID cards. Our standard is to use a uniquely assigned number preceded with a three-digit alpha prefix.

If you have questions, call the member’s Customer Service department, at the number on the back of the member’s ID card or visit our website at premera.com.

Section 2: Reading an ID Card

Front of the ID Card

The front of the ID card identifies the member's plan and contains coverage and cost-sharing information, as well as billing completion information. Here's what to look for when reading the front of our member ID card:



Office Visit Copay \$XX
Emergency Room \$XX
Retail RX \$XX/\$XX/\$XX
Mail-Order Rx \$XX/\$XX/\$XX

Rx: This symbol is used if the member's plan has prescription coverage.

Copayment information: Indicates the amount that the member pays at time of service.

This example also shows tiered prescription costs.

Note: Copay amounts vary by plan. Check the member's ID card or contact the Customer Service (number on the back of the ID card) for the specific copay amount. Some larger accounts may request that copayment amounts not be displayed on the ID card.

BIN #610014

Bank Identification Number: The BIN# assists pharmacies with submitting prescription medication claims through the Medco on-line system.

As a Premera-contracted provider, you can render services to patients who are national account members of other Blue Cross and/or Blue Shield plans, and who travel or live in your state. The BlueCard Program enables members of one Blue Cross and Blue Shield (BCBS) plan to obtain healthcare services while traveling or living in another Blue plan's service area. The suitcase symbols are important when providing healthcare services to out-of-area patients who belong to the BlueCard Program.



Empty suitcase: A blank suitcase symbol on a member's ID card indicates that the member's plan includes BlueCard benefits. The suitcase symbols are important when providing healthcare services to Blue Cross Blue Shield out-of-area patients.



PPO in suitcase: "PPO in the Suitcase" lets you know that this patient is covered under a BlueCard PPO plan.

Group

Internal number assigned to each group that chooses Premera as their health plan.

Identification

Use this number to identify the patient when submitting claims. You must submit the member's ID number on all claims and correspondence exactly as displayed on the members ID card.

Prefix	<p>Include the alpha prefix with the member's Identification # on all claims.</p> <p>Note: Custom prefixes are available to large groups to assist national accounts with claims routing.</p> <p>Note: Submit claims with the alpha-prefix information exactly as printed on the member ID card. Modifications to the prefix as shown on the card will result in claims delays.</p>
Suffix	<p>Indicates the member's relationship to the subscriber and does not need to be included on any claim.</p>
BCBS	<p>A number code used to assist in the identification of the member's Blue Cross Blue Shield plan.</p>
Medical Network	<p>Indicates member's specific network/plan name. If "Plus 1" follows the name, it means that the member's plan has out-of-network benefits. You will need to contact customer service for out-of-network benefits. Our Dimensions network names are identified to the right of "Medical Network" on the member card:</p> <ul style="list-style-type: none">• Foundation• Heritage• Global <p>Our National Account members will have a network name of BlueCard PPO or BlueCard Traditional.</p>
Plus 1	<p>If the plan name is followed by "Plus 1" this indicates that the plan has out-of-network benefits.</p> <p>Note: "Plus 1" is not the name of a plan/network or contracted product. It is added after the member's plan to indicate that the member has out-of-network coverage (but at a reduced benefit level).</p>
Date Printed	<p>Our member ID cards include a "Date Printed" in the lower, left corner. This date represents the date that the ID card was printed, not the member's effective date.</p> <p>We include the date printed because medical offices requested an indicator to help staff identify if a card is current. However, use the "Date Printed" only as a guideline.</p> <p>Generally, if the member's plan has not changed, no new ID card is printed so the "Date Printed" is still valid, even if it's two plus years old. When you see an older "Date Printed," confirm with the member that he/she has not received a new ID card, and then call the eligibility phone number printed on the back of the card for current coverage.</p> <p>Note: Member ID cards do not display the name "Dimensions," only the plan's network name (Foundation, Global or Heritage). Some large accounts may also include custom information in addition to the network name.</p>

