

# New Plan Announcement

Regence BlueShield Align HMO NoRX

Effective January 1, 2020

**Effective January 1, 2020**, Prime Therapeutics (Prime) will begin processing Medicare Advantage (MA) Part B claims for Covered Persons of Regence BlueShield Align HMO NoRX.

## 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.

### Regence BlueShield Align HMO NoRX

BIN: ----- 610623



PCN: ----- CBPARTB


- Covered Person ID Number
- Date of Birth
- Gender
- 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

- MA 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 844.765.6826
- Prime's Medicare Part B payer specification sheets are available at: [PrimeTherapeutics.com](http://PrimeTherapeutics.com) > Resources > Pharmacy + Provider > Pharmacy claim processing > Payer sheet > Medicare Part B D.0 Pharmacy Payer Sheet

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

		<b>Align HMO NoRX</b>	
<b>SUBSCRIBER SAMPLE</b>		<b>RX BIN 610623 PCN CBPARTB</b> <b>Issuer (80840)</b>	
<b>ID NO ABC123456789</b>		<b>Card Issue Date: MM/DD/YYYY</b>	
<b>00 SUBSCRIBER SAMPLE</b> Group No. <b>26500014</b> PCP Name <b>Provider Name</b> PCP/SPEC <b>Copay \$5/\$40</b>		<b>M D RX V</b> <b>Y Y N Y</b>	
		<b>CMS-H1997-008</b>	
			

		<b>www.regence.com/medicare</b>	
Hospitals or Physicians: File claims with local Blue Cross and/ or Blue Shield plan/ANSI 837 transaction.		<b>Members Call 1 (800) 541-8981</b> <b>TTY/TDD Line 711</b> <b>24 Hour Nurseline 1 (800) 267-6729</b> <b>MDLIVE 1 (888) 725-3097</b> <b>Providers Call 1 (877) 508-7362</b>	
<b>MEDICARE LIMITING CHARGES APPLY</b>		<b>VSP Vision Care 1 (844) 872-6065</b>	
This card is for information only and does not certify eligibility or guarantee benefits.		Send inquiries to Mail Administrator: Regence BlueShield PO BOX 1827 Medford, OR 97501	
Regence BlueShield serves select counties in the state of Washington and is an Independent Licensee of the Blue Cross and Blue Shield Association.			