Is your culture respected and understood? If not, speak up!

Your culture, beliefs, language, and values shape who you are. Some of our providers and all our associates are trained and have learned about many cultures. This way they can better understand your needs and how to approach your health and wellness journey.

Your provider may not know about your cultural needs. Please speak up if you feel misunderstood or feel like your cultural needs are not being met.

— Ask your doctor to explain your treatment in words or language you understand.
— Don’t be afraid to ask about alternative treatment that may be part of your culture.
— Make sure that you are asked about your cultural needs. If not, share them and make sure that those needs are included in your medical chart.

If you feel as though you are not receiving culturally competent care, please let us know. Call an iCare Member Advocate/Member Rights Specialist at 1-800-777-4376 extension 1076 (TTY: 711) to express what you need and how you can feel understood.
Dear iCare BadgerCare Plus or Medicaid SSI Member:

During the COVID–19 pandemic, the federal government created temporary policies which allowed the Wisconsin Department of Health Services (DHS) to temporarily change program rules to help protect the health and safety of members. As a result, most members of our BadgerCare Plus or Medicaid SSI programs have kept their benefits since March 2020. The federal government is now ending these temporary policies. This means, for most members, if you don’t complete your Medicaid renewal you will have a gap or loss of your health care coverage.

WHAT TO EXPECT — WATCH YOUR MAIL, READ YOUR NOTICES, AND ACT!

To see if you can keep getting benefits through BadgerCare Plus or Medicaid SSI, you need to complete a renewal. DHS will send members a packet in the mail 30 days (one month) before your renewal date. The packet will include instructions on how to complete your renewal.

Please note: Your benefits will continue at least until your renewal deadline.

After DHS sends the renewal packet and you don’t renew, they will send you a reminder by mail, by email or text (if they have your cell or email information on file).

If you have a smart phone or mobile device and installed and logged into the MyACCESS Wisconsin app, and set up permissions to receive push notifications, you will receive a reminder. If you are not, download and install the app today! If you move during the renewal process, it’s a great way to update your address and receive push notifications on your mobile device when you need to take important actions with your account, like your renewal!

HOW TO COMPLETE YOUR RENEWAL

The easiest and fastest way to complete your renewal and keep your mailing information current is online through your ACCESS account at www.access.wi.gov.

Create an account if you don’t have one. Once you log-in, look for the benefits renewal “alert”.

You can also complete your Medicaid renewal, although it may take longer, by:

» Phone: You can renew by calling your income maintenance or tribal agency. Your agency’s phone number can be found at www.dhs.wisconsin.gov/forwardhealth/imagency.

» In-person: Contact your local agency to set up an appointment. Wait times may be longer during this time. Find your local agency at www.dhs.wisconsin.gov/forwardhealth/imagency.

» Mail: Fill out and mail a paper application to your agency. Your agency’s address can be found at www.dhs.wisconsin.gov/forwardhealth/imagency.

Additional information about renewing can be found at www.dhs.wisconsin.gov/forwardhealth/apply.htm

Members should not renew coverage until they get their renewal notification. If you have already completed your Medicaid renewal no action is needed.
After you renew, you will get a letter telling you if you qualify for benefits. If you qualify, you may remain a member of iCare.

If you are notified by DHS that you are not eligible to stay covered with BadgerCare plus or Medicaid SSI, you have the right to a Fair Hearing about your benefits. DHS will include information on the Fair Hearing process in your denial letter. Another option is to find a different health insurance plan. Ask your local agency for more information.

If you have questions about the renewal process, visit www.dhs.wisconsin.gov/forwardhealth/renewals.htm or call your local agency at the phone number listed on your renewal packet. If you have questions about your BadgerCare Plus or SSI Medicaid benefits package or coverage, call Member Services at 1-800-362-3002.

iCare is here for you and your family during this change. We are proud to serve thousands of members in Wisconsin. And now, as part of the Humana family, we can offer you even more. If you have questions about your benefits or coverage with iCare, we have staff that can help. Call the iCare Member Retention Hotline at 414-272-5621 (TTY: 711). The Member Retention Team is available Monday through Friday, 8:30 a.m. to 5:00 p.m.

