

# Medicaid ID Card Guide for Auto Insurers and Insurance Agents

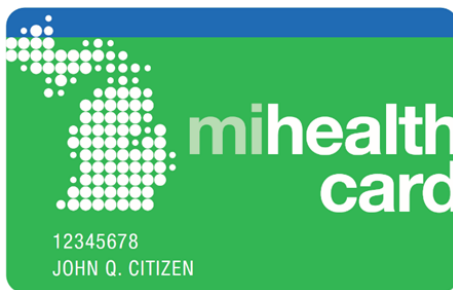


[Michigan.gov/AutoInsurance](https://Michigan.gov/AutoInsurance)

***Michigan’s new auto insurance law allows people with Medicaid to make certain selections on their auto insurance policies. Auto insurers, directly or through their agents, should collect Medicaid documentation not only when a person first applies for coverage, but also at every renewal when a person is relying on Medicaid to make a PIP medical coverage selection.***

Documentation can be in the form of a current Medicaid card. This guide includes images of Medicaid cards in use as of June 2022.

### **Michigan Medicaid mihealth card**



Michigan contracts with 9 health plans to provide health services to Medicaid beneficiaries. Beneficiaries who are enrolled with these plans have ID cards that may look like commercial health insurance; however, the beneficiaries are Medicaid enrollees. DIFS has provided samples of the ID cards that agents may encounter when verifying Medicaid enrollment for these beneficiaries.

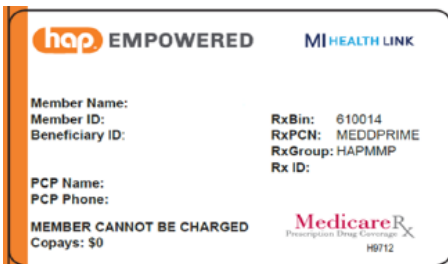
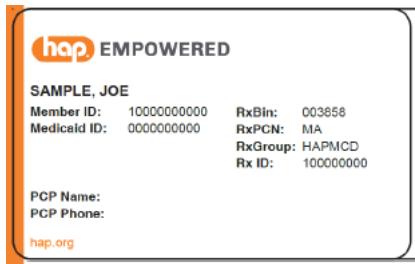
## Aetna BetterHealth of Michigan




## Blue Cross Complete of Michigan



## HAP Empowered




## McLaren Health Plan

 24 Hour #  
**(888) 327 0671**

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Member Name: JOHN DOE  
 Member ID: 0000000000  
 PCP Name: DR SMITH  
 PCP Phone: 111-222-3333

Please show this card each time you get health care services.


 24 Hour #  
**(888) 327 0671**

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Member Name: JOHN DOE  
 Member ID: 0000000000  
 PCP Name: DR SMITH  
 PCP Phone: 111-222-3333

Please show this card each time you get health care services.

## Meridian Health Plan of Michigan, Inc.




Member Name: **Sample A Sample**  
 Member ID: **98765432**  
 Member Services: **888-437-0606** TTY: 711

General Information | Benefits | Provider Network

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Prescriptions: **866-984-6462** BIN: 004336  
 Mental Health: **888-222-8041** PCN: MCAIDADV  
 (Available 24 hours a day, 7 days a week) Group: RX5492



 **HMP**

Member Name: **Sample A Sample**  
 Member ID: **98765432**  
 Member Services: **888-437-0606** TTY: 711

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**DentaQuest**  
 Dental: **855-898-1478** BIN: 004336  
 Behavioral Health: **888-222-8041** PCN: MCAIDADV  
 (Available 24 hours a day, 7 days a week) Group: RX5492  
 Prescriptions: **866-984-6462**

## Molina Healthcare of Michigan

Member Name: <MemFIRST><MemM><MemLAST>  
 Member ID: <HIC#>


Beneficiary ID: <MEMID>  
 PCP Name: <PCPNAM>  
 PCP Phone: <PCPPH>

**MEMBER CANNOT BE CHARGED**  
 Copays: \$0

<ContNum>

**MedicareR**  
 Prescription Drug Coverage

RxBIN: <RXBIN>  
 RxPCN: <RXPCN>  
 RxGRP: <RXGroup>  
 RxID: <HIC#>



Member: <Member\_Name\_1>  
 Member ID: <Member\_ID\_1>  
 Program: <Program\_Name\_1>

RxBIN: <Bin\_Number\_1>  
 RxPCN: <RXPCN\_1>  
 RxGRP: <RXGroup\_1>

This card is only valid if member maintains Molina Healthcare of Michigan eligibility.  
 Eligibility should be verified before rendering services.  
 Member: Please show this card each time you receive health care services

