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# Sample Medicaid Card - North Carolina (NC)

**THIS DOCUMENT CONTAINS FLUORESCENT FIBERS, FLUORESCENT ARTIFICIAL WATERMARK AND IS PRINTED ON CHEMICAL REACTIVE PAPER**

**MEDICAID IDENTIFICATION CARD**

N.C. DEPT. OF HEALTH AND HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE

**01-01-05**    **01-31-05**    **VALID FROM 01-01-05 THRU 01-31-05**

P.O. Box 111  
Any City, NC  
Zip=12345

CAP	COUNTY CASE NO.	ISSUANCE	PROGRAM	CLASS
	123456	99364R	AAF	N

RECIPIENT I.D.	ELIGIBLES FOR MEDICAID	INS.NO.	BIRTHDATE	SEX
900-00-0000K	Jane Recipient Carolina ACCESS Provider 123 Any Street Any City, NC 12345 555-5555	1	12-17-73	F

CASE I.D. 10847667  
CASEHEAD Jane Recipient

**ELIGIBLE MEMBERS**

ENG. NO.	NAME CODE	POLICY NUMBER	TYPE
1		Medicare-B	
2	091	123456789	

Jane Recipient  
900-00-0000K

Carolina ACCESS Enrollee  
Jan 2005 AAF11    10847667 101  
123 Any Street  
Any City, NC 12345

SAMPLE

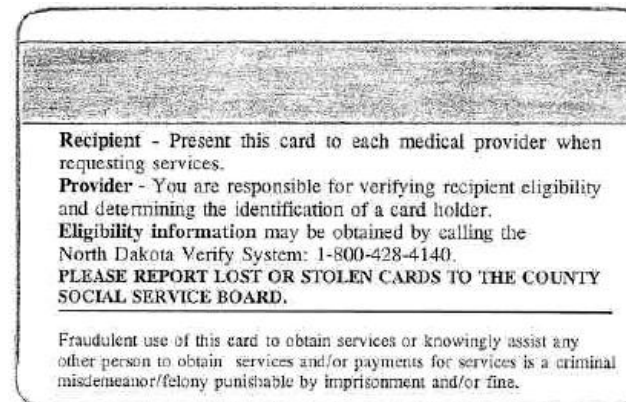
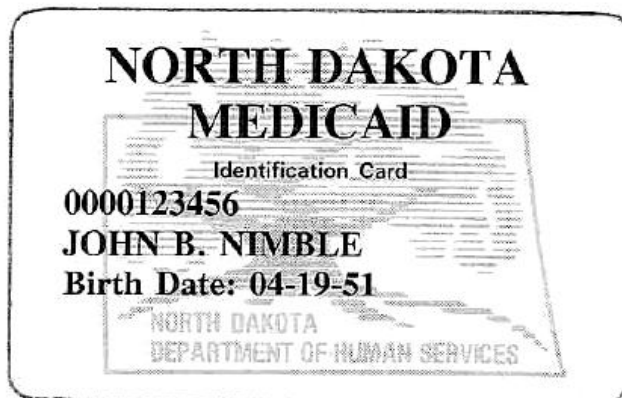
RECIPIENT (Signature) Jane Recipient (Not valid unless signed)

MISUSE MAY RESULT IN FRAUD PROSECUTION

5006 DMS3005 (REV 8/99)

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## Sample Medicaid Card - North Dakota (ND)



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## Sample Medicaid Card - Nebraska (NE)

<b>NEBRASKA</b>		ISSUE DATE
RxBIN 013766		<b>00/00/0000</b>
RxPCN P063013766		ID NUMBER/DATE OF BIRTH
RxGRP NEBMEDICAID		
<b>Susan B. Individual</b>	<b>523000000-01</b>	<b>11-12-68</b>
<b>John M. Individual</b>	<b>523000000-02</b>	<b>03-06-00</b>
<b>Mary K. Individual</b>	<b>523000000-03</b>	<b>07-14-07</b>
NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES		

