**New Plan Announcement**

*Blue Cross and Blue Shield of Texas STAR and CHIP Medicaid Programs*

**Effective 12/01/2015**

Effective 12/01/2015, Prime Therapeutics (Prime) will begin processing pharmacy claims for eligible BCBSTX STAR and CHIP Covered Persons.

**Processing Requirements**

To ensure uninterrupted service to Participating Pharmacies and Covered Persons, please use the following information to set up your system prior to the effective date 12/01/2015.

**Blue Cross and Blue Shield of Texas STAR and CHIP Program**

BIN: ------------------011552
PCN: ------------------TXCAID

→ Covered Person Medicaid ID Number (9 digits)
→ Date of Birth
→ Gender
→ Group Number
→ U&C
→ Days Supply
→ Pharmacy NPI
→ Active/Valid Prescriber ID (NPI, DEA or State License)
→ Date Rx Written
→ Rx Origin Code

**For more information**

→ If you have questions regarding claims processing, please contact Prime’s Contact Center at 855.457.0403 for CHIP and 855.457.0405 for STAR

→ For software setup information, please visit Prime’s website at Primetherapeutics.com > Pharmacists > Payer sheets > TX Medicaid D.D.0 Payer Sheet

**Prior Authorization**

→ If you need assistance with a Prior Authorization, contact Prime at 855.457.0407, print the Prior Authorization request form online at Primetherapeutics.com>Pharmacists or submit the request online at covermymeds.com

**Outstanding Claim Reversals and Processing**

→ To prepare for this transition, Participating Pharmacies should complete all claims processing and reversals by close of business 11/30/2015.

→ Medicaid claims with a submission or reversal date prior to 11/30/2015 should be submitted to Express Scripts using the following processing information:

→ BIN: 003858
→ PCN: A4
→ Rx Group: WFTA

→ For assistance with claims that have a date of fill prior to 12/01/2015, please contact Express Scripts Pharmacy Help Desk at 866.323.2088 for CHIP or 866.294.1562 for STAR.

**Provider Training**

→ Please refer to Blue Cross Blue Shield of Texas’ website at: www.bcbstx.com/provider for more information; including cultural competency and training documentation on the TX CHIP and TX STAR Programs

**72 Hour Emergency Supply**

→ A Participating Pharmacy is required to provide a 72-hour emergency supply of a prescribed drug when a medication is needed without delay and a Prior Authorization (PA) is not available.

→ A 72-hour emergency supply should be dispensed any time a Prescription claim rejects with NCPDP Reject Code 75: Prior Authorization Required

→ The Participating Pharmacy should resubmit the rejected claim using the following process:

<table>
<thead>
<tr>
<th>NCPDP Segment Name</th>
<th>NCPDP Field Name</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLAIM SEGMENT</td>
<td>461-EU</td>
<td>PRIOR AUTHORIZATION TYPE CODE</td>
</tr>
<tr>
<td>CLAIM SEGMENT</td>
<td>462-EV</td>
<td>PRIOR AUTHORIZATION NUMBER SUBMITTED</td>
</tr>
<tr>
<td>CLAIM SEGMENT</td>
<td>405-D5</td>
<td>DAYS SUPPLY</td>
</tr>
<tr>
<td>CLAIM SEGMENT</td>
<td>442-E7</td>
<td>QUANTITY DISPENSED</td>
</tr>
</tbody>
</table>

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Featured below is an example of the most common ID cards used:

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**Durable Medical Equipment (DME)**

- Participating Pharmacies are encouraged to become Medicaid-enrolled durable medical equipment (DME) providers. Please refer to www.bcbstx.com/provider to request a DME application. To be listed as a DME provider, a pharmacy must be a VDP pharmacy and attested with TMHP.