

Chapter 4: Member Identification Cards

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Chapter Summary

All members receive their own personal member identification (ID) card. Our New York City GHI PPO members are issued two ID cards, one from EmblemHealth and one from Anthem Blue Cross and Blue Shield (formerly known as Empire BlueCross BlueShield). Physical cards are mailed to members and are available virtually from the Member Management Eligibility look-up results in the [provider portal](#).

A member ID card does not guarantee eligibility or payment. Providers should [verify member eligibility](#) in the secure provider portal on emblemhealth.com/providers in addition to asking to see an ID card at each visit.

Cards show important health plan information, including the network the member may access, who is responsible for managing the member's care, where to submit claims and ER admission/newborn notifications, covered riders, and copayments. Diagrams in the "Sample ID Cards" section of this chapter show how to quickly locate key coverage details and contact information.

Member ID Numbers

EmblemHealth uses unique non-Social Security, number-based identification numbers. For most members, this will be an 11-digit alphanumeric member ID. The IDs start with the letter "K" followed by a unique 8-digit number (a "K-ID"). The final two digits distinguish the subscriber from each dependent (01, 02, 03, etc.). Effective January 1, 2021, EmblemHealth will issue Medicare subscribers' dependents new unique member IDs that are not derived from the Medicare subscriber's ID. Medicaid members receive a unique Medicaid Client Identification Number. This practice protects our members' confidentiality and deters identity theft and fraud.

Note: [GHI PPO members \(other than City of New York\) are migrating](#) upon plan renewal to our new claims platform through the end of 2020. You will know a member has been migrated when you see the K-ID.

Effective July 1, 2020, [GHI PPO City of New York members will use K-IDs](#). EmblemHealth ID cards will display the full 11 digits. Empire BCBS will adopt the same K-ID but will only use and display the first 9 digits on their member ID cards. City of New York members who are also eligible for Medicare benefits will have member ID cards issued to all family members individually in compliance with CMS regulations. Effective July 1, 2020, GHI PPO City of New York members will use K-IDs. EmblemHealth ID cards will display the full 11 digits. Empire BCBS will adopt the same K-ID but will only use and display the first 9 digits on their member ID cards. City of New York members who are also eligible for Medicare benefits will have member ID cards issued to all family members individually in compliance with CMS regulations.

Remember: Please submit preauthorization requests and claims using the member ID in effect on the date of service.

Sample ID Cards

This section shows generic examples of the ID cards you may see. The diagrams point out where to find key coverage details and contact information. Actual cards will be customized based on the member's policy.. The first section of card images shows the standard templates used for most members. The second section of card images shows the templates used for our City of New York members.

Key to Logos Used on Cards

Member ID cards may have logos for managing entities or extended networks that affect utilization management, claims submission, ER admission/newborn notification, member access to specific networks, and more. A key to these networks and entities appears below the Member ID diagrams.

SECTION 1: Standard Templates


This first two examples are the ID card templates used for most [2025 Summary of Companies, Lines of Business, Networks, and Benefit Plans](#) and [2024 Summary of Companies, Lines of Business, Networks & Benefit Plans](#). These are the most common designs you will see.

The third example is the ID card template used for Child Health Plus members. Child Health Plus members access the Prime Network.

Variations of the standard templates are used for the Bridge Program. See our [Bridge Program page](#) for sample ID cards and instructions on how to use them to identify program members and the administrative processes they follow.

FRONT

Plan name → **VIP Reserve (HMO)
No Referral Required**

Member name →  **EmblemHealth®**

Member ID number → **MEMBER: Sample Member
ID NUMBER: KXXXXXXXXX01**

Network name → **Network: VIP Reserve**

Copays → **Copay: PCP \$XX SPEC \$XX
Urgent: \$XX ER \$XX**

MedicareRx
Prescription Drug Coverage X

Rx BIN#: 400023
Rx PCN#: 0020050403
Rx GRP#: KHYA
CMS#: H5991-009

Comprehensive Dental

BACK

Customer service phone number → **Customer Service: 877-344-7364 (TTY: 711)
Behavioral Health: 888-447-2526
Pharmacy: 877-444-7097
Dental (Healthplex): 855-933-4033
Vision (CPS-EyeMed): 844-790-3878**

Claims address → **Medical/Hospital Claims: EmblemHealth, PO Box 2845, New York, NY 10116-2845. Payor ID: 55247.
Behavioral Health Claims: Emblem Behavioral Health Services, PO Box 1850, Hicksville, NY 11802.**

emblemhealth.com/medicare

PROVIDERS: Use **emblemhealth.com/providers** to check eligibility, find network providers, and see all preauthorization requirements and UM programs.

