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	418
027	426
072	436
109	443
125	465
154	469
201	559
216	567
231	578
239	591
296	608
299	679
300	684
316	802
334	856
335	HX1
341	HX2
365	HX4
369	HX5
371	RVM
384	Z447
387	Z766
388	
406	
407	

