



State of New Jersey

DEPARTMENT OF HUMAN SERVICES  
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES  
CN 712  
TRENTON, NEW JERSEY 08625

MEDICAID COMMUNICATION NO. 94-9

DATE: May 4, 1994

TO: County Welfare Agency Directors  
Medicaid District Offices

SUBJECT: Modification to the Medicaid Eligibility Identification Card

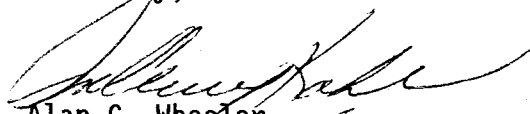
The Division of Medical Assistance and Health Services is pleased to introduce a security modification to the Medicaid Eligibility Identification Card (Form FD 73/178) (Rev. 4/94). The blue and white card will essentially remain the same, however, it will now contain a shaded area located where eligibility and other information is printed. This shaded area is a security feature which is designed to deter illegal tampering of the printed material. When an original card is photocopied, the word "VOID" will appear throughout the shaded area. As a result, any card which contains altered information will be easily identifiable. An example of the photocopied card is attached.

The new card will be phased in with the next monthly system generated production cycle. However, existing stock of the old card will continue to be used largely for presumptively eligible pregnant women and for initial and replacement cards issued by Medicaid District Offices and County Welfare Agencies. Therefore, you are advised to continue to use existing stock until it is exhausted. At the reorder point, we will send you a supply of the new form.

We have advised providers that, in accordance with N.J.A.C Chapter 10:49-2.13, the Form FD73/178 represents the primary proof of eligibility. Accordingly, we encouraged them not to accept photocopies and should a photocopy be presented, to verify eligibility through REVS and/or the patient's identification through another source, as appropriate.

Any questions concerning the new Medicaid Eligibility Card may be directed to Douglas Eide, Office of Eligibility Policy and Operations, (609) 588-2936.

Sincerely,

  
Alan G. Wheeler  
Acting Director

AGW:Em

Attachment

c Marion Reitz, Director  
Division of Family Development

Nicholas R. Scalera, Director  
Division of Youth & Family Services

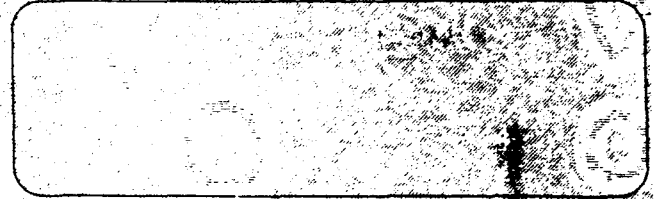
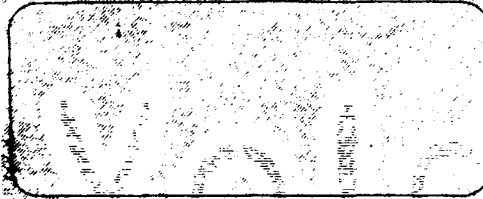
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STATE OF NEW JERSEY  
DEPARTMENT OF  
HUMAN SERVICES  
DIVISION OF  
MEDICAL ASSISTANCE  
AND  
HEALTH SERVICES



MEDICAID ELIGIBILITY IDENTIFICATION CARD

8265004



ADDITIONAL HEALTH INSURANCE

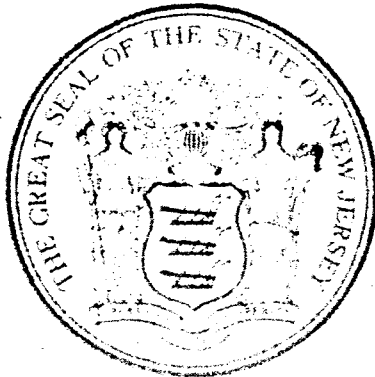
HSP (MEDICAID) CASE NO. PERSON NO.

VALID FROM

TO

SOC. SEC. ACCT. NO.

DATE OF BIRTH



USE THIS CARD WHEN YOU NEED MEDICAL SERVICES

\_\_\_\_\_  
RECIPIENT'S SIGNATURE