

# BLUE SHIELD OF CALIFORNIA TANDEM PPO NETWORK TOOLS & TIPS (2026)



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Thank you for participating in Blue Shield of California's Tandem PPO Network. We hope this reference guide will be helpful in providing services for our Tandem plan members. Review the guide in its entirety or click the links below to go directly to the information you need.

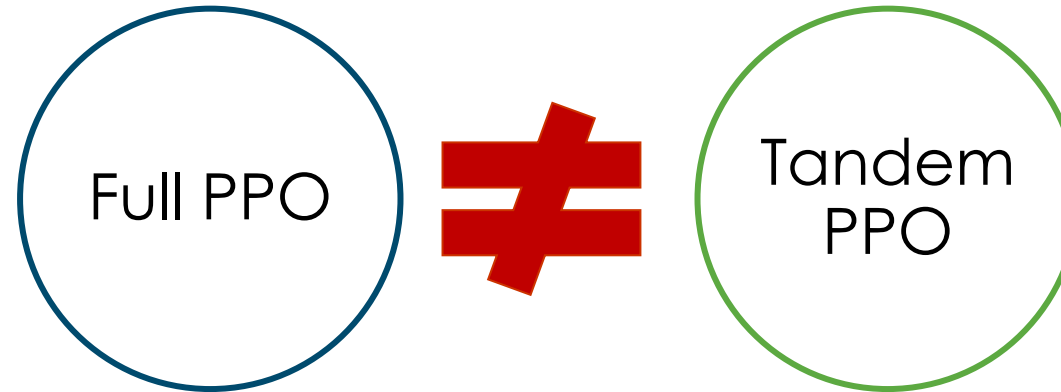
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# Difference between Full PPO and Tandem PPO Networks

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The Full PPO Network and Tandem PPO Network are different networks.



Participation in the Full PPO Network  
does not automatically mean you participate in the Tandem PPO Network.

**It is important to confirm you are in the Tandem PPO Network at the address where the member will be receiving services.**

**If a member uses non-emergency services from a provider who does NOT participate in the Tandem PPO Network, those services will be billed at out-of-network rates.**

# Tandem PPO Network overview

- The Tandem PPO Network is a subset of our Full PPO Network. Tandem PPO Network contracts are location-specific.
- Available statewide, it offers members access to a quality network of providers, which includes all specialties and levels of care.
- Tandem members are automatically matched to a primary care physician (PCP)\*, but they can change this match at any time.
  - Matched PCP names do not appear on the member ID card.
- Tandem PPO Network members are free to choose any doctor or specialist without referral – in or out of the network.
- If Tandem PPO Network members seek services from out-of-network providers or facilities, they pay a greater share of costs.†



\* PCP match is based on location (within 10 miles of member's residence) and if panel is open to new patients.

† Members with Tandem EPO plans do not have coverage for ANY out-of-network costs except emergency care. EPO plans utilize the Tandem PPO Network.

# Tandem PPO Network member ID card examples

All Tandem PPO Network member IDs begin with “XNK” and have the word “Tandem” on the card.



Subscriber

**MEMBER NAME**

ID: XNK000000000

Copayment

Primary Care \$35 Specialist \$35  
Urgent Care Center \$35 Teladoc 0%  
Emergency Room \$100 + 20%

Group #

Effective

Coverage

Plan

RxBIN

RxPCN

W00020

01/01/2026

INDIVIDUAL

PPO

026696

77993333

Tandem PPO 500 80/60





Subscriber

**MEMBER NAME**

ID: XNK000000000

Copayment

Virtual Blue Care \$0  
Primary Care \$30  
Specialist \$40  
Urgent Care Center \$30  
Emergency Room \$200

Group #

Effective

Coverage

Plan

RxBIN

RxPCN

W0051

01/01/2026

INDIVIDUAL

TANDEM PPO

026696

77993333

Tandem PPO 500 80/60



If members have questions about their benefits, claims, or referrals, refer them to the Shield Concierge or Member Customer Service phone number on the back of their member ID cards.

