




# Medallion 4.0 Member ID Cards by Plan, Effective 7.1.21



Anthem:  
(Front)

 <b>Anthem HealthKeepers Plus</b> <small>Offered by HealthKeepers, Inc.</small>		PCP Name PCP Phone Medicaid ID	<b>SAMPLE</b>	XL4086900000 
Member ID				
Group Number BC/BS Plan Rx Bin Number Rx PCN Number Rx Group Number	HKP00200 823 003856 A4 WQWA	PCP/Specialist Outpatient Inpatient Emergency Rx		

(Back)


<b>SAMPLE</b>	 <b>Anthem HealthKeepers Plus</b> <small>Offered by HealthKeepers, Inc.</small>	<a href="http://www.anthem.com/medallion">www.anthem.com/medallion</a> Member Services: 1-800-301-0020 Provider Services: 1-800-801-0020 TTY: 711 24/7 NurseLine: 1-800-801-0020 Mental Health Services: 1-800-801-0020 Authorization: 1-800-801-0020 Smiles for Children: 1-888-812-3466 Transportation Service: 1-877-882-3888 For Pharmacists Only: 1-800-824-0888
	Members: When submitting inquiries, always include your identification number from the face of this card. Possession or use of this card does not guarantee payment. In an emergency, go to the nearest facility or call 911. Pharmacies: For network contracting and claims inquiries, call the pharmacist-only number listed to the right. Providers: Please submit claims to your local BCBS plan. To ensure proper claims processing, please include the 3-digit prefix that precedes the patient's identification number listed on the front of this card. Claims Filing Address: Post Office Box 27401 Richmond, VA 23279 Contractor ID: 0047003253	HealthKeepers, Inc. P.O. Box 27421 Mail Drop VA2002-H020 Richmond, VA 23279 <small>HealthKeepers, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.</small>

(Front)


 Anthem HealthKeepers Plus Offered by HealthKeepers, Inc.		 FAMIS	
Member ID		PCP Name	
		PCP Phone	
		FAMIS 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

SAMPLE

X14071942000001



(Back)

 Anthem HealthKeepers Plus Offered by HealthKeepers, Inc.		<a href="http://www.anthem.com/vamedicaid">www.anthem.com/vamedicaid</a>
<p>When submitting inquiries, always include your identification number from the face of this card. Possession or use of this card does not guarantee payment. In an emergency, go to the nearest facility or call 911.</p> <p>Pharmacies: For network contracting and claims inquiries, call the pharmacist-only number listed to the right.</p> <p>Providers: Please submit claims to your local BCBS plan. To ensure proper claims processing, please include the 3-digit prefix that precedes the patient's identification number listed on the front of this card.</p>		<p>Member Services: 1-800-301-0020 Provider Services: 1-800-891-0020 TTY: 711 24/7 NurseLine: 1-800-891-0020 Mental Health Services: 1-800-891-0020 Authorization: 1-800-891-0020 Smiles for Children: 1-888-812-3468 For Pharmacists Only: 1-800-824-0888</p> <p>*Department of Medical Assistance Services program</p> <p>HealthKeepers, Inc. P.O. Box 27401 Mail Drop VA2002-H600 Richmond, VA 23279</p> <p>HealthKeepers, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.</p>
Claims Filing Address: Post Office Box 27401 Richmond, VA 23279	Contractor ID 0047003253	
VA02 1/1/17		

SAMPLE

Aetna:

**Aetna Better Health® of Virginia**

Name Last Name, First Name  
Medicaid/Member ID # 0000000000      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**  
Aetna Better Health of Virginia  
PO Box 63518  
Phoenix, AZ 85082-3518  
**EDI Payer** 128VA

**Submit appeals to**  
Aetna Better Health of Virginia  
9881 Mayland Drive  
Richmond, VA 23233


VAMED4B

**Aetna Better Health® of Virginia**

Name Last Name, First Name  
FAMIS/Member ID # 0000000000      DOB 00/00/0000      Sex X

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

Copay: N    PCP/UC: \$0    Inpatient: \$0    Outpatient: \$0  
Generic Rx: \$0    Brand Rx: \$0    ER: \$0    ER non-emerg: \$0  
RxBIN: 610591    RxPCN: ADV    RxGROUP: RX8836  
Pharmacist Use Only: 1-866-386-7882    

**aetnabetterhealth.com/virginia**

THIS CARD IS NOT A GUARANTEE OF ELIGIBILITY, ENROLLMENT OR PAYMENT.      MEVAFAM51

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)
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**  
Aetna Better Health of Virginia  
PO Box 63518  
Phoenix, AZ 85082-3518  
**Payer ID** 128VA

**Submit appeals to**  
Aetna Better Health of Virginia  
9881 Mayland Drive  
Richmond, VA 23233

VAFAM51

VA Premier:

