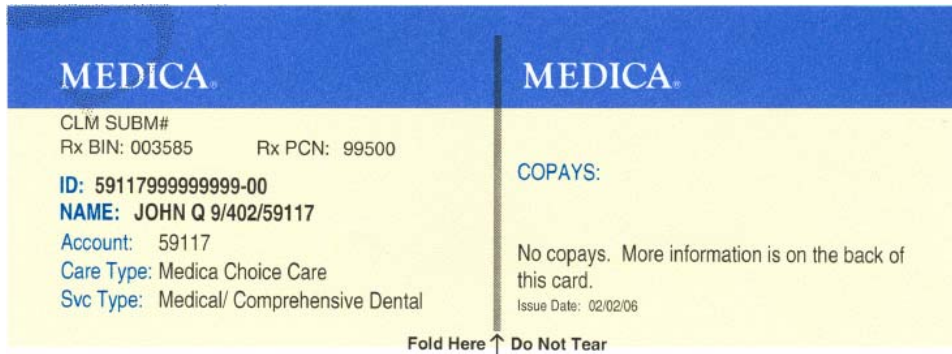


## Medica Provider Fact Sheet on Medica Choice Care<sup>SM</sup>

### Overview

Medica Choice Care is an open access product for recipients of Medical Assistance and General Assistance. No premiums or copayments were charged to members of this plan prior to 10/1/03. Copayments do apply to some services after 10/1/03 (changes made by DHS).

### Identification Card



### Networks

- Medica’s Medical Assistance (MA) and General Assistance Medical Care (GAMC) recipients use the Medica Choice open-access provider network, except for park Nicollet Clinics.
- Members are encouraged to select a primary care clinic, though no referrals are required.
- Access to inpatient services and certain outpatient services is restricted to facilities that participate with these products. Services (unless emergency/urgent care) outside the network require prior notification, except if the member has primary insurance coverage through a commercial plan or Medicare. Medica would not require prior notification if the primary insurance deemed the service as covered.

### Group Numbers

- 59000 – 59999

### Medica Choice Care Benefits

Medica Choice Care has varying levels of coverage, depending upon a member’s status:

- **Medical Assistance for children, pregnant women and nursing home residents.** Members who are children, pregnant women or nursing home residents will have no copays assessed for covered services.
- **Medical Assistance for adults.** Adult members who are not pregnant women, however are eligible for medical assistance will have some copays, depending upon the service provided.
- **General Assistance Medical Care.** Adult members, ages 21-64, who do not qualify for medical assistance, are not pregnant and have no dependents will have some copays, depending upon the service provided.

**Claim Submission**

Claims should be submitted to:

Medica  
PO Box 30990  
Salt Lake City, UT 84130

Electronic payer ID 94265

10/07

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