



trio HMO

Subscriber ID# **XEQ902891099**
JEE HYUN BAE
Member
DYLAN LEE

ADVENTIST HEALTH PHYSICIAN
NETWORK-GLENDALE
PARK, CAROLINE K.
(818) 637-7980 **03/01/21**

Network Name **Trio ACO HMO**
Group # **X0001000**
Effective **01/01/2022**

Copays

| | | | |
|--------------------|-------|------------|------|
| Primary Care | \$35 | Specialist | \$70 |
| Urgent Care Center | \$35 | Teladoc | \$0 |
| Emergency Room | \$400 | | |

| | |
|-----------|-----------------|
| Plan Type | HMO |
| RX | YES |
| RxBIN | 004336 |
| RxPCN | 77993333 |

Silver 70 Off Exch Trio HMO



Providers: Please file all claims with your local BCBS licensee in whose service area the member received services or, when Medicare is primary, file all claims with Medicare. This member has limited benefits outside of California. For more information visit: blueshieldca.com/provider

| | Deductible | Out-of-pocket maximum |
|--------------------------------|------------|-----------------------|
| Individual HMO medical | \$3,700 | \$8,200 |
| Individual in-network pharmacy | \$10 | Included* |
| Family HMO medical | \$7,400 | \$16,400 |
| Family in-network pharmacy | \$20 | Included* |

*Pharmacy included in medical deductibles/out-of-pocket maximums.

CA Medical claims to: Blue Shield of California, P.O. Box 272540, Chico, CA 95927-2540

Pediatric Dental Claims to: Blue Shield of California, P.O. Box 30567, Salt Lake City, UT 84130-0567

We are here to help:

blueshieldca.com/go

(844) 250-2873 Shield Concierge
711 TTY
(877) 263-9952 Mental Health Customer Svc.
(877) 304-0504 NurseHelp 24/7
(800) 810-2583 To locate providers outside of CA
(800) 541-6652 CA Provider Customer Service
(includes hospitals for pre-auth)
(888) 970-0932 Pharmacists Only
(877) 601-9083 Vision Benefits and Claims Inquiries
(888) 702-4171 Pediatric Dental Benefits and Claims
Inquiries
(800) 835-2362 Teladoc

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