Employer Group Number for Primary Care Provider Prior Authorization Waiver

BlueCross BlueShield of Vermont
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Under Act 111, there are certain Blue Cross and Blue Shield of Vermont members who do not require a prior authorization for qualifying services ordered by a qualifying primary care provider (see Section 12 of our on-line Provider Handbook for details). Use the below list of group numbers to identify those members who do not require prior authorizations for qualifying services ordered by a qualifying primary care provider. The list provides the first three digits of the member's group number on their health insurance member ID card.

Note: The list below is subject to change and will be updated at least monthly.

Group Number (first 3 digits)	
025	388
027	418
068	426
072	436
109	443
125	447
154	465
201	469
216	559
231	567
239	578
296	591
299	608
300	679
316	684
334	766
335	802
341	856
365	HX1
369	HX2
371	HX4
406	HX5
407	RVM
384	
387	