# CalPERS PERS Gold plan

|                                                                                     |                  |                                                |            |
|-------------------------------------------------------------------------------------|------------------|------------------------------------------------|------------|
|    |                  | <b>PERS Gold</b>                               |            |
| Subscriber<br>(Name)                                                                | ID# XEA999999999 | (PPO Primary Care Physician)<br>(310) 999-9999 | 01/01/2026 |
| Group #                                                                             | W0051411         | Plan                                           | PPO        |
| Effective                                                                           | 01/01/2026       | RxBIN                                          | 610011     |
| Copayment                                                                           |                  | RxPCN                                          | IRX        |
| Assigned PCP \$10                                                                   | Urgent Care \$35 | RxGroup                                        | CALPBSCP   |
| Other PCP \$35                                                                      | ER \$50          |                                                |            |
| Specialist \$35                                                                     |                  |                                                |            |
| CALPERS                                                                             |                  |                                                |            |
|  |                  |                                                |            |

**Members:** Use Blue Shield of California preferred providers to receive maximum benefits.  
**Providers:** Please file all claims with your local BCBS licensee in whose service area the member received services or, when Medicare is primary, file all claims with Medicare. For more information visit: [blueshieldca.com/provider](https://blueshieldca.com/provider)

|                                   | Deductible | Out-of-pocket maximum |
|-----------------------------------|------------|-----------------------|
| Individual in-network medical     | \$1,000    | \$7,200               |
| Individual out-of-network medical | \$2,500    | \$0                   |
| Family in-network medical         | \$2,000    | \$14,400              |
| Family out-of-network medical     | \$5,000    | \$0                   |

CA Medical claims to: Blue Shield of California, P.O. Box 272530, Chico, CA 95927-2530

[blueshieldca.com/calpers](https://blueshieldca.com/calpers)

(855) 633-4436 Included Health Member Services  
[includedhealth.com/calpers](https://includedhealth.com/calpers)  
711 TTY  
(855) 633-4436 Locate providers outside of CA\*  
(800) 541-6652 CA Provider Customer Service  
(includes hospitals for pre-auth)  
(855) 633-4436 Nurse Triage\*  
(855) 505-8110 Pharmacy Services\*  
(866) 443-1095 Pharmacists Only\*  
\*Included Health and Pharmacy contracts directly with group

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**As of January 1, 2025, CalPERS members on the PERS Gold plan began to utilize the Tandem PPO Network. PERS Gold plan member IDs start with the "XEA" prefix.**

This plan provides in-network access to a SUB-SET of physician practice locations and acute care hospitals within Blue Shield's Full PPO Network in California.

All other provider types and facilities who participate in Blue Shield's Full PPO Network in California are in-network for PERS Gold members.

# Tandem PPO Network Virtual Blue Plan

A virtual-first plan delivering convenience, access, and choice.

Tandem PPO Virtual Blue members:

- Choose from a diverse selection of virtual primary care physicians and maintain an ongoing relationship.
- Pay a \$0 copay for virtual primary, specialists, and mental health visits – no referral required. Offers 20 specialist services including cardiologists, endocrinologists and more.
- Enjoy short appointment lead times with online booking for virtual care via the Blue Shield app or the Accolade Care app.
- Receive support from a virtual team including their chosen primary care physician plus access to other health professionals such as behavioral therapists, specialists, health and mental health coaches, social workers, etc.
- Most Tandem PPO Network Virtual Blue plans will obtain in-person care through the Tandem PPO Network – no referral required. Deductibles and cost sharing, where applicable.

\* Click [here](#) for more information about the Tandem PPO Virtual Blue care model.



# Options for confirming participation in the Tandem PPO Network

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**Take one of the following actions to check Tandem PPO Network participation:**

1. [Log in to Provider Connection](#) and use the *Verify eligibility* tool to check your network status for a specific member. [See instructions](#) in this guide.
2. Contact:
  - Your IPA or medical group *OR*
  - Blue Shield Provider Information and Enrollment at **(800) 258-3091** *OR*
  - Your Blue Shield Contract Manager (for hospitals and other facilities).
3. Search Blue Shield's [Find a Doctor](#) online directory. **Note, you must display at the office location contracted with the Tandem PPO Network to be in-network.** [See instructions](#) in this guide.
  - Note, failure to verify your directory information may result in suppression from our directory listings. If this is the case, you will not show in the member's Tandem PPO Network.
  - To reinstate your information in *Find a Doctor*, your Provider Connection Account Manager (or a user with permission to edit provider data) must [log in to Provider Connection](#), view your provider directory data, submit updates if necessary, and attest to the accuracy of your information.
    - For detailed instructions, see [Provider data management](#) in the Provider Connection *News & Education* section.



