

Medicare Processing Update

BlueCross BlueShield of Minnesota SecureBlueSM (HMO SNP)



Effective January 1, 2019

Effective January 1, 2019, BlueCross BlueShield of Minnesota will begin utilizing a new Processor Control Number (PCN) for Medicare Part D claims for Covered Persons of BlueCross BlueShield of Minnesota (BCBSMN) SecureBlue (HMO SNP).

Processing Requirements

To ensure uninterrupted service to Participating Pharmacies and Covered Persons, please use the following information to set up your system prior to January 1, 2019.

Plan Sponsor	Plan Name	BIN	PCN
BCBSMN	BlueCross BlueShield of Minnesota SecureBlue Part D (HMO SNP)	610455	SBPARTD

For more information

- If you have questions regarding claims processing, please contact Prime's Contact Center at 800.648.2778
- For software setup information, please visit Prime's website at Primetherapeutics.com > Resources > Pharmacy + provider > Pharmacy claim processing > Payer sheet > Medicare Part D D.0 Pharmacy Payer Sheet

Processing Requirements continued:

- Covered Person ID Number
- Date of Birth
- Gender
- U&C
- Days Supply
- Pharmacy NPI
- Active/Valid Prescriber ID (NPI, DEA or State License)
- Date Rx Written
- Rx Origin Code
- Pharmacy Service Type
- Patient Residence

Featured below is an example of the new ID card for Covered Persons of BlueCross BlueShield of Minnesota SecureBlue (HMO SNP) :

		SecureBlue SM (HMO SNP) H2425001	
Name <Member Name>	Group #	<8 digits>	
ID <JTM><9 Digit Facets ID>	Medicaid ID	<8 digits>	
	[PCC][<1 st initial, lstrname>][<clinic name>]	[PCC Telephone] [<1-xxx-xxx-xxx>]	
Svc Types	<Med, RX>	Care Type	<MN HLTH Care Prog>
Brand Name Copay	<\$3.80/\$8.50/ NONE/15%>	RX Bin	<610455>
Generic Copay	<\$1.25/\$3.40/ NONE/15%>	RX PCN	<SBPARTD>
RX Network	<Standard>	[RX ID]	[<RX ID#>]
Dental Network	<MN Select>	Issuer	<80840>
MEDICARE ADVANTAGE HMO			

	<bluecrossmn.com/secureblue> Member Services <1-888-740-6013> Behavioral Health <1-844-410-0745> DHS Ombudsman <651-431-2660> <TTY 711> Nurse Line <1-888-740-6013> Medical TTY <711> Provider Service <1-866-518-8448> Prime Therapeutics / Prescription Questions <1-888-877-6424> Pharmacist Only <1-800-648-2778> Delta Dental of MN <1-800-774-9049> Dental TTY <711> Stop Smoking Program <1-844-421-5661> Blue Ride <1-866-340-8648><(TTY 711)> Blue Cross and Blue Shield of Minnesota and Blue Plus are nonprofit independent licensees of the Blue Cross and Blue Shield Association.
Members: Authorization not required for emergency care. For appeals or grievances, call the applicable number or write to an address below. [<Delta Dental of Minnesota, PO Box 1328, Minneapolis, MN 55440-1328>] [<Blue Plus Appeals and Grievances PO Box 64033, St. Paul, MN 55164-4033>] [<DHS Appeals Unit, PO Box 64941 St. Paul, MN 55164-0942>] Providers: Submit claims to the local Blue Cross and/or Blue Shield plan. [<Blue Plus PO Box 61249 Virginia Beach, VA 23466>]	