

New Plan Announcement

BlueCross BlueShield of Kansas Preferred Blue Medicare Advantage

Effective January 1, 2020

Effective January 1, 2020, Prime Therapeutics (Prime) will begin processing Medicare Part D and Part B claims for Covered Persons of BlueCross BlueShield of Kansas Preferred Blue Medicare Advantage.

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, 2020.

BCBSKS Preferred Blue Medicare Advantage

BIN: ----- 610455




PCN: ----- KSPARTD

- Covered Person ID Number
- Date of Birth
- Gender
- Group Number
- U&C
- Days Supply
- Pharmacy NPI
- Active/Valid Prescriber ID NPI
- Date Prescription Written
- Prescription Origin Code
- Pharmacy Service Type
- Patient Residence

For more information

- Medicare Part D and Part B claims with a fill date on or after January 1, 2020 must be submitted with the BIN/PCN outlined on the left
- If you have questions regarding claims processing, please contact Prime's Pharmacy Help Desk at 866.325.5231
- Prime's Medicare Part D and B payer specification sheets are available at: PrimeTherapeutics.com > Resources > Pharmacy + Provider > Pharmacy claim processing > Payer sheet > Medicare Part D D.0 Pharmacy Payer Sheet and Medicare Part B D.0 Pharmacy Payer Sheet

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

		Kansas Preferred Blue Medicare Advantage Network	
Valued Member Member Identification Number M3A123456789		Health Dental Hearing Vision	
Group No. 15050 Card Print Date 01/01/2009		Plan <XXXX XXX> RXBIN: 610455 RXPCN: KSPARTD RXGRP: H7063 RXID: #####	
Benefit Plan Blue Medicare Advantage (PPO)		 	

	
Members: See your contract for covered services. Possession of this card does not guarantee eligibility for benefits. Use of this card is subject to the terms of applicable contracts, conditions and use agreements. Hospitals or physicians: File claims with your local Blue Cross and/or Blue Shield Plan.	Customer Service: 800-222-7645 TTY: 711 Provider Services: 800-240-0577 Dental: 800-222-7645 Pharmacy: 866-230-7265 Vision: 866-292-9825 Hearing: 833-725-6521 Fitness: 888-423-4632 Nervous/Mental Health: 877-589-1635
For member correspondence, please send to: Blue Cross and Blue Shield of Kansas PO BOX 261367 Plano, TX 75026-1367 <small>An independent licensee of the Blue Cross Blue Shield Association.</small>	 bcbsks.com/medicare