Medical Assistance and MinnesotaCare

Identification card

PLEASE DETACH YOUR IDENTIFICATION CARD

PrimeWest
HEALTH

3905 Dakota St
Alexandria, MN 56308
www.primewest.org

Member:
ID #:
Issuer: (80840)
Care Type:
Med Grp:
Svc Type: Medical/Dental/Rx
RxGrp: PRW02
RxBIN: 017142 RxPCN: MNPROD1

Card issued:

Minnesota Health Care Programs

Minnesota Health Care Programs

Minnesota Health Care Programs

Minnesota Health Care Programs

Member:
ID #:
Issuer: (80840)
Care Type:
Med Grp:
Svc Type: Medical/Dental/Rx
RxGrp: PRW02
RxBIN: 017142 RxPCN: MNPROD1

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<PrimeWest Health Product>

Identification card

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For Members (calls to these numbers are free)

For life-threatening emergencies, call 911

Member Services: 1-866-431-0801 **TTY:** 1-800-627-3529 or 711

Medical Questions: 1-866-201-4601 (24-Hour Nurse Line)

Complaints: 1-866-431-0801 **State Ombudsman:** 1-800-657-3729 **Appeals:** Department of Human Services, PO Box 64941, St Paul, MN 55164-0941

For Providers (calls to these numbers are free)

Provider Call Center: 1-866-431-0802 Utilization Review: 1-866-431-0803

Precertification (including after providing emergency care): 1-866-431-0803

Notification of hospital admission required within 1 business day

EDI submission: www.primewest.org/providers Pharmacists: 1-800-788-2949 (MedImpact) Pharmacy Claims: MedImpact Healthcare Systems

Fax: 1-858-549-1569

PO Box 509098, San Diego, CA 92150-9098

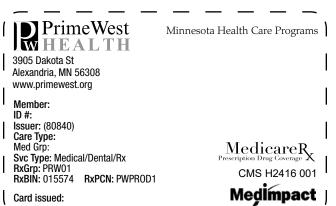
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<PrimeWest Health Product>

Minnesota Senior Health Options (MSHO)

Identification card





PLEASE DETACH YOUR IDENTIFICATION CARD

PrimeWest Senior Health Complete (HMO SNP)

Identification card

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For Members (calls to these numbers are free)

For life-threatening emergencies, call 911

Member Services: 1-800-366-2906 TTY: 1-800-627-3529 or 711

Medical Questions: 1-866-201-4601 (24-Hour Nurse Line)

For Providers (calls to these numbers are free)

Provider Call Center: 1-866-431-0802 Utilization Review: 1-866-431-0803

Precertification (including after providing emergency care): 1-866-431-0803

Notification of hospital admission required within 1 business day

EDI submission: www.primewest.org/providers Pharmacists: 1-877-391-9294 (MedImpact) Pharmacy Claims: MedImpact Healthcare Systems

Fax: 1-858-549-1569

PO Box 509108, San Diego, CA 92150-9108

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PrimeWest Senior Health Complete (HMO SNP)

Special Needs BasicCare (SNBC)

Identification card

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PrimeWest
HEALTH

3905 Dakota St
Alexandria, MN 56308
www.primewest.org

Member:
ID #:
Issuer: (80840)
Care Type:
Med Grp:
Svc Type: Medical/Dental/Rx
RxGrp: PRW01
RxBIN: 015574
RxPCN: PWPR0D1

Card issued:

Minnesota Health Care Programs

Minnesota Health Care Programs

Minnesota Health Care Programs

Medicare Programs

Medicare Programs

Medicare Programs

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Prime Health Complete (HMO SNP)

Identification card

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For Members (calls to these numbers are free)

For life-threatening emergencies, call 911

Member Services: 1-877-600-4913 TTY: 1-800-627-3529 or 711

Medical Questions: 1-866-201-4601 (24-Hour Nurse Line)

Complaints: 1-877-600-4913 **State Ombudsman:** 1-800-657-3729 **Appeals:** Department of Human Services, PO Box 64941, St Paul, MN 55164-0941

For Providers (calls to these numbers are free)

Provider Call Center: 1-866-431-0802 Utilization Review: 1-866-431-0803

Precertification (including after providing emergency care): 1-866-431-0803

Notification of hospital admission required within 1 business day

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Prime Health Complete (HMO SNP)