



BlueCross BlueShield
of Alabama



State Employees'
Health Insurance Plan

Subscriber Name

SHEMEKWA L FARROW

Contract Number

EIB901371546

In-Ntwk Ded: \$300

Out-of-Ntwk Ded: \$300

In-Ntwk OOP: \$8,700

Out-of-Ntwk OOP: NA

Group Number

13000

Effective Date

01-01-2022

HEALTH

PAC

