



## Frequently Asked Questions

[General Medicare and Health Plan Questions](#)  
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## General Medicare and Health Plan Questions

### Medicare Basics

[What Are The Four Parts Of Medicare? -](#)

1. Part A - Hospital coverage
2. Part B - Medical coverage
3. Part C - Also known as “Medicare Advantage.” Combines hospital (Part A) and medical (Part B) coverage in one plan. In addition, you may have access to:
  - Low or \$0 monthly premiums
  - Prescription drug coverage (Part D)
  - Extra benefits that are not available through Original Medicare such as vision benefits, dental benefits, hearing benefits, or fitness or gym membership
4. Part D - Prescription drug coverage that is only available when you enroll in a Medicare Advantage plan that includes prescription drug coverage (MAPD) or enroll in a separate Prescription Drug Plan (PDP).

### ***What Is A Medicare Supplement Plan?***

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Medicare Supplement plans are an alternative to Original Medicare or Medicare Advantage plans.

Medicare Supplement plans:

- Are designed to fill gaps left by Original Medicare.
- Generally cost more per month and may offer more comprehensive coverage than Medicare Advantage plans.
- Do not include prescription drug coverage. If you want that important option, you must purchase it separately.
- Allow you to see any provider who accepts Medicare.
- May not be combined with a Medicare Advantage plan.

### ***When Can I Enroll In Medicare?***

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You can sign up for Medicare Part A and/or Part B during your **Initial Enrollment Period**, the 7-month period that begins 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65.

### ***When Can I Enroll In A Medicare Advantage Plan?***

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You can enroll in or make changes to your Medicare Advantage plan during the **Annual Enrollment Period** from October 15 to December 7 every year. During this time period, you can:

- Enroll in a Medicare Advantage plan from Original Medicare
- Switch from a Medicare Advantage plan to Original Medicare
- Enroll in a Medicare Prescription Drug plan
- Switch from one Medicare Advantage plan (with or without drug coverage) to another Medicare Advantage plan (with or without drug coverage)
- Switch from one Medicare Prescription Drug plan to another Medicare Prescription Drug plan

Drop your Medicare prescription drug coverage completely

## ***Are There Other Circumstances Where I Can Change My Plan?***

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There are certain “enrollment periods” when you make changes to your Medicare coverage, these include:

- **Medicare Advantage Open Enrollment Period** from Jan 1. To March 31. During this time you can:
- Switch from one Medicare Advantage plan to another (with or without drug coverage)
- Drop your Medicare Advantage plan and return to Original Medicare. You’ll also be able to join a separate Medicare Prescription Drug Plan
- A **Special Election Period** when certain events happen in your life. For example:
- You move
- You are eligible for Medicaid
- You move to an institution, like a skilled nursing facility or long term care hospital
- You qualify for Extra with Medicare prescription drug costs
- You want to switch to a plan with a 5-star overall quality rating

If you qualify for an SEP, you may be able to join, switch, or drop a Medicare Advantage plan.

## ***Can I Get Help For Paying For Medicare Prescription Drug Costs?***

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You may be able to receive help paying for your prescription drug costs through Medicare’s Extra Help program. This program helps people with limited income and resources pay for their Medicare prescription drug coverage, such as plan premiums, deductibles, copays or coinsurance.

[Learn more about Medicare’s Extra Help program. \(/medicare-extra-help.html\)](/medicare-extra-help.html).

## Medicare Coverage

### ***I’m New To Medicare. What Are My Coverage Options?***

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Once you enroll in Medicare, you’ll have three basic choices for receiving your health coverage:

- Original Medicare (Part A and Part B)
- Medicare Advantage (Part C)
- Medicare Supplement

### ***What Does Original Medicare Cover?***

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Original Medicare covers doctor visits and hospital stays. You usually pay a monthly Part B premium, must meet your yearly deductibles, and then pay 20% for the cost of your care. There is no limit to your out-of-pocket costs each year.

It’s important to understand that Original Medicare doesn’t cover everything and doesn’t include Medicare Part D prescription drug coverage.

### ***Is Prescription Drug Coverage Included With Original Medicare Or A Medicare Supplement Plan?***

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No, prescription drug coverage is not included with Original Medicare or Medicare Supplement Plans.

Medicare Part D prescription drug coverage is an important option that is available either as a standalone plan or as part of a Medicare Advantage Plan.

Remember, if you do not sign up for prescription drug coverage during your Initial Enrollment Period you may encounter a Late Enrollment Penalty if you sign up at a later date.

### ***How Can I Get Medicare Part D Prescription Drug Coverage?***

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To get Medicare Part D Prescription Drug Coverage, you'll need to enroll in either a Medicare Advantage plan with prescription drug coverage (MA-PD plan) or a standalone Medicare Prescription Drug Plan (PDP).

