

# Understanding Your ID Cards

## Adjoin

Your medical plan through your employer, Adjoin, has provided you with 2 medical ID cards. When accessing care, you will be required to present an ID card depending on the visit type. Knowing the difference between both ID cards can be tricky, so we've pulled together some helpful hints:

### Anthem ID Card

- Your Anthem ID card will be used for doctor office visits, such as primary care, specialists, independent urgent care centers and independent laboratories. This is labeled as "Professional/Ancillary Services Only" on the front of your ID card.
- The network will be specified at the top left-hand corner of your ID card. You can browse in-network providers at: [www.anthem.com/ca/find-care](http://www.anthem.com/ca/find-care)
- Your provider can view claim submission instructions on the back of your ID card.

### ClaimDOC ID Card

- Your ClaimDOC ID card will be used for all facility-based services such as outpatient surgical centers, walk-in clinics within a hospital and all other hospital-related services.
- This is an open-access plan for all facility-based services, so members do not need to search for in-network facilities.
- Your provider can view claim submission instructions on the back of your ID card.

### IMPORTANT!

- You can present either one of your ID cards to the pharmacy to obtain prescriptions.
- Register your user account on [www.MyHealthBenefits.com](http://www.MyHealthBenefits.com) to access digital copies of your ID cards, plan summaries, claim status and more.
- If you are unsure of which card to present or need additional support, contact BRMS at 1-888-780-6687

### ID Card Key

1. Eligibility Information	2. Medical Group Number	3. Coverages	4. Dependents	5. Pharmacy Information	6. Member Services	7. Pharmacy Logo
Your eligibility information for your plan(s): Employee (the enrolled member's name); Identification Number (enrolled member's ID number).	The eligibility number associated with your medical plan.	The Anthem Blue Cross network information for BRMS administered plans you are enrolled in.	If applicable, the dependents that are covered on your plan.	Identifies the Rx numbers for your pharmacy.	Member phone numbers for claims customer support, pre-authorizations, telemedicine, etc.	The pharmacy vendor integrated into your medical plan.

**Anthem** 4  
**Member Name** JIMMY SAMPLE  
**Member ID** 1  
 MXXX0123456  
 Group No: 2 IM012345M1234  
 Plan Code: 000  
 Rx BIN: 00000  
 Rx PCN: XY  
 Rx GRP: XXXX  
 PRODUCTS: MEDICAL 3  
 Office Visit: \$20  
 Specialist: \$25  
 Urgent Care: \$250  
 Emergency Room: \$500/\$1,000  
 In Net Def ND/FAM: \$900/\$1,000  
 Out of Net Def ND/FAM: \$1,000/\$6,000  
 In Net OCP ND/FAM: \$3,000/\$6,000  
 Out of Net OCP ND/FAM: \$3,000/\$6,000  
 For detailed benefit information including Deductible and Out of Pocket maximums, please visit your member services website.  
 Company Name has hired BRMS to handle member contact for health plan administration. See back for contact information.  
 PPO Rx 7

**Anthem**  
 BRMS Member Services\* 1-888-888-8888  
 myHealthBenefits.com 1-888-111-1111  
 Pharmacy Member Services 1-888-232-2322  
 Help for Transients 1-888-232-2323  
 Coverage While Traveling 1-888-444-4444  
 Provider Eligibility/Benefits 1-888-666-6666  
 Rx Provider Pre-Cert (prior auth) 1-888-666-6666  
 Cause Pre-Cert (lost file report) 1-888-888-8888  
 Facility Provider Inquiries\* 1-888-888-8888  
 \*Contracts directly with group  
 Anthem Blue Cross Life and Health Insurance Company is an independent licensee of the Blue Cross Association. Anthem Blue Cross provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.  
 All other claims please file to:  
 Facilities Claims Services  
 P.O. Box 2140  
 Folsom, CA 95763  
 EDI Payor ID: 99320

**ClaimDOC**  
 Group # 012345 2  
 Member Name: JOHN SAMPLE  
 Member ID: SMPJ0001 1  
 JIMMY SAMPLE 4  
 Pharmacy 7  
 www.rxvendor.com  
 Rx Bin: 012345  
 PCN: 1111  
 Rx Group: 11AB 5  
 Pharmacy Help Desk: 1-888-888-8888

**Eligibility**  
 Members: Carry this card at all times. To view claims information visit [www.myhealthbenefits.com](http://www.myhealthbenefits.com)  
 Providers: To verify eligibility and copays visit [www.brmsprovidergateway.com](http://www.brmsprovidergateway.com)  
 Eligibility & Claims (888)123-1234  
**Send Medical Claims To:**  
 BRMS  
 P.O. Box 2140  
 Folsom, CA 95763  
 To file a provider call (888) 888-8888 or visit [www.brmsprovidergateway.com](http://www.brmsprovidergateway.com)  
 Account ID: BRMS. Benefits and eligibility at [www.brmsprovidergateway.com](http://www.brmsprovidergateway.com)  
**Important Information**  
 Precertification is required for inpatient admissions and specific outpatient services and therapies. Failure to precertify may result in a reduction of benefits.  
 This commercial self funded plan does not utilize a PPO network for Hospital and Facility services. As such, all medical service providers are reimbursed per the terms of the Plan document, up to a Maximum Payable Amount and in compliance with ERISA.  
 For precertifications or other questions, contact BRMS at (888)123-1234 6