Back of the ID Card

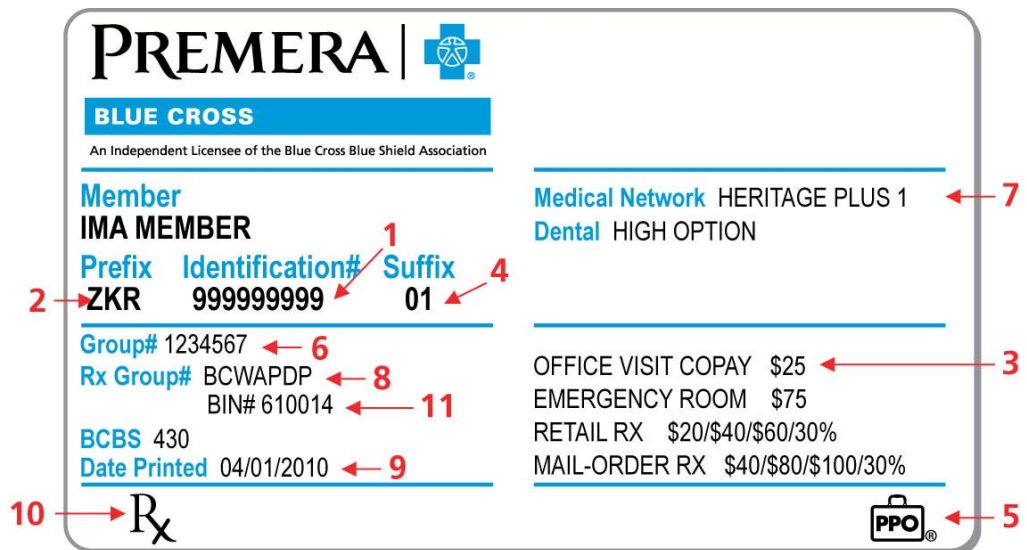
The back of the card is divided into sections: members, important phone numbers and providers. Here is what providers should look for on the back of the ID card:

- Billing instructions for paper claims and address specific to the member's plan
- Phone numbers for assistance:
 - Member's Customer Service department
 - BlueCard[®] provider locator
 - BlueCard[®] eligibility
 - Pharmacy locator (*if applicable*)
- premera.com:
 - For coverage details & health-related information.

To expedite paper claims payment, use the PO Box printed on the back of the member's ID card when billing paper claims.


Section 3: Premera ID Cards

Front of ID Card Here is an example of a Premera ID card.



1-Identification #	Use this number to identify the patient when submitting claims.
2-Prefix	Include the alpha prefix with the member's ID number on all claims.
3-Copay	Indicates what the member pays at the time of service. This example shows a copay for an office visit (OV), emergency room (ER) and, if applicable, prescription (RX) coverage. <i>Note</i> : this example also shows tiered prescription costs.
4-Suffix	Indicates the member's relationship to the subscriber and does not need to be included on any claim.
5-Suitcase	Indicates that the member's plan includes BlueCard benefits. The suitcase symbols are important when providing healthcare services to Blue Cross Blue Shield <u>out-of-area patients</u> .
6-Group #	Internal number assigned to each group that chooses Premera as their health plan.
7-Medical Network	Indicates member's specific network/plan name. This is a Heritage Plus plan. Heritage is a network a member obtains services from for a higher benefit level. If "Plus 1" follows the name, it means that the member's plan has out-of-network benefits. You will need to contact customer service for out-of-network benefits.
8-Rx Group #	Used for billing pharmacy claims.
9-Date Printed	The printed date is not the date a member's coverage began, just the date when the card was last printed (issued). This ID card was printed on February 15, 2010.
10-Rx	This symbol is used if the member's plan includes prescription coverage.
11-BIN#	Means "Bank Identification Number." BIN assists pharmacies with submitting prescription medication claims through the Medco online system.

Back of ID Card



BLUE CROSS

Visit www.premera.com for coverage details,
on-line services and health-related information. 14

13 → **PROVIDERS:** Please submit all claims with ID number, alpha prefix and group number. Claims from Premera contracted providers, or any provider in WA or AK should be sent to Premera Blue Cross. Claims outside of WA or AK should be sent to the local Blue Cross Blue Shield Plan. This card is not a guarantee that the member's coverage is currently in effect. Providers may call BlueCard Eligibility at 1-800-676-BLUE(2583) to verify membership and coverage.

Premera Blue Cross
P.O. Box 91059
Seattle, WA 98111-9159

MEMBERS: Please show this card when you receive services. See your benefit booklet for covered services. If you have questions, call Customer Service or write us at the address on this card. If you're admitted to a hospital outside of WA or AK, please call Customer Service to notify us within 48 hours of admission.

Customer Service 1-800-722-1471 12
TDD for the hearing-impaired 1-800-842-5357
BlueCard Provider Locator 1-800-810-BLUE(2583)
Pharmacy Locator and/or Medco by Mail 1-800-391-9701
24-hour NurseLine* 1-800-841-8343

* Not a Blue Cross Blue Shield Product

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12-Contact Information

Key phone numbers.

13-Claims Submission

Billing instructions and address.

14-Web information

How to obtain on-line coverage and health-related information.