[MyMolina.com](#)

# Priority Health Choice



Contract number: 1111111111  
 Name: JOHN Q SAMPLE  
 Group number: 10001  
 Health plan: Choice MDC

Copays	
Non-emergent ER:	\$0
Hospital Urgent Care:	\$0
Prescription:	\$0
Office visit:	\$0



Contract number: 1111111111  
 Name: JOHN Q SAMPLE  
 Group number: 10001  
 Health plan: Choice HMI

Copays	
Non-emergent ER:	Yes
Hospital Urgent Care:	Yes
Prescription:	Yes
Office visit:	Yes

*Copays apply to members age 21 or over and are not collected at this point of service.*

priorityhealth.com

priorityhealth.com

## UnitedHealthcare Community Plan

### Member ID card

**UnitedHealthcare** Community Plan  
 Michigan  
 Health Plan (0084): 911-95467-00  
 Member ID: 001901398  
 Group Number: MIPHCP  
 Member: REISSUE B ENGLISH  
 State Assigned ID: 9999991398  
 PCP Name: DOUGLAS GETWELL  
 PCP Phone: (269)969-6123  
 Effective Date: 08/01/2015  
 Payer ID: 95467  
 OPTUMRx  
 Rx Bin: 610484  
 Rx Csp: ACUM  
 Rx PCN: 4242  
 In an emergency go to nearest emergency room or call 911.  
 This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.uyhc.com/communityplan or call.  
 For Members: 800-903-5253 TTY 711 877-862-3995  
 Non-Emergency Transportation: 800-903-5253  
 Outpatient Mental Health/Vision: 800-903-5253  
 For Providers: UHCprovider.com 800-903-5253  
 Medical Claims: PO Box 30991, Salt Lake City, UT 84130-0991  
 Pharmacy Claims: OptumRx, PO Box 60234, Dallas, TX 75260-0334  
 For Pharmacists: 877-355-8952  
 Mental/Behavioral Health/Vision Services

Labels:  
 - Your plan ID number (911-95467-00)  
 - Your member ID number (001901398)  
 - Member Services phone number (800-903-5253)  
 - Name and phone number of your Primary Care Provider (DOUGLAS GETWELL, (269)969-6123)  
 - Information for your pharmacist (OPTUMRx, Rx Bin: 610484, Rx Csp: ACUM, Rx PCN: 4242)

### Member ID card

**UnitedHealthcare** Community Plan  
 Michigan  
 Health Plan (0084): 911-95467-00  
 Member ID: 001901400  
 Group Number: MSHCP  
 Member: NEW S ENGLISH  
 State Assigned ID: 9999991393  
 PCP Name: DOUGLAS GETWELL  
 PCP Phone: (810)622-9248  
 Effective Date: 01/01/2014  
 Payer ID: 95467  
 OPTUMRx  
 Rx Bin: 610484  
 Rx Csp: ACUM  
 Rx PCN: 4242  
 In an emergency go to nearest emergency room or call 911.  
 This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.uyhc.com/communityplan or call.  
 For Members: 800-903-5253 TTY 711 877-862-3995  
 Non-Emergency Transportation: 800-903-5253  
 Outpatient Mental Health/Vision: 800-903-5253  
 For Providers: UHCprovider.com 800-903-5253  
 Medical Claims: PO Box 30991, Salt Lake City, UT 84130-0991  
 Dental Claims: UnitedHealthcare MI Dental, PO Box 1011, Milwaukee, WI 53201  
 Pharmacy Claims: OptumRx, PO Box 60234, Dallas, TX 75260-0334  
 For Pharmacists: 877-355-8952  
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Labels:  
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 - Member Services phone number (800-903-5253)  
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 - Information for your pharmacist (OPTUMRx, Rx Bin: 610484, Rx Csp: ACUM, Rx PCN: 4242)

## Upper Peninsula Health Plan

 <small>UPPER PENINSULA HEALTH PLAN</small>	
<b>Member Name:</b>	JANE A DOE
<b>Member ID:</b>	0123456789
<b>Primary Care Provider:</b>	JOHN SMITH
<b>PCP Phone:</b>	(906)555-5555
<b>Pharmacy:</b>	Magellan Rx (see back of card)
<small>This card is for identification purposes only. To ensure payment for covered care, providers should use the Michigan Eligibility Verification System.</small>	

If insurers or agents have questions about this process, DIFS can help. Call the department at 833-Ask-DIFS or email [AutoInsurance@michigan.gov](mailto:AutoInsurance@michigan.gov).



833-Ask-DIFS | [Michigan.gov/AutoInsurance](https://Michigan.gov/AutoInsurance)

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