

blue of california

Subscriber ID# **XEH908982589**
JURIKO U YAMADA
Member
JAKE M

AXMINSTER MEDICAL GROUP INC A+
ONEILL, MAUREEN A.
(310) 792-4450 **03/01/19**

Network Name **Access+ HMO**
Group # **W0022269**
Effective **02/01/2019**

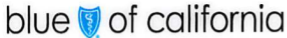
Copays

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

Plan	HMO
RxBIN	600428
RxPCN	01910000

Platinum Access+ HMO 0/25





Providers: Please file all claims with your local BCBS licensee in whose service area the member received services or, when Medicare is primary, file all claims with Medicare.

CA Providers: Most claims should be filed with the members IPA/ Medical group. Call Provider Customer Service to obtain medical and hospital admission prior authorization. Visit Provider Connection at:

blueshieldca.com/provider

CA Medical claims to: Blue Shield of California, P.O. Box 272540, Chico, CA 95927-2540

Pediatric Dental Claims to: Blue Shield of California, P.O. Box 272590, Chico, CA 95927

A+ gives you the option to self-refer to an Access+ Specialist, subject to certain limitations. See your Evidence of Coverage for details.

blueshieldca.com

- (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 (including hospitals)
 - (888) 635-8224** Pharmacists Only
 - (877) 601-9083** Pediatric Vision Benefits and Claims
 - (888) 702-4171** Pediatric Dental Benefits and Claims
 - (800) 835-2362** Teladoc
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