



**BlueCross  
BlueShield**  
Arizona

An Independent Licensee of the Blue Cross Blue Shield Association

**Health  
Choice**



Member:

**John Q Sample**

HCP ID #: **MZHHC1234567**

AHCCCS ID #: **HCIA12345678**

Health Plan Name:

BCBSAZ Health Choice Pathway  
(HMO D-SNP)

BCBSAZ Health Choice Arizona

RxBIN:

**004336**

RxPCN:

**MEDDADV**

RxGRP:

**RX8748**

Health Plan:

**(80840)**

Plan ID:

**H5587-002**

Member Services:

**1-800-656-8991**

Crisis Hotline: **1-844-534-4673**

**Medicare**  
Prescription Drug Coverage **Rx**

**MEDICARE  
ADVANTAGE | HMO**



Health  
Choice

**HealthChoicePathway.com**

Member Services:

**1-800-656-8991, TTY: 711**

24/7 Nurse Advice Line:

**1-855-458-0622**

Pharmacy Help Desk:

**1-866-693-4620**

Pharmacy Prior Auth and

Appeals Fax: **1-877-424-5690**

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Arizona providers  
send medical claims to:  
BCBSAZ Health Choice Pathway  
PO Box 52033  
Phoenix, AZ 85072-2033

**Providers outside of Arizona  
should file all claims to the  
local Blue Cross and Blue Shield  
Plan in whose service area the  
member received services.**

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Benefits are limited to emergent care  
outside of Arizona.

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