

PREMERA BLUE CROSS

2024 Medicare Advantage Plans



PREMERA | 

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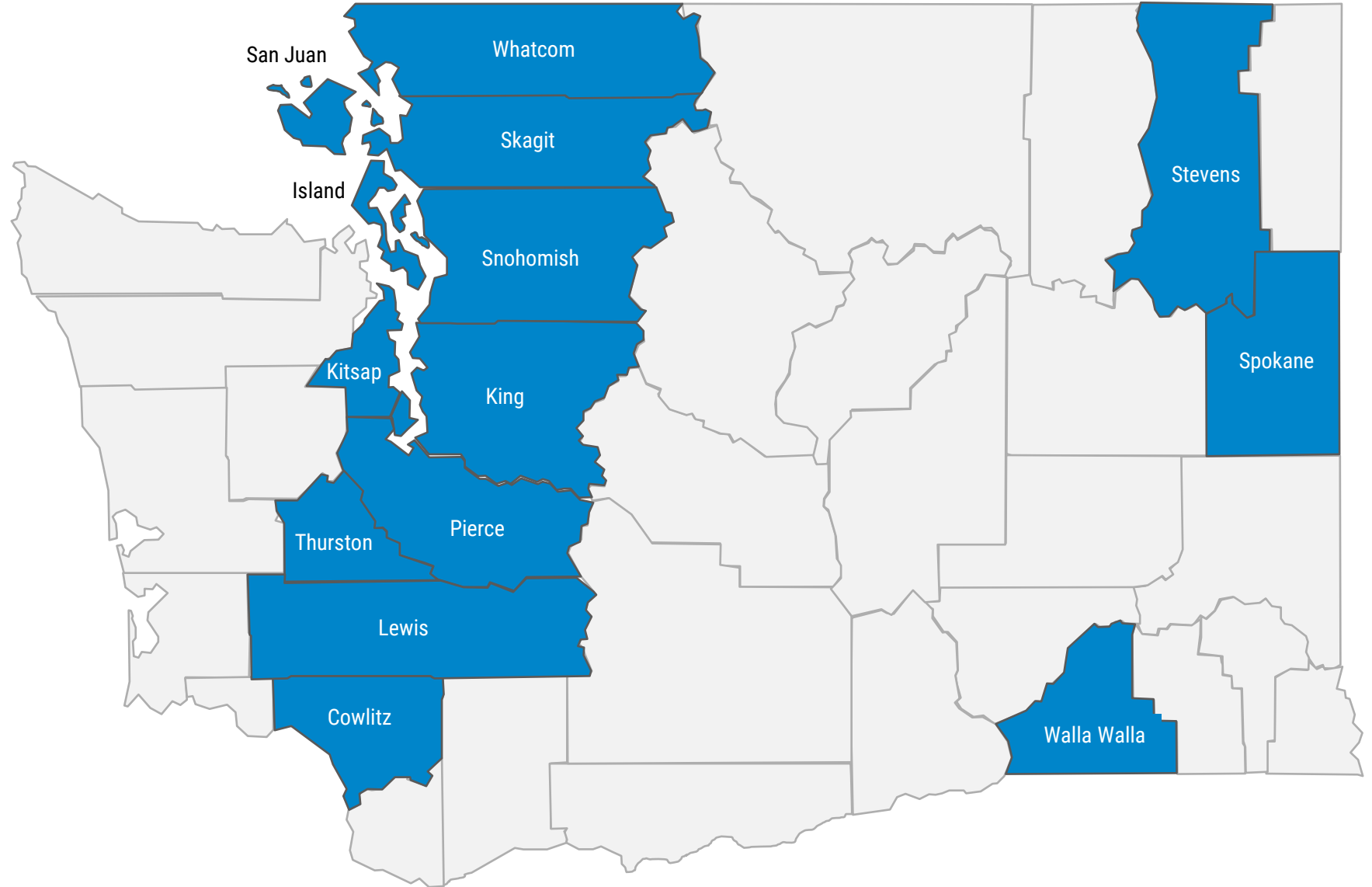
Service area

Eastern Washington

Spokane
Stevens
Walla Walla

Western Washington

Cowlitz
Island
King
Kitsap
Lewis
Pierce
San Juan
Skagit
Snohomish
Thurston
Whatcom



2024 Premera Blue Cross Medicare Advantage plans

	*HMO \$0	*Classic HMO	Total Health HMO
Premium	\$0	\$54	\$23
Cowlitz, Island, King, Kitsap, Lewis, Pierce, San Juan, Skagit, Snohomish, Thurston, and Whatcom			
Walla Walla			
Spokane			
Stevens			