**Virginia Premier Elite Individual**

  
Member Name: **Virginia Premier Elite Individual**  
First Name Last Name

Member ID:	XXXXXXXXXXXX	RxBin:	XXXXXX
PCP Name:	XXXXXXX	RxPCN:	XXXXXX
PCP Phone:	X.XXX.XXX.XXXX	RxGRP:	XXXXXXXXXXXX
		RxD:	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:	1-800-727-7536
Transportation:	1-855-880-3480
24-hour Nurse Line:	1-800-256-1982
Behavioral Health:	1-844-513-4950
Pharmacy Help Desk:	1-855-872-0005
Smiles for Children:	1-888-912-3456
Adult Dental:	1-800-516-2940
ARTS:	1-800-727-7536
Website:	VirginiaPremier.com


Send Claims To: Mailing Address:  
**Virginia Premier Claims**  
PO Box 4250  
Richmond, VA 23220

**Virginia Premier**  
P.O. Box 5307  
Richmond, VA 23220

**Virginia Premier Elite Family (FAMIS)**

  
Member Name: **Virginia Premier Elite Family**  
First Name Last Name

Member ID:	XXXXXXXXXXXX	RxBin:	XXXXXX
PCP Name:	XXXXXXX	RxPCN:	XXXXXX
PCP Phone:	X.XXX.XXX.XXXX	RxGRP:	XXXXXXXXXXXX
PCP Copay:	XXXXXX	RxD:	XXXXXXXXXXXX
SPC Copay:	XXXXXX		

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:	1-800-727-7536
Transportation:	1-855-880-3480
24-hour Nurse Line:	1-800-256-1982
Behavioral Health:	1-844-513-4950
Pharmacy Help Desk:	1-855-872-0005
Smiles for Children:	1-888-912-3456
Adult Dental:	1-800-516-2940
ARTS:	1-800-727-7536
Website:	VirginiaPremier.com

Send Claims To: Mailing Address:  
**Virginia Premier Claims**  
PO Box 4250  
Richmond, VA 23220

**Virginia Premier**  
P.O. Box 5307  
Richmond, VA 23220

**Virginia Premier Elite Individual (Medicaid Expansion)**

  
Member Name: **Virginia Premier Elite Individual**  
First Name Last Name

Member ID:	XXXXXXXXXXXX	RxBin:	XXXXXX
PCP Name:	XXXXXXX	RxPCN:	XXXXXX
PCP Phone:	X.XXX.XXX.XXXX	RxGRP:	XXXXXXXXXXXX
		RxD:	XXXXXXXXXXXX

Medallion Expansion  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:	1-800-727-7536
Transportation:	1-855-880-3480
24-hour Nurse Line:	1-800-256-1982
Behavioral Health:	1-844-513-4950
Pharmacy Help Desk:	1-855-872-0005
Smiles for Children:	1-888-912-3456
Adult Dental:	1-800-516-2940
ARTS:	1-800-727-7536
Website:	VirginiaPremier.com

Send Claims To: Mailing Address:  
**Virginia Premier Claims**  
PO Box 4250  
Richmond, VA 23220

**Virginia Premier**  
P.O. Box 5307  
Richmond, VA 23220

Optima:

**OptimaHealth** 

**FAMILY CARE**

Member Name: JOHN DOE  
Member Number: 9999999\*99  
Group Number: ABC  
Member Effective Date: 99-99-99  
PCP Name: JANE DOE  
PCP Phone: 999-999-9999  
RxBIN #: 610011  
RxPCN #: OHPMCAID  
Medicaid #: 999999999999

DOB: 99/99/9999

COV: \$0  
ER: \$0  
RX: \$0

Detailed benefit information at [optimahealth.com](http://optimahealth.com) and our mobile app

Pre Authorization 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.

Member Services: <small>(Hearing Impaired/Virginia Relay: 711)</small>	9-999-999-9999
Behavioral Health/ARTS Crisis Line:	9-999-999-9999
Provider Services: <small>(Including Pre-Authorization)</small>	9-999-999-9999
24/7 Nurse Advice Line:	9-999-999-9999
Pharmacist Help Desk: <small>(Including Pre-Authorization)</small>	9-999-999-9999
Dental:	9-999-999-9999
Transportation:	9-999-999-9999

MEDICAL CLAIMS	BEHAVIORAL HEALTH CLAIMS	OPTIMA HEALTH
P.O. Box 5028	P.O. Box 1440	4417 Corporation Lane
Troy, MI 48007-5028	Troy, MI 48099-1440	Virginia Beach, VA 23462-3162

Offered by Optima Health Plan

**OptimaHealth** 

**FAMILY CARE  
FAMIS**

Member Name: JOHN DOE  
Member Number: 9999999\*99  
Group Number: ABC  
Member Effective Date: 07-01-18  
PCP Name: JANE DOE  
PCP Phone: 999-999-9999  
RxBIN #: 610011  
RxPCN #: OHPMCAID  
Medicaid #: 999999999999

DOB: 99/99/9999

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




Detailed benefit information at [optimahealth.com](http://optimahealth.com) and our mobile app

Pre Authorization 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.

