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FIRST M LAST
STREET
CITY, STATE ZIP



Blue Shield of California
Installation & Membership - Small Group
PO BOX 629032
EL DORADO HILLS CA 95762-9032

Member Services: **(888) 319-5999**
Monday - Thursday: 8 a.m. - 5 p.m.
Friday: 9 a.m. - 5 p.m.
blueshieldca.com/go



Subscriber
FIRST M LAST

ID# 0000000000000

OPTUM CARE NETWORK - LITTLE CO OF
MARY A+

SUN, CHRISTOPHER
(310) 374-9646

11/01/21

Network Name **Access+ HMO**

Group # **W0001695**

Effective **12/01/2020**

Copays

Primary Care \$25 Specialist \$50
Urgent Care Center \$25 Teladoc \$5
Emergency Room \$250

Plan
RxBIN
RxPCN

HMO
004336
77993333

Platinum HMO 0/25

⚠️ Check Evidence of Coverage for self-referral rules.



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Here's your new member ID card.

Review your card and make sure the information is accurate. If you need to change your primary care physician or any other information, please call the Member Services number on the back of your card.

Register online for 24/7 access to your health benefits if you haven't already. Download our mobile app or visit blueshieldca.com/start and set up your account with your member ID.

Thank you for choosing Blue Shield.

By accepting this card and any benefits it entitles the holder, the holder acknowledges that the agreement is a contract solely between the named subscriber's group and Blue Shield of California, and that Blue Shield is an independent corporation operating under a license from the Blue Shield Association, which permits Blue Shield to use the Blue Shield name and service marks in California.

Providers: Please file all claims with your local BCBS license in whose service area the member received services or, when Medicare is primary, file all claims with Medicare. This member has limited benefits outside of California. For more information visit blueshieldca.com/provider

Deductible	Out-of-pocket maximum
Individual HMO medical	\$0
Individual in-network pharmacy	\$0
Pharmacy (included in medical deductibles/out-of-pocket maximums)	\$2,350 included

We are here to help:
blueshieldca.com/go
(888) 319-5999 Member Services
711 TTY
(877) 263-9952 Mental Health Customer Svc.
(877) 304-0504 NurseHelp 24/7
(800) 810-2583 To locate providers outside of CA
(800) 541-6652 CA Provider Customer Service (includes hospitals for pre-auth)
(888) 970-0932 Pharmacists Only
(877) 601-9083 Pediatric Vision Benefits and Claims
(888) 702-4171 Pediatric Dental Benefits and Claims
(800) 835-2362 Teladoc

CA Medical claims to: Blue Shield of California, P.O. Box 272940, Chico, CA 95927-2540
Pediatric Dental Claims to: Blue Shield of California, P.O. Box 300567, Salt Lake City, UT 84130-0567

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Get the most out of your plan:
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