



BOARD ON

AGING &
LONG TERM CARE

Wisconsin Fall Medicare Trainings

Medicare Advantage Updates

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Training Logistics

- We will have time for questions at the end of the presentation as we have 87 slides to get through. **Please use the 'Q&A' function in zoom to ask your questions, Alyssa Kulpa will try to answer questions and save some for the end.**
 - I will do my best to address any questions but please avoid including any personal or client specific information.
 - If I am unable to address your question, please don't hesitate to contact BOALTCMedigap@wisconsin.gov for assistance.
- We have one scheduled break but please feel free to take care of your needs during this training, as it is being recorded.
- Slides and a recording will be made available following the presentation; a link is included on the Fall Training Agenda.

Presentation Overview

- **Brief Medicare Advantage Overview & Reminders**
- **Medicare Advantage Enrollment Periods & Navigating Coverage Changes**
 - Special Enrollment Periods
 - Medicare Advantage Trial Periods
- **Wisconsin Advantage Plan Landscape Overview**
 - Local Example – Chippewa County
- **Dual Eligible Special Needs Plan Changes**
- **Special Needs Plan Landscape Overview**
- **Closing / Question & Answer**

Training Objectives

- Provide a Broad Overview of Medicare Advantage and Enrollment Periods
- Understand Changes to Medicare Advantage Policy in 2027
- Understand Changes to Dual Eligible Special Needs Policy in 2027
- Provide an Overview of the Statewide Landscape of Medicare Advantage in Wisconsin for 2027
- Provide an Overview of the Statewide Landscape of Special Needs Plans in Wisconsin for 2027
- Understand How to Navigate Changes in Medicare Advantage Offerings in Your Area, Including:
 - Resources to Assist in Navigating the Medicare Advantage Landscape
 - A Local Example on How to Use Publicly Available Resources to Navigate Plan Changes

MEDICARE ADVANTAGE OVERVIEW & REMINDERS



Objectives – Medicare Advantage Overview

- Provide an Overview of Medicare Enrollment in Wisconsin
 - Including Medicare Advantage Enrollment and Trends
- Confirm a Basic Understanding of Medicare Advantage
- Identify Helpful Resources in Understanding Medicare Advantage

Medicare Enrollment in Wisconsin Overview

- In Wisconsin, **1,381,212 individuals** are enrolled in Medicare as of September 2026.
- Of these individuals **747,198 or approximately 54%** are enrolled in Medicare Advantage Plans.
- This represents an increase of the following from September 2025.
 - Medicare Enrollees: 31,836 (2.36%)
 - Medicare Advantage Enrollees: 4,076 (0.55 %)
- The percent of overall Medicare Enrollees in Medicare Advantage Plans has decreased from 55% (9/2025) to 54% (9/2026).

Medicare Advantage Review

- Medicare Advantage plans do not supplement Original Medicare.
- Advantage plans are health plans offered by Medicare-approved private companies that must follow rules set by Medicare.
 - Medicare pays a fixed amount each month to the company offering that plan for coverage of each beneficiary enrolled.
- Advantage plans offer coverage for Medicare Part A and Part B services, and some plans may offer coverage for things Original Medicare doesn't cover (such as routine dental or vision services, hearing aids, wellness programs, etc.).
 - These benefits are referred to as supplemental or extra benefits.
- Advantage plans may or may not include a Medicare Part D Prescription Drug Plan.

Medicare Advantage Costs

Premiums:

- Advantage plan enrollees are responsible for Medicare Part A & B premiums, advantage plan premiums (some plans may have \$0 premiums), and supplemental benefit premiums if elected.

Cost Sharing:

- Out of pocket costs may include deductibles, copays, or coinsurance which will vary by plan.

Maximum Out of Pocket Limit:

- Advantage Plans will have a maximum out of pocket limit which is the maximum an individual can spend in a year on cost sharing expenses.
- In 2027 the maximum out of pocket limit for plans is \$9,850 for in-network services and up to \$14,800 for combined in- and out-of-network services.

Medicare Advantage Definitions – Plan Types

Plan Types:

- Health Maintenance Organization (HMO): a plan that limits your coverage to a specific network of doctors, clinics, and hospitals.
- Preferred Provider Organization (PPO): a type plan that lets you see any doctor or specialist without a referral or a primary care physician.
- Private Fee For Services (PFFS): a plan that allows you to see any Medicare-approved doctor or hospital that agrees to the plan's payment terms and conditions.
- Medicare Medical Savings Account (MSA): a plan that combines a zero-premium high-deductible health plan with a deposit-funded savings account.
- Special Needs Plan: a plan with specialized care coordination for individuals with specific health or financial needs.

Medicare Definitions – Medicaid Related

- **Dual Eligible:** an individual that is eligible for and enrolled in both Medicare and Medicaid.
- **Medicaid SSI Health Maintenance Organization (HMO) (Managed Care Organization):** Health coverage for Medicaid members who are age 65 or older, blind, or disabled. This coverage may align with specific Dual Eligible Special Needs Plan offerings.
 - An organization that coordinates Medicaid health coverage.

Helpful Medicare Advantage Resources

[Code of Federal Regulations 42 CFR Part 422](#)

- More technical regulation for Medicare Advantage Plans.

[Medicare Managed Care Manual](#)

- Less technical Policy Manual than the Code of Federal Regulations (CFR).

[Consumer's Guide to Medicare Advantage in Wisconsin](#)

- Consumer facing Office of the Commissioner of Insurance booklet.

[Understanding Medicare Advantage Plans](#)

- Consumer facing Centers for Medicare and Medicaid Services booklet.

MEDICARE ADVANTAGE ENROLLMENT PERIODS



Objectives – Medicare Advantage Enrollment Periods

- Understand Relevant Beneficiary Plan Notices
- Understand Medicare Enrollment Periods Involving Medicare Advantage
 - Including access to publicly available enrollment guidance.
- Understand How to Navigate Common Medicare Advantage Related Special Enrollment Periods
 - Including Medicare Advantage Trial Periods!
- Identify Resources to Assist With Navigating Medicare Advantage Enrollment

Notices From Advantage Plans

- **Annual Notice of Change:** The Medicare Advantage Organization will send each enrolled Beneficiary a printed copy by September 30th including changes in the plan (costs/coverage) that will be effective January 1st.
- **Evidence of Coverage:** The Medicare Advantage Organization will send each enrolled Beneficiary a notice (or printed copy) by October 15th which gives details about the plan's coverage for next year (includes information on how to get it electronically or by mail).
- Documents can be viewed online at the Medicare Advantage Organization's website or obtained by contacting the Advantage Organization directly.