# Check Tandem PPO Network participation on Provider Connection

**Provider Connection can tell you if you are in a member's Tandem PPO Network via the Check eligibility tool available after login.**

1. To begin, use the *Check eligibility* tool to search for your member (not shown). If the member is in our system, a member's *eligibility results* screen displays.
2. Click **Details** to expand the results screen for additional information about the member. The first item you will see is *Network status*.
3. If you have one Tax ID/SSN and one Blue Shield Provider ID (PIN), *Network status* will automatically populate with either in- or out-of-network status for Tandem.

If you have more than one Tax ID (TIN) registered with Blue Shield or multiple PINs, you will see a *Check status* link in the *Network status* section. Click that link to launch a network status search. [See instructions on the next page.](#)

The screenshot shows a member's eligibility results page. Callout 1 points to the member's name 'MEMBER, JOHN' and status 'Eligible'. Callout 2 points to the 'Details' link in the top navigation bar. Callout 3 points to the 'Network status' section, which shows the member is 'In network'.

| Member name                | Status                            | Navigation                      |                                                |
|----------------------------|-----------------------------------|---------------------------------|------------------------------------------------|
| MEMBER, JOHN               | Eligible                          | Details                         | ID Card Benefits Claims                        |
| Subscriber ID              | Date of birth                     | Gender                          | Member address                                 |
| XEA999999999-00            | 09/16/1970                        | Male                            | 123 MAIN STREET,<br>SHERMAN OAKS, CA,<br>91423 |
| Plan name                  | Plan type                         | Coverage effective / start date | Coverage end /<br>redetermination date         |
| Tandem PPO                 | Commercial PPO (Fully<br>insured) | 02/01/2024                      | Present                                        |
| Relationship to subscriber | Subscriber name                   | PCP name                        | Office visit copay                             |
| Subscriber                 | MEMBER, JOHN                      | PROVIDER, JANE Q.               | In-network-\$25                                |

Network status ⓘ

🟢 In network

1231231234- HEALTHY HEALTHCARE INC  
HEALTHY HEALTHCARE INC  
1 MAIN AVENUE, Monterey, CA  
[Check network status for a different provider](#)

Network status ⓘ

🔴 Out of network

1231231234- HEALTHY HEALTHCARE INC  
HEALTHY HEALTHCARE INC



## Check Tandem PPO Network participation on Provider Connection *continued*

If you have more than one TIN registered with Blue Shield and/or multiple PINs, Provider Connection will ask you to search for network status. Based on your TIN/PIN configuration, it will ask you to complete one or more popups:

- Identify the appropriate Tax ID by selecting or searching in the pop-up. Click **Continue**.

- Select from a list if you have between 1-5 Tax IDs
- Enter search criteria if you have 6+ Tax IDs

The screenshot shows a pop-up window titled 'Check network status'. At the top, there is a progress bar with three steps: 1. TIN (highlighted with a blue circle), 2. Provider, and 3. Status. Below the progress bar, the text 'Check network status' is displayed. Underneath, it says 'Search for a TIN or organization name'. There is a search input field labeled 'TIN or organization name' with a placeholder text 'Enter at least four characters from a TIN or organization name to search'. At the bottom, there are two buttons: 'Cancel' and 'Search'.

- Identify the appropriate provider by selecting or searching in the pop-up. Click **Continue**.

