2020 product information for providers

This brochure will help you know about the different ID cards you may see in your practice from members who have Blue Cross coverage.

All Blue Cross Blue Shield of Michigan member ID cards have the same basic layout, but the information on each card may vary slightly, depending on the member’s benefits. A Blue Cross member may carry a card for a standard commercial plan, a self-funded group plan, an individual plan or a Medicare or Medicaid plan.

The standard Blue Cross ID card layout

ID cards for most Blue Cross products include the following:

- **Enrollee Name**
  Name of the subscriber who holds the contract.

- **Enrollee ID**
  Alphanumeric identifier composed of a three or four character Blue Cross code followed by a Blue Cross-issued contract number. Use this number for billing and checking eligibility and benefits.

- **Issuer**
  Identifies the specific Blue Cross plan.

- **Group Number**
  Number exclusive to a group. The upper right corner of the ID card may also display the unique name and logo of the particular employer group. Members who don’t belong to a group, are assigned a special number that appears in the Group Number space.

- **Suitcase image**
  Indicates coverage by BlueCard® while traveling outside of Michigan. (This doesn’t apply to full Medicare.) The suitcase image may vary for non-PPO members.

- **Blue Dental℠**
  Appears if the plan includes dental coverage through Blue Cross Blue Shield of Michigan.

- **Blue Vision℠**
  Appears if the plan includes vision coverage through Blue Cross Blue Shield of Michigan.

- **Rx symbol**
  Appears if the member has Blue Cross prescription drug coverage.

- **Rx Limited**
  Indicates that limited prescription coverage is available in accordance with the preventive services requirement of the Patient Protection and Affordable Care Act when the plan does not offer a regular pharmacy benefit.

Most Blue Cross plans use the standard Blue Cross ID card. However, some have unique plan identifiers, as shown on the following pages. Note: This brochure does not include stand-alone dental ID, stand-alone vision ID cards, or stand-alone dental and vision ID cards.
Blue Cross Traditional and PPO products for employer groups

Most Blue Cross products for employer groups use the standard Blue Cross ID card shown on the first page.  
**Note:** Many Blue Cross members have a group-specific ID card. A list of group-specific prefixes is available on web-DENIS within BCBSM Provider Publications and Resources. Click on Newsletters and Resources, then click on Clinical Criteria & Resources and scroll down to Prefixes on patient ID cards.

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| Traditional coverage                | XYY or JXT   | • This product provides comprehensive benefits for hospital and medical surgical services. Most benefits are subject to an annual deductible and member coinsurance.  
• Riders allow for additional benefits and member cost-sharing amounts. |
| Comprehensive Major Medical PPO     | XYQ or JXP   | • Members get the same benefits as the Traditional plan, but use the TRUST PPO provider network.  
• The member pays additional cost-sharing amounts when covered services are performed by an out-of-network provider. |
| Community BlueSM PPO                | XYQ or JXP   | • A managed care program with built-in wellness and preventive benefits.  
• Preventive care benefits are covered 100 percent when received from a TRUST PPO network provider.  
• Members have the freedom to select providers of their choice without needing a referral from their primary care physician. |
| Community BlueSM HRA PPO            | XYQ          | • This product offers the same benefits as Community Blue PPO, but paired with a health reimbursement arrangement which helps members pay for qualified medical expenses. |
| Simply BlueSM PPO                   | XYQ          | • This product provides comprehensive PPO coverage with cost-sharing features.  
• Preventive care benefits are covered 100 percent when received from a TRUST PPO network provider. |
| Simply BlueSM HRA PPO               | XYQ          | • This product offers the same benefits as Simply Blue PPO, but paired with a health reimbursement arrangement.  
• An HRA is a fund that the employer establishes for employees to use for qualified out-of-pocket health care expenses. The employer allocates a set dollar amount for each employee. |
| Simply BlueSM HSA PPO               | XYQ          | • Simply Blue HSA is a high-deductible plan paired with a tax-free health savings account. |
| Simply BlueSM Routine Care PPO      | XYQ          | • This product offers the advantages of a classic PPO plan, but with the added cost savings of a high-deductible plan.  
• Preventive services are covered 100 percent, while primary care office visits, urgent care visits and generic drugs are covered with a copayment and are not subject to the deductible. |
| Healthy Blue AchieveHM PPO          | XYQ          | • This is an innovative wellness product that rewards members who achieve health targets and commit to engage in health improvement programs. This product uses the TRUST PPO network. |
| Blue Cross® Physician Choice PPO    | XYQ          | • Members have access to the broad PPO network.  
• Only members who select a primary care physician affiliated with a Level 1 OSC will be eligible to receive Level 1 cost share (lowest out-of-pocket costs). |
| Self-funded products                | Numerous     | • All group products are available as self-funded products.  
• The employer assumes the risk for claim costs and pays an administrative fee for the services and programs provided by Blue Cross. Blue Cross collects from the employer and pays the claims.  
• Some unique self-funded products have their own names, such as Blue Preferred Plus, a PPO product for auto groups in a 21-county network, GeoBlue®, a Blue Cross Blue Shield product that serves more than 3,000 internationally-based General Motors employees, ConnectCare: Henry Ford Health System, and ConnectCare: Ascension Genesys, a General Motors PPO product for select salaried employees and eligible dependents in the Detroit and Flint areas.  
• Traditional Care Network, a plan that supplements Original Medicare for Medicare-eligible UAW retirees covered through the URMBT, and Enhanced Care PPO, a plan offering similar benefits to other Traditional plans for non-Medicare eligible UAW retirees covered through the URMBT. |

[Image: A Blue Cross ID card with the name and contact information of a Blue Cross member.]

[Image: GeoBlue International Health Care Plan and Blue Dental logo.]

