

South Country Health Alliance Programs	Pharmacy Help Desk	Pharmacy Claims	Formulary/Forms
<b>AbilityCare</b>  <b>SeniorCare Complete</b>  <b>PMAP</b>  <b>GAMC</b>  <b>MSC +</b>  <b>MNCare</b>	<b>Prime Therapeutics</b>  1-866-325-5233	<b>Prime Therapeutics</b>  1-800-995-4543 (Provider Services)  1-800-821-4795 (Technical Assistance)  <b>Bin #: 610455</b>  <b>Completed UCFs should be mailed to:</b>  Medicare Claims: Prime Therapeutics LLC P.O. Box 64813 St. Paul, MN 55164-0812  Medicaid claims: Prime Therapeutics LLC P.O. Box 64812 St. Paul, MN 55164-0812	<u><b>Online Formulary</b></u> Medicare Part D Formulary ( <a href="http://www.myrxassistant.com">www.myrxassistant.com</a> )  <u><b>Online Formulary</b></u> MSC+, PMAP, GAMC, MNCare ( <a href="http://www.myrxhealth.com">www.myrxhealth.com</a> )  <u><b>Forms</b></u> Formulary Exception Prior Authorization Quantity Limit Step Therapy ( <a href="http://www.myrxassistant.com">www.myrxassistant.com</a> )