

# blue of california

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Subscriber ID# **XEH901514487**  
**JOSEPH W JENKINS**  
Member  
**HANA M**

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UC IRVINE HEALTH MED GRP A+  
ROSIN, MELISSA J.  
(714) 838-8878

**06/01/15**

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Network Name **Access+ HMO**  
Group # **W0040638**  
Effective **12/01/2016**  
**Copayment**  
Office \$25

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Plan **HMO**  
RxBIN **600428**  
RxPCN **01910000**

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**Platinum Access+ HMO 0/25**





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**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](https://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.

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**[blueshieldca.com](https://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

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Blue Shield of California is an independent member of the Blue Shield Association.

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