



# Coupe Health<sup>SM</sup> SAMPLE ID CARD

Uses BlueChoice PPO<sup>SM</sup> and Blue High Performance Network<sup>SM</sup>

For our Coupe members with a **financing plan**: You won't collect any copay for your services. Instead, Blue Cross and Blue Shield of Texas will reimburse you directly for the full allowed amount, including the member share. The ID card will indicate: No patient responsibility owed at the time of service. Plan will pay provider the full contract rate.

ID Card with financing plan sample:

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	<b>BlueCross BlueShield</b>	ACCOUNT LOGO
Member Name:	ABC Company	
JAMIE DOE		
Identification Number:		
ABC123456789		
Group Number:	123456	
PPO Plan		
	RXBIN: 1234560 RXPCN: ABC	RXGRP: XYZ
Blue Cross Blue Shield Health Plan	Powered By <b>COUPE</b>	

	<b>BlueCross BlueShield of Texas</b>	<b>coupehealth.com</b>
		Coupe Member Services: 1.811.111.1111
		Provider Services: 1.822.222.2222
		Pre-certification: 1.833.333.3333
		Rx Help Desk*: 1.844.444.4444
<b>Deductible Information</b>		
In-Network Individual \$0 / Family \$0		
Out-of-Network Individual \$0 / Family \$0		
<b>Out-of-Pocket Maximum Information</b>		
In-Network Individual \$5,000 / Family \$6,000		
Out-of-Network Individual \$7,000 / Family \$8,000		
<b>Pre-certification required for the following procedures:</b>		
MRIs/MRA's/PET Scans	Outpatient Surgery	
DME over \$1500/Rentals	Dialysis	
Home Health	Transplants	
Hospice	Genetic Testing	
Oncology Services (Chemotherapy and Radiation)		
Hospitalizations to include acute care, skilled nursing, skilled rehabilitation, and behavioral health/substance abuse. Partial hospitalization and intensive outpatient for behavioral health/substance abuse.		
<b>No patient responsibility owed at the time of service. Plan will pay provider the full contract rate.</b>		
Providers: File claims with your local BCBS plan.		
		*Group contracts directly
		BlueCross BlueShield of Texas, an independent licensee of the BlueCross BlueShield Association, provides claims processing only and assumes no financial risk for claims.

For our Coupe members with a **non-financing plan**: You will collect copays from members according to members' plan benefits.

ID card with non-financing plan sample:

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	<b>BlueCross BlueShield</b>	ACCOUNT LOGO
Member Name:	ABC Company	
JAMIE DOE		
Identification Number:		
ABC123456789		
Group Number:	123456	
PPO Plan		
	RXBIN: 1234560 RXPCN: ABC	RXGRP: XYZ
Blue Cross Blue Shield Health Plan	Powered By <b>COUPE</b>	

	<b>BlueCross BlueShield of Texas</b>	<b>coupehealth.com</b>
		Coupe Member Services: 1.811.111.1111
		Provider Services: 1.822.222.2222
		Pre-certification: 1.833.333.3333
		Rx Help Desk*: 1.844.444.4444
<b>Deductible Information</b>		
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<b>Pre-certification required for the following procedures:</b>		
MRIs/MRA's/PET Scans	Outpatient Surgery	
DME over \$1500/Rentals	Dialysis	
Home Health	Transplants	
Hospice	Genetic Testing	
Oncology Services (Chemotherapy and Radiation)		
Hospitalizations to include acute care, skilled nursing, skilled rehabilitation, and behavioral health/substance abuse. Partial hospitalization and intensive outpatient for behavioral health/substance abuse.		
Providers: File claims with your local BCBS plan.		
		*Group contracts directly
		BlueCross BlueShield of Texas, an independent licensee of the BlueCross BlueShield Association, provides claims processing only and assumes no financial risk for claims.