

ANNUAL MEDICAID IDENTIFICATION (MID) CARD

This is your new Medicaid Identification card. This card is issued yearly. **YOU WILL NOT RECEIVE A MONTHLY CARD.** Each person in the case will receive a separate card. You may receive a new card if:

- you change your Carolina ACCESS Primary Care Provider
- there is a name change in your case

Recipients of Special Assistance and Work First will still receive their checks monthly but this is your yearly Medicaid Identification card. You will not receive a Medicaid Identification card with your check.

When you visit a medical provider you should have with you:

- your Medicaid Identification card
- other identification (for adults)
- any other insurance cards, including Medicare

The Medicaid Identification card is **not** proof of Medicaid eligibility.

FOR MORE INFORMATION, PLEASE READ THE BACK OF THIS LETTER

ANNUAL MEDICAID IDENTIFICATION CARD, CONTINUED

Your county Department of Social Services (DSS) sent you a letter when you first became eligible for Medicaid telling you what type of Medicaid you have and how long it lasts. It is the responsibility of the medical provider to verify if you are eligible for Medicaid covered services.

If your Medicaid Identification card is lost, destroyed, or stolen, please contact the local county DSS so they can order a replacement card for you. If you become ineligible for Medicaid **do not** throw the card away. You may become eligible for Medicaid again and need the card.

Use of the card by anyone not listed on the card is fraud and punishable by a fine, imprisonment, or both. **For questions about your Medicaid coverage and/or to report Medicaid fraud, waste or program abuse, please contact CARE-LINE at 1-800-662-7030 or locally call 919-855-4400.** If you have questions about your medical home/primary care provider with Community Care of North Carolina or Carolina ACCESS or you need to request a change in your primary care provider, call your county Department of Social Services (DSS).

Immediately return the card to the county DSS if a Medicaid recipient moves or dies. Notify your worker at DSS within 10 calendar days of any changes in your situation.

You may ask for a review if Medicaid denies prior approval for a service or if you are billed by a provider who did not tell you that you would be responsible for paying the bill. To ask for a review, write to DMA, 2501 Mail Service Center, Raleigh, NC 27699-2501 within 60 days of receiving the bill.