**THIS CARD DOES NOT GUARANTEE ELIGIBILITY.**

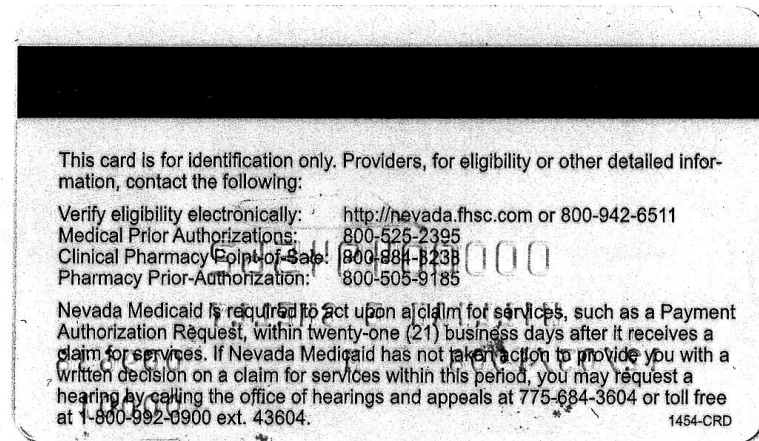
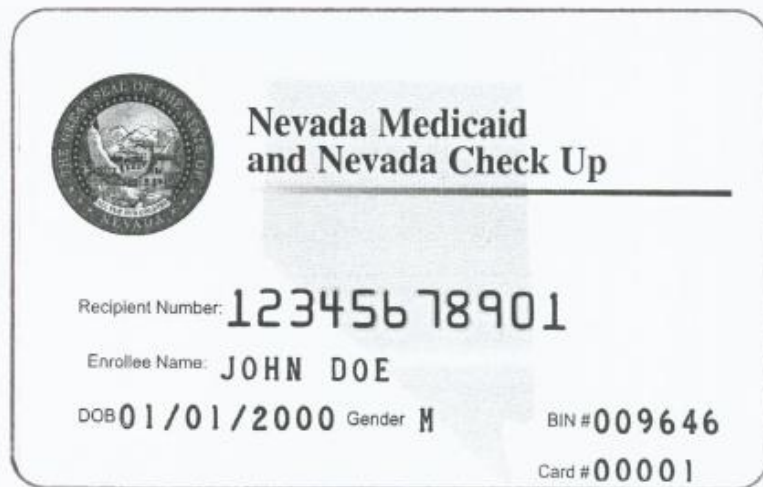
**FOR CLIENT:**  
**This is your permanent Medicaid ID card. Keep this card.** To verify your current eligibility for Medicaid, call toll-free at 800-383-4278 (in Lincoln 323-7455). If you are enrolled in Managed Care, you can verify your information by calling 888-255-2605 (in Lincoln, 471-7715). If your card is lost or stolen, call your caseworker.

**FOR PROVIDER:**  
**Eligibility must be verified.** To verify eligibility and obtain information regarding claims submission, call NMES at 800-642-6092 (in Lincoln, 471-9580); log-on to [www.dhhs.ne.gov/med/internetaccess.htm](http://www.dhhs.ne.gov/med/internetaccess.htm); or call the Medicaid Inquiry Line at 877-255-3092 (in Lincoln, 471-9128).

This card is non-transferable and is for identification only and is not a guarantee of benefits or eligibility. Any fraudulent or unauthorized use of this card is strictly prohibited and punishable by law.

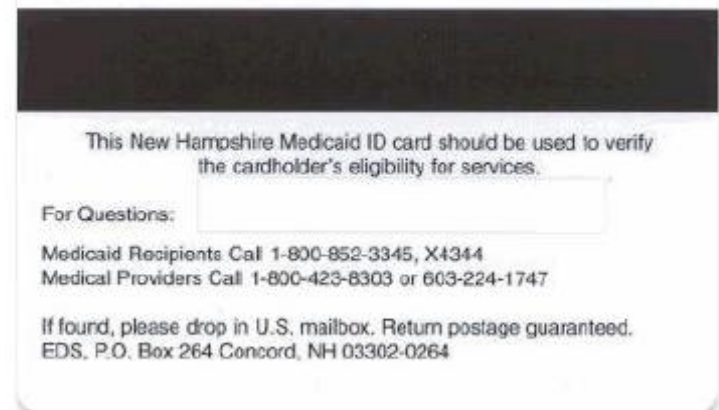
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## Sample Medicaid Card - Nevada (NV)



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## Sample Medicaid Card - New Hampshire (NH)



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## Sample Medicaid Card - New Jersey (NJ)



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

For questions regarding your health insurance program, contact the NJ FamilyCare Call Center at 1-800-356-1561.


When reporting a lost or stolen card, call 1-877-414-9251.

PROVIDERS – To verify eligibility **swipe** this card through the card reader provided by your eligibility vendor; **inquire online** at [www.njmmis.com](http://www.njmmis.com) or **call** the Recipient Eligibility Verification System (REVS) at 1-800-676-6562.

To report possible fraud or abuse, please call 1-888-9FRAUD5 or 1-888-937-2835.

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## Sample Medicaid Card - New Mexico (NM)

 <b>State of New Mexico</b> <b>Human Services Department</b> <u>Medicaid Identification Card</u>	<b>Card Control#</b> 11111111	<b>Date Issued</b> 07/01/2003
	<b>Client Name</b> ID Card #: 0000000000	<b>Date of Birth:</b> 01/01/2001

**Recipient** – Show this card to each medical provider. This card can only be used for services for the recipient identified on the card.  
For the HSD/Medicaid help desk call toll-free 1-888-997-2583

**Provider**  
Automated Voice Response line 1-800-820-6901  
Eligibility Help Desk: 1-800-705-4452  
Provider Services: 1-800-299-7304

**Pharmacy**  
POS Help Desk: 1-800-365-4944 Fee for service only

Fraudulent use of the card to obtain services or payment for services is a criminal offense punishable by fine and/or imprisonment.

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## Sample Medicaid Card - New York (NY)