How to Enroll in Medicare Advantage Plans

- **Utilizing Medicare.Gov,**
- **Calling 1-800-MEDICARE, or**
- **Contacting the Medicare Advantage Organization Directly.**

Medicare.Gov Resources

- [Using the Medicare.Gov Plan Finder Tool - Youtube \(External Link\)](#)
A YouTube video explaining how to use the Medicare.Gov plan finder tool to compare Medicare Part D & Advantage Plans.
- [Creating a Medicare.Gov Account - YouTube \(External Link\)](#)
A YouTube video explaining how to use the Medicare.Gov plan finder tool to compare Medicare Part D & Advantage Plans.
- [Using the Medicare.Gov Plan Finder Tool \(Creating Account\) CMS \(PDF\)](#)
A PDF document outlining how to create a Medicare.Gov account and how to use the Medicare.Gov plan finder to view your projected costs and select a Medicare Advantage or Part D Plan.

Resources to Help with Navigating Medicare Advantage Enrollment

- **Medicare Part C & D Eligibility and Enrollment Guidance**
 - [Medicare Managed Care Eligibility and Enrollment Homepage - Centers for Medicare and Medicaid Services](#)
 - [Medicare Advantage and Part D Enrollment and Disenrollment Guidance 2027](#)
- **Medicare Rights Center Special Enrollment Period Chart**
 - [Medicare Rights Center Special Enrollment Periods for Medicare Advantage Plans](#)

Enrollment Periods

- **Initial Coverage Election Period**

- Typically, when an individual first enrolls in Medicare.

- **Annual Medicare Open Enrollment Period**

- October 15th to December 7th With Coverage Effective January 1st of the Following Year.

- **Medicare Advantage Open Enrollment Period**

- January through March Each Year With Coverage Effective the First of the Following Month.

- **Special Enrollment Periods**

- Common Special Enrollment Periods will be covered on the next several slides.

Special Enrollment Period for Individuals Who Enroll in Part B During the General Enrollment Period

Eligibility:

- An individual who individuals who are not entitled to premium-free Part A and who enroll in Part B during the General Enrollment Period for Part B (January–March).

Changes Permitted:

- Enrollment into a Part D Plan or Medicare Advantage Plan with Prescription Drug Coverage.

42 CFR § 423.38(c)(16)

Special Enrollment Period For Individuals Who Belong to a Qualified State Pharmaceutical Assistance Program or Who Los Eligibility.

Eligibility:

- An individual who belongs to a qualified “State Pharmaceutical Assistance Program”(§ 10) or has lost eligibility for the program.
- Wisconsin SeniorCare is a qualified State Pharmaceutical Assistance Program

Changes Permitted:

- Enrollment into a Part D Plan or Medicare Advantage Plan with Part D Coverage

42 CFR §§ 422.62(b)(12) and 423.38(c)(17)

Special Enrollment Period for Individuals Whose Plan or Contract is Terminated or Non-Renewed, Including Service Area Reductions

Eligibility:

- Individuals can use this enrollment period when the Centers for Medicare and Medicaid Services, a Medicare Advantage organization, or a Part D sponsor has terminated an individual's Medicare Advantage or Part D plan contract, discontinued the plan in the area in which an individual resides (i.e., service area reduction), or notified an individual of an impending plan termination or an impending service area reduction.

Changes Permitted:

- Enrollment into a Medicare Advantage Plan or Part D Plan

42 CFR §§ 422.62(b)(1), 422.74(e)(2)(ii), and 423.38(c)(6)

Special Enrollment Period for Individuals in The Program of All-inclusive Care for the Elderly (PACE)

Eligibility:

- Individuals who are in the Program for All-inclusive Care for the Elderly (PACE) (see § 10) to disenroll from a PACE organization.

Changes Permitted:

- Enrollment into a Medicare Advantage Plan or Part D Plan

42 CFR §§ 422.62(b)(7) and 423.38(c)(14)

Special Enrollment Period for Individuals Who Lose Special Needs Status

Eligibility:

- Individuals enrolled in a Special Needs Plan who no longer meet the applicable status to remain in the plan.

Changes Permitted:

- Enrollment into a Medicare Advantage Plan or Medicare Part D Plan

42 CFR §§ 422.62(b)(11) and 423.38(c)(27)

Special Enrollment Period for Individuals Who Are Eligible or Are Found Ineligible to Enroll in a Chronic Care Special Needs Plan

Eligibility:

- Individuals with a server or disabling chronic condition who are pursuing enrollment into a Chronic Care Special Needs Plan.

Changes Permitted:

- Enroll in a qualifying Chronic Care Special Needs Plan or Enroll in a Medicare Advantage Plan if found ineligible for the Chronic Care Special Needs Plan

42 CFR §§ 422.62(b)(13) and 423.38(c)(28)

Special Enrollment Period For Individuals Who Elect Into or Out of Employer Sponsored Coverage

Eligibility:

- Individuals who are leaving or entering employer sponsored coverage.

Changes Permitted:

- Enroll in or out of a employer sponsored coverage and/or a Medicare Advantage Plan.

42 CFR §§ 422.62(b)(4) and 423.38(c)(11)

Special Enrollment Period for Individuals Who Involuntarily Lose Creditable Prescription Drug Coverage

Eligibility:

- Individuals who involuntarily lose creditable prescription drug coverage.

Changes Permitted:

- Enrollment into a Medicare Advantage Plan with Prescription Drug Coverage or a Part D Plan

Social Security Act § 1860D-1(b)(3)(A); 42 CFR §§ 422.62(b)(19) and 423.38(c)(1)

Special Enrollment Period for Individuals Who Change Permanent Residence

Eligibility:

- Individuals who change their permanent residence and one or more of the following applies:
 - Changes their permanent residence to outside of the plan's service area;
 - Has been living outside of the U.S. and has now moved back to the U.S.;
 - Was incarcerated and has now been released; or
 - Has new Advantage or Part D plans available to them as a result of a permanent move.

