



MEMBER ID CARDS

for Blue Cross Blue Shield of Massachusetts plans

This Quick Tip provides an overview of our member ID cards. For more information about our plans and products, including BlueCard® and out-of-area programs, visit bluecrossma.com/provider and go to **Patient Resources>Plans & Products**.

Do you need a replacement member ID card? [Contact us.](#)

KEY FEATURES

1. National or state plan logo

The image on the right displays our **state** plan logo. PPO and national products, such as the Federal Employee Program (FEP) and the New England Health Plans (NEHP), carry the **national** Blue Cross Blue Shield logo.

2. ID number

A three-character **prefix** is part of most member ID numbers. Use the correct prefix to ensure the claim is routed to the correct Blue Plan.

3. Copayment amounts

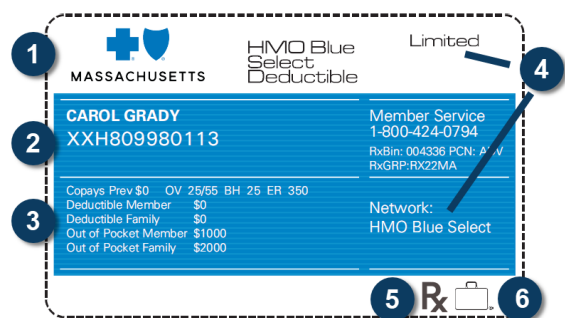
Copayments may be listed for:

- Office visits (OV)
- Behavioral health visits (BH)
- Emergency room visits (ER)
- Preventive care.

Copayments may not appear if the deductible must be met first. For member cost information, check benefits and eligibility using a technology like ConnectCenter.

4. Network information

Here we indicate if the member has a **limited network** of providers from which to choose for in-network care. This means they don't have access to the broader network of HMO and PPO providers for in-network care. It's important to know this if you are referring the member to other providers for their care.



5. Pharmacy coverage indicator

"Rx" or "Medicare Rx" will appear on the ID cards of members who receive their prescription drug coverage through Blue Cross Blue Shield of Massachusetts.



Note that Blue MedicareRxSM (PDP), our standalone Medicare Part D prescription drug plans, have their own ID cards and formulary.

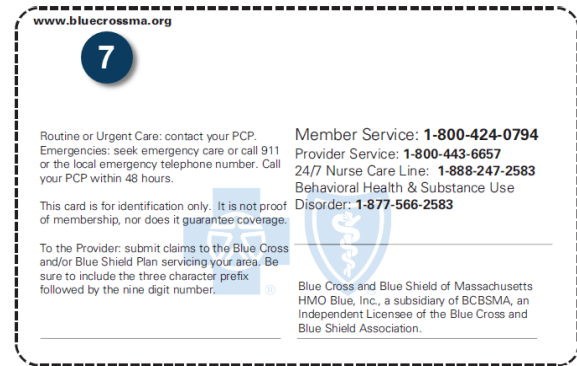
6. BlueCard symbol

The main identifier for BlueCard members is the suitcase logo on their ID card. The BlueCard program makes caring for members from other BCBS plans easy. You can submit claims for these members directly to Blue Cross Blue Shield of Massachusetts.

The suitcase logo may contain the abbreviation of the network name.

7. Is the patient a Massachusetts member?

Massachusetts members can be identified by the Blue Cross Blue Shield of Massachusetts website on the back of their ID card.



When there are two office visit copayment amounts, the first office visit (or OV as indicated on the card) usually applies to visits to the member's designated primary care provider (PCP), and the second usually applies to any other in-network provider. (Exceptions exist for some customized plans.)

When there are three office visit copayment amounts, the member is in a Blue Options **tiered network** plan. For visits to their PCP, the cost to the member is based on the tier status of the provider they see. The tiers are:

- Enhanced Benefits Tier (\$)
- Standard Benefits Tier (\$\$)
- Basic Benefits Tier (\$\$\$)

Specialists are not tiered. The copayment for an office visit to a specialist is equivalent to the PCP-level copayment in the Basic Benefits Tier.

ID Prefixes

Most Blue-branded ID cards display a three-character prefix in the first three positions of the subscriber's ID number; however, ID cards for the following products or programs do not have a prefix. (For these members, follow instructions on the ID card on how to verify eligibility and submit claims.)

- Certain stand-alone vision, pharmacy, and dental products
- The Federal Employee Program (FEP). FEP has the letter "R" in front of the ID number.

Blue Cross Blue Shield of Massachusetts uses more than 200 prefixes.

- Prefixes vary depending on how and where the plan was purchased (for example, direct from Blue Cross Blue Shield of Massachusetts or through Massachusetts' Health Connector).
- Using the member's current prefix is critical for eligibility inquiries and claims to be routed correctly, especially for out-of-state members.

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