Sincerely,
Tony Mollica
iCare Chief Executive Officer

Member Handbook Update

We want you to have easy access to resources that can help you get the most from your benefits. The member handbook is a useful tool to know about and use. With the member handbook you can learn about your health plan and what's available to you.

The handbook covers topics like:

» Member rights and responsibilities.
   This statement is available on our web site too. Visit www.iCareHealthPlan.org/MedicaidMemberRights.

» How to use your plan to get health care. Examples include choosing a primary care provider or how to get hospital or behavioral health services.

» How to request interpreter or language services and/or materials in formats to meet special needs.

» How to file a grievance or appeal.

» Cultural competency.

» Privacy Notice (see page 10 for more information).

» Covered and non-covered benefits.

The member handbook is updated every year. You can view the member handbook on our web site at www.icarehealthplan.org/MemDocs. Or you can request that a copy be mailed to you at no cost. Call Customer Service at 1-800-777-4376 (TTY: 711) or use the Hard Copy Request Form on our web site (www.icarehealthplan.org/hardcopy) to request one today.
Complete Your Health Risk Screening
The Health Risk Screening (HRS) is a questionnaire given by phone or by paper copy you fill out and return to iCare. It asks you about your health history and if you have any health care conditions.

Our Care Team will ask you to complete the HRS when you join iCare (within the first 60 days after you join). We do this so we can help match your current health care needs with the right providers, treatments, tests, and medications.

It is required that Medicaid SSI members take the HRS every year. This gives iCare the opportunity to check in to see how you are doing. We also want to know if any new health issues pop up so we can help you get the care you need. When it’s your time to complete your annual HRS, iCare will contact you.

BadgerCare members may also take the HRS every year, although it is not required.

**It is important that you talk with us so that you can get the care and services you need.**

If you have any questions about your iCare Medicaid benefits or would like to schedule a time to talk about your health care needs, please call 1-800-777-4376 (TTY: 711).

What is 988?
988 is the three-digit number for the National Suicide Prevention Lifeline. This shorter phone number will make it easier to remember and access mental health services. You can call, text, or chat 988 to be connected to trained counselors. The counselors will listen, understand how your problems are affecting you, and provide support. The 988 line is available at no cost. It is available 24/7. The previous Lifeline phone number (1-800-273-8255) will always remain available to people in emotional distress or suicidal crisis. To learn about 988, visit www.988lifeline.org/.

Nurse Advice Line is Here for You!
Questions about your health can come up any time. You can use the 24/7 Nurse Advice Line when you can’t speak to your primary care provider (PCP). A nurse can talk to you about your symptoms and answer questions about your health or medications. If you are sick or injured, they can also help you decide if you should go to your PCP, urgent care, or the emergency room. Call the Nurse Advice Line at 1-800-679-9874. Calls are free!
Take Care of Your Health

Getting regular checkups, screenings and immunizations may help prevent disease and help your doctor identify health problems early when they may be more treatable. These important services are included in your plan’s benefits. There are more covered preventive benefits. Contact your Care Coach for more information. Always talk to your doctor about what is right for you.

Mental Health Services. For people that have a behavioral health challenge like anxiety, depression, bipolar, schizophrenia and other mental illness, it can be difficult to manage alone and even harder if someone is also using alcohol or drugs to cope. We’re here to help. We will offer care management services so you can get the treatment and follow up care your need. We will support you through your recovery.

Colorectal Cancer Screening. This preventive measure is recommended for people once they reach age 50. Colonoscopies are standard for this screening; however, alternative testing may be an option for you. Talk to your doctor to learn more.

Breast Cancer Screening. Mammograms are x-rays of the breasts to look for cancer. Most of the time women survive breast cancer if it is found and treated early enough. Talk to your doctor about how often you should get a mammogram.

