

New Plan Announcement

Alignment Health Plan Medicare HMO and DSNP

Effective Jan. 1, 2021

Effective Jan. 1, 2021, Prime Therapeutics (Prime) will begin processing Medicare Part D and Part B claims for Covered Persons of Alignment Health Plan.

Processing requirements

To ensure uninterrupted service to Pharmacies and Covered Persons, please use the following information to set up your system prior to Jan. 1, 2021:

- Covered Person ID Number
- Date of Birth
- Gender
- Rx 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 Jan. 1, 2021 must be submitted with the BIN/PCN noted below. If you have questions regarding claims processing, please contact Prime's Pharmacy Help Desk at **855.457.0622**
- Prime's Medicare Part D payer specification sheets are available at: www.PrimeTherapeutics.com > **Resources > Pharmacy + provider > Pharmacy claim processing > Payer sheet > Medicare Part D D.0 Pharmacy Payer Sheet.**

Processing Requirements Continued:

Plan Sponsor	Plan Name	BIN	PCN	RX Group Number
Alignment Health Plan of Nevada	Platinum Plan (HMO) NVPlus (HMO) AVA (HMO)	610455	AHPPARTD	H9686
Alignment Health Plan of North Carolina	NC Premier (HMO) NCPlus (HMO) Platinum (HMO-POS)	610455	AHPPARTD	H5296
Alignment Health Plan	CalPlusDuals (HMO D-SNP)	610455	AHPPARTD	H3815

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→ Featured below are example(s) of the most common ID card(s) used:

<div data-bbox="435 443 760 510"></div> <p data-bbox="126 527 324 556">[PLAN NAME]</p> <p data-bbox="126 564 324 590">Member: <John Doe></p> <p data-bbox="126 592 406 617">Member ID: <000123456789></p> <p data-bbox="126 619 373 644">PCP Name: <Doctor Name></p> <p data-bbox="126 646 397 672">PCP Phone: <(800) 100-1000></p> <p data-bbox="126 674 373 699">Med Grp: <Medical Group></p> <p data-bbox="126 701 397 726">Med Grp #: <(405) 888-8888></p> <p data-bbox="126 728 527 753">Member Services: <(866) 634-2247/TTY 711></p> <p data-bbox="126 756 324 781">Member Since <2019></p> <p data-bbox="560 569 755 594">Eff Date: <01/01/20></p> <p data-bbox="560 596 706 621">RxGrp: <H3815></p> <p data-bbox="560 623 706 648">RxBIn: <610455></p> <p data-bbox="560 651 755 676">RxPCN: <AHPPARTD></p> <p data-bbox="560 678 755 703">RxID: <000123456789></p> <p data-bbox="560 705 722 730">Plan Code: <020></p> <div data-bbox="544 745 747 793"> Prescription Drug Coverage</div> <p data-bbox="142 814 747 840">Primary Care: <\$> Specialist: <\$> ER: <\$> Urgent Care: <\$></p>	<p data-bbox="844 462 901 525"></p> <p data-bbox="933 445 1258 470">All Claims must be mailed to:</p> <p data-bbox="933 489 1291 541">Alignment Health Plan P.O. Box 14010, Orange, CA 92863</p> <p data-bbox="844 609 901 672"></p> <p data-bbox="933 579 1429 604">Pharmacy Technical Help Desk: (844) 227-7615</p> <p data-bbox="933 606 1356 632">Member Pharmacy Help: (844) 227-7616</p> <p data-bbox="933 634 1323 659">Eligibility Verification: (888) 517-2247</p> <p data-bbox="933 661 1274 686">Dental Benefits: (866) 454-3008</p> <div data-bbox="844 709 1063 777"> Medicare Advantage</div> <p data-bbox="1144 705 1429 781">Pre-authorization is required for all non-emergent hospital admissions, please call 1-866-646-2247, Opt 4.</p> <p data-bbox="990 814 1291 840">www.alignmenthealthplan.com</p>
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