

Guide to Reading a Member ID Card

Wellcare by Superior HealthPlan and Wellcare offer multiple Dual Special Needs Plans (D-SNPs) in Texas for members who are eligible for both Medicare and Medicaid. As a provider, understanding the differences between these plans and how to read member ID cards is essential for accurate identification and service delivery.



What to Look for on the ID Card

Applicable Integrated Plans (AIPs)

All members enrolled in an AIP Dual Special Needs Plan (D-SNP) will receive a single, integrated Wellcare by Superior HealthPlan member ID card covering both their Medicare and Medicaid benefits.

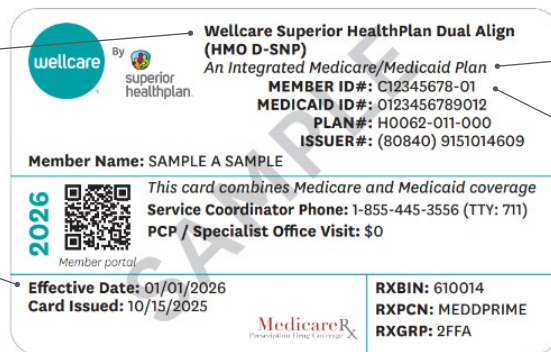
Key details include:

Plan name:

Wellcare Superior HealthPlan Dual Align (HMO D-SNP)

Plan begins :

January 1, 2026



Label:

Integrated Medicare/Medicaid Plan

Member ID numbers:

The ID card includes both a Medicare ID and Medicaid ID. The Medicare ID is the primary ID providers will use when interacting with our plan.

Other aligned and unaligned D-SNP Plans

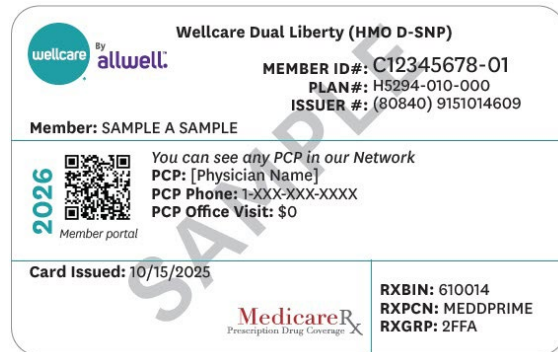
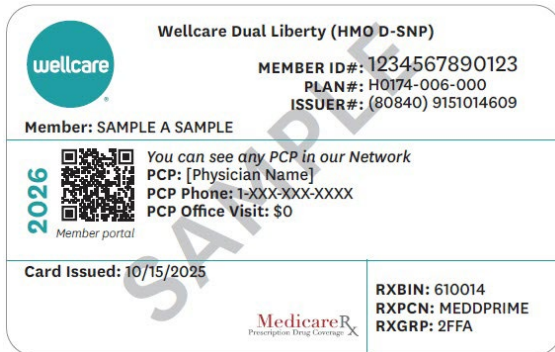
Members in our other D-SNP plans will receive **two separate ID cards, one for Medicare and one for Medicaid**. Both cards must be presented together at the time of service. Importantly, these members may have their Medicaid benefits with our affiliated Medicaid plan, Superior HealthPlan, or their Medicaid benefits may be with another managed care organization.

(continued)

Key details include:

The Wellcare Medicare plan name on the ID will include one of the following:

- Wellcare Dual Liberty (HMO D-SNP)
- Wellcare Dual Access (HMO D-SNP)
- Wellcare Dual Liberty Sync (HMO D-SNP)



Refer to the Attachments section of the Medicaid Provider Manual for a for a current link to the member ID cards at superiorhealthplan.com/providers/training-manuals.html or scan the QR Code.



Important Reminder: ID cards contain essential details to help you confirm their enrollment in the plan. Presentation of an ID card does **not guarantee eligibility**. Always verify the member's eligibility **on the date of service** using your standard verification process.

Need Help?



If you have questions about these plans, referral requirements, or eligibility verification, our **Provider Services team** is here to support you. Contact us at: **1-855-445-3572** (phone number effective 12/1/25).

We value your partnership and appreciate the high-quality care you provide to our members.