



BLUE CROSS BLUE SHIELD OF ALASKA

An Independent Licensee of the Blue Cross Blue Shield Association

2019 Premera ID Card Guide

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Premera Provider Site: <https://www.premera.com/ak/provider/>

Premera ID Cards

What's the difference?

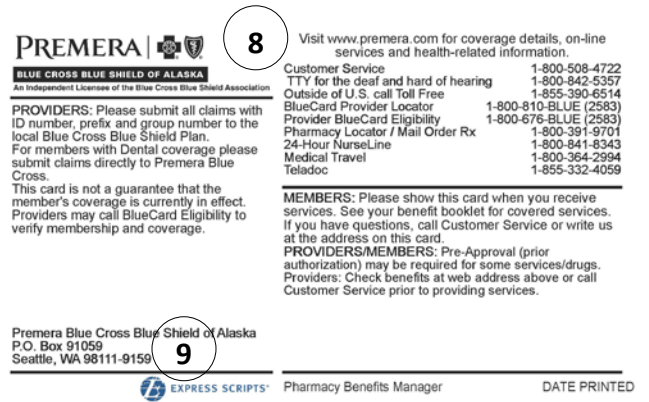
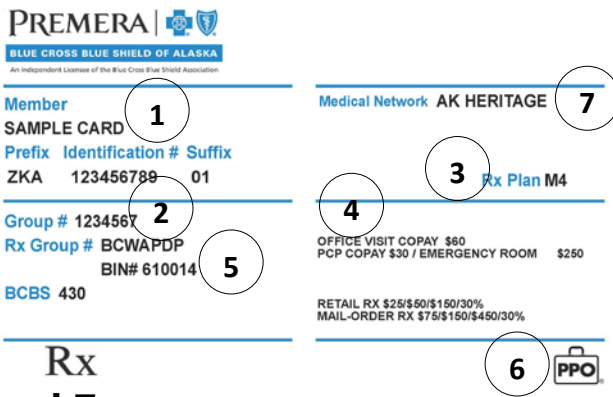
Premera has three types of plans in Alaska:

- Individual preferred provider organization (PPO) and HSA plans: Sold to individuals through the [Exchange marketplace](#).
- Group or commercial plans: Typically employer-based plans; can be PPO or HSA.
- BlueCard: Patient may be a customer of a Blue Cross and/or Blue Shield plan based in another state. The BlueCard program allows customers to get services while living in another Blue plan's service area.

ID Cards vary by plan type

Most Premera ID cards are similar, with just a few key differences. When patients call, we recommend that you ask them for their health plan and network name. Remember that the ID card is not a guarantee of coverage or eligibility. To check eligibility and benefits, use our online [Eligibility and Benefits Tool](#) or contact Customer Service. This tool requires secure log in through [One Health Port](#).

For more details and to see samples of our ID cards, view Premera's [Reference Manual](#).



ID Card Features*

1. Customer Information
Policyholder's name and member ID number. Be sure to include the prefix and the identification number when submitting claims or checking eligibility. You don't need to include the suffix.
2. Group Number
Group ID numbers identify the line of business for the customer's plan.
3. Medical Network
This identifies which network your patient is in. See [Plans and Networks](#) on the next page for specific network details and limitations. If the member has dental coverage, that will be listed as well.
4. Copay, Emergency Room, Rx
Details what a customer pays at the time of service.
5. Rx Group # and BIN#
These numbers relate to pharmacy claims.
6. Suitcase symbol for nationwide coverage
The suitcase image, with or without PPO noted, indicates that the customer's plan includes BlueCard benefits. This symbol is important when providing healthcare services to out-of-area patients. Note that certain plans, don't cover out of area services, even though the suitcase logo is on the card.
7. Group or Plan Name
For Premera accounts, the account name may appear on the card.
8. Contact information and web tools for members and providers
If a customer has a limited network (such as an EPO), emergency care benefits are noted here.
9. Billing instructions and address; pharmacy benefits manager will be listed on the bottom left of the card.

*For more details and to see samples of our ID cards, view Premera's [Reference Manual](#). Access requires secure log in through [One Health Port](#).

Plans and Networks

Our PPO and High-Deductible plans have a standard in-network and out-of-network structure. Copays or co-insurance amounts are listed on the member ID card.

