



*i*Care BadgerCare Plus and Medicaid SSI Welcome Guide

*i*Care Medicaid plans provide complete health care services.
As a member, you get the benefits you need to live your best life.

Please keep this Guide. You will reference it often while you are an *i*Care member. This includes if you join the plan, leave then return.



*i*Care's office is located at 1555 North RiverCenter Drive, Suite 206, Milwaukee, Wisconsin 53212.

For help or information, please call Customer Service at 1-800-777-4376, 24 hours a day, 7 days a week or visit our website at www.iCareHealthPlan.org. TTY users call 711.

Our office hours are Monday through Friday, 8:30 a.m. to 5:00 p.m.

Welcome to iCare!

Welcome to Independent Care Health Plan (iCare)! We are glad you chose us for your health insurance.

With iCare BadgerCare Plus or Medicaid SSI you will have access to medical, dental, behavioral health, well woman care, family planning services and vision benefits. The State of Wisconsin manages your pharmacy benefit. To start the process for accessing your iCare covered benefits, please call us at 1-800-777-4376. TTY users, please call 711.

Many members like to visit us at iCare. We accept visitors by appointment only. Please call your Care Team first if you need to visit iCare. You can discuss if an appointment is necessary. If so, it will be scheduled during our business hours, Monday through Friday, 8:30 a.m. to 5:00 p.m.

As an iCare member, you may receive text messages and emails about actions to take like preventative wellness visits and completing a health risk screening. These reminders can help you stay healthy and learn new ways to take care of yourself. If you do not want to receive these messages, you can opt out at any time.

Plan Information

ForwardHealth ID Card

Your ForwardHealth ID Card is how your doctor or pharmacist will know you are an iCare Medicaid member. You may have problems getting care or medication(s) if you do not have your card. It is important to always carry your ForwardHealth ID card with you. Show it every time you get care. Also, be sure to tell your doctor or pharmacist that you are a member of iCare.

If your card is lost, stolen, or damaged, call ForwardHealth Member Services at 1-800-362-3002 to report it. A new card will be sent to you right away.

Tell Us About the Quality of Your Health Care

A grievance is any complaint about your HMO or health care provider that is not an adverse benefit determination (see "Appeals" in your iCare Member Handbook for more information about adverse benefit determinations). Grievance topics include things like the quality of services you were provided, rudeness from a provider or an employee, and not respecting your rights as a member. We want to know if you have a grievance about your care or about iCare. Please call iCare's Member Advocates at 1-800-777-4376 or write to us if you have a grievance. Our address is on the front cover of this booklet.

If you want to talk to someone outside of iCare about the problem, call the BadgerCarePlus and Medicaid Ombuds at 1-800-760-0001. The Ombuds may be able to help you solve the problem or write a formal grievance to iCare or the Medicaid program. You can also contact the SSI Managed Care External Advocacy Project at 1-800-928-8778.

More information on filing a grievance is listed in your Member Handbook. You may file a grievance at any time. You will not be treated differently from other members because you file a grievance. Your health care benefits will not be affected.

Member Handbook

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 member handbook is updated every year.**

You can view the member handbook on our website at <https://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 website (<https://www.icarehealthplan.org/hardcopy>) to request one.

Diversity and Accessibility

Wisconsin has a diverse population with thousands of residents who do not consider English their primary language. Our multilingual Care Teams speak fluently in languages such as Spanish and Hmong. This allows us to effectively coordinate your health care with less confusion and better understanding of benefits and services. We also provide over-the-phone interpreter services for those members who do not speak English. This service can be accessed by calling our Customer Service department or our Member Advocates.

All non-English speaking members are directed to network physicians who understand their culture. Our provider network includes primary and specialty care providers who practice in areas where you live and spend time. In addition to a multilingual staff, there is a TTY phone number (711) for the hearing impaired. Special services also are available for those who are blind or have limited vision.