[Image: Blue Cross Blue Shield logo and a list of covered products and services.]
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| Medicare Plus Blue™ (RX information may appear on ID cards, if applicable) Group PPO | XYL | - This is a Medicare Advantage PPO product that covers services provided under Medicare and may include additional preventive care coverage.  
- The member may pay less for covered services by using a provider in the Medicare Advantage PPO provider network.  
- Outside Michigan, member costs are the same as in-network services when members use providers that accept Medicare.  
- The member carries one ID card. Providers bill Medicare Plus Blue PPO. |
| Medicare Plus Blue™ PPO Individual | XYL | - This is a Medicare Advantage PPO product that covers services provided under Medicare and may include additional preventive care coverage.  
- The member may pay less for covered services by using a provider in the Medicare Advantage PPO provider network.  
- There are four plan options – Essential, Vitality, Signature and Assure. Vitality, Signature and Assure offer coverage for vision, hearing and preventive dental. Members can elect additional dental and vision coverage with all four options.  
- Part D drug coverage is included in all four options.  
- The member carries one ID card. Providers bill Medicare Plus Blue PPO. |
| Blue Cross® Medicare Supplement Uses standard Blue Cross ID card | XYR | - Includes five plans available to individuals: Plan A, Plan F, Plan High Deductible F, Plan G and Plan N.  
- Effective 4/1/20: plans will include Plan D and Plan High Deductible G.  
- This product supplements Original Medicare by covering all or part of Medicare’s deductibles and coinsurance.  
- This product does not cover prescription drugs nor does it cover dental, vision or hearing services beyond what Original Medicare covers.  
- Members carry two ID cards: their Original Medicare ID card and their Medicare Supplement ID card. Providers should bill Medicare first.  
- There are no networks or referrals required. |
| Prescription Blue™ Group PDP (Prescription Drug Plan) | No prefix | - Members must use a network of pharmacies to fill their prescriptions for covered Part D drugs.  
- Some network pharmacies have preferred cost-sharing. Members may pay less with these pharmacies. |
| Prescription Blue™ Individual PDP | No prefix | - This is a Medicare Part D prescription drug-only product offered to individual members.  
- Members can obtain approved drugs by using the plan’s pharmacy network. |
| Medicare Complementary Coverage Uses standard Blue Cross ID card | XYR or XYX | - This product supplements Original Medicare by covering all or part of Medicare’s deductibles and coinsurance.  
- This product does not cover prescription drugs nor does it cover dental, vision or hearing services beyond what Original Medicare covers.  
- Members carry two ID cards: their Original Medicare ID card and their Medicare Complementary Coverage ID card. Providers should bill Medicare first.  
- There are no provider networks or referrals required. |
| Legacy™ Medigap Uses standard Blue Cross ID card | XYR or XYX | - This product supplements Original Medicare by covering all or part of Medicare’s deductibles and coinsurance.  
- This product does not cover prescription drugs nor does it cover dental, vision or hearing services beyond what Original Medicare covers.  
- Members carry two ID cards: their Original Medicare ID card and their Legacy Medigap ID card. Providers should bill Medicare first.  
- There are no provider networks or referrals required. |
| Blue Cross Complete of Michigan | XYU | - This product is open to eligible Medicaid beneficiaries in 32 Michigan counties.  
- Members select a primary care physician from within the Blue Cross Complete provider network who coordinates all medical care.  
- Blue Cross Complete members receive two ID cards: a Blue Cross Complete ID card and a Medicaid ID card, called a mhealth card. Providers bill Blue Cross Complete for most services.  
- There are no provider networks or referrals required. |
| Blue Cross Complete Healthy Michigan Plan | XYU | - This product is similar to Blue Cross Complete, but also covers habilitative services, dental services and hearing aids for persons 21 years and older.  
- As long as the service is covered by the health plan, members are not responsible for copays at the point of service.  
- Primary care physicians must complete a health risk assessment form for members at the first appointment. |
Blue Cross products for individuals

All individual ID cards have product names on them. Examples are shown below. The group number is specific to the product and level of the plan (gold, silver, bronze or catastrophic). When Blue VisionSM is listed on the ID card, this means all members have vision coverage (adults and children). Blue VisionSM Pediatric means only children have vision coverage.

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| Blue Cross Premier | XYE (on Marketplace) XYG (off Marketplace) | • This product offers a broad choice of providers in the TRUST PPO network. It is available statewide with in- and out-of-network benefits.  
• This product has BlueCard coverage for members who travel outside of Michigan. Members will have out-of-network cost-sharing for scheduled services and in-network cost sharing for urgent, emergency or accidental injury services, as well as online visits and pharmacy claims. |

Back of the Blue Cross member ID card

Information located on the back of the member’s ID card is plan-specific and may vary.

The image below shows the back of a typical card.

> Contact information is provided for both members and providers.

Travel and guest coverage

BlueCard® is a national program from the Blue Cross and Blue Shield Association that gives Blue Cross and Blue Care Network members easy and convenient access to health care services while traveling or living outside of their BCBS home state.

Members pay their regular deductible, coinsurance and copayments for service. Out-of-state Blue Cross and BCN members with the nationally recognized BlueCard suitcase logo on their ID cards should be treated as Blue Cross Blue Shield of Michigan traditional members with traditional coverage.

The ID cards shown in this brochure are examples and may differ for a specific member based on the member’s benefit package.

For additional information on these products, please refer to the “Introduction” and other chapters of the BCBSM Provider Manual, Benefit Explainer, and the certificates of coverage. Medicare Advantage information is available at bcbsm.com/providers. Click on Medicare Advantage. Blue Cross Complete information is available at MiBlueCrossComplete.com/providers.