Prescription drug coverage is not included with Original Medicare or Medicare Supplement plans so it's important to understand your options.

## Plan Enrollment and Coverage

### ***What Is A Formulary?***

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A Formulary, also called a drug list, is a list of prescription drugs covered by your Medicare Advantage plan.

### ***How Do I Enroll In An Wellcare By Allwell Medicare Medicare Advantage Plan?***

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Enrolling in one of our plans is easy! Visit our [How to Enroll \(/new-to-plan/enroll-in-a-plan.html\)](/new-to-plan/enroll-in-a-plan.html) page for more details.

## Member Questions

### Membership

#### ***Appointing A Representative***

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You can authorize anyone (like a relative, friend, advocate, an attorney, or a doctor) to act as your representative and file an appeal or ask for a coverage decision on your behalf. Just complete an [Appointment of Representative form \(https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms1696.pdf\)](https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms1696.pdf) *(By clicking on this link you will be leaving the Wellcare By Allwell website.)* and follow the instructions on where to send it.

Visit our [Appeals and Grievances \(/member-resources/member-rights/appeals-grievances.html\)](/member-resources/member-rights/appeals-grievances.html) web page for more information about this form and how to authorize a representative.

### ***How Do I Renew My Plan?***

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Your Medicare Advantage plan will renew automatically each year unless you make changes to your coverage. You may choose to change your coverage during the Annual Enrollment Period from: October 15 – December 7 each year.

If you are a member of a Dual Eligible Special Needs Plan (DSNP), your renewal is contingent upon your Medicaid eligibility.

If you qualify for a Special Enrollment Period, you can change plans according to the situation that is allowing you a Special Enrollment Period.

### ***I Just Enrolled In A For Wellcare By Allwell Medicare Medicare Advantage Plan, What Do I Do Next?***

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Welcome to Wellcare By Allwell Medicare! We look forward to starting a new journey with you. As a new member you will receive materials from us, such as:

- A new Membership ID Card
- A Welcome Kit
- A Welcome telephone call from our Member Services team

### ***How Do I Create An Online Member Account?***

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Creating an account is easy! Just follow the below steps:

1. Go to the [Member Login \(/member-resources/member-login.html\)](/member-resources/member-login.html).
2. Search for your member information by entering your Medicare Advantage ID number. This number can be found on your Wellcare By Allwell Medicare ID card.
3. Register your account by entering your email address and choose a password. A confirmation message will appear on the screen. You will also receive an email to verify your account and to complete your account registration.
4. Once you've verified your account, you can then choose your preferred language and add answers to the secret questions you pick. These questions will help you access your account if you forget your password. When you are done, click "Next" to finish your account registration.

Once your account has been created, you can use your member account to:

- View your plan benefits and claims information.
- Get a replacement ID card.
- Search or select a primary care provider (PCP).
- Send or receive secure messages about your plan coverage.

If you have questions setting up or logging into your account, please [contact Member Services \(/contact-us.html\)](/contact-us.html). We are here to help!

### ***How Can I Setup A Mail-Order Service For My Medications?***

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For certain kinds of drugs, you can use our mail-order services. Generally, the drugs provided through mail-order are drugs that you take on a regular basis for a chronic or long-term medical condition such as high blood pressure or diabetes. The drugs available through our plan's mail-order service are marked as "mail-order or MO" in our [List of Drugs \(Formulary\)](/drug-pharmacy/formulary.html) (</drug-pharmacy/formulary.html>).

Our plan's mail-order service allows you to order up to a 90-day supply. To get order forms and information about filling your prescriptions by mail, [contact Member Services](/contact-us.html) (</contact-us.html>).

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### ***Who Should I Contact If I Have Questions About My Plan?***

You can ask questions and get support from our [Member Services](/contact-us.html) (</contact-us.html>) team 7 days a week. From October 1 – March 31 you can call us 7 days a week from 8 a.m. to 8 p.m. From April 1 – September 30, you can call us Monday – Friday from 8 a.m. to 8 p.m. A messaging system is used after hours, weekends, and on federal holidays. Here are some ways you can contact us.

Call:

1-800-977-7522 (TTY: 711)

Write:

Wellcare by Allwell from Arizona Complete Health

PO Box 10420

Van Nuys, CA 91410

Email:

Create or log into your [online member account](/member-resources/member-login.html) (</member-resources/member-login.html>) to send secure messages.

## How to Get Care

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### ***What Are Network Providers?***

Network providers are doctors, pharmacies, hospitals, and other health care professionals or facilities that have an agreement with us to deliver covered services to members in our plan. You can use our [Find a Provider tool](/find-doctor.html) (</find-doctor.html>) to see if your doctor, pharmacy, or other healthcare professional or facility is in our network.