Provider Service: 866-447-9717

Underwritten by Health Insurance Plan of Greater New York (HIP)

**EmblemHealth****EH Gold Premier HMO****No Referral Required****MEMBER: Sample Member****ID NUMBER: K1234567801****NETWORK: Select Care**

Rx BIN#: 400023

PCN: 01071998

Formulary: 2161

Dental / Vision: Y

Copays: PCP \$XX (3 \$0 PCP Visits) SPEC \$XX

Urgent Care \$XX ER \$XXX

Rx \$XX / \$XX NF \$XX

In-Network

MOOP: \$XXXXX / \$XXXXX

Deductible: \$XXXXX / \$XXXXX

Go Paperless - Visit emblemhealth.com/members

MEMBERS AND PROVIDERS: Network providers must provide or arrange nonemergency care. Providers call 866-447-9717 to request prior approval of a hospital admission.

Customer Service: 888-447-7703 (TTY: 711)

Emblem Behavioral Health Services: 888-447-2526

EmblemHealth Pharmacy Services: 855-283-2150

24-Hour Nurse Advice Line: 877-444-7988

Dental (Healthplex): 855-932-3292

Vision (EyeMed): 877-324-6211

Behavioral Health claims to: Emblem Behavioral Health Services, PO Box 1850, Hicksville, NY 11802

All other claims to: EmblemHealth, PO Box 2845, New York, NY 10116-2845

Underwritten by Health Insurance Plan of Greater New York
Fully insured coverage



FRONT


PCP phone →

Member name →

Member ID number →

PCP name →

Copays →




EmblemHealth®

CHILD

MEMBER: MEMBER NAME
ID NUMBER: K6000000001

PCP Name: **Not Selected**
Copay: **PCP \$0 SPEC \$0 ER \$0 Rx \$0**
Dental: **\$0**
BIN#: 400023

PCP Phone: **800-447-8255**



BACK

**Customer service
phone number** →

Claims address →


Go Paperless - Visit emblemhealth.com/members

MEMBERS AND PROVIDERS: Network providers must provide or arrange nonemergency care. Call **866-447-9717** to request prior approval and confirm eligibility.

Customer Service: **855-283-2146** (TTY: 711)
Claims Questions: **866-447-9717**
Emblem Behavioral Health Services: **888-447-2526**
Dental (**Healthplex**): **855-910-2406**
Vision (EyeMed): **877-324-2791**

Emblem Health Customer Service, 55 Water St, New York, NY 10041
Claims Submission, EmblemHealth, PO Box 2845, New York, NY 10116
Behavioral Health claims to: Emblem Behavioral Health Services, PO Box 1850, Hicksville, NY 11802

Underwritten by Health Insurance Plan of Greater New York



Section 2: City of New York ID Card Templates

The next three images are examples of the ID cards used by City of New York members. City members with a GHI PPO plan are sent two ID cards – one from EmblemHealth and the other from Empire. Both companies use the same member ID number; however, Empire adds the prefix NYC and only uses the first 9 digits of the EmblemHealth ID #, example: NYC K10000000. Please be aware of this when switching between EmblemHealth and Empire systems.

