

**ID CARD SAMPLE**

**Product:** MEDICARE






**Platform:** Amisys 6

**Contract:** H4158-001

**State:** Ohio

**Branding:** Wellcare By Buckeye  
Health Plan

**Plan Year:** 2026

  <small>Next Generation MyCare</small>	<p>By  <b>buckeye health plan.</b></p> <p><b>Wellcare Buckeye MyCare Ohio Dual Align (HMO D-SNP)</b> <i>An Integrated Medicare/Medicaid Plan</i></p> <p><b>MEMBER ID#:</b> C12345678-01 <b>MMIS NUMBER#:</b> 0123456789012 <b>PLAN#:</b> H4158-001-000 <b>ISSUER #:</b> (80840) 9151014609</p>
<p><b>Member:</b> SAMPLE A SAMPLE</p>	
<p><b>2026</b></p>  <small>Member portal</small>	<p><i>This card combines Medicare and Medicaid coverage</i></p> <p><b>PCP:</b> Last Name, First Name <b>PCP Phone:</b> T-XXX-XXX-XXXX <b>MEMBER CANNOT BE CHARGED</b> <b>PCP / Specialist Office Visit:</b> \$0 <b>Co-pays:</b> \$0</p>
<p><b>Effective Date:</b> 01/01/2026 <b>Card Issued:</b> 10/15/2025</p>	<p> <small>Prescription Drug Coverage</small></p> <p><b>RXBIN:</b> 610014 <b>RXPCN:</b> MEDDPRIME <b>RXGRP:</b> 2FFA</p>



Member Services / Care Management	1-855-445-3562 (TTY: 711)
Behavioral Health Crisis Line	988 (TTY: 711)
24-Hour Nurse Advice Line	1-855-445-3562 (TTY: 711)
Centene Vision / Dental Services	1-855-659-6663 (TTY: 711)
Provider Services / Pharmacy Prior Auth	1-833-998-4892 (TTY: 711)
Pharmacist Only	1-833-750-4433 (TTY: 711)

**Medical Claims:** Wellcare By Buckeye Health Plan Attn: Claims P.O. Box 9700 Farmington, MO 63640-0700 Payor ID: 0021583

**Part D Claims:** Wellcare By Buckeye Health Plan Attn: Medicare Part D Member Reimbursement Dept. P.O. Box 31577 Tampa, FL 33631-3577

**FOR EMERGENCIES:** Dial 911 or go to the nearest Emergency Room (ER). If you are not sure if you need to go to the ER, call the 24-Hour Nurse Advice Line.

[go.wellcare.com/BuckeyeOH](https://go.wellcare.com/BuckeyeOH)