

**You may request a hard copy of the Provider/Pharmacy Directory, Comprehensive Formulary, or Evidence of Coverage.**

***There are several ways to request a hard copy to be mailed to you:***

1. Call **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.
2. Email us at **info@iCareHealthPlan.org**
3. Go online at **www.iCareHealthPlan.org/hardcopy**

A request for a hard copy of any of these items can be a one-time or a permanent request.

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**You may find what you need by visiting our web site at any time:**

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

**For a Comprehensive Formulary**, visit **www.iCareHealthPlan.org/druglist** to view the formulary. If you have a question about covered drugs, please 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 10/15/2022 for 2023.

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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 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.

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.

Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-777-4376. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Peb muaj kev pab txhais lus dawb los teb cov lus nug uas koj muaj txog peb txoj kev npaj khomob lossis tshuaj. Yog xav tau ib tug neeg txhais lus, hu rau peb ntawm 1-800-777-4376. Ib tug neeg uas hais lus Askiv / thiab lwm yam lus tuaj yeem pab koj. Qhov no yog ib qho kev pab dawb.