Flu Shot. Influenza (flu) vaccines protect against the most common flu viruses of the season. Most everyone six months and older should get a flu vaccine each season. This is especially important for older adults and people with chronic conditions. There are several types of vaccine. Ask your provider or pharmacist the best vaccine for you. Flu vaccines are free with your health insurance. You can get a flu vaccine at your provider office or pharmacy. The Vaccine Finder is a good resource for help, information and to find a vaccination site. Visit www.vaccines.gov/find-vaccines/.
Prescription Changes
During COVID, BadgerCare Plus and Wisconsin Medicaid had policies in place to make it easier for members to get their medicines. Those policies ended on December 1, 2022.
What you need to know:
» You may not be able to refill your medicines early.
» You may only be able to get a one-month (30-day) supply of some of your medicines.
» You may have a limit on the number of tablets allowed in a month for your medicines.
Ask your pharmacist if your medicines have changed.

DHS Expands Free COVID-19 Testing Program
Wisconsin households can get two free at-home COVID–19 self-test kits every month through the Say Yes! COVID Test web site www.sayyescovidhometest.org/. Each test kit includes five rapid antigen tests.
Self-testing allows for quick results to help people make decisions about their health. It also helps to prevent spreading the virus to others. Here are some tips:
» Take a test right away if you have symptoms of COVID–19.
» Test five days after you have been exposed to someone with COVID–19 even if they had a vaccine.
» Stay home for at least five full days if you test positive. Separate yourself from others and notify your close contacts.
» Contact a doctor, community health center, pharmacy, or the DHS free telehealth service to see if COVID–19 treatments may be recommended for you.
» If you test negative, you may need to take multiple tests over a span of a few days to reduce the risk of unknowingly spreading COVID–19.
» When using a self-test, practice repeat testing.
Stay up to date on vaccines and booster doses for the best protection against COVID. Get tested and stay home if you have symptoms. Seek treatment if you are at risk of getting sick. Visit the DHS web site (www.dhs.wisconsin.gov/covid-19/index.htm) for more information about COVID–19.
Behavioral Health Services
Sometimes an inpatient hospital stay is a necessary step in getting help with a behavioral health challenge. Anxiety, depression, bipolar, schizophrenia and other mental illness are common conditions. These conditions can be difficult to manage alone and even harder if someone is also using alcohol or drugs to cope.
If you are admitted to a hospital because of a behavioral health condition, we will outreach to you. We will offer care management services so you get the follow up care you need. We will also support you through your recovery. We can help with follow up appointments and rides. We can also connect you to education, community resources and other supports you need.
There is no cost to members to use this program. You can choose not to participate. We are here to help. If you would like more information, call us. To request this program, please call Customer Service at 1-800-777-4376 (TTY: 711). Customer Service is available 24 hours a day, 7 days a week. Our office hours are Monday through Friday, 8:30 a.m. to 5:00 p.m.

Complex Chronic Conditions
Having a high quality of life while managing multiple chronic conditions is a huge challenge. Examples of chronic conditions are diabetes, COPD, hypertension, mental illnesses and/or substance use disorders.
If you have a chronic health condition, it requires juggling many different providers and treatments. You also need to know how those treatments work together. It can be hard to understand.
Our case management teams are here to help. They will work with you to assess your needs. There are different levels of care management. Your team will help identify and place you in the level that is best for you. Your care team may help you establish health goals and overcome barriers to those goals. They can assist with provider referrals and care coordination. They can also assist with referrals to community resources.
There is no cost to members to use this program. It is an optional program. You can choose not to participate. If you join the program, you can opt out at any time.
To find out more, please call iCare Customer Service at 1-800-777-4376. TTY users call 711. Customer service is available 24 hours a day, 7 days a week. Our office hours are Monday through Friday, 8:30 a.m. to 5:00 p.m.
Concerned About Your Child’s Development?

