

A Guide to the Wisconsin Medicaid and BadgerCare HMO Program

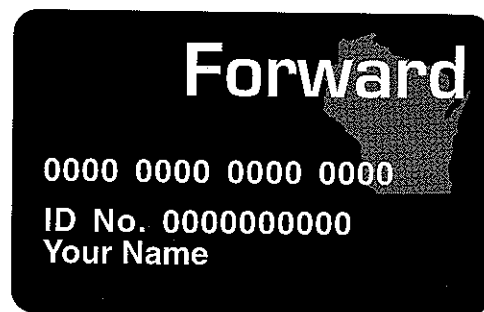
Forward

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Your Name

- [English] For help to translate or understand this document, please call 1-800-291-2002.
- [Spanish] Si necesita ayuda para traducir o entender este texto, por favor llame el telefono 1-800-291-2002.
- [Russian] Если вам не всё понятно в этом документе, позвоните по телефону 1-800-291-2002.
- [Hmong] Yog xav tau kev pab txhais covntaubntawv no kom koj totaub, hu rau 1-800-291-2002.
- [Laotian] ເພື່ອຊ່ວຍໃນການແປ ຫລືເຂົ້າໃຈເນື້ອຫາໃນນີ້, ກະລຸນາໂທສະສັບຫາ 1-800-291-2002.
- [Hearing Impaired] For help to understand this document, please call 1-800-291-2002.



This is a Wisconsin **Forward** card. This card is issued to individuals eligible for Medicaid and BadgerCare coverage. One of the many benefits of the Medicaid and BadgerCare program is the opportunity to enroll into a Wisconsin Medicaid and BadgerCare Health Maintenance Organization (HMO).

Will I be enrolled in an HMO?

Most families with children who receive their health care through the Wisconsin Medicaid and BadgerCare program are enrolled in an HMO.

You and your family must enroll in an HMO if **two** or more HMOs are available where you live.

If only **one** HMO is available where you live, your family can either join that HMO or receive health care from any provider that accepts your Forward card.

Why should you join an HMO?

HMO members do not have copayments for most covered services. HMOs provide health care 24 hours a day, 7 days a week. Some HMOs provide all your health care in one location.

How do you choose your HMO?

1. Ask your providers such as your...
 - Doctors
 - Hospital
 - Pharmacy
 - Mental Health Providers...if they belong to an HMO. This HMO could be the one you choose.
2. Look in your **Choosing Your HMO** booklet to learn about the HMOs your provider accepts.
3. Call the Enrollment Specialist at 1-800-291-2002 to help you choose the best HMO for you and your family.
4. To choose an HMO, call the Enrollment Specialist or mail your HMO Enrollment Choice form in the enclosed envelope.



Get in Touch!



Get in touch with the Enrollment Specialist if you need help selecting your HMO. The Enrollment Specialist can help you select an HMO that meets your family's needs.

The Enrollment Specialist can:

- ☎ Find out if your doctor, hospital, or clinic belongs to an HMO, and if so, which one.
- ☎ Help you select an HMO over the phone or help you fill out an HMO Enrollment Choice form that you can mail.
- ☎ Answer your questions about how the HMO works.

You can get in touch with the Enrollment Specialist by calling 1-800-291-2002.

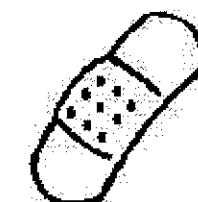
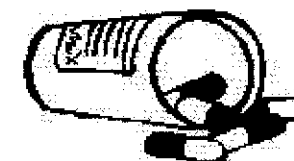
The services your HMO covers

Your HMO will cover all medically necessary services. Your doctor may have to request some services for you. This is called "**prior authorization**."

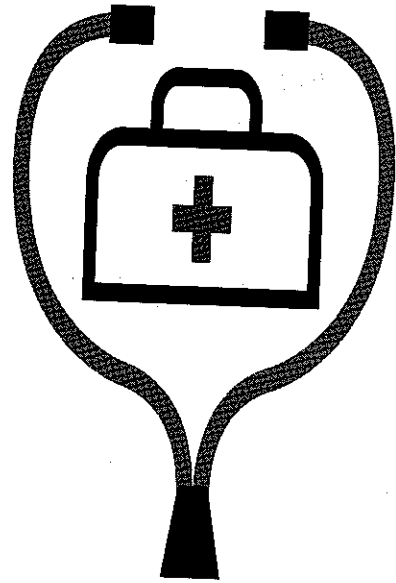
After you have joined an HMO, call the HMO to find out where to go for your health care.

The services your HMO will cover for you and your family include:

- Doctor visits and hospital care.
- Prenatal care.
- Shots.
- Vision care, including eyeglasses.
- Prescription drugs.
- Medical equipment.
- Mental health services.
- Hearing services, including hearing aids.
- Family planning services and supplies.



What You Should Know About Your HMO



You have to go to the providers, hospitals, and clinics covered by your HMO. You must choose one of the HMO's providers to manage your health care. This provider is called your **Primary Care Provider (PCP)**.

When you or your family need health care, call your PCP first.

If you think you need to see another provider or a specialist, call your PCP. Your PCP will decide if you need to see another provider and if so, give you a referral. Remember, you must get approval from your PCP before seeing another provider.

After enrollment, you must contact your HMO's customer service department to choose or change your PCP.

In an emergency, go to the nearest hospital or clinic.

The Choice is Yours

If you are not happy with the HMO you joined, you can change your HMO during the first 3 months of your enrollment. This is called "open enrollment."

When your open enrollment period is over, you cannot change your HMO for 9 more months. This is called a "lock-in period." You will be sent a letter telling you when your lock-in period will end. When your lock-in period has ended, you may change to a different HMO if you wish.

The Enrollment Specialist can help you:

- Decide if you need to change your HMO.
- Change your HMO over the phone.
- Delay your enrollment or get permission not to join an HMO.

You have joined an HMO!

Soon, you will receive a letter welcoming you to the HMO you joined.

You will receive a membership packet from your HMO with information about services your HMO offers and a list of the doctors, hospitals, and clinics that belong to your HMO.

Once you are enrolled in an HMO, call the HMO's Member Services to:

- Find out what services your HMO provides.
- Find out the doctors and clinics you and your family can use.
- Choose or change your PCP.
- Report the need for emergency or urgent care.

If you are not satisfied with the services provided by your HMO or its providers, call the Enrollment Specialist at 1-800-291-2002. The Enrollment Specialist can help you take the next step.



What if you forget to choose an HMO?

If you forget to choose an HMO, one will be chosen for you. You will receive a notice in the mail telling you which HMO was chosen for you and your family.

What if you are not happy with your HMO?

If you are not happy with your HMO within the first 3 months of your enrollment, call the Enrollment Specialist. The Enrollment Specialist can change your HMO for you over the phone. It's that easy!