Member Advocates

The role of a Member Advocate is very important to you as an *iCare* member. Their responsibilities include investigating and resolving questions and concerns related to member access to health care. They work closely with the Care Coordination staff to assist them in making sure you receive the most appropriate care. They also serve as a contact with local, county and state agencies and help with cultural sensitivity issues. They can tell you more about your rights and responsibilities as an *iCare* member and help make sure *iCare* is supporting your needs and outcomes. You can reach a Member Advocate at 1-800-777-4376 or 414-231-1076.

Report to the State When You Have a Life Changing Event

If you have a change in your life, it needs to be reported to the State of Wisconsin. ***iCare* is not able to change a member's address and phone number in our records.** If you do not report your changes to the State, you might miss out on benefit information. A life changing event includes a new phone number or email, a marriage or divorce, a change in income, or a change in living arrangement. You can find all the types of changes you must report listed in the letters you received about your benefits.

There are different ways that you can update your information:

- » Online: The easiest way to update your information is through the MyACCESS website at <https://access.wisconsin.gov/access/>. Here you can log-in to your account then click "Report My Changes" from the side menu. If you don't have an account, you can create one.
- » Mobile App: Use the MyACCESS mobile app on your smart phone or tablet to report changes.
- » Phone: Call your county or tribal agency.
- » Fax or mail: Complete a paper change form and fax or mail it using the instructions on the form. Download a copy of the BadgerCare Plus form at <https://dhs.wisconsin.gov/library/collection/f-10183>. Get the Medicaid SSI form by visiting <https://dhs.wisconsin.gov/library/collection/f-10137>.
- » In person: Visit your county or tribal agency.
Find yours at <https://dhs.wisconsin.gov/forwardhealth/imagency/index.htm>



Don't Lose Your Health Care Coverage!

When you first apply for BadgerCare or Medicaid SSI you tell the Wisconsin Department of Health Services (DHS) about things like your household, income, assets, and insurance. To see if you can keep your benefits, DHS needs to update that information every year. This process is called a renewal.

It is important to renew your health insurance on time. You need to renew it when you get your renewal letter. If you do not renew your coverage by the due date, your health care insurance will end. To learn more and complete your renewal, visit <https://dhs.wisconsin.gov/forwardhealth/renewals.htm>.



Health and Wellness

It feels great when your health doesn't prevent you from participating in activities you enjoy, like spending time with loved ones. Usually that happens when you've made good choices like getting screenings, tests and immunizations, listening to your doctor's advice, and participating in programs and services that may help support healthy habits.

The next few pages discuss a few of the many benefits, programs and services available to *iCare* members. Please refer to your Member Handbook for more information.

Getting Care from Primary Care Providers

It is important to have a primary care provider (PCP) to manage all your health care. However, *iCare* does not require you to select a PCP. Your PCP is the physician who collaborates with your care team and our plan to oversee your health care. Your PCP will arrange or coordinate the covered health care services you get as a plan member. They will help you decide if you need to see another doctor or specialist and, if appropriate, give you a referral.

You can see any PCP in your plan, and you may change your PCP for any reason, at any time. Also, it is possible that your PCP might leave our plan's network of providers and you would have to find a new PCP. We will notify you if your PCP leaves our plan's network.

You may find a PCP by using the *iCare* Provider Network Directory or the "Find a Provider" search tool on the *iCare* website at www.iCareHealthPlan.org. You can also get help from our Customer Service Department by calling 1-800-777-4376 (TTY: 711).

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. The questionnaire also asks Health Equity questions. These questions will be about your race, ethnicity, language, gender identity, sex assigned at birth, sexual orientation. We will also ask which pronouns you use like "she, her, his, him, they or them." We ask these questions because some groups experience discrimination or unfair treatment in health care. Your answers help us see if we have any gaps in these areas. We can then work on efforts to reduce them. We want to make sure we meet your cultural and social needs related to health care.

We know this is personal information and you may not feel comfortable sharing it. You have the right not to answer. Your benefits and coverage do not change if you do or do not answer these questions. If you do share your personal information, *iCare* protects it. Only your Care Team has access to your personal information. If you want to know more about Health Equity, please call your Care Team. They can answer your questions and send you more information if you request it.

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.

iCare will call you or mail a letter to you when it's time to complete your HRS. 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).