As your child grows, they develop new skills. Skills such as taking their first step, smiling for the first time, and crawling are called milestones. A missed milestone could be a sign of a problem. That’s why it is important for your children to have a well-child visit. Seeing their doctor regularly helps them stay healthy, even if your child doesn’t seem to have any health problems. During visits with your child’s doctor you can ask questions and get advice.

Well-child visits are covered by iCare for BadgerCare Plus members. There is no cost to you. Your children need to be seen by their Primary Care Provider or Pediatrician for a well-child visit at the following ages:

» Newborn.
» 3-5 days of age.
» 1 month of age.
» 2 months of age.
» 4 months of age.
» 6 months of age.
» 9 months of age.
» 12 months of age.
» 15 months of age.
» 18 months of age.
» 24 months of age (2 years old).
» Every year from ages 3-21.

During a well-child visit, your provider will perform a screening to take a closer look at how your child is developing or ask you questions about your child. You may have your own questions you want to ask the doctor about your child. iCare recommends you ask about:

**Lead Screenings** — If your child is under 2 years old, ask your doctor to do a lead screening. Children with high blood lead levels or even low levels, can have problems with learning, understanding information, paying attention and hearing. Lead also affects a child’s developing brain. Your child should be screened for blood lead levels at 12 and 24 months of age.

**Immunizations** — Children should also receive their immunizations. Babies need immunizations like DTap, Polio, Varicella, MMR, Flu, HepA and HepB, PCV, Rotavirus and Hib. Adolescents (ages 7-18) should get their HPV, Tdap and Meningococcal. Other shots might be necessary if your child needs to catch up on missing vaccines or if certain health or lifestyle conditions put them at increased risk for serious diseases.

As a parent, you know your child best. If your child is not meeting the milestones for their age or you think there could be a problem with the way your child plays, learns, speaks, acts, or moves, talk to your child’s provider, and share your concerns. Don’t wait. Acting early can make a real difference!
iCare Mom and Baby Program

The iCare for Mom and Baby program offers care management services to pregnant members who need support during pregnancy and postpartum. We will work together to identify your needs and goals for care. iCare case management services can assist with the following:

» Referrals to providers.
» Care coordination with your providers.
» Referrals to community services.
» Breastfeeding and newborn needs.
» Education on before and after delivery care.
» Other goals or needs you have related to your health and the health of your baby.

Call us with questions about the program. We are here to offer support to you and your baby.

There is no cost to members to use this program. It is an optional program. You can choose not to participate. If you join the program, you can opt out at any time.

To find out if you are eligible for the iCare for Mom and Baby program, call Customer Service at 1-800-777-4376 (TTY: 711). We will ask you a few questions about your pregnancy to determine your specific needs and eligibility.

Family Planning

Are you planning to grow your family? iCare provides private family planning services to all members, including minors. If you do not want to talk to your primary care provider (PCP) about family planning, call Customer Service. We will help you choose an iCare family planning doctor who is different from your PCP. We encourage you to get family planning services from an iCare doctor so that we can better coordinate all your health care. However, you can also go to any family planning clinic that will accept your ForwardHealth ID card, even if the clinic is not part of iCare.
Fraud, Waste and Abuse
Do you think you did not get services iCare paid for? Do you think you may be a target of fraud, waste and/or abuse? Do you know someone who is causing fraud, waste and/or abuse? If you think that someone engaged in any form of health care fraud, waste and/or abuse, contact us:

» Go to our web site at www.iCareHealthPlan.org and click on “Report Fraud” at the top of the page.
» Write to iCare, Attention: Compliance Officer, 1555 N. RiverCenter Drive, Ste. 206, Milwaukee, WI 53212.
» Call the Humana Ethics Help Line at 1-877-584-3539 (1-877-5-THE-KEY).