Your doctor or pharmacy should be an in-network provider, so your health services are covered. If you use an out-of-network provider, you will likely pay more for your healthcare services.

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### ***How Do I Get Care From Out-Of-Network Providers?***

If you need care and an in-network provider is unable to provide this care, you may be able to get care from an out-of-network provider. Your PCP must confirm there is not a network provider available and contact the plan to request authorization for you to obtain services from an out-of-network provider. If approved, the out-of-network provider will be

issued an authorization to provide the service(s).

Please note out-of-network/non- contracted providers are under no obligation to treat Wellcare By Allwell members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost- sharing that applies to out-of-network services

### ***What Is A Primary Care Physician (PCP) And How Do I Choose One? ➞***

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Your primary care provider is the doctor or other provider you see first for most health problems. He or she makes sure you get the care you need to keep you healthy. He or she also may talk with other doctors and health care providers about your care and refer you to them. In some Medicare health plans, you must see your primary care provider before you see any other health care provider.

**If you don't have a PCP, here are ways to choose one:**

1. Use our [Find a Provider tool \(/find-doctor.html\)](/find-doctor.html) to find an in-network provider and [contact Member Services \(/contact-us.html\)](/contact-us.html) with your selection.
2. Or, you can call us! [Member Services \(/contact-us.html\)](/contact-us.html) will help you find a PCP.

**If you already have a PCP:**

That's great! You may want to [contact Member Services \(/contact-us.html\)](/contact-us.html) or use our [Find a Provider tool \(/find-doctor.html\)](/find-doctor.html) to make sure your PCP is in our network. If your PCP is not in our network, don't worry, we will work with you to make sure you are assigned a PCP that is in our network.

### ***I Need Help Deciding Where To Go For Care. ➞***

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Deciding where to go for care can sometimes be confusing. For non-emergency illness or injury, call your Primary Care Physician (PCP), contact the 24/7 Nurse Advice Line or visit an in-network urgent care facility. If you feel you are experiencing a life-threatening condition, go to the emergency room (ER).

The following information may help you decide where to go for the type of care you need.

**DO YOU HAVE A PHYSICAL INJURY OR ILLNESS LIKE THE FLU? IF YES:**

- Call Our 24/7 Nurse Connect Line at:  
1-800-893-5597 (TTY: 711)

Get quick, reliable answers to your health questions.

- Call Your Primary Care Provider (PCP)  
Set up an appointment to see your doctor.
- Go to In-Network Urgent Care  
Get quickly diagnosed and treated for less serious illnesses or injuries.

**CALL 9-1-1 IMMEDIATELY OR GO TO AN EMERGENCY ROOM IF:**

You feel you have a life-threatening injury or illness like:

- Chest pains
- Bleeding that won't stop
- Shortness of breath
- Broken bones
- Poisoning
- Severe cuts or burns

Always follow up with your PCP if you have gone to an emergency room, visited an urgent care facility or had a hospital stay.

If you have questions please, [contact Member Services \(/contact-us.html\)](/contact-us.html).

**Company**  
[About Us \(/about-us.html\)](/about-us.html)  
[Contact Us \(/contact-us.html\)](/contact-us.html)  
[CMS STAR Rating \(/star-ratings.html\)](/star-ratings.html)

English (/faqs.html)	Español ( <a href="https://wellcare-es.azcompletehealth.com/legal/language-assistance.html">https://wellcare-es.azcompletehealth.com/legal/language-assistance.html</a> )	Tiếng Việt ( <a href="/legal/language-assistance.html">/legal/language-assistance.html</a> )
中文 (/legal/language-assistance.html)	العربية (/legal/language-assistance.html)	Français (/legal/language-assistance.html)
Русский язык (/legal/language-assistance.html)	Deutsch (/legal/language-assistance.html)	Tagalog (/legal/language-assistance.html)
	日本語 (/legal/language-assistance.html)	한국어 (/legal/language-assistance.html)
Italian (/legal/language-assistance.html)	Polish (/legal/language-assistance.html)	French Creole (/legal/language-assistance.html)
German (/legal/language-assistance.html)		

Wellcare by Allwell from Arizona Complete Health  
PO Box 10420  
Van Nuys, CA 91410  
1-800-977-7522 (TTY: 711)



<https://www.facebook.com/AllwellMedicare/>  
<https://www.youtube.com/watch?v=JC7H2JBV>



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Wellcare is the Medicare brand for Centene Corporation, an HMO, PPO, PFFS, PDP plan with a Medicare contract and is an approved Part D Sponsor. Our D-SNP plans have a contract with the state Medicaid program. Enrollment in our plans depends on contract renewal. Arizona D-



SNP plans: Contract services are funded in part [Expand Information...](#)

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