Changes Permitted:

- Enrollment into a Part D Plan or Medicare Advantage Plan

42 CFR §§ 422.62(b)(2) and 423.38(c)(7)

Special Enrollment Period for Individuals Who Want to Enroll in a 5-star Plan

Eligibility:

- Any Medicare beneficiary that lives in an area with a 5-star plan.

Changes Permitted:

- Enrollment into a 5-star Part D or Medicare Advantage Plan

Star ratings for 2027 plans are set to be released on Medicare.Gov on or around October 8th 2026.

42 CFR §§ 422.62(b)(15), 423.38(c)(20), and 423.38(c)(29)

Special Enrollment Period for Significant Change in Provider Network

Eligibility:

- Individuals who have a plan that has been determined by the Centers for Medicare and Medicaid Services to have a significant change in the plan's provider network.

Changes Permitted:

- Enrollment into a Medicare Part D or Advantage Plan.

42 CFR §§ 422.62(b)(23) and 423.38(c)(30)

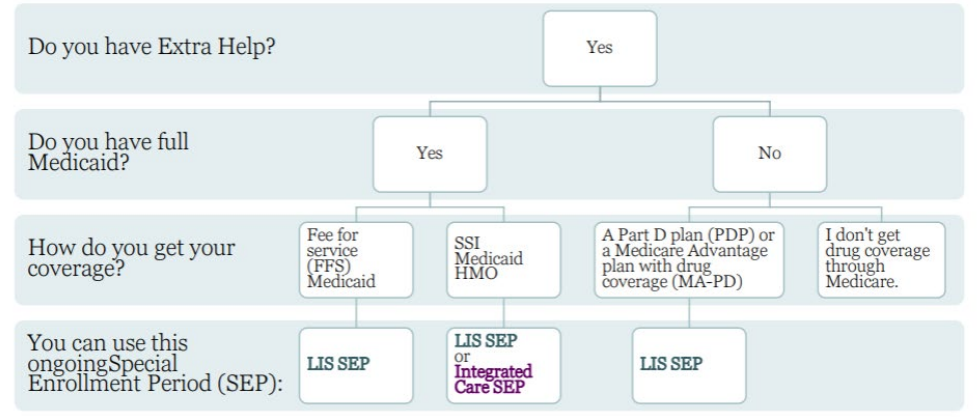
Special Enrollment Period for Integrated Care

Eligibility:

- Dually eligible individuals who are enrolled in an aligned Medicaid Managed Care Organization.

Changes Permitted:

- Enrollment into an aligned Fully Integrated, Highly Integrated, or Applicable Integrated Special Needs Plan.



42 CFR § 423.38(c)(35)

More Special Enrollment Periods!

More detailed information on the special enrollment periods we covered, including timeframes for enrollment and additional special enrollment periods can be found on the below publicly available guidance.

[Medicare Advantage and Part D Enrollment and Disenrollment Guidance 2027](#)

Medicare Advantage Trial Periods - Federal

- **Medicare Advantage "Special Enrollment Period 65" (Federal Trial Period)**
 - This Trial Period allows beneficiaries aged 65 who enrolled into a Medicare Advantage plan for the first time during their Medicare Initial Enrollment Period (IEP), the ability to disenroll from that plan and return to Original Medicare within the first 12 months of that plan's coverage. Beneficiaries using the 'SEP 65' have guaranteed issue protections to purchase any available Medigap policy regardless of the individual's health status. [\(Ins 3.39\(34\)\(b\)6\)](#)
- **Medicare Advantage "Trial Period" (Federal Trial Period)**
 - This Trial Period allows beneficiaries of any age, enrolling into a Medicare Advantage plan for the first time, when leaving a Medigap policy the ability to disenroll from that plan and return to Original Medicare within the first 12 months of that coverage. Beneficiaries using this Trial Period have guaranteed issue protections to purchase the Medigap policy they had prior, if still available, or purchase another Medigap policy regardless of the beneficiary's health status. [\(Ins 3.39\(34\)\(b\)5.b.\)](#)

[Medicare Advantage Trial Periods: Returning to Original Medicare](#)

Medicare Advantage Trial Periods - State

○ Wisconsin “State Trial Period” (State Guaranteed Issue Period)

- Wisconsin has another protection for Medicare beneficiaries. If a beneficiary leaves an employer-sponsored group health plan to enroll in a Medicare Advantage plan for the first time, the beneficiary has guaranteed issue protections to purchase a Medigap policy if the beneficiary disenrolls from the Advantage plan within the first 12 months of that plan's coverage. [\(Ins 3.39\(34\)\(b\)1r.\)](#)
- *There is no specific Medicare Special Enrollment Period for this trial period.*

[Medicare Advantage Trial Periods: Returning to Original Medicare](#)

WISCONSIN ADVANTAGE PLAN LANDSCAPE OVERVIEW



Objectives – Advantage Plan Landscape Overview

- Review the Medicare Advantage Plan Offerings in Wisconsin
- Understand Terms Related to Landscape Changes
 - Termination, Crosswalk, and More!
- Understand How to Evaluate Your Local Medicare Advantage Landscape
- Identify Tools to Navigate Changing Medicare Advantage Offerings
- Provide a Local Example of How to Identify and Navigate Medicare Advantage Landscape Changes

Data Source: [Prescription Drug Coverage - General Information | CMS](#)

Wisconsin Advantage Plan Landscape Summary

Type of Plan	Number of Plan Offerings
Medicare Advantage without Part D	16
Medicare Advantage with Part D	59
Special Needs Plan	28
Total Medicare Advantage Plans	103

Data does not include Medicare Cost Plans.

Total Medicare Advantage Plans in 2026: 107

Offerings by Medicare Advantage Plan Organization

Average Medicare Advantage Plan Monthly Premium:

- 2027: \$19.67
- 2026: \$19.38

100% of Medicare Beneficiaries in Wisconsin have access to a Medicare Advantage Plan in 2027.

100% of Medicare Beneficiaries in Wisconsin have access to a Medicare Advantage Plan with a \$0 monthly premium in 2027.

