



DAVID S BLAIR

Member ID: UIK983W17757

Group: Plan Code RxBIN RxPCN RxGRP Medical BOR090M112 102 004336 ADV RX1428

Coins In/Out 80%/60% INN OOP IND \$4500 INN DED IND \$250

University System of Georgia

For detailed benefits information, please visit the website on the back of your card Blue Open Access
POS



△ DELTA DENTAL



Enrollee

David Blair

Enrollee ID: 4103880

USG

16711 Group ID:

Provided by The Board of Regents of the Univ System of Administered by Delta Dental Insurance Company



Possession of this card does not guarantee

Providers: File all claims directly with your Local Blue Cross Blue Shield plan. Please submit all claims with the 3 digit prefix that precedes the member ID on the front of the card. Anthem Providers submit claims at: www.availity.com Members: Submit claims at: www.anthem.com/submitmyclaim

Accolade Member Service* member.accolade.com* Accolade Nurseline* Coverage While Traveling BH Pre-Certification Pre Certification Provider Services Pharmacy Services*

1-866-204-9818 1-800-810-2583 1-800-292-2879 1-800-233-5765 1-800-676-2583 1-877-362-3922

*Contracts directly with group

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All hospital admissions require precertification

10/13/2023

Additional information: call **1-800-471-4214** or visit **deltadentalins.com/usg**

This card is for informational purposes and not a guarantee of coverage.

Send claims to: Delta Dental Insurance Company P.O. Box 1809 Alpharetta, GA 30023-1809