When you contact us, providing us with as much information as possible helps us investigate. You can report and not give your name or phone number, but this can make investigating more challenging.

iCare’s Privacy Policy or Notice
The law says we must keep your health information private. The iCare Privacy Notice tells you what information we collect and how we use it. The Privacy Notice was updated in February 2023. To read the Privacy Notice, visit www.iCareHealthPlan.org/privacy. You can get a hard copy of our Privacy Notice. Ask us to mail you a copy by calling Customer Service at 1-800-777-4376 (TTY: 711).

If you have questions about the Privacy Notice you can write or call our Member Advocate/Member Rights Specialists at iCare, Attention: Member Advocate/Member Rights Specialist, 1555 North RiverCenter Drive, Suite 206, Milwaukee, Wisconsin 53212. Call us at 1-800-777-4376 ext.1076 (TTY: 711). Our office hours are Monday through Friday, 8:30 a.m. to 5:00 p.m. If you do not have any questions, you do not have to do anything.

Need Help with Your Internet Service Bill?
Is it hard to afford internet service? There is a long-term government program that may help. It is called the Affordable Connectivity Program. Your household income should be below 200 percent of the Federal Poverty Guidelines to be eligible. Or you need to have a member of the household who meets at least one of the rules listed on www.fcc.gov/acp. The program can also help Tribal communities. There may be more help for people living on Tribal lands.

Go to www.affordableconnectivity.gov/ to apply or print out a mail-in application. If you are approved, contact your internet service provider and have the discount applied to your bill. You will need to sign up for service if you don’t have an internet service provider. Some companies may have their own application that they will ask you to complete. For more information and full details, visit www.affordableconnectivity.gov or call 1-877-384-2575.
ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-777-4376 (TTY: 1-800-947-3529).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-777-4376 (TTY: 1-800-947-3529).


УВАГА: Якщо ви говорите на польській мові, вам доступні безкоштовні послуги перекладу. Зв’яжіться з номером 1-800-777-4376 (телефон для глухих: 1-800-947-3529).


Health and Wellness or Prevention Information

Are you a Dual Member?

Are you a “dual member”? Being a “dual member” means that you have a Medicare and Medicaid health plan. A dual eligible health plan helps your benefits work together. You may be eligible to be an iCare dual member. To be a dual member with iCare, you need to have iCare Medicaid and eligible for Medicare.

If you become eligible for Medicare, iCare may mail you a letter. The letter will explain your Medicare coverage options. One choice is to become a member of iCare Medicare Plan (HMO D-SNP). iCare Medicare Plan includes health care and prescription drug coverage.

Or you can also choose to get your Medicare coverage through another Medicare Advantage plan or Original Medicare. In both cases, you may need to enroll in a separate prescription drug plan. Remember it is your choice!

To learn about your Medicare options, Visit Medicare.gov. Call 1-800-MEDICARE (1-800-633-4227) 24/7. Tell them you got a letter saying you have Medicaid now and are going to be eligible for Medicare. Ask for help with your Medicare choices. TTY users should call 1-877-486-2048. If you have questions about your iCare Medicaid SSI Plan benefits, please call Customer Service. If you have questions about being an iCare dual member, call an iCare Member Retention Specialist, Monday through Friday, 8:30 a.m. to 5:00 p.m. at 414-272-5621.

Independent Care Health Plan complies with applicable federal civil rights laws and does not discriminate, exclude or treat people differently because of their race, color, national origin, age, disability, sex, sexual orientation, gender, gender identity, ancestry, ethnicity, marital status, religion or language.

Independent Care Health Plan provides free aids and services to people with disabilities and people whose primary language is not English to communicate effectively with us, such as qualified interpreters (including sign language) and written information in other formats (large print, audio, accessible electronic formats, braille, other formats) and languages. If you need these services contact Customer Service at 1-800-777-4376 (TTY: 711), 24 hours a day, 7 days a week. Our office hours are Monday through Friday, 8:30 a.m. to 5:00 p.m., CST.

Doctors, nurses, and other health care professionals on iCare’s staff review the articles in each iCare newsletter. However, this information should never take the place of your doctor’s advice and opinions. Always talk with your doctor first when deciding the best course of action to take for your health.

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