Exceptions

Premera may make exceptions in assigning providers to network tiers, based on specific plan or market needs to ensure adequate member access to network providers.

2019 Plans Names and Networks

Individual Plans	
Plan Names	Network Names*
Preferred Plus	Heritage
Small Group Plans	
Plan Names	Network Names
Select Plans	Heritage
Select Qualified HSA Plans	Heritage
Plus PCP Plans	Heritage
Plus Qualified HAS Plans	Heritage
Employer Group Plans	
Plan Names	Network Names
-PPO Plus	Heritage
PPO Select	Heritage
Plus HSA	Heritage
Select HAS	Heritage
Plus Envoy	Heritage
Select Envoy	Heritage
Dental Plans	
Plan Names	Network Names
Dental	Choice
Washington Service Area	
Plan Names	Network Names
All Plans	Heritage

**Heritage is sometimes shown as Heritage Plus on ID cards.*

Helpful Online Tools

Visit our provider website at premera.com/ak/provider for helpful tools and information. These tools may require secure log in through [One Health Port](#).

PREMERA | BLUE CROSS BLUE SHIELD OF ALASKA

Log in

Providers

Current location: AK

Providers

For Providers

Tools

- Eligibility & Benefits
- Prior Authorization
- Check Prior Authorization Status
- Claims & Payments
- Claims Editor
- Electronic Funds Transfer
- PCP Roster
- Find a Doctor
- Rx Search
- Utilization Review
- Library
- Pharmacy

Provider Home

Alert: (Jan. 2, 2019) The issue with our secure medical records attachment feature for prospective review submissions is now resolved. Please submit medical records using the tool. Thank you.

Premera and dental providers

Need prior authorization? Use our [code check tool](#) and [prior auth tool](#) to submit your request.

Log in to our secure provider website to:

- Check eligibility and benefits
- Get a claim estimate or claim status
- Download an explanation of payment (EOP)

[Log in](#)

Note: The Premera provider website requires you to [register](#) as a OneHealthPort subscriber.

Medical providers outside of Washington and Alaska

Resources for providers outside of Washington and Alaska typically start with the local Blue plan. Although each Blue plan site is organized a bit differently, they usually have tools for out-of-area members that you can use to find what you need to help any Premera customers.

[Learn what's available to you](#)

Quick links

- [Medical policies](#)
- [Payment policies](#)
- [Code list \(.pdf\)](#)
- [Update my info \(.pdf\)](#)
- [BlueCard® resources](#)
- [OneHealthPort](#)
- [Patient decision aids](#)
- [Contact us](#)

Get the latest news

Find Premera provider news and policy updates. (Jan. 3, 2019)

[Stay up to date](#)

Learn at your pace

Need orientation or tools training? Check out our updated [learning center](#).

Find a Doctor: Verify your address and specialty information, find providers you can refer within a member's network by visiting our Find a Doctor tool.

Eligibility & Benefits: Verify a member's network and eligibility information using our eligibility and benefits tool.

Prior Authorization: Determine what services require authorization or need review (based on the member's plan).

Plan Code Prefixes: Determine which plans are within Premera's network or are outside Alaska. This is helpful when determining benefits and eligibility for a customer. You'll find this list in the [general reference section](#) of our secure website.

For a step-by-step walk through of our online tools, visit us at <https://www.premera.com/ak/provider/reference/> to access our online tool guides.

Important Contacts

Customer Service: 800-508-4722

- Member benefits and eligibility verification
- Claims payment, payment vouchers, or remittance assistance
- Provide network status confirmation

BlueCard: 800-676-BLUE to verify benefits or eligibility for BlueCard members. Call 888-261-9562 for BlueCard claims customer service.

Physician & Provider Relations: 800-722-4714, option 4

- Changing your billing, practice or remittance address
- Adding a practice location
- Updating your tax identification number
- Adding/deleting a provider at your office
- Fulfilling application and contract requests
- Verifying contract status
- Requesting copies of past communications

Pharmacy Services: 888-261-1756

- General information on the Preferred Drug List (PDL)
- Exceptions for point-of-sale edits
- Level status confirmation for a specific medication

Care Management: 877-342-5258, option 3

Technical website help: 800-722-9780

[Online Provider Reference Manual](#)