- Select from a list if there are 2-5 providers linked to the Tax ID
- Enter search criteria if there are 6+ providers

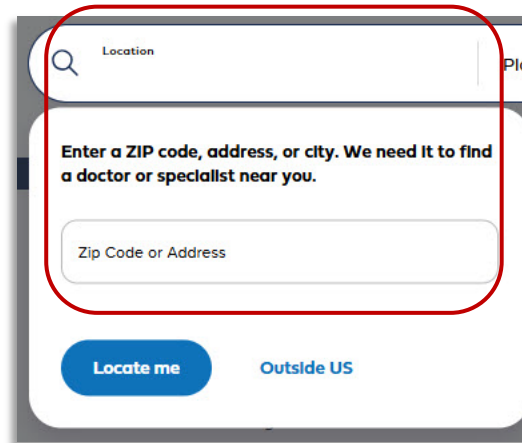
The screenshot shows a pop-up window titled 'Check network status'. At the top, there is a progress bar with three steps: 1. TIN (marked with a green checkmark), 2. Provider (highlighted with a blue circle), and 3. Status. Below the progress bar, the text 'Check network status' is displayed. Underneath, it says 'TIN / organization: 777673891 - PALOMAR POMERADO HEALTH'. Below that, it says 'Search for a provider name'. There is a search input field labeled 'Provider name' with a placeholder text 'Enter at least four characters from a provider name'. At the bottom, there are two buttons: '< Back' and 'Search'.

- If the location you select IS NOT IN the Tandem PPO Network, you will see an **Out of network** indicator. Click **Back** to select a different location if appropriate. Click **Close** to return to the *Details* page.
- If the location you select IS IN the Tandem PPO Network, you will see an **In network** indicator. Click **Close** to return to the *Details* page.
- Network status* – either in or out – will display on the *Details* page with the location you selected.

# Use *Find a Doctor* to check Tandem PPO Network participation

1. Go to [Find a Doctor](#).

2. **Location:** Enter a ZIP code, address, or city.



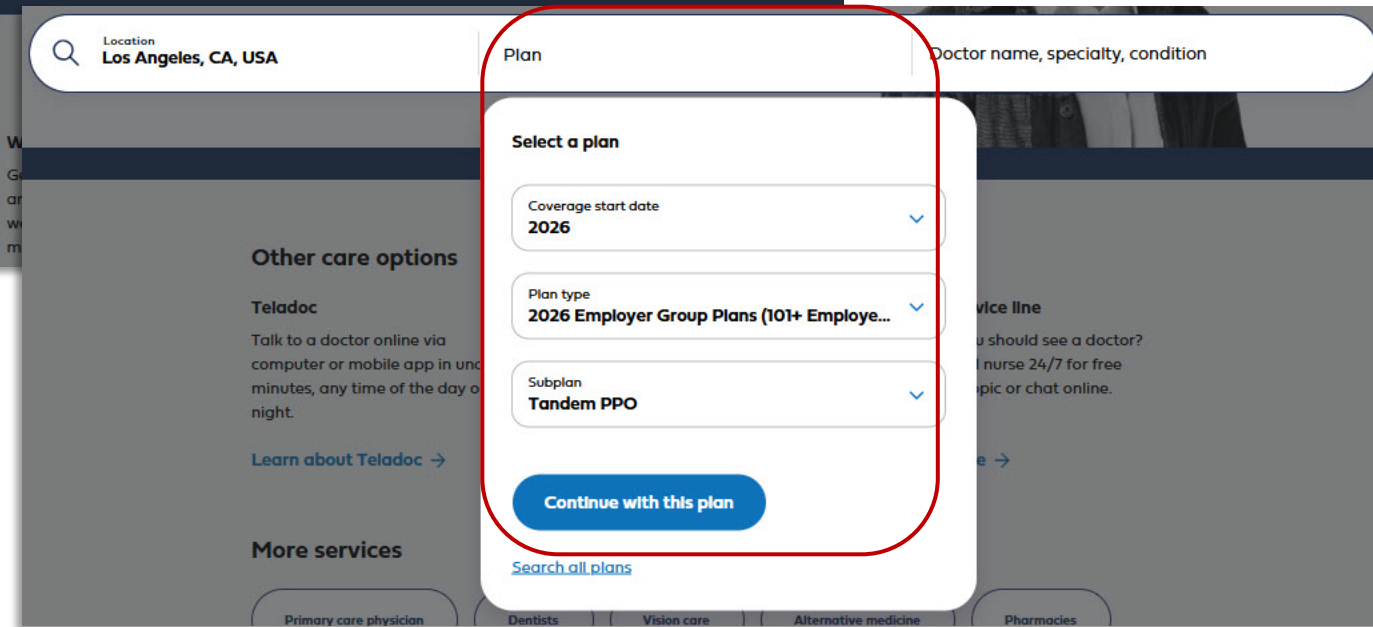
Location

Enter a ZIP code, address, or city. We need it to find a doctor or specialist near you.

