



Medicaid Member ID Cards by Plan


Aetna

Aetna Better Health® of Virginia

Name Last Name, First Name
Medicaid/Member ID # 000000000 **DOB** 00/00/0000 **Sex** X

PCP Last Name, First Name
PCP Phone 000-000-0000 **Effective Date** 00/00/0000

RxBIN: 610591 **RxPCN:** ADV **RxGROUP:** RX8837 
 Pharmacist Use Only: **1-866-386-7882**
aetnabetterhealth.com/virginia

THIS CARD IS NOT A GUARANTEE OF ELIGIBILITY, ENROLLMENT OR PAYMENT. VAMED4

In case of an emergency go to the nearest emergency room or call 911.

Important numbers for members

Member Services	1-800-279-1878 (TTY 711)
Transportation	1-800-734-0430
Behavioral Health and Substance Use Hotline	1-800-279-1878
24-Hour Nurse Line	1-800-279-1878
Smiles for Children	1-888-912-3456


Important numbers for providers

Eligibility/Preauthorization	1-800-279-1878
Radiology Preauthorization	1-888-693-3211

Submit claims to	Submit appeals to
Aetna Better Health of Virginia	Aetna Better Health of Virginia
PO Box 63518	9881 Mayland Drive
Phoenix, AZ 85082-3518	Richmond, VA 23233
EDI Payer 128VA	

VAMED4B


Anthem



Anthem HealthKeepers Plus
Offered by HealthKeepers, Inc.

Member ID	PCP Name
	PCP Phone
	Medicaid ID

Group Number	HKP00200	PCP/Specialist	\$0/\$0
BC/BS Plan	923	Outpatient	\$0
Rx Bin Number	003858	Inpatient	\$0
Rx PCN Number	A4	Emergency	\$0
Rx Group Number	WQWA	Rx	\$0/\$0



Anthem HealthKeepers Plus
Offered by HealthKeepers, Inc.

www.anthem.com/vamedicaid

Member Services:	1-800-901-0020
Provider Services:	1-800-901-0020
TTY:	711
24/7 NurseLine:	1-800-501-0020
Behavioral Health Crisis Line:	1-844-429-9620
Authorization:	1-800-901-0020
Smiles for Children*:	1-888-912-3456
Transportation Service:	1-877-892-3988
For Pharmacists Only:	1-800-824-0898

*Department of Medical Assistance Services program


HealthKeepers, Inc.
P.O. Box 27401
Mail Drop VA2002-N500
Richmond, VA 23279

HealthKeepers, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

Claims Filing Address: Post Office Box 27401 Richmond, VA 23279 Contractor ID: 0047003253

VA21 08/18

Magellan



Magellan
COMPLETE CARE

John Smith

Medicaid ID
ZECM12345678

Group No. **00000**

Subscriber ID
ZEB123456789

RQGRP: MCCVWRX
 RQBN: 016523
 RQPN: 63346286

In case of emergency, go to the nearest emergency room or call 911.

Member Services: 1-800-424-4518 (TTY 711)
 Provider Services: 1-800-424-4518 (TTY 711)
 Behavioral Health: 1-800-424-4518 (TTY 711)
 24/7 CareLine: 1-800-424-4518 (TTY 711)
 Transportation: 1-877-790-9472 (TTY 711)
 Pharmacy Help Desk: 1-800-424-4518 (TTY 711)
 24 hours a day, 7 days a week

Rx Prior Authorizations: 1-800-424-4518 (TTY 711)
 Smiles for Children: 1-888-912-3456 (TTY 711)
 Website: www.MCCofVA.com

Claims Address:
 MCC Claims Service Ctr.,
 1 Cameron Hill Circle, Suite 52,
 Chattanooga, TN 37402-0052

General Mailing Address:
 MCC of VA
 3829 Gaskins Rd
 Richmond, VA 23233-1437

Optima



FAMILY CARE

Member Name: JOHN DOE
 Member Number: 9999999*99
 Group Number: ABC
 Member Effective Date: 07-01-18
 PCP Name: JANE DOE
 PCP Phone: 999-9999

OV: \$0
 ER: \$0
 RX: 0

Medicaid #: 999999999999 DOB: 99/99/9999

Detailed benefit information is available at optimahealth.com

Preauthorization may be required for: hospitalization, outpatient surgery, therapies, advanced imaging, DME, home health, skilled nursing, acute rehab, or prosthetics.
IN CASE OF AN EMERGENCY: Call 911 or go to the nearest emergency room.
 Always call your Primary Care Physician for non-emergent care.