Alternative medicine benefits for 2024

	HMO \$0	Classic HMO, Total Health HMO
Routine acupuncture services	✓	✓
Number of allowed visits	6	10
Copays	\$20	\$20
Routine chiropractic services	✓	✓
Number of allowed visits	6	10
Copays	\$20	\$20
Routine naturopathic services	Not covered	✓
Number of allowed visits	N/A	6
Copays	N/A	\$30

Medicare Advantage HMO plans

All Premera MA plans are HMO plans this means:


- The primary care provider (PCP) is responsible for communicating and arranging care from specialists. Referrals to in-network providers don't need to be submitted to Premera.
- Referrals to out-of-network specialists will require submission to Premera for review and approval.
- Premera HMO plans require members to see in-network providers unless it's emergency care.

Prior Authorizations

- A prior authorization is required for some non-emergent care services.
- Members who don't receive a prior authorization for some non-emergent services may be required to pay 100 percent of the costs.

Check the member's ID card

- All Medicare Advantage cards have the ID prefix, ZNP.
- All contact phone numbers are on the back of the card.
- Member PCP and designated clinic are on the back of the card.
- The information for processing prescriptions is on the back right hand side of the card.

 <p>PREMERA  BLUE CROSS <small>An Independent Licensee of the Blue Cross Blue Shield Association</small></p>		<p><Name of specific plan></p>	
<p>Enrollee Name FIRST M LASTNAME JR</p>		<p>Plan <H7245 XXX></p>	
<p>Enrollee ID</p>		<p>Medical Network Medicare Advantage</p>	
<p>Prefix ZNP 123456789</p>	<p>PC 00</p>	<p>RXBIN: 004336 RXPCN: MEDDADV RXGRP: RX8644 RXID: 12345678900</p>	
<p>Health Plan (80840) <0000000000></p>		<p>Issued: MM/YYYY</p>	
<p>Group Number 12345</p>		<p>Members: www.premera.com/MA</p> 	
<p><DENTAL, VISION, HEARING> MEDICARE ADVANTAGE IHMO</p>		<p>Premera Blue Cross An Independent Licensee of the Blue Cross Blue Shield Association</p> <p>Use of this card is subject to terms of applicable contracts, conditions and use agreements.</p> <p>Providers outside of WA, local plan.</p> <p>Mail Provider claims to: Premera Blue Cross PO Box 91059 Seattle, WA 98111-9159</p> <p><first/last name> <Designated Clinic></p>	
		<p>Customer Service: 888-850-8526 TTY/TDD: 711</p> <p>PCP: <XXX-XXX-XXXX> Mental health/substance abuse treatment: 844-884-1855 Dental Inquiries: 888-850-8526 Vision/Hearing Inquiries: 888-850-8526 24/7 Nurseline: 855-339-8123 Medical Authorizations: 855-339-8127 Dental Provider Service: 855-612-7477 Pharmacist Call: 866-693-4620</p>	

Delegated providers

- Some provider groups are delegated to provide utilization and claims management services for our members.
-
- For patients who've selected a PCP associated with the following groups, it's important that you contact the group before providing services that require referral, authorization, or admission.
-

The following providers manage UM and claims for our Medicare Advantage members:

Optum Care Network:

Polyclinic/The Everett Clinic/
Western Washington Medical
Group/Island/CHAS/Virginia
Mason Franciscan Health

Physicians of Southwest
Washington (PSW)

Seoul Medical Group

The name of the designated clinic is on the [back of the member ID card](#).

Primary care provider (PCP) selection during enrollment

Members can specify their PCP choice on the enrollment application; if they don't:

- A member is auto assigned a PCP based on their home address.
- A letter is mailed to the member with the name of the PCP that was auto selected.
- The ID card will show the PCP that was auto selected.
- Members can call customer service and change their PCP at any time.

Medicare Advantage PCP

- Members are required to select a PCP.
- Only in-network providers can be assigned as PCPs.
- If a member changes their PCP, that change will be effective on the first of the following month.
- The PCP is responsible for communicating and arranging care with specialists.

PCP types	
Geriatric physician	General practice
Internal medicine	Family practice
Pediatrician	ARNP or PA

Identifying a member's PCP

- Look for the PCP name and designated clinic on the back of the member's card.
- Use the eligibility and benefits tool on the MA provider website.
- Use electronic 270/271 inquiry transactions.
- Call the customer service phone number on the back of the card.

Contact information for Medicare Advantage

Department	Phone Number
Medicare Advantage homepage, Find A Doctor, and forms	800-722-9780
General information, member benefits, claims payment questions, pharmacy policy questions, drug list questions, and more	888-850-8526