

SAMPLE ID CARD




BlueCross BlueShield
of Texas

Blue Advantage HMOSM

FRONT

- ALPHA PREFIX
- NETWORK ID
- TDI INDICATES FULLY INSURED MEMBER
- PRIMARY CARE PROVIDER (PCP) NAME AND PHONE #
- PCP PORG IF APPLICABLE

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

HMO

Subscriber Name: SAMPLE CARD
Identification Number: ABC 123456789

Dependent Name:

Group Number: 123456
Member Effective: 08/01/12

OV/Specialist: 620/650

Urgent Care



Emergency Room **SAMPLE**

RX Generic Copay

RX Brand Copay: 500/500

PCP: JOHN SMITH MD
972-123-4567 09/01/12

RxBIN: 011552
RxPCN: BCTX

BACK

www.bcbstx.com



 BlueCross BlueShield of Texas

Customer Service: 1-877-300-3333
Guest Membership: **SAMPLE**
Presouth-Medical
Presouth-MH/CD
Blue Card Access
Provider Service: 1-800-670-6000

Some services must be pre-authorized, including Mental Health (MH) and Chemical Dependency (CD).
Claims should be mailed to: HMO Blue Texas, P.O. Box 468044, Dallas, TX 75246-0644.

BlueCross BlueShield of Texas, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an independent licensee of the Blue Cross BlueShield Association.

 PRIME
THERAPEUTICS

Pharmacy Benefits Manager