



Wellcare No Premium (HMO)
Wellcare Giveback (HMO)
Wellcare Assist (HMO)
Wellcare No Premium Open (PPO)
Wellcare Patriot Giveback Open (PPO)

Member Complaint Form

Complete and mail or fax to
Wellcare By Allwell
Appeals & Grievances/Medicare Operations
7700 Forsyth Blvd | St. Louis, MO 63105
Fax: 1-844-273-2671

Wellcare By Allwell will have a resolution to your complaint no later than 30 days after your submission. If we need more information and the delay is in your best interest or if you ask for more time, we can take up to 14 more calendar days (44 calendar days total) to answer your complaint. However, if we take this extension, we will notify you or your representative. We can usually help you right away or at the most within a few days. If you are making a complaint because we denied your request for a “fast coverage decision” or a “fast appeal”, we will automatically give you a “fast” complaint. If you have a “fast” complaint, it means we will give you an answer within 24 hours.

If you need any help, please call us at 1-855-766-1541 (TTY: **711**). From October 1 to March 31, you can call us 7 days a week from 8 a.m. to 8 p.m. From April 1 to September 30, you can call us Monday through Friday from 8 a.m. to 8 p.m. A messaging system is used after hours, weekends, and on federal holidays. You can also visit www.Wellcare.com/allwellIN.

Member's Name (First and Last): _____

Medicare ID Number: _____ Member Date of Birth: _____

Relationship to Member *(please choose one): ☐ Self ☐ Parent ☐ Legal Guardian ☐ Spouse

☐ Other: _____

**If other than “Self” is selected, proof of guardianship, power of attorney or an Appointment of Representative (AOR) form will be required. The AOR form can be found on our website.*

Phone Number: _____

Street Address: _____

City: _____ State: _____ Zip: _____ County: _____

Provider: _____

Complaint Type (please choose one):

- ☐ Access
- ☐ Service Request
- ☐ Claims Payment Issue
- ☐ Appeals
- ☐ Benefits
- ☐ Prescription Drug Request or Issue/Coverage Determination & Redetermination Process
- ☐ Customer Service
- ☐ Enrollment & Disenrollment
- ☐ Fraud & Abuse
- ☐ Marketing
- ☐ Privacy Issues
- ☐ Quality of Care

Is this complaint about your medications? (Please choose one): ☐ Yes ☐ No

If you answered YES above, do you have enough supply for the next 7 days? (Please choose one):

☐ Yes ☐ No

What is your complaint?

How can Wellcare help resolve your issue?

What is the best way to reach you regarding this complaint? (Please choose one): ☐ Phone ☐ Email
☐ Other _____

Please provide further contact information (i.e. phone number, email address, etc).

For Administrative Use Only

Complaint Number: _____ *Date Received:* _____

ATENCIÓN: Si habla español, contamos con servicios de asistencia lingüística que se encuentran disponibles para usted de manera gratuita. Llame al número de Servicios para Miembros que se indica para su estado en la página siguiente.

注意：如果您說中文，您可以免費獲得語言援助服務。請撥打針對您所在州列示於下一頁的會員服務部電話號碼。

Chú ý: Nếu quý vị nói tiếng Việt, dịch vụ hỗ trợ ngôn ngữ có sẵn miễn phí dành cho quý vị. Hãy gọi số điện thoại của bộ phận Dịch Vụ Thành Viên thuộc bang của quý vị ở trang tiếp theo.

주의사항: 한국어를 구사할 경우, 언어 보조 서비스를 무료로 이용 가능합니다. 다음 페이지에서 가입자의 주에 해당하는 목록 내 가입자 서비스부 번호로 전화해 주십시오.

Atensyon: Kung nagsasalita ka ng Tagalog, may mga available na libreng tulong sa wika para sa iyo. Tumawag sa numero ng Mga Serbisyo para sa Miyembro na nakalista para sa iyong estado sa susunod na page.

Dumngeg: No agsasau ka iti Ilokano, dagiti tulong nga serbisio, a libre, ket available para kaniyam. Awagam iti numero dagiti serbisio iti Miembro a nakalista para iti estadom iti sumaruno a panid.

La Silafia: Afai e te tautala i le gagana Samoa, o lo’o avanoa ia te oe ‘au’aunaga fesoasoani i le gagana, e leai se totogi. Vala’au le Member Services numera lisiina mo lou setete i le isi itulau.

