

How to Request a Provider/Pharmacy Directory, Comprehensive Formulary, or Evidence of Coverage

To request a hard copy be mailed to you, please:

Call Customer Service at **1-800-777-4376 (TTY: 711)**, 24 hours a day, 7 days a week. Our office hours are Monday – Friday, 8:30 a.m. – 5:00 p.m.

OR email info@iCareHealthPlan.org

OR request online at www.iCareHealthPlan.org/hardcopy

To find what you need by visiting our website:

For a Provider/Pharmacy Directory, visit www.iCareHealthPlan.org/FindProvider to access our online searchable directory.

For a Comprehensive Formulary, visit your plan at www.iCareHealthPlan.org/Members.htm to view the formulary. If you have a question about covered drugs, please call our **Pharmacy Services Helpline** at **1-866-938-0406 (TTY: 711)**, Monday – Friday, 8:30 a.m. – 5:00 p.m., or call **Customer Service** at the number above.

For an Evidence of Coverage, visit our member documents page at www.icarehealthplan.org/Members/Member-Documents.htm

These documents will be available 10/15/2020 for 2021.

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Independent Care Health Plan (*iCare*), which insures *iCare* Medicare Plan (HMO D-SNP) and *iCare* Family Care Partnership (HMO D-SNP), is an HMO with a Medicare contract and a contract with the State Medicaid program. Enrollment in *iCare* Medicare Plan or *iCare* Family Care Partnership depends on *iCare's* contract renewal.

Questions? Call 1-800-777-4376 (TTY: 711) for more information.

Independent Care Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, gender identity, or sex.

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

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-777-4376 (TTY: 1-800-947-3529).