FRONT

Member name

Member ID number

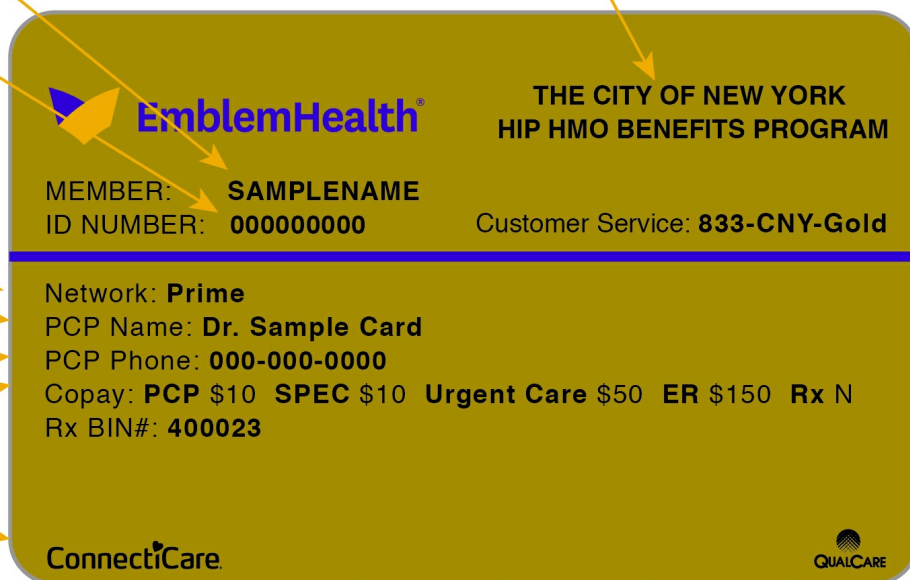
Plan name

Network name

PCP name

PCP phone

Copays

Managing Entity or
Extended Network

BACK

Customer service
phone number

Claims address



FRONT

Member name

Member ID number

Copays

Network name



EmblemHealth®



THE CITY OF NEW YORK
HEALTH BENEFITS PROGRAM

Sample Member
ID: **K0000000000**
HEALTH PLAN: **MEDICAL**

NETWORK: **GHI CBP**

Preventive Care Copay: **\$0**

ACPNY* Copay:

Other Providers Copay:

Lab/Radiology Copay: **\$20**

Urgent Care Copay: **\$50**

Rx BIN#: 003858 Rx PCN: A4

RX Plan: Express Scripts

*AdvantageCare Physicians

Preventive Care Rx Copay: **\$0**

PCP **\$0** SPEC **\$0**

PCP **\$15** SPEC **\$30**

MRI/CT Hi-Tech Radiology: **\$50**

Physical Therapy Copay: **\$20**

RxGRP: GH3A

Underwritten by GHI

BACK

Customer service
phone number

Claims address

emblemhealth.com

EmblemHealth Member Services: 212-501-4444
Express Scripts Customer Services: 877-534-3682

Submit Medical Claims to:

EmblemHealth (Payer ID No.13551) P.O. Box 3000, New York, NY 10116-3000

Emblem Behavioral Health Services: 888-447-2526

Behavioral Health claims to:

Emblem Behavioral Health, PO Box 1850 Hicksville, NY 11802

NYC Healthline Number: 800-521-9574

Call NYC Healthline for precertifications including:

- Inpatient admissions
- Within 48 hours of an emergency admission
- Ambulatory surgery
- Physical and speech therapy after the 16th visit

Full list of services requiring precertification available at emblemhealth.com/city

Possession of this card does not guarantee payment.