Zip Code or Address

Locate me Outside US

3. **Plan:** Select Plan type "2026 Employer Group Plans" or "2026 Small Business Tandem PPO", and Subplan Tandem PPO (or other Tandem plan). Click **Continue with this plan**.



Location Los Angeles, CA, USA

Plan

Doctor name, specialty, condition

Select a plan

Coverage start date 2026

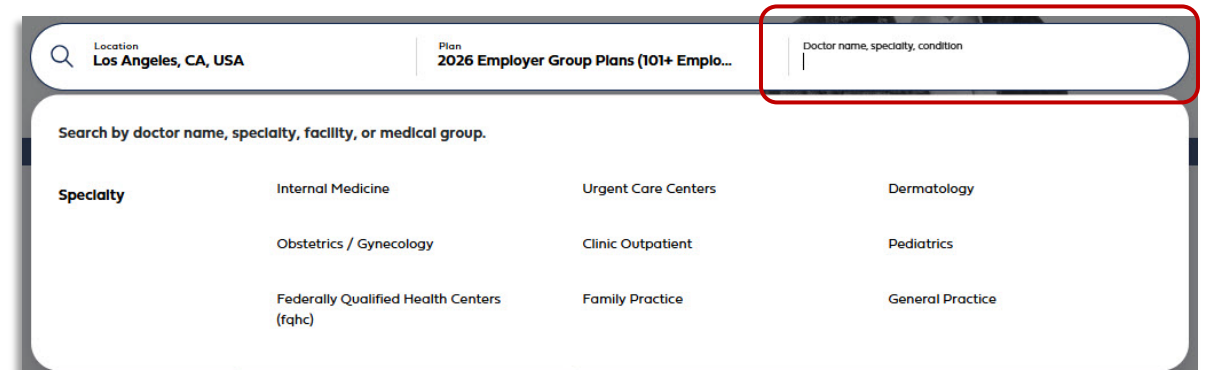
Plan type 2026 Employer Group Plans (101+ Employee...)

Subplan Tandem PPO

Continue with this plan

Search all plans

4. **Doctor name, specialty, condition:** Enter your last name and click **Search**. If you display at the office location contracted with Tandem PPO, you are in the network.



Location Los Angeles, CA, USA

Plan 2026 Employer Group Plans (101+ Emplo...

Doctor name, specialty, condition

Search by doctor name, specialty, facility, or medical group.

|           |                                           |                     |                  |
|-----------|-------------------------------------------|---------------------|------------------|
| Specialty | Internal Medicine                         | Urgent Care Centers | Dermatology      |
|           | Obstetrics / Gynecology                   | Clinic Outpatient   | Pediatrics       |
|           | Federally Qualified Health Centers (fqhc) | Family Practice     | General Practice |

# Ensure Tandem PPO Network claims are processed as in-network

**To ensure correct claim processing, confirm that services are billed under the right tax identification number (TIN), employer identification number (EIN), or social security number (SSN).**

| Claims may be processed as out of network if:                                                                                                                                                      | How to avoid:                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| An individual provider is contracted with the Tandem PPO Network, but the medical group is not, and services are billed using the group TIN instead of the individual provider's TIN.              | If the individual provider participates in the Tandem PPO Network, then use the individual provider's SSN/EIN/TIN on the claim. |
| A medical group is contracted with the Tandem PPO Network, but a provider also has an individual agreement and uses the individual provider's TIN instead of the medical group's TIN.              | If the medical group participates in the Tandem PPO Network, then use the medical group's SSN/EIN/TIN on the claim.             |
| A medical group or provider doesn't participate in the Tandem PPO Network at all its locations, and a provider renders services at a location that is not participating in the Tandem PPO Network. | Be sure claims reflect the Group or Provider TIN for the locations participating in the Tandem PPO Network.                     |

**If claims are processed as out-of-network, members may be billed for the balance.**





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