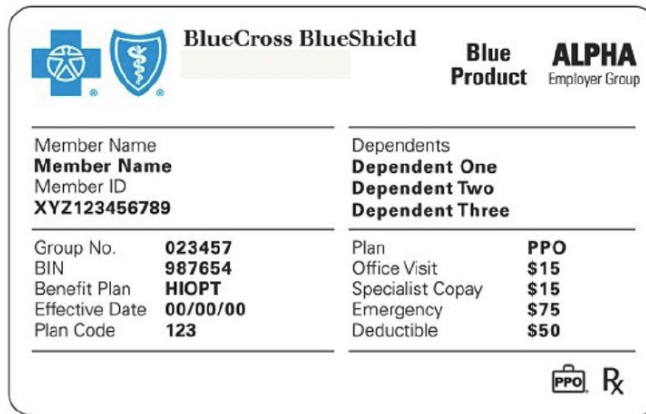
 **Section 4: BlueCard® ID Cards**

BlueCard® Identifiers

An alpha prefix preceding the member’s ID number is present on all BlueCard® program ID cards. To distinguish the member’s type of plan, look for one of these BlueCard® identifiers:

1. Blank suitcase symbol
2. “PPO in a Suitcase” symbol for eligible PPO members, or
3. No suitcase symbol.

See **Chapter 11, BlueCard®**, for more information.





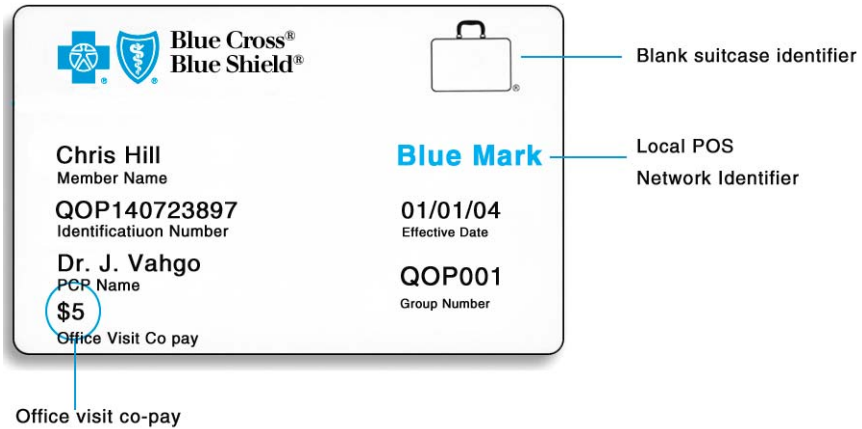
Example of an ID card with no suitcase symbol.

Used for members with stand-alone prescription or dental coverage, or for a unique plan exempt from the BlueCard program.

**BlueCard
 Point-of-service**

Though Premera does not have a Point-of-service plan, you may see members from other Blue Cross Blue Shield plans enrolled in a BlueCard POS plan. Treat these members like any other BlueCard member.

The ID card includes a local network identifier and a blank suitcase symbol.



**BlueCard
 International
 Members**

Occasionally, you may see ID cards from foreign Blue Cross and Blue Shield plan members. These ID cards also contain three-character alpha prefixes. Treat these members in the same manner as you do for domestic Blue Cross Blue Shield plan members.





Section 5: Premera National Accounts ID Card

The following are examples of ID cards for a Premera national account. National account ID cards for Blue Cross Blue Shield members do not include the health plan logo on the front of the card.

		Member IMA MEMBER Prefix Identification # Suffix ZKR 999999999 01	Medical Network BLUECARD PPO Dental HIGH OPTION
Group # 1234567 Rx Group # BCWAPDP BIN# 610014 BCBS 430 Date Printed 02/15/2010	OFFICE VISIT COPAY \$25 EMERGENCY ROOM \$75 RETAIL RX \$10/\$25/\$45 MAIL-ORDER RX \$25/\$62/\$112		

PREMERA BLUE CROSS BLUE SHIELD OF ALASKA An Independent Licensee of the Blue Cross Blue Shield Association. PROVIDERS: Please submit all claims with ID number, alpha prefix and group number. Claims from Premera contracted providers, or any provider in AK or WA should be sent to Premera Blue Cross Blue Shield of Alaska. Claims outside of AK or WA should be sent to the local Blue Cross Blue Shield Plan. This card is not a guarantee that the member's coverage is currently in effect. Providers may call BlueCard Eligibility at 1-800-676-BLUE(2583) to verify membership and coverage. Premera Blue Cross Blue Shield of Alaska P.O. Box 240609 Anchorage, AK 99524-0609	Visit www.premera.com for coverage details, on-line services and health-related information. Customer Service 1-800-508-4722 TDD for the hearing-impaired 1-800-842-5357 BlueCard Provider Locator 1-800-810-BLUE(2583) Pharmacy Locator and/or Medco by Mail : 1-800-391-9701 24-hour NurseLine 1-800-841-8343 <small>* Not a Blue Cross Blue Shield Product</small> MEMBERS: Please show this card when you receive services. See your benefit booklet for covered services. If you have questions, call Customer Service or write us at the address on this card. If you're admitted to a hospital outside of AK or WA, please call Customer Service to notify us within 48 hours of admission.
medco Pharmacy Benefits Manager	51C5 (11-2007)

