



Your Guide to Better Health.

## Buckeye Health Plan - MyCare Ohio

Member Name: <Cardholder Name> Health Plan: < Card Issuer Identifier>

MMIS Number: < Medicaid Recipient ID#2>

PCP Name: <PCP Name> PCP Phone: <PCP Phone>

RX CLAIMS PROCESSOR: RXADVANCE®

PA FAX: 1-877-386-4695 PHARMACY HELP DESK

NUMBER: 1-800-681-5632

BIN: 004336

BuckeyePCN: MCAIDOH RXGroup: RX5495

TFN-Help Desk:

1-800-393-2313

## \* Buckeye Medicaid Member Only \*

In an emergency, call 9-1-1 or go to the nearest emergency room (ER) or other appropriate setting. If you are not sure if you need to go to the ER, call your PCP or the 24-Hour Nurse Advice line.

 Member Services:
 866-549-8289, TTY: 711
 Eligibility Verification:
 <866-246-4358>

 Behavioral Health Crisis:
 866-549-8289>
 Pharmacy Help Desk:
 1-844-201-1984

 Care Management:
 686-549-8289>
 Claim Inquiry:
 <866-246-4358>

 24-Hour Nurse Advice:
 866-549-8289

Website: http://mmp.BuckeyeHealthPlan.com
Send Medicaid claims to: Buckeye Health Plan
PO Box 6200
Farmington, MO 63640

TTY: 711

\*Note: Member is eligible for Medicare through original Medicare or another health plan. You must submit Medicare claims to the member's primary care insurance.