Examples of Medicaid Identification Card

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

MEDICAID IDENTIFICATION CARD

01-01-03
P.O. Box 111
Any City, NC
Zip=12345

CASE I.D. 10847667
CASEHEAD Jane Recipient

ELIGIBLE MEMBERS

Jane Recipient

900-00-0000K

01-31-03

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

CAP	COUNTY CASE NO.	ISSUANCE	PROGRAM	CLASS	VALID FROM	VALID THRU
	123456	99364R	MRF	N	01-01-03	01-31-03

RECIPIENT I.D.	ELIGIBLES FOR MEDICAID	INS.NO.	BIRTHDATE	SEX
900-00-0000K	Jane Recipient		12-17-73	F

SAMPLE

INS.NO.	NAME CODE	POLICY NUMBER	TYPE

MISUSE MAY RESULT IN FRAUD PROSECUTION

Jan 2003 MRF11 10847667 101
Jane Recipient
123 Any Street
Any City, NC 12345

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

5005 DMA5005 (REV 8 99)

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