How we Protect your Information - *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. Read the Privacy Notice at <https://www.icarehealthplan.org/Utility-Navigation/Privacy-Policy.htm>. You can request a hard copy of our Privacy Notice be mailed to you by calling Customer Service. If you have questions about the Privacy Notice you can write or call our Member Advocate. If you do not have any questions, you do not have to do anything.

During certain health or social assessments *iCare* conducts with members, we ask several health-related questions. We also ask questions about your race, ethnicity, language, gender identify and sexual orientation. We have a diverse group of members. Asking this information helps us provide all our members with the best health care possible. This information is private and protected. We limit access to staff working with you. We require passwords to access your information. We train staff on how to keep your information private. We cannot use this information to deny you services, coverage, and benefits. It is not used for underwriting. We use this information to look at health care disparities among our members. We design intervention programs to improve the health of our members. We design and direct educational materials to members who need them. Your care management team also uses this information to provide appropriate services for you. When your provider asks us to approve a service for you, we tell your provider about your preferred language. You have the right to choose not to answer these types of questions. Your answers have no impact your benefits or the services you receive from *iCare*. You will not lose your benefits or services or have less benefits or services by answering these questions. If you want more information on how *iCare* uses or shares your information, please see our privacy policy on our website at: <https://www.icarehealthplan.org/Utility-Navigation/Privacy-Policy.htm>. If you would like a paper copy of our privacy policy, call Customer Service at 1-800-777-4376 to request a copy to be mailed to you.





Member Advisory Committee - We want to hear from you!

iCare is dedicated to improving the health and wellbeing of our members from different racial, ethnic, and cultural communities and backgrounds. One of the ways we can do this is to create a time to talk with members to get feedback and recommendations through Member Advisory Committees. Currently, we are looking for iCare members to join our Member Advisory Committee. This committee is an opportunity for members and/or representatives to learn about and discuss important topics with iCare leadership. These topics include iCare's Health Equity Plan – a yearly plan to reduce health disparities and work towards health equity, as well as other ongoing projects and initiatives.

Please consider this committee if:

- » You are an iCare Member.
- » You are a representative for an iCare Member.
- » You are a community partner that supports iCare members.
- » You are interested in helping iCare better understand, be respectful, inclusive, and deliver better care to members from different races, ethnicities, abilities, genders, and languages.
- » Can participate in at least one to two committee meetings per year.

iCare can provide transportation and interpreter services. If you are unable to attend a meeting, you are welcome to join by telephone. If you are interested, or have questions please contact the Population Health Department at iCare Health Plan at (414) 567-6753, or 1-800-777-4376 (TTY: 711), or email info@icarehealthplan.org.

Vision Benefit

iCare provides covered vision services, including eyeglasses; however, some limitations apply. Please call Customer Service at 1-800-777-4376 for more information. To find an eye doctor near you, go to the iCare website (www.iCareHealthPlan.org) or call NVA, our vision provider, at 1-888-287-0116.

Dental Benefit

iCare covers dental services for members who live in Kenosha, Milwaukee, Ozaukee, Racine, Washington, and Waukesha counties. You must go to an iCare dentist. See the *iCare Medicaid SSI/BadgerCare Plus Provider Directory* or call Customer Service at 1-800-777-4376 for the names of our dentists. You can also visit the iCare website (www.iCareHealthPlan.org) or call DentaQuest, our dental provider, at 1-888-291-3760.

If you live in a county that is not listed, dental services are a covered benefit under Medicaid Fee-for-Service. You may get dental services from a Medicaid-enrolled provider who will accept your ForwardHealth ID card. To find a Medicaid-enrolled provider go to <http://www.forwardhealth.wi.gov/> or you can call ForwardHealth Member Services at 1-800-362-3002.

Fitness Benefit — Medicaid SSI Members Only

The fitness benefit is only available to *iCare* Medicaid SSI members. You can get reimbursed up to \$35/month towards a health/fitness center membership or you can use the \$35/month towards an exercise class of your choice. Mail *iCare* your receipt. We will reimburse you either by check or direct deposit.

