



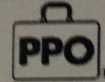
BlueCross® BlueShield®

**JOSEPH SALAZAR**

Member ID

**MOG769001447487**

MyHealthToolkitWNY.com



BlueCross® BlueShield®

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Members: Call Customer Service for claims filing information.

Providers: File claims with the local BlueCross and/or BlueShield Plan where member received services. When Medicare is primary, file Medicare claims directly with Medicare. Preauthorization required for all hospital inpatient admissions. Report emergency admissions within 24 hours. MRI/MRA/PET/CT will require authorization to ensure benefit payment.

Customer Service: **855-263-0680**  
PPO Network Provider Information: **800-810-2583**  
Provider Service: **800-868-2510**  
Precertification: **888-376-6544**  
Mental Health and Substance Abuse Precertification: **800-868-1032**  
CVS Caremark\*: **877-304-1101**  
\*Contracts separately with group.

BlueCross BlueShield of Western New York, a Division of HealthNow New York Inc., provides administrative services only and does not assume any financial risk for claims.

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