



Blue Cross Group Medicare Advantage Open Access (PPO)SM

Dear Member,

You are enrolled in an employer-sponsored Blue Cross Group Medicare Advantage Open Access (PPO) health plan. This health plan is a custom plan that does not require the use of a network provider for coverage. Your benefit levels are the same whether or not you use a network provider. You may seek care from any providers nationwide that accept Medicare.

Please give your medical provider a copy of this letter.

The information below will help them understand your benefits. If you have any questions, please call the number on the back of your member ID card.

IMPORTANT MEDICAL PROVIDER INFORMATION:

Dear Provider,

Under this plan, you do not need to be a Blue Cross Group Medicare Advantage Open Access (PPO) contracting provider to see and treat this member. Members can see any willing provider as long as the provider accepts payment from Medicare. The member’s coverage level is the same whether or not the provider is in the network for Blue Cross Group Medicare Advantage Open Access (PPO).

At a minimum, eligible claims will be reimbursed at the Medicare Allowed Amount.

Please submit claims to Blue Cross and Blue Shield of Oklahoma. For questions regarding claims submission or payment, call **1-877-299-1008**. We are open 8:00 a.m. – 8:00 p.m., local time, 7 days a week. If you are calling from April 1 through September 30, alternate technologies (for example, voicemail) will be used on weekends and holidays.

Your patient’s medical coverage at a glance:	
Plan Type:	Blue Cross Group Medicare Advantage Open Access (PPO)
Employer Group Name:	
Customer Service:	1-877-299-1008
Submit All Claims to:	Your local Blue Cross and Blue Shield plan.

This information is not a complete description of benefits. Call 1-877-299-1008 TTY 711 for more information.

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Out-of-network/non-contracted providers are under no obligation to treat Blue Cross and Blue Shield of Oklahoma members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

HMO plans provided by GHS Health Maintenance Organization, Inc. d/b/a BlueLincs HMO (BlueLincs). HMO and PPO employer/union group plans provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC). HCSC and BlueLincs are Independent Licensees of the Blue Cross and Blue Shield Association. HCSC and BlueLincs are Medicare Advantage organizations with a Medicare contract. Enrollment in HCSC's and BlueLincs' plans depends on contract renewal.