If you leave the *iCare* Medicaid SSI Plan, you will lose the \$35/month benefit.

If you would like to see if you are eligible for the fitness benefit, contact us. We can send you a flyer with information on the rules of the program and answer questions. Please contact Customer Service at 1-800-777-4376 (TTY: 711). Our office hours are Monday through Friday, 8:30 a.m. to 5:00 p.m.

Care Management

iCare has a Care Management team of Care Coordinators, Registered Nurses, and a Housing Navigator that can help connect you and your family to resources such as housing, doctors or medical care, community education, alcohol or drug abuse treatment, food and clothing banks, social services agencies, and/or health education and information.

Our case management teams will work with you to assess your needs. There are various levels of care management, and 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.

The team knows what services are available for you where you live and will direct you to the best services for your needs. There is no cost for you to use these services. To see if Care Management services are a good fit for you, call *iCare* at 1-800-777-4376 (TTY:711)..

Supporting Your Health: Programs for Pregnancy, Chronic Health and Mental Health Conditions

iCare is here for your health. The following programs are provided by our care management teams. There is no cost to members to use any program. All programs are optional - you choose to participate. If you join the program, you can opt out at any time. If interested in a program or 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.

» **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* care 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 with one of our nurses | » Other goals or needs you have related to your health and the health of your baby |

» **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, and 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.



» **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.

24/7 Nurse Advice Line

Questions about your health or your family's health can come up any time. Our Nurse Advice Line is here for you 24 hours a day, 7 days a week — at no cost. When you call, a registered nurse will answer health questions or provide health information. Nurses can also tell you how to take care of yourself at home when you do not feel well, but do not need to see a PCP. Call the Nurse Advice Line at 1-800-679-9874.

Flu Vaccine

Influenza (flu) vaccines protect against the most common flu viruses of the season. Most vaccines are shots (given with a needle) in the arm but sometimes a nasal spray is an option. Most everyone 6 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 about 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. For more information, talk with your provider, pharmacy or go to https://www.cdc.gov/flu/vaccines/?CDC_AAref_Val=https://www.cdc.gov/flu/prevent/flushot.htm. You can also call iCare Customer Service for help at 1-800-777-4376 (TTY: 711).

Well-Child Visit — BadgerCare Plus Members Only

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 *i*Care for BadgerCare Plus members. There is no cost to you. Your children need to be seen by their Primary Care Provider (PCP) or Pediatrician for a well-child visit at the following ages:

- | | | |
|-------------------|--------------------|----------------------------------|
| » Newborn | » 4 months of age | » 15 months of age |
| » 3-5 days of age | » 6 months of age | » 18 months of age |
| » 1 month of age | » 9 months of age | » 24 months of age (2 years old) |
| » 2 months of age | » 12 months of age | » 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. *i*Care 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!

Fraud, Waste, and Abuse

If you suspect fraud or abuse of the Medicaid program, you may report it. Please go to www.reportfraud.wisconsin.gov.

Immunization Cheat Sheet (CDC Guidelines)

IMA Measure				
Immunization	Number of Doses	Minimum Age to Receive	1st Dose Typically Given	2nd Dose Given
Meningococcal	x1	On or between 11th and 13th birthday	X	X
Tdap	x1	On or between 10th and 13th birthday	X	X
HPV	x2	On or between 9th and 13th birthday	x	Must wait at least 146 days after first dose.

CIS Measure						
Immunization	Number of Doses	Minimum Age to Receive	1st Dose Typically Given	2nd Dose Given	3rd Dose Given	4th Dose Given
Dtap	x4	6 weeks (42 days after birth)	6 weeks	4 weeks after 1st dose	4 weeks after 2nd dose	6 months after 3rd dose
IPV	x3	6 weeks (42 days after birth)	at 2 months	at 4 months	at 6 months	x
MMR	x1	1 year (365 days after birth)	On or between 1st and 2nd birthday	X	X	x
HiB	x3	6 weeks (42 days after birth)	6 weeks	At least 2 months after 1st dose	At least 2 months after 2nd dose	x
HepB	x3	6 weeks (42 days after birth)	Birth to 7 days	4 weeks after 1st dose	8 weeks after 2nd dose	x
VZV	x1	1 year (365 days after birth)	On or between 1st and 2nd birthday	X	x	x
PCV	x4	6 weeks (42 days after birth)	6 weeks	4 weeks after 1st dose	4 weeks after 2nd dose	8 weeks after 3rd dose

Auxiliary aids and services, free of charge, are available to you.
1-800-777-4376 (TTY: 1-800-947-3529), available 24 hours a day,
7 days a week (Standard office hours: Monday – Friday, 8:30 a.m. – 5:00 p.m.
Central time).

