

Blue Cross Blue Shield of Michigan: Understanding member ID cards

2025 product information for providers

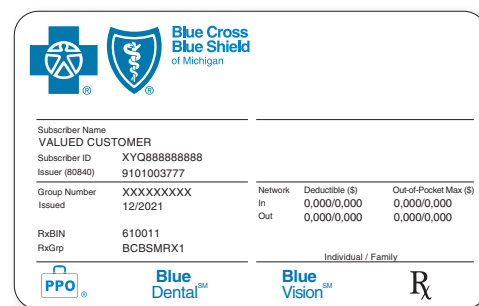
This brochure will help you know about the different ID cards you may see in your practice from members who have Blue Cross coverage.

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:

- > **Subscriber Name**
Name of the subscriber who holds the contract.
- > **Subscriber ID**
Alphanumeric identifier composed of a three-character Blue Cross prefix 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.
- > **Deductible and Out-of-Pocket Max**
Some cards indicate the deductible and out-of-pocket maximum applicable to the subscriber's plan or coverage. In some cases where member deductibles or out-of-pocket maximums are not available on the card, they are either not applicable (for example, stand-alone cards) or this information was not available at the time the card was issued.
- > **Suitcase image**
Indicates coverage by BlueCard® while traveling outside of Michigan for commercial members or through our nationwide network of Blue plan providers for Medicare Advantage members. (This doesn't apply to full Medicare.) The suitcase image may vary for some EPO and non-PPO members.
- > **Blue DentalSM**
Appears if the plan includes dental coverage through Blue Cross Blue Shield of Michigan.
- > **Blue VisionSM**
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.

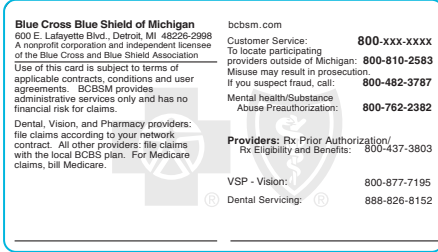


Back of the Blue Cross member ID card

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.



Most Blue Cross plans use the standard Blue Cross ID card. However, some have unique plan identifiers on the front of the card, 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.

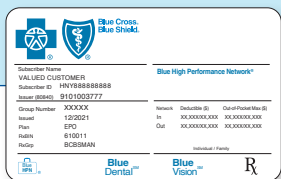
Blue Cross Traditional and PPO products for employer groups



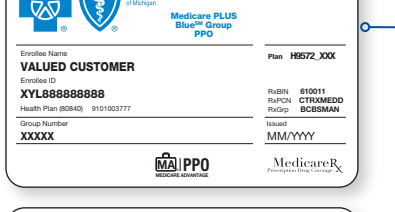
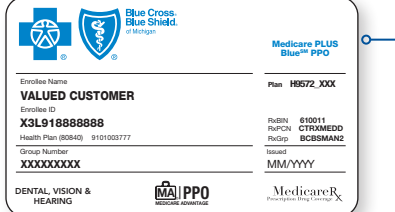
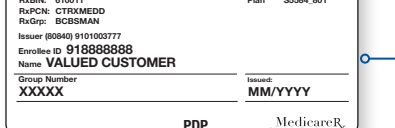

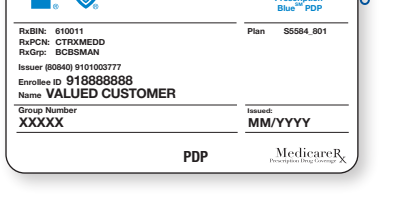
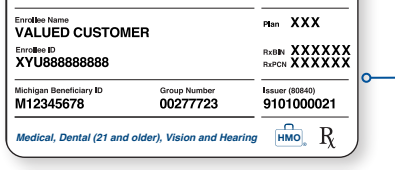
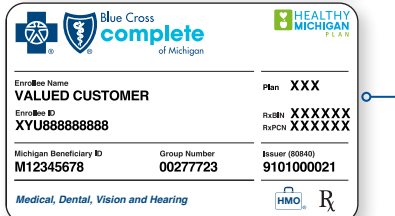
Most Blue Cross products for employer groups use the standard Blue Cross ID card shown on the first page.

Note: Many Blue Cross members have a group-specific ID card. A list of group-specific prefixes is available on the Secure Provider Resources site. Click on *Billing and Claims*, then select *Prefixes*.