FRONT




Member name

Member ID number

Network name


Plan name

Copays

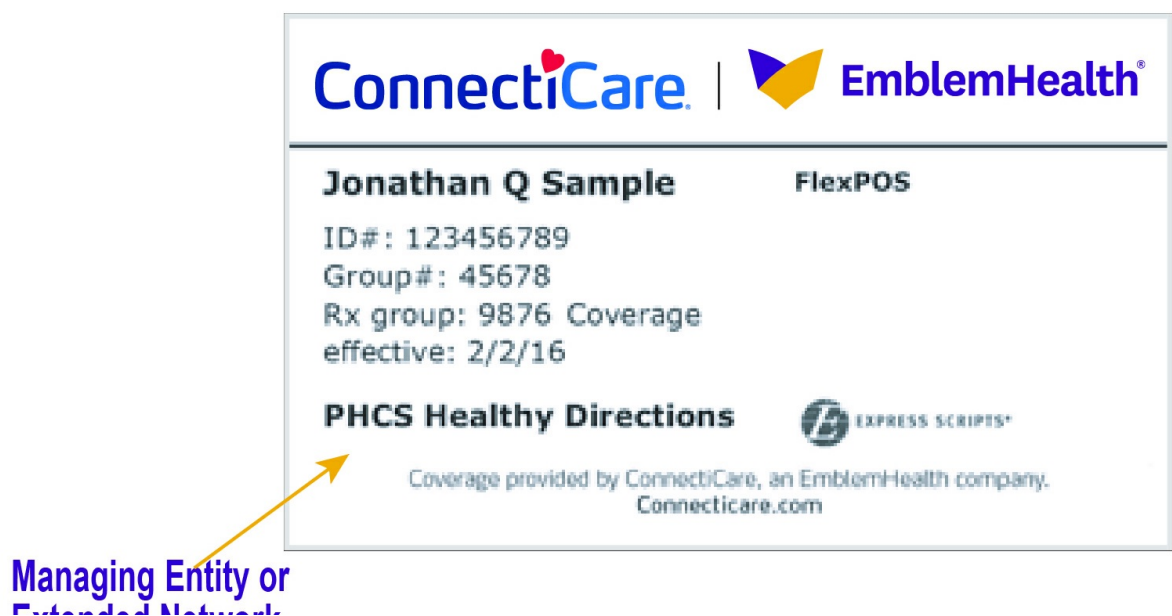
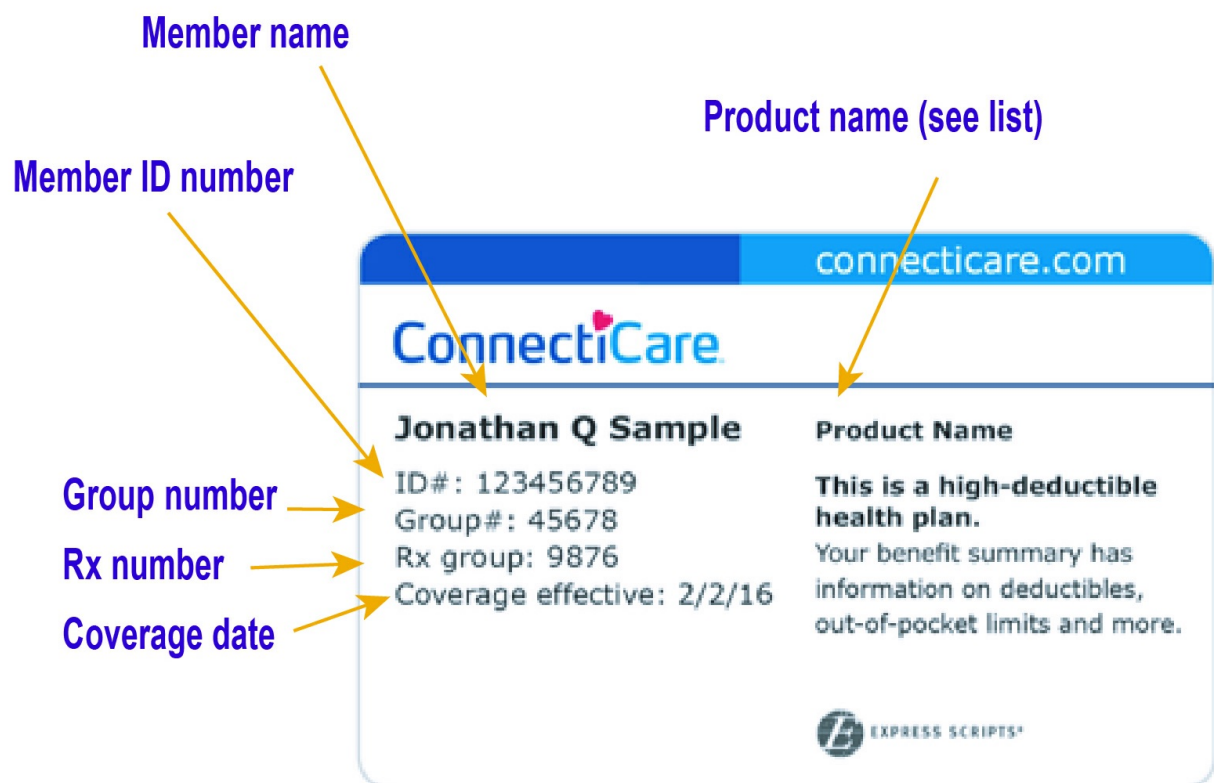
 An Anthem Company	
<hr/> Sample Member Identification Number NYC K00000000	<hr/> ER copay*: \$150 Hospital copay: \$300 per admission
<hr/> The City of New York Health Benefits Program	<hr/> <i>Call NYC HEALTHLINE for hospital admissions and Empire member services for benefit information (see details on back).</i>
<hr/> Health Plan: Hospital BC Plan 754	<hr/> 

