

Louisiana Department of Health and Hospitals BAYOU HEALTH Informational Bulletin 12-3

February 8, 2012; Revised July 31, 2013

Issue: Member ID Cards

Amerigroup



Effective Date: Date of Birth:

Subscriber #

Amerigroup Louisiana, 3850 N. Causeway Blvd., Metairie, LA 70002 www.myamerigroup.com/LA

Member Name:

Medicaid or LaCHIP Number: Primary Care Provider (PCP): PCP Telephone #:

PCP After Hours #: PCP Address:

Vision: 1-800-787-3157 (under age 21)

Member Services and Behavioral Health: 1-800-600-4441 Amerigroup On Call/Nurse HelpLine: 1-866-864-2544

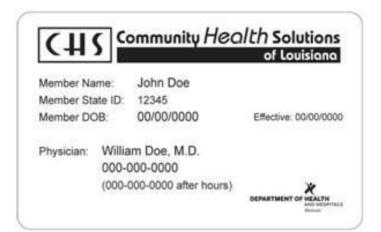
MEMBERS: Please carry this card at all times. Show this card before you get medical care. You do not need to show this card before you get emergency care. If you have an emergency, call 911 or go to the nearest emergency room. Always call your Amerigroup PCP for nonemergency care. If you have questions, call Member Services at 1-800-600-4441. If you are deaf or hard of hearing, call 1-800-855-2880.

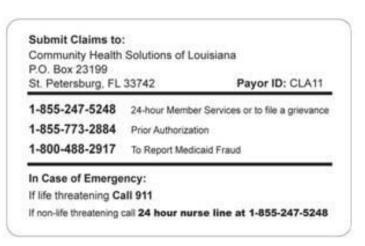
MIEMBROS: Lieve consigo siempre esta tarjeta de Identificación. Muéstrela antes de recibir atención médica. Usted no necesita mostrar esta tarjeta antes de recibir atención de emergencia. Si tiene una emergencia, liame al 911 o vaya a la sala de emergencias más oercana. Liame siempre a su PCP de Amerigroup para la atención que no es de emergencia. Si tiene aiguna pregunta, liame a Servicios para Miembros al 1-800-600-4441. Liame al 1-800-855-2884 si es una persona

llame a Servicios para Miembros al 1-800-600-4441. Liame al 1-800-855-2884 si es uña persona sorda o tiene problemas de la audición. HOSPITALS: Preadmission certification is required for all nonemergency admissions, including outpatient surgery. For emergency admissions, notify Amerigroup within 24 hours after treatment at 1-800-454-4730. PROVIDERS: Certain services must be preauthorized. Care that is not preauthorized may not be covered. For preauthorization/billing information, call 1-800-454-3730. PHARMACIES: Submit daims using Caremark RXBIN: 004336; RXPCN: ADV; RXGRP: RX4299. For technical help, call Caremark at 1-800-364-6331.

SUBMIT MEDICAL CLAIMS TO:
AMERIGROUP - P.O. BOX 61010 - VIRGINIA BEACH, VA 23466-1010
USE OF THIS CARD BY ANY PERSON OTHER THAN THE MEMBER IS FRAUD.
Louisiana Medicaid Fraud and Abuse Hotiline: 1-800-488-2917

Community Health Solutions





LaCare



DOE, JOHN ID 12345678 SEX M DOB 01/01/01 **EFFECTIVE 00/00/0000**

RxBIN: 600428 RxPCN: 06030000 PRIMARY DOCTOR Dr. John Smith (ABC Family Practice) 123 Main Street Anytown, Louisiana 12345 PHONE 999-999-9999

PLAN CODF 355/855

P.O. Box 83580 Eacare Baton Rouge, LA 70884 www.lacarelouisiana.com

Always carry your LaCare card. You'll need it to get your benefits. Go to your LaCare Primary Care Physician (PCP) for medical care.

Emergency Room: Go to an Emergency Room near you when you believe your medical condition may be an emergency. If you get emergency care, please notify your PCP.

Out-of-Area Care: Report out-of-area care to LaCare and your PCP within 48 hours.

Mental Health, Drug & Alcohol Services: Call the toll free number for your partsh. If you don't know the number, call Member Services at 1-888-756-0004.

Member Services & Filing Grievances 1-888-756-0004 | TTY 1-866-428-7588 **Provider Services & Prior Authorization**

1-888-922-0007 **Report Medicald Fraud** 1-800-488-2917

To Speak with a Nurse Anytime 1-888-632-0009

Pharmacy Member Services 1-866-452-1040 | TTY 1-855-294-7047

Pharmacy Provider Services 1-800-684-5502

LaCare Claims Processing P.O. Box 7322, London, Kentucky 40742

Louisiana Healthcare

Connections Address:

8550 United Plaza Blvd.

Baton Rouge, LA 70809

Louisiana Healthcare Connections



Name: Jane Doe

Medicaid ID #: XXXXXXXXXXXX DOB: XX/XX/XXXX

PCP Name: John Doe

PCP Address: XXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXX

PCP Phone #: XXX-XXX-XXXX After Hours #: XXX-XXX-XXXX

If you have an emergency, call 911 or go to the nearest emergency room (ER). You do not have to contact Louisiana Healthcare Connections for an okay before you get emergency services. If you are not sure whether you need to go to the ER, call your PCP or Louisiana Healthcare Connections NurseWise® toll-free at 1-866-595-8133 (TDD/TTY 1-877-285-4514) NurseWise is open 24 hours a day.

