
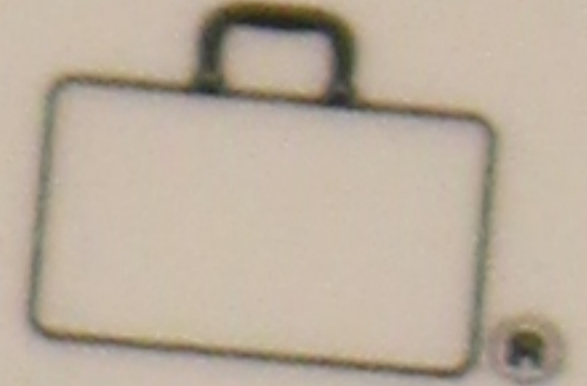


CareFirst 
BlueChoice.

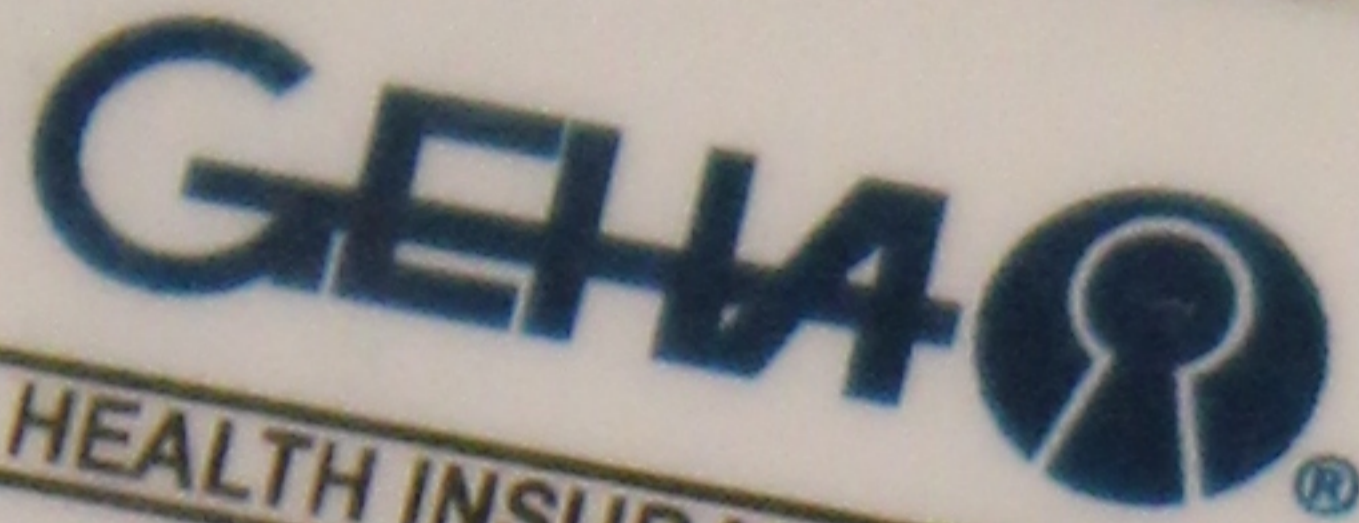
CareFirst BlueChoice, Inc.

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MEMBER SERVICES

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HEALTH INSURANCE IDENTIFICATION CARD

P.O. Box 4665
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www.geha.com



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(80840)

UHC ID

Name

UHC Grp#

RxBin

RxID

RxGrp



Providers must submit all Medical claims to the local Blue Cross and Blue Shield Plan.

Local CareFirst Medical & All Dental providers mail to:

Mail Administrator

PO Box 14116 (for Medical claims)

PO Box 14115 (for Dental claims)

PO Box 14114 (for correspondence)

Lexington, KY 40512

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IDC0189-1S (10/09)

www.carefirst.com

Member Service: 443-738-2920
888-567-9155

Provider Claims and Benefits: **800-842-5975**

Hospital Precert: **866-773-2884**

Mental Health/Substance Abuse: **800-245-7013**

24hr FirstHelp: **800-535-9700**

To locate Participating Providers outside the CareFirst BlueCross BlueShield service area, call **800-810-2583**

If your CareFirst benefits include:

Argus Pharmacy Services

Providers: **888-850-4999**

Members: **800-241-3371**

Dental Member Srvcs: **866-891-2802**

Dental Provider Srvcs: **866-891-2804**

DNoA Preferred Network (for out-of-area dental providers): **866-891-2802**

Davis Vision: **800-783-5602**

DP Dental - PPO

DT Dental - Traditional