

FIRST LAST
1604 MENDE AVE SAN
DIEGO, CA 92116



Blue Shield of California
6300 Canoga Avenue
Woodland Hills, CA 91367

Customer Care: **(888) 802-4423 (TTY: 711)**
8:00 a.m. - 8:00 p.m., 7 days a week, year round
www.blueshieldca.com/medicare



Member:
FIRST M LAST

Member ID: 000000000000

Copayments: PCP/SPC/ER \$0/\$0/\$85

PCP: DENYSIAK, BARBARA

(619) 294-6500

**SCRIPPS PHYSICIANS MEDICAL
GROUP**

MedicareRx
Prescription Drug Coverage

Blue Shield Promise
AdvantageOptimum Plan
1 (HMO)

Health Plan: (80840)

Group #: E0001000

Effective Date:
01/01/2020

RxBIN: 004336

RxPCN: 77993322

CMS ID:

H5928-010



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Dear FIRST M LAST:

Welcome to Blue Shield!

Here is your new ID card. Please bring it with you whenever you visit a healthcare provider. Your card contains important information you and your providers will need.

Please visit **blueshieldca.com/medicare** when you want to:

- Select or locate a healthcare provider
- See highlights of your plan's benefits
- Chat with a nurse or ask a pharmacist questions
- Discover all the extra services and support available to you as a Blue Shield member

It's easy to register at our Web site using your ID number, **00000000000000**.

If you have any questions about your coverage or benefits, call the service number printed on this card. Our service representatives are ready to help you.

Thank you for choosing Blue Shield.

blueshieldca.com/medicare

Customer Care (800) 544-0088 (TTY: 711)
Transportation (855) 200-7544
NurseHelp 24/7 (877) 304-0504
Pharmacy Help Desk (888) 970-0933
Behavioral Health (800) 776-4466 (TTY : 711)

This member has limited benefits outside of the plan service area and outside of California.

Members: In an emergency, call 911 or go to the nearest ER. **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 member's IPA/Medical Group. Call Provider Customer Service to obtain medical and hospital admission prior authorization to avoid reduced or non-payment. Pharmacists call for prescription processing information. Visit Provider connection at: **blueshieldca.com/provider**

Submit Medical Claims to: Blue Shield of California, P.O. Box 272640 Chico, CA 95927-2640

Submit RxClaims to: Blue Shield of California, P.O. Box 52066, Phoenix, AZ 85072-2066

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

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