

# SAMPLE ID CARD



BlueCross BlueShield  
of Texas

## Blue Choice PPO<sup>SM</sup>

FRONT

**BlueCross BlueShield**

Subscriber Name: **SAMPLE CARD**  
Identification Number: **ABC123456789**

Group Number: 123456  
Coverage Date: 09/01/12  
Member Effective: 09/01/12  
SINGLE **TDI** **BCA**

Office Visit  
Emergency Room  
Urgent Care  
RX Copay

RxBIN: 011552  
RxPCN: BCTX

**SAMPLE**

**PPO** **Rx**

**ALPHA PREFIX** → ABC123456789

**TDI INDICATES FULLY INSURED MEMBER** → TDI

**NETWORK ID** → BCA

BACK

[www.bcbstx.com](http://www.bcbstx.com)

**BlueCross BlueShield of Texas**

Customer Service: 1.800.531.3337  
Preauth-Medical: 1.800.431.0227  
Preauth-MH/CD: 1.800.431.0227  
Blue Card Access: 1.800.431.0227  
Provider Service: 1.800.431.0227

**SAMPLE**

Network coverage is available through participating network providers. Non-network services will be covered at a lower level. Some services must be preauthorized, including mental health (MH) and chemical dependency (CD). Refer to your benefits booklet for additional information. Providers: File claims with your local BCBS plan.

**BlueCross BlueShield of Texas, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an independent licensee of the BlueCross BlueShield Association.**

**PRIME**  
MEMBER BENEFIT GROUP

Pharmacy Benefits Manager