Product name	BCBSM prefix	Details
Traditional coverage Comprehensive Major Medical <i>Uses standard Blue Cross ID card</i>	YYY or JXT	<ul style="list-style-type: none"> 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 <i>Uses standard Blue Cross ID card</i>	XYQ or JXP	<ul style="list-style-type: none"> 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 Blue SM PPO <i>Uses standard Blue Cross ID card</i>	XYQ or JXP	<ul style="list-style-type: none"> 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 Blue SM HRA PPO <i>Uses standard Blue Cross ID card</i>	XYQ	<ul style="list-style-type: none"> 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 Blue SM PPO <i>Uses standard Blue Cross ID card</i>	XYQ	<ul style="list-style-type: none"> 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 Blue SM HRA PPO <i>Uses standard Blue Cross ID card</i>	XYQ	<ul style="list-style-type: none"> 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 Blue SM HSA PPO <i>Uses standard Blue Cross ID card</i>	XYQ	<ul style="list-style-type: none"> Simply Blue HSA is a high-deductible plan paired with a tax-free health savings account.
Simply Blue SM Routine Care <i>Uses standard Blue Cross ID card</i>	XYQ	<ul style="list-style-type: none"> 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.
Blue High Performance Network [®] or BlueHPN <i>(HPN logo will appear on ID card)</i>	Various	<ul style="list-style-type: none"> This is an exclusive provider organization, or EPO, health plan option offered to select Blue Cross Blue Shield of Michigan customers. Members who have health plans with BlueHPN in Southeast Michigan can see certain, contracted Ascension health care providers for services and will only have to pay the plan's out-of-pocket expenses. If they see a non-BlueHPN health care provider, they are responsible for the costs (except for emergency services and urgent care). Members can see BlueHPN providers outside of the state.

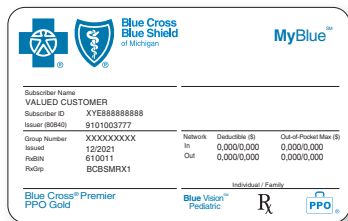




	Product name	BCBSM prefix	Details
 <p>Enrollee Name: VALUED CUSTOMER Enrollee ID: XYL888888888 Health Plan (80840): 9101003777 Group Number: XXXXX</p> <p>Plan: H5672_XXX</p> <p>RxBIN: 610011 RUPCN: CTRXMEDD RxCSP: BCBSMAN</p> <p>Issued: MM/YYYY</p> <p>MA PPO MedicareRx</p>	Medicare Plus Blue SM (RX information may appear on ID cards, if applicable) Group PPO	XYL or X3L (X3L will have 9-digit group number)	<ul style="list-style-type: none"> 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.
 <p>Enrollee Name: VALUED CUSTOMER Enrollee ID: X3L918888888 Health Plan (80840): 9101003777 Group Number: XXXXXXXXX</p> <p>Plan: H5672_XXX</p> <p>RxBIN: 610011 RUPCN: CTRXMEDD RxCSP: BCBSMAN2</p> <p>Issued: MM/YYYY</p> <p>DENTAL VISION & HEARING MA PPO MedicareRx</p>	Medicare Plus Blue SM PPO Individual	X3L	<ul style="list-style-type: none"> 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 six plan options – Essential, Vitality, Signature, Assure, Part B Credit and Meijer. All six offer coverage for vision, hearing and preventive dental. Members can elect additional dental and vision coverage with all six 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 <i>Uses standard Blue Cross ID card</i>	XYR	<ul style="list-style-type: none"> Includes seven plans available to individuals: Plan A, Plan D, Plan F, Plan High Deductible F, Plan G, Plan High Deductible G and Plan N. 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.
 <p>RxBIN: 610011 RUPCN: CTRXMEDD RxCSP: BCBSMAN Issuer (80840): 9101003777 Enrollee ID: 918888888 Name: VALUED CUSTOMER Group Number: XXXXX</p> <p>Plan: S5584_801</p> <p>Issued: MM/YYYY</p> <p>PDP MedicareRx</p>	Prescription Blue SM Group PDP (Prescription Drug Plan)	No prefix	<ul style="list-style-type: none"> 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.
 <p>RxBIN: 610011 RUPCN: CTRXMEDD RxCSP: BCBSMAN Issuer (80840): 9101003777 Enrollee ID: 918888888 Name: VALUED CUSTOMER Group Number: XXXXX</p> <p>Plan: S5584_801</p> <p>Issued: MM/YYYY</p> <p>PDP MedicareRx</p>	Prescription Blue SM Individual PDP	No prefix	<ul style="list-style-type: none"> 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.
 <p>RxBIN: 610011 RUPCN: CTRXMEDD RxCSP: BCBSMAN Issuer (80840): 9101003777 Enrollee ID: 918888888 Name: VALUED CUSTOMER Group Number: XXXXX</p> <p>Plan: S5584_801</p> <p>Issued: MM/YYYY</p> <p>PDP MedicareRx</p>	Medicare Complementary Coverage <i>Uses standard Blue Cross ID card</i>	XYR or XYX	<ul style="list-style-type: none"> 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 Complementary Coverage ID card. Providers should bill Medicare first. There are no provider networks or referrals required.
	Legacy SM Medigap <i>Uses standard Blue Cross ID card</i>	XYR or XYX	<ul style="list-style-type: none"> 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.
 <p>Enrollee Name: VALUED CUSTOMER Enrollee ID: XYU888888888 Michigan Beneficiary ID: M12345678 Group Number: 00277723 Issuer (80840): 9101000021</p> <p>Plan: XXX</p> <p>RxBIN: XXXXXX RUPCN: XXXXXX</p> <p>Medical, Dental (21 and older), Vision and Hearing HMO R</p>	Blue Cross Complete of Michigan	XYU	<ul style="list-style-type: none"> This product is open to eligible Medicaid beneficiaries in 58 Michigan counties. Members select a primary care physician from within the Blue Cross Complete provider network to coordinate medical care. Blue Cross Complete members receive two ID cards: a Blue Cross Complete ID card and a Medicaid ID card, called a mihealth card. Providers bill Blue Cross Complete for most services. Dental coverage is included for adults ages 21 and older. Those on Medicaid under age 21 receive dental coverage through the state's Healthy Kids Dental program.
 <p>Enrollee Name: VALUED CUSTOMER Enrollee ID: XYU888888888 Michigan Beneficiary ID: M12345678 Group Number: 00277723 Issuer (80840): 9101000021</p> <p>Plan: XXX</p> <p>RxBIN: XXXXXX RUPCN: XXXXXX</p> <p>Medical, Dental, Vision and Hearing HMO R</p>	Blue Cross Complete of Michigan/Healthy Michigan Plan	XYU	<ul style="list-style-type: none"> This type of coverage is similar to Blue Cross Complete traditional Medicaid, and also covers dental services. Michigan residents ages 19 through 64 who have income at or below 133 percent of the federal poverty level qualify for Healthy Michigan Plan.