Member Prefix Identification # TST	NORTHWEST LABORERS EMPLOYERS HEALTH & SECURITY TRUST MEDICAL Group # 0001 BCBS 430
PHARMACY RxBIN 003858 RxPCN A4 RxGRP A3NN	SEE BACK OF CARD FOR IMPORTANT PHONE NUMBERS

PREMERA BLUE CROSS An Independent Licensee of the Blue Cross Blue Shield Association. PROVIDERS: Please send medical claims for services by a Premera contracted provider, or any provider in WA or AK to Premera Blue Cross, P.O. Box 91059, Seattle, WA 98111-9159. Medical claims for services outside of WA or AK should be sent to the local Blue Cross and/or Blue Shield Plan. DENTAL CLAIMS: Send to Northwest Laborers-Employers Health & Security Trust, Group U054, P.O. Box 91002, Seattle, WA 98111-9102. Include complete ID number, alpha prefix & group number from the front of this card on all claims.	www.premera.com to locate a provider www.zenithadmin.com Northwest Laborers Member Claims & Member/Provider benefits & eligibility 1-206-282-3600 Toll Free 1-800-826-2102 Provider Customer Service 1-800-713-5373 BlueCard Provider Locator 1-800-810-BLUE(2583) CareAllies Hospital pre-admission authorization & BABYTIME 1-800-422-3038 Express Scripts Pharmacy Member Services 1-800-692-5269 Express Scripts Pharmacy Help desk 1-800-824-0898 Ellingson's Pharmacy Mail-Order 1-800-292-4722 VSP Member Service 1-800-877-7195 <small>* Not a Blue Cross Blue Shield Product</small> PROVIDERS MUST CALL NORTHWEST LABORERS TO VERIFY ELIGIBILITY AND BENEFITS. This ID card is not a guarantee that the member's coverage is currently in effect.
EXPRESS SCRIPTS® <small>An Independent Licensee of the Blue Cross Blue Shield Association</small> Pharmacy Benefits Manager	NL21 (04-2009)



Section 6: Federal Employee Program (FEP) ID Cards

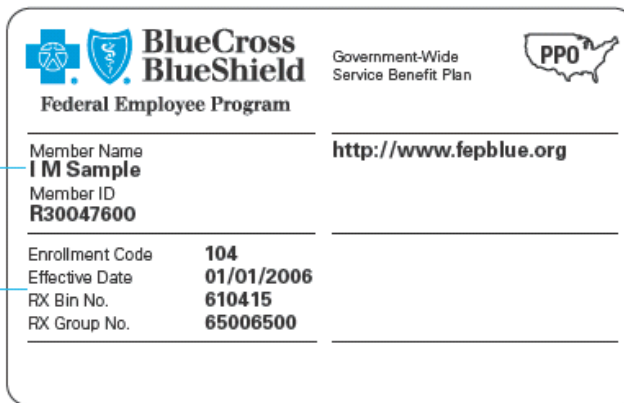
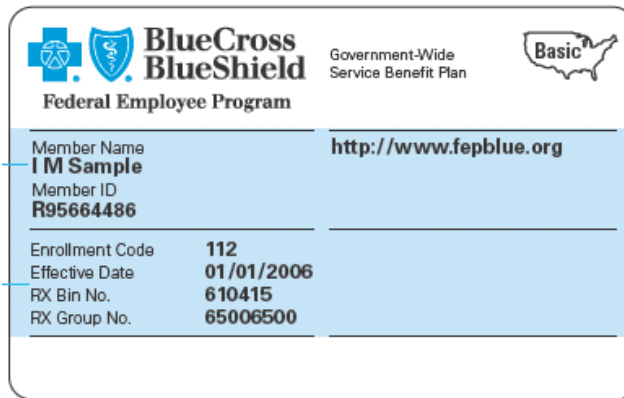
FEP Basic/ Standard Options

The following are examples of ID cards for federal employees covered under the Federal Employee Program.

- For FEP Basic Option the member must use a preferred provider in order to receive benefits.
- For FEP Standard Option (PPO card), the member may see any provider; however, if a preferred provider is used the member receives a higher benefit level.

The FEP ID card will only list the subscriber's name. The ID card does not list dependents.

Note: FEP member ID cards are issued from the national FEP system in Washington, D.C.



FEP Contact Information

Contact phone numbers for hospital and professional claims are listed on the back of the ID card. For all hospital claims, members should contact 800-562-1011 (Premera Blue Cross). The contact phone number for professional claims in eastern Washington is 800-562-1011 (except Walla Walla, Columbia & Asotin counties). For professional claims inquiries in Western Washington contact 800-552-0733 (Regence Blue Shield).