

RETURN ADDRESS  
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**State of Wisconsin**

**Case #:** 1234567890

Mailing Date: MM/DD/YYYY

ANNA MEMBER  
123 MAIN ST  
ANYTOWN WI 55555

**ABC Agency**  
Worker: IM A WORKER  
Phone #: 1-987-654-3210  
Fax #: (555) 555-5555  
Use fax # to send verifications.



The State of Wisconsin is an equal opportunity service provider. This letter contains information that affects your benefits. If you need this material in a different format because of a disability or if you need this letter translated or explained in your own language, please call 1-987-954-3210. These services are free.

## Removing the Hold from Your Health Care Benefits

While you were in jail or prison, your Medicaid benefits were placed on hold. Our records show that you will be released soon. Based on this information, we have removed the hold from your benefits. As soon as you are released, you will have access to full Medicaid benefits.

Please call your agency at 1-987-654-3210 to let them know where you will be living once you are released. If you are not being released to the community this month or next month, you will need to report this information to your agency.

### Important Information About Your Benefits

- **Medicaid** – Medicaid is a full benefit health care plan, which pays for most services you get from Medicaid or BadgerCare Plus health care providers. It will also pay for prescription drugs (unless you are also getting Medicare). You may have a small co-payment for some services and prescription drugs. If you have questions about whether a service is covered, call ForwardHealth Member Services at 800-362-3002. If you have questions about your Medicaid enrollment, contact your agency at 1-987-654-3210.
- **ForwardHealth Card** – Some providers may ask to see your ForwardHealth card. If you still have your card, you can keep using the same one. If you need a new ForwardHealth card, call 800-362-3002.

- HMO Enrollment – Members of some health care programs must enroll in a health maintenance organization (HMO). If this applies to you, you will get a letter about enrolling in your previous HMO or a new HMO. If you have questions about HMO enrollment, contact an HMO enrollment specialist at 800-291-2002.
- Reporting Changes – Members are required to report certain changes to their agency. For example, if you move to a different address after your release, or you get a new job, you must report this to your agency. Contact your agency at 1-987-654-3210 if you have questions about reporting changes.
- Other Programs – You may be eligible for other programs, such as FoodShare, once you are released from jail or prison. Go to [www.access.wi.gov](http://www.access.wi.gov) or contact your agency at 1-987-654-3210 to apply.

SAMPLE