BlueCross BlueShield of Oklahoma
1215 South Boulder
P.O. Box 3283
Tulsa, OK 74102-3283

Attached are your new ID cards. Please discard any previously issued card(s). Always present your most current ID card to the hospital or provider when you or your covered dependents seek health care.

>000252 8047537 001 003113

To obtain a copy of BCBSOK's Notice of Privacy Practice (NOPP), please visit our website: www.bcbsok.com/legalDisclaimer.html or email "NOPP@BCBSOK.com" or call the number on back of your ID Card.

03113 8047537 0000 0000252 0000252 276 7 111

BlueLincs
Blue Cross and Blue Shield of Oklahoma

Subscriber Name:
SAMPLE CARD
Identification Number:
YUH123456789

Group Number: 123456
PLAN RH5LV

PCP: WESLEY M INGRAM DO
918-369-9555 06/01/11

PCP / Spec	$20 / $20
Emergency Room	$100
Med Ded	$500
RX Copay	12/25/30%

RxBIN: 011552
RxPCN: 1215

Rx

BlueCross BlueShield of Oklahoma
Experience. Wellness. Everywhere.™

blueaccess for Members℠

- Review benefit information
- Access claim status and history
- Use wellness tools
- Print a temporary ID card
- Locate doctors and compare hospitals

Log in to **Blue Access for Members** today by using the web address on the back of your ID card.

This card is recognized wherever you go and entitles the card holder to the benefits specified in the agreement pursuant to which this card is issued. While other independent Blue Cross and Blue Shield Plans who belong to the Blue Cross and Blue Shield Association may assist the card holder in obtaining benefits, the card holder recognizes that the agreement which controls the use of this card and which specifies the card holder's benefits is solely between the parties to such agreement and Blue Cross and Blue Shield of Oklahoma or, independent corporations operating under a license with the Blue Cross and Blue Shield Association, which permits Blue Cross and Blue Shield of Oklahoma to use the Blue Cross and Blue Shield name and service marks in the State of Oklahoma.

www.bcbsok.com

BlueCross BlueShield of Oklahoma

Pre-Authorization Required. Call your PCP within 48 hours of an emergency that requires you to seek immediate medical attention from the nearest facility.
Providers other than the PCP must have a specific advance authorization from BlueLincs and/or your PCP for all non-emergency services. Failure to follow these instructions may result in denial of coverage. Submit claims to P.O. Box 3283, Tulsa OK, 74102.

Customer Service	1-800-580-6202
Precertification	1-800-672-2378
Provider Locator	1-800-810-2583
24/7 Nurseline	1-800-581-0407
RX Tech Support	1-877-353-0992
RX Cust Svc*	1-877-546-2779

*Not a BCBS product.

BlueLincs HMO, a Subsidiary of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of BlueCross BlueShield Association

PRIME THERAPEUTICS®
Pharmacy Benefits Manager

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DIRECT
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