



**BlueCross[®]
BlueShield[®]**



Microsoft

Member

SHO OKIHARA

Prefix Identification # Suffix

MSJ 602131405 05

Group # 1000010

Rx Group # BCWAPDP

BIN# 610014

BCBS 430

Medical Network BlueCard PPO


Dental PLUS

Vision YES

HEALTH SAVINGS PLAN

Rx



PREMERA | 

BLUE CROSS

An Independent Licensee of the Blue Cross Blue Shield Association

PROVIDERS: Please submit all claims with ID number, alpha prefix and group number to the local Blue Cross Blue Shield Plan. Prior authorization may be required for some services/drugs. Please call Customer Service prior to services.

CA Services: Blue Cross is the only Preferred Provider Network.

This card is not a guarantee that the member's coverage is currently in effect. Providers may call BlueCard Eligibility to verify membership and coverage.

Premera Blue Cross
P.O. Box 91059
Seattle, WA 98111-9159



EXPRESS SCRIPTS®

Visit benefits.me.microsoft.com for coverage details, online services and health-related information.

Customer Service	1-800-676-1411
TTY for the deaf and hard of hearing	1-800-842-5357
	microsoft@premera.com
Provider BlueCard Eligibility	1-800-676-BLUE (2583)
24-Hour Nurse Line	1-800-676-1411

MEMBERS: Please show this card when you receive services. See your summary Plan Description at benefits.me.microsoft.com for covered services. If you have questions contact Premera's Microsoft-dedicated customer service team. Prior authorization may be required for some services/drugs. Please call Customer Services prior to services. For members with Dental coverage please submit claims directly to Premera Blue Cross.

Premera Blue Cross provides administrative services only and does not assume financial risk or obligation with respect to claims.

Pharmacy Benefits Manager

01/25/2017