Organization Name	Total Plan Offerings
Aetna Medicare	8
Anthem Blue Cross and Blue Shield	6
Community Care	1
Dean Advantage	5
Group Health Cooperative of Eau Claire	2
HealthPartners	2
Humana	19
iCare	1
Molina Healthcare of Wisconsin	4
Network Health	10
Quartz Medicare Advantage	14
Security Health Plan of Wisconsin, Inc.	5
UnitedHealthcare	23
Wellcare	3

Medicare Advantage Plan Type Landscape Summary

Plan Type	Number of Total Plan Offerings
Health Maintenance Organization	18
Health Maintenance Organization - Point of Service	18
Medicare Medical Savings Account	1
Private Fee For Service	1
Preferred Provider Organization	35
Regional Preferred Provider Organization	2
Total Medicare Advantage Plans (Non-Special Needs Plans)	75

Health Maintenance Organization Plans

- Compass (HMO)
- Cooperative Medicare Advantage (HMO)
- Dean Advantage Complete (HMO)
- Dean Advantage Essential (HMO)
- Esteem Rx (HMO)
- Gundersen Quartz Med Advantage Basic D (w/Rx) (HMO)
- Gundersen Quartz Med Advantage Core D (w/Rx) (HMO)
- Gundersen Quartz Med Advantage Elite (HMO)
- Gundersen Quartz Med Advantage Elite D (w/Rx) (HMO)
- Gundersen Quartz Med Advantage Value (HMO)
- Gundersen Quartz Med Advantage Value D (w/Rx) (HMO)
- Humana Total Complete (HMO)
- UW Health Quartz Med Advantage Basic D (w/Rx) (HMO)
- UW Health Quartz Med Advantage Core D (w/Rx) (HMO)
- UW Health Quartz Med Advantage Elite (HMO)
- UW Health Quartz Med Advantage Elite D (w/Rx) (HMO)
- UW Health Quartz Med Advantage Value (HMO)
- UW Health Quartz Med Advantage Value D (w/Rx) (HMO)

Health Maintenance Organization - Point of Service Plans

- AARP Medicare Advantage Essentials from UHC WI-13 (HMO-POS)
- AARP Medicare Advantage Extras from UHC WI-19 (HMO-POS)
- AARP Medicare Advantage from UHC WI-0010 (HMO-POS)
- AARP Medicare Advantage from UHC WI-0011 (HMO-POS)
- AARP Medicare Advantage from UHC WI-0012 (HMO-POS)
- AARP Medicare Advantage from UHC WI-0014 (HMO-POS)
- AARP Medicare Advantage from UHC WI-0015 (HMO-POS)
- AARP Medicare Advantage Patriot No Rx WI-MA02 (HMO-POS)
- Aetna Medicare Signature (HMO-POS)
- Anthem Medicare Advantage (HMO-POS)
- Dean Advantage Assurance (HMO-POS)
- Dean Advantage Balance (HMO-POS)
- Dean Advantage Harmony (HMO-POS)
- Esteem Rx Gold (HMO-POS)
- Esteem Rx Silver (HMO-POS)
- Legacy Rx (HMO-POS)
- Wellcare Simple (HMO-POS)

More Medicare Advantage Plans

Medicare Medical Savings Account Advantage Plans

- Network Health Prime (MSA)

Private Fee For Service Advantage Plans

- Humana Gold Choice H8145-006
(PFFS)

Preferred Provider Organization (Local & Regional) Plans

- AARP Medicare Advantage from UHC WI-0002 (PPO)
- AARP Medicare Advantage from UHC WI-6 (PPO)
- AARP Medicare Advantage Patriot No Rx WI-MA01 (PPO)
- Aetna Medicare Eagle (PPO)
- Aetna Medicare Enhanced (PPO)
- Aetna Medicare Signature (PPO)
- Aetna Medicare Signature Extra (PPO)
- Aetna Medicare Value Care (PPO)
- Anthem Medicare Advantage 3 (PPO)
- Anthem Veteran (PPO)
- HealthPartners Birch (PPO)
- HealthPartners Cedar (PPO)
- Humana Essentials Plus Giveback (PPO)
- Humana Full Access (PPO)
- Humana USAA Honor Giveback (PPO)
- **Humana USAA Honor Giveback (Regional PPO)**
- Humana Value Choice (PPO)
- Humana Value Plus H5216-173 (PPO)
- HumanaChoice Giveback H5216-252 (PPO)
- HumanaChoice H5216-001 (PPO)
- HumanaChoice H5216-006 (PPO)
- HumanaChoice H5216-168 (PPO)
- HumanaChoice H7617-007 (PPO)
- **HumanaChoice R5361-002 (Regional PPO)**
- Network Health Anywhere (PPO)
- Network Health Armor (PPO)
- Network Health Bravo (PPO)
- Network Health Choice (PPO)
- Network Health Go (PPO)
- Network Health PlusRx (PPO)
- Network Health PremierRx (PPO)
- Network Health Select (PPO)

Medicare Advantage Plan Enrollment Limits

Enrollment limits or capacity limits are caps established by a Medicare Advantage plan organization during the annual bid process to restrict total enrollment numbers for one or more specific plans.

42 CFR 422.60(b)

Plan Name	Plan ID	Enrollment Limit
Cooperative Medicare Advantage (HMO)	H7598_004	2,500
HealthPartners Birch (PPO)	H6309_001	6,100
HealthPartners Cedar (PPO)	H6309_002	1,150
Network Health Anywhere (PPO)	H5215_010	23,254
Network Health Armor (PPO)	H5215_013	5,378
Network Health Bravo (PPO)	H5215_014	1,601
Network Health Cares (PPO D-SNP)	H5215_007	3,148
Network Health Choice (PPO)	H5215_011	37,136
Network Health Go (PPO)	H5215_009	11,440
Network Health PlusRx (PPO)	H5215_002	3,185
Network Health PremierRx (PPO)	H5215_005	1,522
Network Health Prime (MSA)	H1181_001	3,408
Network Health Select (PPO)	H5215_008	56,345

Medicare Advantage Plan Crosswalk

A Medicare Advantage plan crosswalk is the automatic transfer of a beneficiary from one plan or benefit package to another by an insurance company and the Centers for Medicare & Medicaid Services.

Causes of Crosswalks:

- Plan Termination: The plan sponsor stops offering the specific plan.
- Consolidation: The plan sponsor combines multiple plans into a single option.
- Service Area Changes: The plan sponsor reduces or changes the counties where the plan is active.

Medicare Advantage Plan Service Area Reduction

Scope

- The plan ends in the beneficiary's county but may continue in others.

