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Update on 2023 Benefits

At the time iCare prepares the 2023 Annual Notice of Changes (ANOC) and Summary of Benefits (SB), some premiums, deductibles and co-insurance amounts for the medical deductible, inpatient hospital coverage, inpatient psychiatric hospital, and skilled nursing facility stays are not yet released by the Centers for Medicare and Medicaid Services (CMS)*.

In the ANOC and SB, these categories include this statement: “These are 2022 cost-sharing amounts and may change for 2023. iCare Medicare Plan (HMO D-SNP) will provide updated rates at www.iCareHealthPlan.org as soon as they are released by Medicare.”

CMS released the 2023 cost sharing amounts for the Medicare Part A and Part B programs.

The amounts for 2023 are:

All cost sharing in this chart is based on your level of Medicaid eligibility. Please contact your Medicaid agency to determine your level of cost-sharing.	
Medical Deductible	This plan has deductibles for some hospital and medical services. In 2023, you will pay \$0 or \$226 per year for in-network services, depending on your level of Medicaid eligibility.
Inpatient Hospital Coverage For a list of covered services, please refer to the iCare Medicare Plan (HMO D-SNP) 2023 Evidence of Coverage.	This plan covers up to 90 days for an inpatient hospital stay. Our plan also covers 60 lifetime reserve days. These are extra days we cover. If your hospital stay is longer than 90 days, you can use these extra days. But once you have used up these extra 60 days, your inpatient hospital coverage will be limited to 90 days. The 60 lifetime reserve days can be used only once during a member’s lifetime for care provided in either an acute care hospital or a psychiatric hospital.

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*Note: The iCare Medicare Plan (HMO D-SNP) 2023 Evidence of Coverage reflects the 2023 amounts. This document, and other plan documents including the ANOC and Summary of Benefits, are posted to the Member Documents page —

www.icarehealthplan.org/memdocs

<p>All cost sharing in this chart is based on your level of Medicaid eligibility.</p> <p>Please contact your Medicaid agency to determine your level of cost-sharing.</p>	
	<p>In-Network</p> <p>In 2023 the amounts for each benefit period are \$0 or:</p> <ul style="list-style-type: none"> • Days 1-60: \$1,600 deductible • Days 61-90: \$400 co-pay per day • Days 91-150: \$800 co-pay per each “lifetime reserve day” (up to 60 days over your lifetime). • After day 150: You pay all costs. <p><i>Prior Authorization is required.</i></p> <p><i>Except in an emergency, you must receive doctor approval before admission.</i></p> <p>If you get authorized inpatient care at an out-of-network hospital after your emergency condition is stabilized, your cost is the cost-sharing you would pay at a network hospital.</p>
<p>Inpatient Psychiatric Hospital</p> <p>For a list of covered services, please refer to the <i>iCare Medicare Plan (HMO D-SNP) 2023 Evidence of Coverage.</i></p>	<p>Our plan covers 90 days for an inpatient hospital stay.</p> <p>Medicare also covers up to 60 lifetime reserve days. These are extra days that we cover. If your hospital stay is longer than 90 days, you can use these extra days. But once you have used up these extra 60 days, your inpatient hospital coverage will be limited to 90 days. The 60 lifetime reserve days can be used only once during a member’s lifetime for care provided in either an acute care hospital or a psychiatric hospital.</p> <p>In-Network</p>

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<p>All cost sharing in this chart is based on your level of Medicaid eligibility.</p> <p>Please contact your Medicaid agency to determine your level of cost-sharing.</p>	
	<p>In 2023 the amounts you pay for each benefit period are \$0 or:</p> <ul style="list-style-type: none"> • Days 1-60: \$1,600 deductible • Days 61-90: \$400 co-pay per day • Days 91-150: \$800 co-pay per each “lifetime reserve day” (up to 60 days over your lifetime). • After day 150: You pay all costs. <p>The plan only pays for up to 190 days of inpatient psychiatric care during your lifetime.</p> <p><i>A prior authorization is required.</i></p> <p><i>A provider referral is required.</i></p>
<p>Skilled Nursing Facility</p> <p>For a list of covered services, please refer to the <i>i</i>Care Medicare Plan (HMO D-SNP) 2023 Evidence of Coverage.</p>	<p>This plan covers up to 100 days each benefit period. A three-day prior hospital stay is required.</p> <p>In 2023 the amounts you pay for each benefit period are \$0 or:</p> <ul style="list-style-type: none"> • Days 1–20: \$0 co-pay per day. • Days 21–100: \$200.00 co-pay per day. • Days 101 and beyond: You pay all costs. <p>You will not be charged additional cost sharing for professional services.</p> <p><i>Prior authorization is required.</i></p> <p><i>A provider referral is required.</i></p>

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