Member Services: <small>(Hearing Impaired/Virginia Relay: 711)</small>	9-999-999-9999
Behavioral Health/ARTS Crisis Line:	9-999-999-9999
Provider Services: <small>(Including Pre-Authorization)</small>	9-999-999-9999
24/7 Nurse Advice Line:	9-999-999-9999
Pharmacist Help Desk: <small>(Including Pre-Authorization)</small>	9-999-999-9999
Dental:	9-999-999-9999

MEDICAL CLAIMS	BEHAVIORAL HEALTH CLAIMS	OPTIMA HEALTH
P.O. Box 5028	P.O. Box 1440	4417 Corporation Lane
Troy, MI 48007-5028	Troy, MI 48099-1440	Virginia Beach, VA 23462-3162

Offered by Optima Health Plan


**OptimaHealth** 

**OPTIMA FAMILY CARE  
MEDICAID XP**

Member Name: JOHN DOE  
Member Number: 9999999\*99  
Group Number: OFC  
Member Effective Date: 07 01 18  
PCP Name: JANE DOE  
PCP Phone: 999 999 9999  
RxBIN #: 610011  
RxPCN #: OHPMCAID  
Medicaid #: 999999999999

DOB: 99/99/9999

OV: \$0  
FR: \$0  
RX: \$0



Detailed benefit information at [optimahealth.com](http://optimahealth.com) and our mobile app


Pre Authorization 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.

Member Services: <small>(Hearing Impaired/Virginia Relay: 711)</small>	9-999-999-9999
Behavioral Health/ARTS Crisis Line:	9-999-999-9999
Provider Services: <small>(Including Pre-Authorization)</small>	9-999-999-9999
24/7 Nurse Advice Line:	9-999-999-9999
Pharmacist Help Desk: <small>(Including Pre-Authorization)</small>	9-999-999-9999
Dental:	9-999-999-9999
Transportation:	9-999-999-9999

MEDICAL CLAIMS	BEHAVIORAL HEALTH CLAIMS	OPTIMA HEALTH
P.O. Box 5028	P.O. Box 1440	4417 Corporation Lane
Troy, MI 48007-5028	Troy, MI 48099-1440	Virginia Beach, VA 23462-3162

Offered by Optima Health Plan


United Healthcare:

 **UnitedHealthcare** | Community Plan

Health Plan (80840) 911-87726-04

Member ID: 001500007      Group Number: 999999

Member:  
NEW M ENGLISH **sample**  
Medicaid ID: 9999999997      Payer ID: 87726  
PCP Name:  
DOUGLAS GETWELL  
PCP Phone: (717)851-6816

  
Rx Bin: 000000  
Rx Grp: ZZZZ  
Rx PCN: 0000

Date of Birth: 06/15/2013      Effective Date: 08/26/2013

0501      UnitedHealthcare Community Plan - Medicaid  
Administered by UnitedHealthcare of the Mid-Atlantic, Inc.

In an emergency go to nearest emergency room or call 911.      Printed: 04/30/18

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 Services/Behavioral: 844-752-9434      **sample**      TTY 711  
Smiles for Children: 888-912-3456      TTY 711  
NurseLine: 800-842-3014      TTY 711  
Transportation: 833-215-3884      Where's My Ride: 833-215-3885

For Providers: UHCprovider.com      844-284-0146  
Claims: PO Box 5270, Kingston, NY, 12402-5270

Pharmacy Claims: OptumRX, PO Box 29044, Hot Springs, AR 71903  
For Pharmacists: 844-284-0149

Molina:

	
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<b>JANE SMITH</b>	
Medicaid ID <b>123456789012</b>	Subscriber ID <b>123456789</b>
Group No. <b>123456</b>	
<small>RXBP: MCCVAX RXBN: 123456 RXPCN: 12345678</small>	
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**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 Crisis: ..... 1-800-424-4518 (TTY 711)  
24/7 NurseLine: ..... 1-800-424-4518 (TTY 711)  
Transportation: ..... 1-800-424-4518 (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)  
Dental: ..... 1-888-912-3456 (TTY 711)  
Website: [www.MCCoVA.com](http://www.MCCoVA.com)

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

**General Mailing Address:**  
Molina Complete Care  
3829 Gaskins Rd  
Richmond, VA 23233-1437

	
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<b>JOHN DOE</b>	
Medicaid ID <b>123456789012</b>	Subscriber ID <b>123456789</b>
Group No. <b>123456</b>	Copayments.
<small>RXBP: MCCVAX RXBN: 123456 RXPCN: 12345678</small>	<small>PCP: Specialist: Outpatient: Emergency: Rx:</small>
<hr/>	

**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)  
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24/7 NurseLine: ..... 1-800-424-4518 (TTY 711)  
Transportation: ..... 1-800-424-4518 (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)  
Dental: ..... 1-888-912-3456 (TTY 711)  
Website: [www.MCCoVA.com](http://www.MCCoVA.com)

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

**General Mailing Address:**  
Molina Complete Care  
3829 Gaskins Rd  
Richmond, VA 23233-1437