Notice Timing

- Received by early October (before AEP).
- Model Notice: [HPMS Memos Archive – Weekly \(9/29/26\) | CMS](#)

Crosswalk Option

- Plan Sponsor may crosswalk a beneficiary to a similar active local plan.

Medicare Advantage Plan Termination / Non-Renewal

Scope

- The plan is discontinued entirely by the insurer.

Notice Timing

- Received by early October (before AEP).
- Model Notice: [HPMS Memos Archive – Weekly \(9/29/26\) | CMS](#)

Crosswalk Option

- Generally, plan termination causes beneficiaries to return to Original Medicare if no other Medicare Advantage election is made during the Annual Election Period or an applicable Special Enrollment Period.

Facilitated Enrollment

- Facilitated enrollment applies to partial-benefit dual eligibles and other LIS-eligible individuals.
- Under facilitated enrollment, other **Low Income Subsidy eligible individuals in Medicare Advantage-only plans are enrolled by the plan organization into a Medicare Advantage with Part D unless they opt out.** Other Low Income Subsidy eligible individuals are defined as those deemed eligible because they are either:
 - Determined eligible for the full Low Income Subsidy upon initial enrollment into a Medicare Advantage-only plan, or,
 - An existing Medicare enrollee of a Medicare Advantage-only plan who becomes newly eligible for Low Income Subsidy.

Key Takeaways: Medicare Advantage Plan Changes for 2027

- Overall contraction of the Medicare Advantage Plan landscape in Wisconsin.
 - Less plan offerings paired with some reductions in plan service areas.
- Enrollment limits are now in place for several Medicare Advantage plans.
- Premiums on aggregate have remained steady.
- Some Medicare Advantage Organizations have left the marketplace.
 - Example: Aspirus
- Several plans have consolidated their offerings which may result in crosswalks and/or plan terminations.

Chippewa County

LOCAL EXAMPLE



Helpful Tools & Resources

- Medicare Landscape Files (2026 & 2027)
 - [Prescription Drug Coverage - General Information | CMS](#)
- Medicare Crosswalk Files (2027)
 - [Plan Crosswalks | CMS](#)
- Medicare.Gov
 - Review plan offerings and may include links to plan webpages and documents.
- Plan Webpages for Plan Documents (Annual Notice of Change)
 - Review Annual Notice of Change for plans that are ending or changing from year to year.
 - It may be advantageous to create an excel file that links all of the relevant plan documents for the clients you may be serving.

2026 Plan Offerings Chippewa County

- 15 Total Non-Special Needs Plan Offerings
- 8 Medicare Advantage Plans without Part D Coverage
- 7 Medicare Advantage Plans with Part D Coverage

Consolidated Part C & D Premium includes the consolidated Monthly Premium; this may not reflect the actual premium for enrollees.

Plan Name	Plan ID	Plan Type	Consolidated Part C & D Premium
AARP Medicare Advantage Patriot No Rx WI-MA01 (PPO)	H0294_014	MA	Not Applicable
Network Health Prime (MSA)	H1181_001	MA	Not Applicable
Spirit (HMO-POS)	H5211_001	MA	Not Applicable
Essence Rx (HMO-POS)	H5211_002	MA-PD	\$87.00
Compass (HMO-POS)	H5211_003	MA	Not Applicable
Legacy Rx (HMO-POS)	H5211_004	MA-PD	\$269.00
Esteem Rx (HMO-POS)	H5211_012	MA-PD	\$0.00
Humana USAA Honor Giveback (PPO)	H5216_355	MA	Not Applicable
AARP Medicare Advantage Patriot No Rx WI-MA02 (HMO-POS)	H5253_021	MA	Not Applicable
AARP Medicare Advantage from UHC WI-0015 (HMO-POS)	H5253_072	MA-PD	\$0.00
Cooperative Medicare Advantage (HMO)	H7598_004	MA-PD	\$0.00
HumanaChoice H7617-007 (PPO)	H7617_007	MA-PD	\$47.00
Humana USAA Honor Giveback (PPO)	H7617_022	MA	Not Applicable
Humana USAA Honor Giveback (Regional PPO)	R5361_001	MA	Not Applicable
HumanaChoice R5361-002 (Regional PPO)	R5361_002	MA-PD	\$103.00

2027 Plan Offerings Chippewa County

- 12 Total Non-Special Needs Plan Offerings
- 5 Medicare Advantage Plans without Part D Coverage
- 7 Medicare Advantage Plans with Part D Coverage (Same as 2026)

Consolidated Part C & D Premium includes the consolidated Monthly Premium; this may not reflect the actual premium for enrollees.

Plan Name	Plan ID	Plan Type	Consolidated Part C & D Premium
Network Health Prime (MSA)	H1181_001	MA	Not Applicable
Compass (HMO)	H5211_003	MA	Not Applicable
Legacy Rx (HMO-POS)	H5211_004	MA-PD	\$300.00
Esteem Rx (HMO)	H5211_012	MA-PD	\$20.00
Esteem Rx Silver (HMO-POS)	H5211_014	MA-PD	\$65.00
Esteem Rx Gold (HMO-POS)	H5211_015	MA-PD	\$125.00
Humana USAA Honor Giveback (PPO)	H5216_355	MA	Not Applicable
Cooperative Medicare Advantage (HMO)	H7598_004	MA-PD	\$0.00
HumanaChoice H7617-007 (PPO)	H7617_007	MA-PD	\$60.00
Humana USAA Honor Giveback (PPO)	H7617_022	MA	Not Applicable
Humana USAA Honor Giveback (Regional PPO)	R5361_001	MA	Not Applicable
HumanaChoice R5361-002 (Regional PPO)	R5361_002	MA-PD	\$87.00

Consistent Plan Offerings

Plan Name (2027)	Plan ID	2026 Consolidated C & D Premium	2027 Consolidated C & D Premium
Network Health Prime (MSA)	H1181_001	Not Applicable	Not Applicable
Compass (HMO)	H5211_003	Not Applicable	Not Applicable
Legacy Rx (HMO-POS)	H5211_004	\$269	\$300
Esteem Rx (HMO)	H5211_012	\$0	\$20
Humana USAA Honor Giveback (PPO)	H5216_355	Not Applicable	Not Applicable
Cooperative Medicare Advantage (HMO)	H7598_004	\$0	\$0
HumanaChoice H7617-007 (PPO)	H7617_007	\$47	\$60
Humana USAA Honor Giveback (PPO)	H7617_022	Not Applicable	Not Applicable
Humana USAA Honor Giveback (Regional PPO)	R5361_001	Not Applicable	Not Applicable
HumanaChoice R5361-002 (Regional PPO)	R5361_002	\$103	\$87

