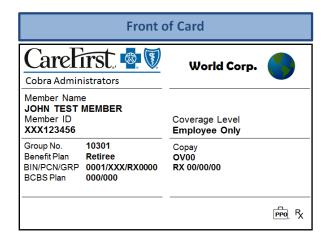
## Your ID Card please click here



## **Back of Card** Member Services and Benefits: Provider Claims and Eligibility: Inpatient Precertification: Outpatient Prenotification: To locate Participating Provider: CareFirst service area, call CVS Caremark \* Member Services: Pharmacist Only: fits: xxx-xxx-xxxx ity: xxx-xxx-xxxx xxx-xxx-xxxx xxx-xxx-xxxx iders outside the xxx-xxx-xxxx Providers outside the CareFirst service area of DC, MD and northern VA should file claims to their local Blue Cross and Blue Shield Plan. This employee benefit plan provides benefits to you and your eligible dependents. Precertification is mandatory before any hospital admission or the next business day for emergency admission. Failure to comply will reduce benefits. Providers within the CareFirst service area mail claims and correspondence to: Mail Administrator PO Box 29615 Demo, XX 51496 Or submit claims electronically to Electronic Payer ID: 12345 reduce benetits. CareFirst Administrators, an independent corporation operating under a license from the Blue Cross and Blue Shield Association, provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims. \* Pharmacy benefits administrator -not a BlueCross BlueShield product

CVS/caremark