BACK

Customer service phone number

 An Anthem Company	www.empireblue.com/nyc
Possession of this card is not a guarantee of payment. Call Empire member services for: <ul style="list-style-type: none"> • Hospital benefit and claims information • Participating inpatient, ambulatory surgical, cardiac and physical rehab facilities Call NYC Healthline for precertifications, including: <ul style="list-style-type: none"> • Inpatient admissions • Within 48 hours of an emergency admission • Ambulatory surgery • Physical and speech therapy after the 16th visit Full list of services requiring pre-certification available at www.empireblue.com/nyc	Empire Member Services: 1-800-433-9592 NYC Healthline 1-800-521-9574 (for precertification)
<hr/>	<hr/> *ER copay waived upon admission. Providers: Submit all claims to your local BlueCross and/or BlueShield Plan. When Medicare is primary, file claims with Medicare. Services provided by Empire HealthChoice Assurance, Inc., a licensee of the Blue Cross Blue Shield Association, an association of Independent Blue Cross and Blue Shield plans.

FRONT



Extended Network

BACK

Customer service
phone number

Claims address

Phone Numbers
 Member services: 860.674.5757 or 800.251.7722
 TTY users: 800.833.8134
 Mental health and substance abuse: 888.946.4658
 MDLIVE telemedicine: 888.995.0217

Find a Doctor: at ConnectiCare.com.

Send claims to:
 ConnectiCare, P.O. Box 546, Farmington, CT 06034-0546
 Payer number: 06105
 860.674.5850 or 800.828.3407

EmblemHealth Prime Network

This card is for identification only and does not guarantee eligibility.

Managing Entities

HealthCare Partners: The member is assigned to an HCP primary care physician. The managing entity is responsible for utilization management, claims processing, and ER admission/newborn notifications for assigned members. Members are exempt from many of our special utilization management programs. See program descriptions to determine if HPC's members are excluded.

SOMOS: The member is assigned to a SOMOS primary care physician. The managing entity is responsible for most utilization management, claims processing, and ER admission/newborn notifications for assigned members. SOMOS members, however, participate in EmblemHealth's special utilization management programs.

Extended Networks

Bridge Program: Members who have the [Bridge Program](#) on their member ID cards belong to fully insured large groups and self-funded employer groups for which EmblemHealth and ConnectiCare are providing administrative services and access to five of our commercial networks (EmblemHealth Insurance Company's (formerly HIPIC) Prime Network, EmblemHealth Plan Inc.'s (formerly GHI) National Network, ConnectiCare, Inc.'s Choice Network, QualCare Network, and First Health Network).

See our [Bridge Program page](#) for sample ID cards and instructions on how to use them.

ConnectiCare: Some members who access care through the EmblemHealth Prime Network may also access care through ConnectiCare in Connecticut. Similarly, some ConnectiCare members may access care through EmblemHealth's Prime Network. See the [Provider Networks and Member Benefit Plan chapter](#) for applicable plan.

First Health Network: A nationwide network for members to receive in-network coverage outside of the tristate area.

PHCS/MultiPlan: Members with access to EmblemHealth Plan, Inc.'s National Network have access to PHCS/MultiPlan outside of New York.

QualCare: Certain members with access to the Prime Network also have access to QualCare's network in New Jersey. See the [Provider Networks and Member Benefit Plan chapter](#) for applicable plans.