



BlueCross BlueShield
of Oklahoma

New BCBSOK Network MyBlue HMOSM Launches Jan. 1, 2023

We are excited to announce that Blue Cross and Blue Shield of Oklahoma (BCBSOK) has created a new network called MyBlue HMOSM. It will include the following counties effective **January 1, 2023**:

Counties
Cleveland, Lincoln, Logan and Oklahoma
Creek, Okmulgee, Osage, Pawnee, Rogers and Tulsa

MyBlue HMO members living in these areas will access care through providers contracted in the **MyBlue HMO** network. Members living in one geographic area can see an in-network provider in the other geographic area.

MyBlue HMO members must choose a primary care provider (PCP). The PCP can be a family practitioner, obstetrician/gynecologist, pediatrician, internist, or physician assistant or advanced practice nurse in one of those areas of practice. This can be an independent provider or one from the following provider groups:

Counties	Provider Groups
Cleveland, Lincoln, Logan and Oklahoma	<ul style="list-style-type: none"> Mercy Clinic Oklahoma Communities, Inc.
Creek, Okmulgee, Osage, Pawnee, Rogers and Tulsa	<ul style="list-style-type: none"> Utica Park Clinic UPC Primary Care Hillcrest Hospital Claremore UPC Hillcrest Hospital Henryetta UPC Hillcrest Hospital Pryor

The following hospitals can be used with an appropriate referral:

Counties	Hospitals
Cleveland, Lincoln, Logan and Oklahoma	<ul style="list-style-type: none">• Mercy Hospital Logan County• Mercy Hospital Oklahoma City• Mercy Hospital Oklahoma City South• Oklahoma Heart Hospital• Oklahoma Heart Hospital South
Creek, Okmulgee, Osage, Pawnee, Rogers and Tulsa	<ul style="list-style-type: none">• Bailey Medical Center• Hillcrest Hospital Claremore• Hillcrest Hospital Henryetta• Hillcrest Hospital South• Hillcrest Medical Center• Tulsa Spine and Specialty Hospital

Members covered by MyBlue HMO can be identified through their **BCBSOK ID card**:

- **MyBlue HMO** is displayed on the [Member ID card](#) or [Dependent ID card](#).
- MyBlue HMO members have a unique network ID: **BAV**.
- The 3-character prefix on the ID card is: **K2G**.

Patient eligibility and benefits should be checked prior to every scheduled appointment through [Availity® Essentials](#) or your preferred web vendor. Eligibility and benefit quotes include participant confirmation, coverage status and other important information, such as applicable copayment, coinsurance and deductible amounts. It is strongly recommended providers **ask to see the participant's ID card** for current information and **photo ID** at every visit to guard against medical identity theft. When services may not be covered, participants should be notified they may be billed directly.

If you have any questions, please contact your Network Management Representative.

More Information: watch future Blue Review newsletters and News and Updates on our [provider website](#) for more information on the new **MyBlue HMO** network.

Checking eligibility and/or benefit information and/or obtaining prior authorization is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage, including, but not limited to, exclusions and limitations applicable on the date services were rendered. If you have any questions, call the number on the member's ID card.

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