Key Advantage Plan Changes

2026 Plan Name	2026 Plan ID	Change For 2027
AARP Medicare Advantage Patriot No Rx WI-MA01 (PPO)	H0294_014	Service Area Reduction
Spirit (HMO-POS)	H5211_001	Crosswalk to Compass (HMO)
Essence Rx (HMO-POS)	H5211_002	Terminated
AARP Medicare Advantage Patriot No Rx WI-MA02 (HMO-POS)	H5253_021	Service Area Reduction
AARP Medicare Advantage from UHC WI-0015 (HMO-POS)	H5253_072	Service Area Reduction

Local Medicare Advantage Plan Landscape Review Process Overview

1. Reviewed 2026 Medicare Advantage Plan Landscape

- Utilized basic excel functions such as tables and/or pivot tables to sort data in a specific county and type of plan.

2. Reviewed 2027 Medicare Advantage Plan Landscape

- Utilized basic excel functions such as tables and/or pivot tables to sort data in a specific county and type of plan.

3. Compared data and located plan documents for plans that were and were not consistent from year to year.

- This can be tailored to meet your specific needs as the landscape files, crosswalk files, and plan documents include all of the information you might need to assemble a year-to-year comparison.

This local landscape review using publicly available information took about 20-25 minutes to complete and can be done easily for a specific area whether you work with clients in one county or multiple counties.

Please be prepared to resume the training in 10 minutes.

BREAK



DUAL ELIGIBLE SPECIAL NEEDS PLAN CHANGES



Objectives - Dual Eligible Special Needs Plan Changes

- Understand Policy Changes Related to Dual Eligible Special Needs Plans
- Compare Policy Changes to Current Policy for Dual Eligible Special Needs Plans
- Share Future Policy Changes to Dual Eligible Special Needs Plans Due to Further Integration
- Review Helpful Tools to Navigate Dual Eligible Special Needs Plan Policy Changes

Sources: Wisconsin Department of Health Services
Division of Medicaid Services
[Frequently Asked Questions \(FAQs\) and Enrollment Scenarios for § 422.514\(h\)](#)

Key 2027 Dual Eligible Special Needs Plan Policy Changes – New Enrollees

- New Dual Eligible Special Needs Plan enrollments (not already enrolled in a Dual Eligible Special Needs Plan) are limited to individuals who are either enrolled or enrolling into an aligned Medicaid Health Maintenance (Managed Care) Organization.
- 2027 Medicaid Health Maintenance Organizations Include:
 - Compcare Health Services Insurance Corporation
 - Group Health Coop Eau Claire
 - iCare (Humana)
 - Managed Health Services
 - Molina HealthCare
 - MyChoice Wisconsin Medicare Dual Advantage
 - Network Health Plan
 - Quartz
 - "UnitedHealthcare Community Plan(Care Improvement Plus Wisconsin Insurance Company)"

Key 2027 Dual Eligible Special Needs Plan Policy Changes – Plan Offering Changes

- Each Medicare Advantage Organization may only have one Dual Eligible plan benefit package in the same service area unless each plan benefit package services a different population.
 - Example: UnitedHealthCare could have two plan benefit packages in the same area with one serving full benefit Medicaid members and one serving another population of Medicaid members.
- What might this mean for applicable beneficiaries?
 - Generally, less plan offerings in their area.
 - Example: They may only be eligible for 4 of the 8 available Dual Eligible Special Needs Plans due to service population rule changes.

Key 2027 Dual Eligible Special Needs Plan Policy Changes – Preferred Provider Organization Plans

- New enrollments into Preferred Provider Organization Dual Eligible Special Needs Plans are frozen.
- The one remaining UnitedHealthCare preferred provider organization plan (UHC Dual Advantage WI-V2) will not accept new enrollments effective 1/1/2027.

Key Exceptions to 2027 Dual Eligible Plan Changes

- Under Centers for Medicare and Medicaid Services rules the following are exempt from the changes on the previous slides:
 - Fee For Service Members
 - Family Care Members
 - Partial Medicaid Members

Key Policy Differences for Dual Eligibles in 2027 Compared to 2026

2026

- Integrated (aligned) coverage optional for all enrollees.
- Dual Eligible Special Needs Plans that are Preferred Provider Organizations accepting enrollments.
- Advantage Plan Organizations could offer multiple dual eligible plan benefit packages to the same population of Medicaid enrollees.

2027

- Integrated (aligned) coverage required for new enrollees.
- Dual Eligible Special Needs Plans that are Preferred Provider Organizations no longer accepting enrollments.
- Advantage Plan Organizations cannot offer multiple dual eligible plan benefit packages to the same population of Medicaid enrollees.

2030 Dual Eligible Special Needs Plan Changes

- The Centers for Medicare and Medicaid Services has indicated that all members enrolled in Dual Eligible Special Needs Plans will need to be aligned.
- This would mean that both new and existing Dual Eligible Plan enrollees would need to be in aligned Medicaid Managed Care Organizations and Dual Eligible Special Needs Plan.
- We do not know how that is going to look yet, as some members will have to change either their Health Maintenance Organization or Dual Eligible Special Needs Plan.

Dual Eligible Special Needs Plan Integration Timeline

2026

- No alignment requirements for Medicare Advantage and Managed Care.
- Alignment needed to utilize the Integrated Care Special Enrollment Period.

2027

- New Dual Eligible Special Needs Plan enrollments are limited to individuals who are either enrolled or enrolling into an aligned Medicaid Health Maintenance (Managed Care) Organization.

2030

- The Centers for Medicare and Medicaid Services has indicated that all members enrolled in Dual Eligible Special Needs Plans will need to be aligned.

Wisconsin Department of Health Services Dual Eligible Special Needs Plan Eligibility Spreadsheet

AutoSave ON ma-pd-service-area (10)

File Home Insert Draw Page Layout Formulas Data Review View Automate Help Acrobat

Georgia Pro Light 12 A' A' Wrap Text General Conditional Formatting Table Styles Insert Delete Format AutoSum Fill Sort & Filter Find & Select Sensitivity Add-ins Create PDF and Share via Outlook Adobe Acrobat

Clipboard Font Alignment Number Styles Cells Editing Sensitivity Add-ins

To clear a filter, click the funnel icon with the red X in the upper right-hand corner of the box.