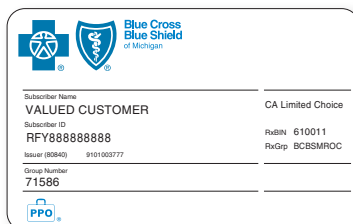
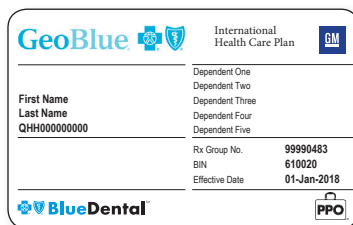


All individual ID cards have product names on them. Examples are shown below. The group number is specific to the product and level of the plan (gold, silver, bronze or catastrophic). When Blue VisionSM is listed on the ID card, this means all members have vision coverage (adults and children). Blue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



Product name	BCBSM prefix	Details
Blue Cross [®] Premier	XYE (on Marketplace) XYG (off Marketplace)	<ul style="list-style-type: none"> 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 24/7 virtual visits and pharmacy claims.

Blue Cross ID card variations



Product name	BCBSM prefix	Details
Self-funded products <i>Group name or logo may appear on ID card (sample image shown)</i>	Numerous	<ul style="list-style-type: none"> 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 about 300 internationally-based General Motors employees, ConnectedCare: Henry Ford Health System, and ConnectedCare: 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.
CA Limited Choice	RFY	<ul style="list-style-type: none"> Some Blue Cross members have contraceptive coverage through Blue Cross only and not through their employer-offered benefits. These members carry a separate ID card called CA Limited Choice.

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 commercial members easy and convenient access to health care services while traveling or living outside of their BCBS home state. Medicare Advantage members have access to care from our nationwide network of Blue Plan providers.

Members pay their regular deductible, coinsurance and copayments for service. Outside-of-Michigan Blue Cross and BCN members with the nationally recognized BlueCard suitcase logo on their ID cards will still be treated as Blue Cross Blue Shield of Michigan members with PPO coverage or BCN 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 *Blue Cross Commercial Provider Manual*, Benefit Explainer, and the certificates of coverage. Medicare Advantage information is available at bcbsm.com/providers/resources/. Click on *Learn more about our products*. Blue Cross Complete information is available at mbluecrosscomplete.com.