

# HOW TO USE YOUR COVERAGE

## Medical Claims

1. **Choose your provider** – You receive better benefits based on discounted charges when you choose a Preferred Provider from Premera’s Heritage Prime network (in Walla Walla, use the Heritage network). Look up providers on the Premera website or call 800-722-1471.
2. **Make the appointment** – When asked, your insurance provider is Premera Blue Cross.
3. **Bring your ID card** to the provider’s office/facility. If you have lost your ID card or have not received one, print a temporary ID card from [premera.com](http://premera.com) or the Premera mobile app:

### Looking up Preferred Providers:

- Go to [www.premera.com](http://www.premera.com)
- Click on ‘Find Care/Find a Doctor’
- Create (or Sign into) an account and follow the instructions **-or-** Search as a Visitor without logging in.
- Make sure to select the ‘Heritage Prime Network’ (in Walla Walla, use ‘Heritage’)
- Out of the area, use ‘Bluecard PPO’

**Preferred Provider Network:** Heritage Prime  
**Group #:** 4002447  
**Claims Processor/Administrator:** Premera Blue Cross  
**Member ID #:** The number that appears on your ID card

4. The provider’s office will probably want to **verify your eligibility and benefits**. They can do this by contacting Premera customer service at 1-800-722-1471.

### Why use a Preferred Provider?

- Preferred provider fees are discounted
- Benefit level is higher (80% vs. 60%)
- Preferred providers will request all necessary prior authorizations on your behalf
- Preferred providers are obligated to bill insurance on behalf of the covered member

Non-network providers are not obligated to bill insurance first and may require you to pay upfront. If billed directly, ask for a claim form to submit for reimbursement.

### Prior Authorization

Some procedures and some inpatient admissions must be authorized with Premera before they will be covered. If you use a Preferred Provider, the provider will handle the prior authorization for you. A partial list of procedures that require prior authorization includes:

- Planned admission into hospitals or skilled nursing facilities
- Non-emergency ground or air ambulance transport
- Advanced imaging such as MRIs and CT scans
- Transplant and donor services
- Some injectable medications you get in a healthcare provider’s office
- Prosthetics and orthotics other than foot orthotics or orthopedic shoes

(This is not a complete list. Your doctor has the most current list and medical information needed to request a prior authorization on your behalf.)

## Prescription Drug Claims

Fill your prescription at a Premera preferred pharmacy to minimize your out of pocket expenses. The plan uses the Essentials formulary with preferred drugs having flat dollar copays, depending on the type of drug (see the benefit summary). Non-preferred (or non-formulary) drugs are covered at 70% when filled at a network pharmacy.

Some prescription drugs require prior-authorization. Ask your pharmacist or contact Premera at 1-800-722-1471.

More Resources and Information are available at [www.premera.com](http://www.premera.com) or use Premera’s mobile app.