Maliu: Ke wala’au Hawai’i ‘oe, loa’a ke kōkua ma ka unuhi ‘ōlelo me ke kākī ‘ole. E kelepona i ka helu kelepona o ka Māhele Kōkua Hoa i hō’ike ‘ia no kou moku’āina ma kēia ‘ao’ao a’e.

We're Just a Phone Call Away

ARKANSAS

✚ HMO, HMO D-SNP

☎ 1-855-565-9518

💻 Or visit www.wellcare.com/allwellAR

ARIZONA

✚ HMO, HMO C-SNP, HMO D-SNP

☎ 1-800-977-7522

💻 Or visit www.wellcare.com/allwellAZ

CALIFORNIA

✚ HMO, HMO C-SNP, HMO D-SNP, PPO

☎ 1-800-275-4737

💻 Or visit www.wellcare.com/healthnetCA

FLORIDA

✚ HMO D-SNP

☎ 1-877-935-8022

💻 Or visit www.wellcare.com/allwellFL

GEORGIA

✚ HMO

☎ 1-844-890-2326

✚ HMO D-SNP

☎ 1-877-725-7748

💻 Or visit www.wellcare.com/allwellGA

INDIANA

✚ HMO, PPO

☎ 1-855-766-1541

✚ HMO D-SNP

☎ 1-833-202-4704

💻 Or visit www.wellcare.com/allwellIN

KANSAS

✚ HMO, PPO

☎ 1-855-565-9519

✚ HMO D-SNP

☎ 1-833-402-6707

💻 Or visit www.wellcare.com/allwellKS

LOUISIANA

✚ HMO

☎ 1-855-766-1572

✚ HMO D-SNP

☎ 1-833-541-0767

💻 Or visit www.wellcare.com/allwellLA

MISSOURI

✚ HMO

☎ 1-855-766-1452

✚ HMO D-SNP

☎ 1-833-298-3361

💻 Or visit www.wellcare.com/allwellMO

MISSISSIPPI

 HMO
 1-844-786-7711

 HMO D-SNP
 1-833-260-4124

 Or visit www.wellcare.com/allwellMS

NEBRASKA

 HMO, PPO
 1-833-542-0693

 HMO D-SNP, PPO D-SNP
 1-833-853-0864

 Or visit www.wellcare.com/NE

NEVADA

 HMO, HMO C-SNP, PPO
 1-833-854-4766

 HMO D-SNP
 1-833-717-0806

 Or visit www.wellcare.com/allwellNV

NEW MEXICO

 HMO, PPO
 1-833-543-0246

 HMO D-SNP
 1-844-810-7965

 Or visit www.wellcare.com/allwellNM

NEW YORK

 HMO, HMO-POS, HMO D-SNP
 1-800-247-1447

 Or visit www.wellcare.com/fidelisNY

OHIO

 HMO, PPO
 1-855-766-1851

 HMO D-SNP
 1-866-389-7690

 Or visit www.wellcare.com/allwellOH

OKLAHOMA

 HMO, PPO
 1-833-853-0865

 HMO D-SNP
 1-833-853-0866

 Or visit www.wellcare.com/OK

OREGON

 HMO, PPO
 1-844-582-5177

 Or visit www.wellcare.com/healthnetOR

 HMO D-SNP
 1-844-867-1156

 Or visit www.wellcare.com/trilliumOR

PENNSYLVANIA

 HMO, PPO
 1-855-766-1456

 HMO D-SNP
 1-866-330-9368

 Or visit www.wellcare.com/allwellPA

SOUTH CAROLINA

 HMO, HMO D-SNP
 1-855-766-1497

 Or visit www.wellcare.com/allwellSC

TEXAS

 HMO

 1-844-796-6811

 HMO D-SNP

 1-877-935-8023

 Or visit www.wellcare.com/allwellTX

WISCONSIN

 HMO D-SNP

 1-877-935-8024

 Or visit www.wellcare.com/allwellWI

WASHINGTON

 PPO

 1-844-582-5177

 Or visit www.wellcare.com/healthnetOR

TTY FOR ALL STATES: 711

HOURS OF OPERATION

 **October 1 to March 31:** Monday–Sunday, 8 a.m. to 8 p.m.

 **April 1 to September 30:** Monday–Friday, 8 a.m. to 8 p.m.