

## Group number 93867 Saskatchewan Hutterian Brethren colonies— direct bill drug claims to be submitted to Alberta Blue Cross effective September 1, 2020

We are pleased to continue to provide prescription drug benefits for the Saskatchewan Hutterian Brethren colonies group number 93867. Effective **September 1, 2020**, all direct bill drug claims are to be submitted to Alberta Blue Cross.

### New Alberta Blue Cross identification cards

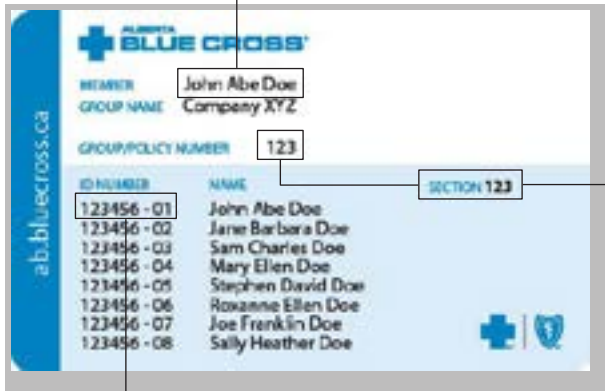
All members for the Hutterian Brethren Saskatchewan colonies group number 93867 have received new Alberta Blue Cross ID cards. Benefits coverage remains the same. Please ensure your patient records are updated to reflect the most current Alberta Blue Cross member identification card information.

Submitting eligible pharmacy claims for Alberta Blue Cross plan members is quick, easy and secure—all you need is the member's Alberta Blue Cross ID card. Our real-time adjudication system will confirm the amount the benefit plan pays and any portion your customer is required to pay.

### Tips for online claim entry and successful claims adjudication

- **Carrier code 11 (Alberta Blue Cross):** this code is to be used when submitting claims for your customers that have Alberta Blue Cross employer-sponsored direct bill drug coverage.
- **Group number:** enter as a seven-digit number (fill with leading zeros if necessary) followed by section (up to three characters, no zero filling). If your software does not utilize a separate field for the section, the group and section are to be entered as one string.
- **Identification number:** (example 1234567-33) "1234567" enter as a 10-digit number (fill with leading zeros if necessary) followed by the two-digit patient code. If your software does not utilize a separate field for the patient code, the identification number should be directly followed by a / or – symbol, then the two-digit patient code.
- **Cardholder (member/subscriber) last name:** the cardholder's last name must be indicated on all claim transmissions along with the patient first and last name.

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### Cardholder (member/subscriber) last name

Must be indicated on all claim transmissions along with the patient first and last name

### Group number

Enter as a seven-digit number (fill with leading zeros if necessary) followed by section (up to three characters, no zero filling)

### Identification number

Enter as a 10-digit number (fill with leading zeros if necessary) followed by the two digit patient code

### When you have questions:

For assistance with benefit or claim inquiries, please contact an Alberta Blue Cross Pharmacy Services Provider Relations contact centre representative at:

780-498-8370 (Edmonton and area) • 403-294-4041 (Calgary and area) • 1-800-361-9632 (toll free)

FAX 780-498-8406 (Edmonton and area) • FAX 1-877-305-9911 (toll free)

Alberta Blue Cross offers online access to current Pharmacy Benefits and supplemental claiming information to assist with the submission of your direct bill drug claims. Visit [ab.bluecross.ca/providers/pharmacy-home.php](http://ab.bluecross.ca/providers/pharmacy-home.php)

