



BlueCross® BlueShield®




SUBSCRIBER'S FIRST NAME
SUBSCRIBER'S LAST NAME

Member ID
XXX123456789012

TIER 1 DEDUCTIBLE OUT OF POCKET	\$XX,XXX \$XX,XXX
TIER 2 DEDUCTIBLE OUT OF POCKET	\$XX,XXX \$XX,XXX
IN NETWORK DEDUCTIBLE OUT OF POCKET	\$XX,XXX \$XX,XXX
OUT OF NETWORK DEDUCTIBLE OUT OF POCKET	\$XX,XXX \$XX,XXX

MyHealthToolkitFL.com Blue Open Access POS 



BlueCross® BlueShield®

MyHealthToolkitFL.com

Members: Call Customer Service for claims filing information.

Providers: File claims with the local BlueCross and/or BlueShield Plan where member received services. When Medicare is primary, file Medicare claims directly with Medicare. Preauthorization required for all hospital inpatient admissions. MRI/MRA/PET/CT will require authorization to ensure benefit payment. "Buy and Bill" specialty drugs require precertification for benefit payment consideration. Report emergency admissions within 24 hours.

Customer Service: **833-578-1132**
Network Provider Information:
800-810-2583
Essential AdvocateSM: **855-638-5839**
Provider Service: **800-868-2510**
Precertification: **888-376-6544**
Mental Health and Substance Abuse
Precertification: **800-868-1032**
Teladoc: **866-789-8155**
Buy and Bill Drugs - Precertification:
877-440-0089

Blue Cross and Blue Shield of Florida, Inc. provides administrative services only and does not assume any financial risk for claims.

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Your identification card is one of the most important cards you carry. Providers will accept it when you need covered services. It contains information about your coverage that will help with the fast and accurate processing of any claims.

Notes:

1. Identification cards feature the name of the policyholder only. Any dependents who have coverage under this policy (for example, a spouse or child) can still use the ID card, even though it only shows the policyholder's name.
2. Alpha Prefix – is the first three characters of the "Member ID," and identifies your group. A group number does not appear on the identification card.
3. Copays (if applicable) do not appear on identification cards.
4. Family tiers receive four cards and all other tiers of coverage receive two. Additional cards can be ordered via My Health Toolkit® or through Customer Service.
5. Groups with embedded deductible and/or OOP will have a space for both Individual & Family amounts. If the member has single coverage there will not be any amounts in the Family fields.