2027 Dual Eligible Special Needs Plans (D-SNPs)

1. Click on the county name(s) and Medicaid programs (yes/no) to find out which plans are available for you.
 2. Multiple options can be selected.
 3. Filters can be applied in any order. For example, you can click a D-SNP plan name to see in which counties it's available and which Medicaid programs it accepts.
 4. To clear a filter, click the funnel icon with the red X in the upper right-hand corner of the box.

Choose where you live. Choose your coverage. See what plans you can have.

1. Click on the county name(s) to see which plans are available there.

2. Click "yes" or "no" under a Medicaid program's name to see which plans will enroll people who have that Medicaid program.

3a. See which D-SNPs are available based on the service area and Medicaid program eligibility selected. Or click on a plan name to see its service area and Medicaid eligibility.

4a. See which SSI Medicaid HMO are aligned with selected D-SNPs.

3b. See what types of D-SNPs are available.

4b. See whether D-SNPs in this area conduct default enrollment.

Service area (county)

Adams	Ashland
Barron	Bayfield
Brown	Buffalo
Burnett	Calumet
Chippewa	Clark
Columbia	Crawford
Dane	Dodge
Door	Douglas
Dunn	Eau Claire
Florence	Fond du Lac
Forest	Grant
Green	Green Lake
Iowa	Iron
Jackson	Jefferson
Juneau	Kenosha
Kewaunee	La Crosse
Lafayette	Laneade

Enrolls full Medicaid?

No

Yes

Enrolls QMB?

No

Yes

Enrolls QWDI?

No

Yes

Enrolls SLMB?

No

Yes

Enrolls QI ("SLMB+" in Wisconsin)?

No

Yes

3b. See what types of D-SNPs are available.

Type of plan

HMO

HMO POS

PPO

D-SNP plan name

Anthem Dual Advantage Plus

Anthem Full Dual Advantage

Cooperative Advantage (GHC EC)

Gundersen Quarta Medi Advantage Dual Eligible

HumanaChoice

Molina My Choice Dual Advantage

Network Health Cares

UHC Dual Advantage WI-V2

UHC Dual Complete WI-Q1

UHC Dual Complete WI-S1

UHC Wisconsin Dual Advantage V-1

UW Health Quarta Med Advantage Dual Eligible

Wellcare MHS Health Wisconsin Dual Liberty Sync

Wellcare MHS Health Wisconsin Dual Select

Aligned SSI Medicaid HMO

Compare

Group Health Coop Eau Claire (GHC EC)

iCare

Managed Health Services (MHS)

Molina HealthCare

N/A

Network Health (NHP)

Quarta

United Healthcare

4b. See whether D-SNPs in this area conduct default enrollment.

Conducts default enrollment?

N/A

No

Yes

Ready Accessibility Investigate

How to use this spreadsheet Key 2026 Filterable dashboard 2026 Filterable table 2026 Print-friendly list 2026 Aligned HMOs 2027 Dashboard 2027 Table 2027 Print-friendly list 2027 Aligned HMOs 26 + | 100%

Wisconsin Department of Health Services - D-SNP Spreadsheet

SPECIAL NEEDS PLAN LANDSCAPE OVERVIEW



Objectives – Special Needs Plan Landscape Overview

- Review the Medicare Advantage Special Needs Plan Offerings in Wisconsin
- Understand How to Evaluate Your Local Medicare Advantage Landscape
- Identify Tools to Navigate Changing Medicare Advantage Offerings

Wisconsin Special Needs Medicare Advantage Plan Landscape Summary

Type of Special Needs Plan	Number of Plan Offerings
Chronic or Disabling Condition	4
Dual-Eligible	22
Institutional	2
Total Medicare Advantage Plans	28

Special Needs Advantage Plan Landscape

Chronic or Disabling Condition

- UHC Complete Care WI-1 (PPO C-SNP)
- UHC Complete Care WI-20 (HMO-POS C-SNP)
- UHC Complete Care WI-21 (HMO-POS C-SNP)
- HumanaChoice - Diabetes and Heart (PPO C-SNP)

Institutional

- UHC Nursing Home Plan WI-F001 (HMO-POS I-SNP)
- UHC Care Advantage WI-E001 (HMO-POS I-SNP)

Dual Eligible Special Needs Plan Landscape

- UHC Dual Advantage WI-V2 (PPO D-SNP)
- iCare Family Care Partnership (HMO D-SNP)
- UHC Dual Complete WI-Q1 (HMO-POS D-SNP)
- UHC Dual Advantage WI-V1 (HMO-POS D-SNP)
- UHC Dual Complete WI-S1 (HMO-POS D-SNP)
- Molina My Choice Partnership (HMO D-SNP)
- Molina My Choice Dual Advantage (HMO D-SNP)
- Cooperative Advantage (HMO D-SNP)
- Anthem Full Dual Advantage (HMO D-SNP)
- Anthem Dual Advantage Plus (HMO D-SNP)
- UHC Dual Complete WI-S1 (HMO-POS D-SNP)
- UHC Dual Complete WI-S1 (HMO-POS D-SNP)
- Network Health Cares (PPO D-SNP)
- HumanaChoice SNP-DE H5216-420 (PPO D-SNP)
- Wellcare MHS Health Wisconsin Dual Liberty Sync (HMO-POS D-SNP)
- Wellcare MHS Health Wisconsin Dual Select (HMO-POS D-SNP)
- Community Care's Partnership Program (HMO D-SNP)
- Molina My Choice Partnership (HMO D-SNP)
- Molina My Choice Dual Advantage (HMO D-SNP)
- UW Health Quartz Med Advantage Dual Eligible (HMO D-SNP)
- UHC Dual Complete WI-YL (HMO-POS D-SNP)
- Gundersen Quartz Med Advantage Dual Eligible (HMO D-SNP)

Dual Eligible Special Needs Plan by Integration Status

Integration Status	Number of Plan Offerings
Coordination Only (CO)	4
Fully Integrated (FIDE)	5
Highly Integrated (HIDE)	13

