

Standard Group ID Card Elements Quick Reference Guide

Blue Cross and Blue Shield of Oklahoma (BCBSOK) offers a wide variety of health care products. Each member's/subscriber's identification (ID) card displays important information required for billing and determining benefits. When filing a BCBSOK claim, two of the most important elements are the member's/subscriber's **ID number** and **group number**.

Most members with coverage through a Blue Cross Blue Shield Plan are assigned a three letter **alpha prefix** that appears at the beginning of their their unique identification number. The alpha prefix is very important to the identification number as the prefix acts as a key element in confirming the member's eligibility and coverage information. Prefixes are also used to identify and correctly route claims to the appropriate Blue Cross Blue Shield Plan for processing.

There are two types of alpha prefixes: plan-specific and account-specific. The plan-specific alpha prefixes are assigned to every Blue Cross Blue Shield plan and start with X, Y or Q. The first two positions indicate the Plan to which the member/subscriber belongs while the third position identifies the product in which the member/subscriber is enrolled. **Note: YU identifies the Oklahoma Plan**


The account-specific alpha prefixes are assigned to national accounts; national accounts are employer groups that have offices across multiple states and offer uniform coverage benefits to their employees and the alpha prefix assigned to the national account will associate to the employer's name.

Identifying the **network** that a member is a part of is now easier with the addition of the three (3) character network value that will be displayed in a **red font**. The network value will appear on Medical Identification cards where network benefits may apply.

Common Network values:

- PPO** = BlueChoice PPO Network
- EPP** = BluePreferred PPO Network
- BVP** = Blue Advantage PPO Network
- HMO** = Blue Lincs HMO Network



PPO Sample Group ID Card




**BlueCross
BlueShield**

SAMPLE

Subscriber Name: SAMPLE CARD	
Identification Number: FOY123456789	
Group Number: 123456	
EPP	
Network Value	
RxBIN: 011552 RxPCN: 1215	

www.bcbsok.com




**BlueCross BlueShield
of Oklahoma**

Customer Service 1-877-219-4347
Preauthorization 1-800-672-2378
Provider Locator 1-800-810-2583
24/7 Nurseline 1-800-581-0407
RX Tech Support 1-877-353-0992
RX Cust Svc* 1-877-546-2779

This card is for identification only and is not to be used for benefit eligibility. Submit all Medical claims to your local Blue Cross and Blue Shield plan. Some services must be preauthorized, including Mental Health (MH) and Chemical Dependency (CD). Refer to your benefits booklet for additional information.


*Group contracts directly



BlueCross BlueShield of Oklahoma, an independent licensee of BlueCross BlueShield Association, provides claims processing only and assumes no financial risk for claims.

Pharmacy Benefits Manager

HMO Sample Group ID Card





BlueLincs
Blue Cross and Blue Shield of Oklahoma


SAMPLE


Subscriber Name: SAMPLE CARD	
Identification Number: XXX123456789	
Group Number: 123456	
Plan: XXX	
HMO	
Network Value	
PCP: RACHEL ANDERSON MD 405-364-0555 01/01/12	

PCP \$25	
Specialist \$35	
Emergency Room \$100	
Deductible \$300	
RX Copay \$10/30/60	
RxBIN: 011552	
RxPCN: 1215	

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RX Cust Svc 1-877-546-2779
PayFlex FSA* 1-800-284-4885
Delta Dental* 1-800-522-0188

Pre-authorization Required. Call your PCP within 48 hours of an emergency that requires you to seek immediate medical attention from the nearest facility. Providers other than the PCP must have a specific advance authorization from BlueLincs and/or your PCP for all non-emergency services. Failure to follow these instructions may result in denial of coverage. Submit claims to P.O. Box 3283, Tulsa OK, 74102.

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Pharmacy Benefits Manager