

New Plan Announcement

BlueCross BlueShield of Nebraska



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 Nebraska.

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.

BCBSNE PPO Part D

BIN: ----- 610455

PCN: ----- ENEH8181

- 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 Contact Center at 855.457.1351
- Prime's Medicare Part D payer specification sheets are available at: PrimeTherapeutics.com > Resources > Pharmacy + Provider > Pharmacy claim processing > Payer sheet > Medicare Part D D.0 Pharmacy Payer Sheet

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

	Blue Cross BlueShield Nebraska	Blue Cross and Blue Shield of Nebraska MA Access™
Enrollee Name VALUED CUSTOMER	Enrollee ID Y2MN99999999	Plan H8181_001
Health Plan (80840)	Group Number 68280	Rx BIN 610455 Rx PCN ENEH8181 Rx Group PARTDNE
		Issued: 10/2019
DENTAL, VISION & HEARING		MedicareRx Prescription Drug Coverage X

Members: medicare.nebraskablue.com	
Blue Cross and Blue Shield of Nebraska is an independent licensee of the Blue Cross and Blue Shield Association. Use of this card is subject to terms of applicable contracts, conditions and user agreements. Medicare limiting charges apply. Providers outside of Nebraska, file claims with your local plan.	Customer Service: 888-488-9850 Customer Rx inquiries: 855-457-1349 TTY/TDD: 711 Misuse may result in prosecution. If you suspect fraud call: 877-632-2583
Mail provider claims to: PO Box 3248 Omaha, NE 68180-0001	To locate participating providers outside of Nebraska: 800-810-2583
Mail pharmacy claims to: PO Box 20970 Lehigh Valley, PA 18002-0970	Provider services: 888-505-2022 Facility prenotification: 877-399-1671 Pharmacy services: 855-457-1351