Independent Care Health Plan (iCare), a wholly-owned subsidiary of Humana, complies with Section 1557 by providing free auxiliary aids and services to people with disabilities when auxiliary aids and services are necessary to ensure an equal opportunity to participate. Services include qualified sign language interpreters, video remote interpretation, and written information in other formats.

English: Call the number above to receive free language assistance services.

Español (Spanish): Llame al número que se indica arriba para recibir servicios gratuitos de asistencia lingüística.

Hmoob (Hmong) Hu rau tus xov tooj saum toj sauiv kom tau txais kev pab txhais lus dawb.

မြန်မာနိုင်ငံ (Burmese) အခမဲ့ ဘာသာစကား အကူအညီ ဝန်ဆောင်မှုများ ရယူရန် အထက်ပါ ဖုန်းနံပါတ်ကို ခေါ်ဆိုပါ။

簡體中文 (Simplified): 您可以拨打上面的电话号码以获得免费的语言协助服务。

Soomaali (Somali) Wac lambarka kore si aad u hesho adeegyada caawimaada luuqada oo bilaash ah.

ພາສາລາວ (Lao) ໂທຫາເບີໂທລະສັບຂ້າງເທິງ ເພື່ອຮັບບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາຝຣັ່ງ.

العربية (Arabic): اتصل برقم الهاتف أعلاه للحصول على خدمات المساعدة اللغوية المجانية.

Tiếng Việt (Vietnamese) Gọi số điện thoại ở trên để nhận các dịch vụ hỗ trợ ngôn ngữ miễn phí.

Русский (Russian): Позвоните по вышеуказанному номеру, чтобы получить бесплатную языковую поддержку.

Srpsko-hrvatski (Serbo-Croatian) Nazovite gore navedeni broj ako želite besplatne usluge jezične pomoći.

This notice is available at icarehealthplan.org

WIHMEKWEN

NOTICE OF NON-DISCRIMINATION

Independent Care Health Plan (iCare), a wholly-owned subsidiary of Humana, complies with applicable Federal civil rights laws and does not discriminate or exclude people because of their race, color, religion, gender, gender identity, sex, sexual orientation, age, disability, national origin, military status, veteran status, genetic information, ancestry, ethnicity, marital status, language, health status, or need for health services. Independent Care Health Plan:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids, or language assistance services contact **1-800-777-4376 (TTY: 1-800-947-3529)**. If you believe that Independent Care Health Plan. has not provided these services or discriminated on the basis of race, color, religion, gender, gender identity, sex, sexual orientation, age, disability, national origin, military status, veteran status, genetic information, ancestry, ethnicity, marital status, language, health status, or need for health services, you can file a grievance in person or by mail, fax, or email with Independent Care Health Plan's Non-Discrimination Coordinator at 1555 North RiverCenter Drive, Suite 206, Milwaukee, Wisconsin 53212, **1-800-777-4376 (TTY: 1-800-947-3529)**, Fax: 1-414-918-7589, or **advocate@icarehealthplan.org**. If you need help filing a grievance, Independent Care Health Plan's Non-Discrimination Coordinator can help you.

You can also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or by mail or phone at:

- U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F, HHH Building Washington, D.C. 20201. **800-368-1019, 800-537-7697 (TDD)**

Important Contact Information

In case of an emergency, call 911.

- » **ForwardHealth Member Services**
1-800-362-3002
- » **Social Security**
1-800-772-1213
- » **Non-Emergency Medical Transportation**
1-866-907-1493



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