FOR PHARMACIST USE ONLY:

BIN# 610011	PROCESSOR CONTROL# OHPMCAID	
OptumRx Pharmacist Help Desk:	1-866-244-9113	
Member Services: <i>(Translation Services Available)</i>	757-552-8975 OR 1-800-881-2166	
Pharmacy Member Services:	757-552-8877 OR 1-844-672-2307	
TTY Virginia Relay Service: <i>(Hearing Impaired)</i>	711 OR 1-800-828-1140	
After Hours Nurse Advice:	757-552-7250 OR 1-800-394-2237	
Smiles for Children:	1-888-912-3456	
Transportation:	1-877-892-3986	
Behavioral Health Pre Authorization:	757-552-7174 OR 1-800-648-8420	
Provider Relations:	757-552-7474 OR 1-800-229-8822	
Medical/Pharmacy Pre Authorization:	757-552-7540 OR 1-800-229-5522	

MEDICAL CLAIMS
 P.O. Box 5028
 Troy, MI 48007-5028

BEHAVIORAL HEALTH CLAIMS
 P.O. Box 1440
 Troy, MI 48099-1440

Offered by Optima Health Plan

United Healthcare

03115 9900973 0000 0000006 0000006 152 3112	UnitedHealthcare Community Plan Health Plan (80840) 911-87726-04	In an emergency go to nearest emergency room or call 911. <small>Form: 360118</small>
	Member ID: 001500006 Group Number: VAMDN	Carry card at all times and before you get non-emergency services. Call Member Services with questions or if you suspect fraud or abuse. Hospitals: Preadmission certification required for non-emergency admissions.
	Member: REISSUE M ENGLISH Payer ID: 87726	Member Services/Behavioral: 844-752-9434 TTY 711 Smiles for Children: 888-912-3456 TTY 711 NurseLine: 800-842-3014 TTY 711 Transportation: 833-215-3884 TTY 711
	Medicaid ID: 9999999996	For Providers: UHCprovider.com 844-284-0146
	PCP Name: DOUGLAS GETWELL	Claims: PO Box 5270, Kingston, NY, 12402-5270
	PCP Phone: (717)851-6816	Preauthorization: 844-284-0146
	Date of Birth: 06/15/2013 Effective Date: 08/26/2013	Pharmacy Claims: OptumRX, PO Box 29044, Hot Springs, AR 71903 For Pharmacists: 844-284-0149
	No Copays	
	0601 UnitedHealthcare Community Plan of Virginia - Medicaid Administered by UnitedHealthcare of the Mid-Atlantic, Inc.	

VA Premier

VirginiaPremier. <small>Powered by VCU Health</small>	
Member Name: <First Name Last Name>	<Virginia Premier Elite Individual>
Member ID: <XXXXXXXXXXXX> PCP Name: <XXXXXXXX> PCP Phone: <X.XXX.XXX.XXXX>	ENVISION Rx RxBin: <XXXXXX> RxPCN: <XXXXXX> RxGRP: <XXXXXXXXXXXX> RxID: <XXXXXXXXXXXX>
<Medallion 4.0>	Coverage Effective Date: <XXXXXX>
For urgent or emergency care, dial 911 or go to the nearest urgent/emergency facility. If you are not sure if you need emergency care, call your PCP or the 24-hour Nurse Advice line.	
Member Services: <X.XXX.XXX.XXXX, TTY:711> 24-hour Nurse Line: <X.XXX.XXX.XXXX> Behavioral Health: <X.XXX.XXX.XXXX> Pharmacy Help Desk: <X.XXX.XXX.XXXX> Smiles for Children: <X.XXX.XXX.XXXX> Adult Dental: <X.XXX.XXX.XXXX> Vision: <X.XXX.XXX.XXXX> ARTS: <X.XXX.XXX.XXXX>	
Website: <VirginiaPremier.com> Send Claims To: <Virginia Premier Claims> PO Box 4250 Richmond, VA 23220>	