

Mobile application user guide

With the Mercy Care mobile application, you can get on demand access to the tools you need to stay healthy. Find a doctor, access member resources, or change your Primary Care Provider (PCP) at any time, from anywhere. It's easy. Just download the app to your mobile device or tablet.

Mobile app features

- Find a Provider
- Change your PCP
- View your claims
- Message Member Services for questions or support
- Update your phone number, address and other member details

Download App

To get the mobile app, you can download it from **Apple's**

App Store or **Google's Play Store**. It's free to download. This app is available on certain devices and operating systems (OS).





To access any of the menu items, you will need to register.

- If you have registered for the Member Portal on your health plan's website you are already registered.
- If you have not, you can register through the app.
- Just have your member ID card with you to register.



Device	OS Version
All Apple Devices	7.1 and above
All Android Devices	4.2 and above

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1. Splash page



2. Sign in



If you have already registered for the secure member portal on the health plan website, enter your **user name** and **password** that you use for the secure member portal.

If you have not registered yet, you will need to create an account. You will need your **member ID number**, **last name**, **date of birth** and **ZIP code** to register.

3. Welcome pages





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4. Menu



5. Find a Provider



5.1 Search Results





6. My Messages

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\bigcirc	Member Services	Your Well-Being Assessment has been Submitted	
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7.1 My Pharmacy Claims



7. My Medications

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7.2 Pharm. Claim Results



8. Member Resources

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	Member materials		
Your need	ds are our top priority	'	Y
Mercy Care			N
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Notice of N	on-Discrimination for Mercy	<u>v Care</u>	N
<u>Advantage</u>			A
Member	handbooks		
Evidence	e of Coverage		Ν
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Applicat	ion user guide		N E
Health r	esources		
Commun	nity resources		

Member materials

8.1 Member Handbook

9:41 AM

mercy care

Your needs are our top priority

Mercy Care 7 a.m. - 6 p.m. Mon - Fri 602-263-3000, 1-800-624-3879 (toll free), TTY 711

Mercy Care Advantage 8:00 a.m. - 8:00 p.m., 7 days a week 602-263-3000, 1-800-624-3879 (toll free), TTY 711

Notice of Non-Discrimination for Mercy Care

Notice of Non-Discrimination for Mercy Care Advantage

Member handbooks

Mercy Care

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English | Español | العربية)

Mercy Care Long Term Care English / Spanish

Evidence of Coverage

Formulary

8.2 Evidence of Coverage



8.3 Formulary



Health resources

Community resources

8.4 App User Guide

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Evidence	of Coverage		
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Health re	esources		

8.6 Community Resources



8.5 Health Resources

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	Evidence of Coverage
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<u>Medline Plus</u> is the National Institutes of Health's website for patients and their families and friends. It's produced by the National Library of Medicine. You'll get the health information you need in language you

9. My Profile

4	Mercy Care
Member Profile	
Member ID	
First Name	
Last Name	
Street Address	
City	Phoenix
State	AZ
ZIP Code	85031
Email ID	
Date of Birth	
Cell phone	
	Edit
Eligibility Inform	mation
Benefit:Mercy Care	Advantage, Member
Please contact mem	her services for eligibility

9.2 Request PCP Change

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	Mercy Care	
Change	Primary Care Physician	
rom		
Tom.	and the second se	
Category:		
General		
Subject:		
Change Pri	mary Care Physician	
Message:		
If you have a the office wh benefits. Re so we may o can contact your ID card	an address change, please here you applied for Medica emember to list your phone call you with any questions. Member Services at the nu I for assistance.	contact aid number You imber on
	Send Reset Form	

9.1 Request Profile Update

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Request	Member Information Ch	ange
From:		
Section Section	and the second se	
Category:		
General		
Subject:		
Request Mem	ber Information Chang	le
Message:		
If you have an the office whe benefits. Ren so we may ca can contact M your ID card fo	address change, plea re you applied for Med nember to list your pho Il you with any questior ember Services at the or assistance.	se contact icaid ne number 15. You number on
	Send	

10. My Claims

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Searc	n Claims	3
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Claim Type		
Claim Typ	00	
Claim Stati	US	
Claim Sta	itus	
Servio	ce Date Range	
1.000		
Date From	(mm/dd/yyyy)	
Date To (m	m/dd/vvvv)	
	Search	
	Reset Form	
	М тинсу сала	
If you wa	nt more information, or need help, call	us at
1-602	2-263-3000 or 1-800-624-3879. TTY 7	11
C	All Rights Reserved.	
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10.1 Claims Results



Enter your claim type, claim status and your beginning and ending service dates.

Enter dates as: mm/dd/yyyy. Then hit **Search** button.

11. About Us



12. Log Out

In the menu, when you are done making changes, sending requests or viewing claims ALWAYS remember to hit **Log Out**.