IMPORTANT TELEPHONE NUMBERS

Members:

Member Services: 1-866-595-8133 TDD/TTY: 1-877-285-4514

24/7 NurseWise: 1-866-595-8133

Vision: 1-866-595-8133

File a Grievance: 1-866-595-8133 Report Medicaid Fraud: 1-800-488-2917

Providers:

Provider Services: 1-866-595-8133

IVR Eligibility inquiry - Prior Auth: 1-866-595-8133

Medical claims: Louisiana Healthcare Connections

Attn: CLAIMS

PO Box 4040

Farmington, MO 63640-3826

Provider/claims information via the web: www.LouisianaHealthConnect.com.

United Healthcare



Health Plan (80840) 999-99999-99

Member ID: 999999999

Member: SUBSCRIBER BROWN Group:99999 Payer ID: 99999

SUBSCRIBER BROW

PCP Name: DR. PROVIDER BROWN PCP Phone (999)999-9999 PCP address Main St.

PCP City, ST 99999

DOB: 99/99/9999

0709

Administered by UnitedHealthcare Community Plan, LLC

In an emergency go to nearest emergency room or call 911.

Printed: 08/10/11

This card does not guarantee coverage. By using this card you agree to the release of medical information as stated in your Member handbook. To find a provider visit the website www.UHCCommunityPlan.com.

For Members: NurseLine: Report Fraud: 866-675-1607 800-542-8630 TTY 7 11 TTY 7 11 800-488-2917 866-675-1607

For Providers: www.uhccommunityplan.com Medical Claims: PO Box 9999, Kingston, NY, 99999-9999

Molina-Issued Medicaid Card

HEALTH NETWORK for LOUISIANA





Oberthur C.S. 04 12621 4/11

This card is for identification purposes. It is not proof of current eligibility.

EMERGENCIES - For emergencies, go to the nearest health care facility or hospital emergency room. Please notify your Primary Care Physician (PCP) of emergency care as soon as possible.

For questions about this Medicaid card or the Medicaid program, call 1-800-834-3333 for help.

PROVIDERS - To verify eligibility, swipe the card or call the Recipient Eligibility Verification System (REVS) at 1-800-776-6323.

To report possible Medicald fraud or abuse call 1-800-488-2917.

Change Password Change Account Info Provider Logout Help

Medicaid Eligibility Verification System Web Application

Navigation Menu

Search Response Print Friendly Main Menu Help

IMPORTANT: DO NOT use the "BACK" browser button - please use the navigation menu.

Note: For Technical Support, Please Contact (877) 598-8753

Note: For El igibi I i ty Informat ion Suppor t , Please Contact (800) 473-2783 or (225) 924-5040

Note: The date f ield formats have changed - enter date in MM/DD/YYYY format

Number

NOTE: CMS REGULATIONS LIMIT PROVIDING RECIPIENT ELIGIBILITY OLDER THAN THE MOST CURRENT 12 MONTHS.

Search Card Control **Card** 777999999999102 **Date of** 01/01/1984 **Plan** 02/08/2012

Type Number and Control Birth Date

Subscriber Information Provider Information

Name O'ANA, LOU Z Provider DHH EXEC MGMT/MOLINA SYSSTAF

Subscriber ID 1004022447801 **NPI** 9999999995

Date of Birth 01/01/1984 **Submitter ID** 2252166370

Sex Male

DOB

Address C/O UNISYS

BATON ROUGE LA 70809-0000

For name or address discrepancies, recipients must call LA Medicaid-Eligibility Hotline 1-877-252-2447.

Health Benefit Plan Coverage

Benefit	Service Type Code	Insurance Type	Plan Coverage Description	
Active Coverage	Health Benefit Plan Coverage	Medicaid	Eligible for Medicaid on Plan Date. Plan Begin Date 07/01/1999	
Benefit Description	Health Benefit Plan Coverage	Medicaid	PREFERRED LANGUAGE: ENGLISH	
Managed Care Coordinator	Medical Care	Medicaid	BAYOU HEALTH PLAN Benefit Begin Managed Care Organization Telephone	01/01/2012 COMMUNITY HEALTH SOLUTIONS OF (888) 982-4752
Active Coverage		Medicaid	Medical Care, Chiropractic, Dental Care, Hospital, Emergency Services, Pharmacy, Professional (Physician) Visit - Office, Vision (Optometry), Mental Health, Urgent Care	

Please Note: Individual coverage level applies to all benefits.

Request Reference 141313520120208011638 **Response Reference** 201202080000029

Number Number

Transaction run on 02/08/2012 at 01:16:38 CT by LAMedicaid - Louisiana Medicaid