2027 Dual Eligible Special Needs Plan Alignment

Medicaid Health Maintenance Organization	Aligned Medicare D-SNP Plan(s)
Compcare Health Services Insurance Corporation	Anthem Full Dual Advantage
Group Health Coop Eau Claire	Cooperative Advantage (GHC EC)
iCare (Humana)	HumanaChoice
Managed Health Services (MHS)	Wellcare MHS Health Wisconsin Dual Liberty Sync Wellcare MHS Health Wisconsin Dual Select
Molina HealthCare	Molina My Choice Dual Advantage
MyChoice Wisconsin Medicare Dual Advantage	Molina My Choice Dual Advantage
Network Health Plan (NHP)	Network Health Cares
Quartz	Gundersen Quartz Medi Advantage Dual Eligible UW Health Quartz Med Advantage Dual Eligible
"UnitedHealthcare Community Plan(Care Improvement Plus Wisconsin Insurance Company)"	UHC Dual Advantage WI-V2 UHC Dual Complete WI-S1

Dual Special Needs Plan Landscape Changes for 2027

Plan Name	Plan ID	Service Area Changes in 2027	Change
Ally Rx	H5211-010	None	Plan ending in 2027
Anthem Full Dual Advantage	H9525-003	None	Full Medicaid members transition Crosswalk to H9525-027. QMB-only members Crosswalk to H9525-028.
Anthem Full Dual Advantage 2	H9525-018	None	Full Medicaid members Crosswalk to H9525-027. QMB-only members crosswalk to H9525-028.
Anthem Full Dual Advantage	H9525-027	None	New Plan
Anthem Dual Advantage Plus	H9525-028	None	New Plan
Cooperative Advantage (GHC EC)	H7598-003	None	Now only accepts people with full benefit Medicaid. Coverage terminated for individuals without full Medicaid.

Dual Special Needs Plan Landscape Changes for 2027 Part 2

Plan Name	Plan ID	Service Area Changes in 2027	Change
Gundersen Quartz Medi Advantage Dual Eligible	H5262-029	None	No Change
HumanaChoice	H5216-420	Added: Dane, Iowa, Sauk	Expanded Service Area
Molina My Choice Dual Advantage	H5209-006-001	None	Name Change
Molina My Choice Dual Advantage	H5209-006-002	Added: Kenosha Dropped: Dane, Jefferson, Milwaukee, Ozaukee, Racine, Rock, Walworth, Washington, Waukesha	Name Change
Network Health Cares	H5215-007	Added: Kenosha, Racine, Washington, Waukesha	Now only accepts people with full benefit Medicaid. Individuals without full Medicaid will be terminated.
UHC Dual Advantage WI-V2	H0294-027	Dropped: Eau Claire, La Crosse	Name change, no longer accepting new members effective 1/1/2027.

Dual Special Needs Plan Landscape Changes for 2027 Part 3

Plan Name	Plan ID	Service Area Changes in 2027	Change
UHC Care Dual Complete WI-D003	H5253-024	None	Plan ending with member crosswalk to H3794-011.
UHC Dual Complete WI-S1	H3794-011-001	None	Receiving crosswalk members, new plan.
UHC Dual Complete WI-S1	H3794-011-002	None	Receiving crosswalk members, new plan.
UHC Dual Complete WI-S1	H3794-011-003	None	Receiving crosswalk members, new plan.
UHC Dual Complete WI-Q1	H3794-002	Dropped: Eau Claire, La Crosse	Now only accepting only QMB members, no longer accepts other Medicaid enrollments.
UHC Wisconsin Dual Advantage V-1	H3794-004	Dropped: Eau Claire, La Crosse	Now only accepts SLMB and SLMB+ members. No longer accepts full Medicaid and/or QMB members.

Dual Special Needs Plan Landscape Changes for 2027 Part 4

Plan Name	Plan ID	Service Area Changes in 2027	Change
UHC Dual Complete WI-D3	H3794-006	None	Plan ending in 2027
UW Health Quartz Med Advantage Dual Eligible	H5262-030	None	No Changes
Wellcare MHS Health Wisconsin Dual Liberty Sync	H8189-001	Dropped: Adams, Green Lake, Lincoln, Marinette, Marquette, Portage, Shawano	Now only accepts individuals with full benefit Medicaid. Name Change.
Wellcare MHS Health Wisconsin Dual Select	H8189-007	Dropped: Adams, Green Lake, Lincoln, Marinette, Marquette, Portage, Shawano	Now only accepts individuals with QMB. Name Change.

Key Takeaways: Dual Eligible Special Needs Plan Changes for 2027

- Lots of plan name changes, crosswalks, and service area changes across the Dual Eligible Special Needs Plan landscape for 2027.
- Enrollment (Capacity) Limit of **3,148** for the **Network Health Cares (PPO D-SNP) (H5215-007)**.
- Be mindful of service area changes for plans, as this may affect plan selection choices or result in terminations for affected beneficiaries.
- Use the [Wisconsin Department of Health Services - D-SNP Spreadsheet](#) to assist you with navigating these changes.

WRAP UP & CLOSING



Key Takeaways: Medicare Advantage Updates

- Significant policy and plan offering changes in the Dual Eligible Special Needs Plan landscape.
 - Many counties will have fewer plan options for eligible enrollees due to policy changes and reduction in plan offerings.
- Overall contraction of the Medicare Advantage market in Wisconsin.
 - Less overall plan offerings compared to 2026 with fewer Medicare Advantage Organizations offering plans.
- Steady aggregate premium costs for enrollees.
 - All Medicare enrollees still have access to \$0 premium plans, and the average premium has remained very similar to 2026.

Medigap Helpline Program Authorization & Mandates

The Board on Aging and Long Term Care is mandated by [state statutes](#) to provide information and counseling to consumers through the Medigap Helpline regarding:

- Insurance policies available to supplement federal Medicare insurance coverage,
- Long-term care insurance, and
- The eligibility requirements for medical assistance.

While providing:

- Training,
- Educational materials, and
- Technical assistance

To volunteer organizations, private businesses, and professionals who also serve these populations.

Medigap Helpline – Program Services

Phone Based Services

Two phone-based helplines serving Medicare beneficiaries of all ages and professionals in Wisconsin.

- Medigap Helpline – 1-800-242-1060 & BOALTCMedigap@wisconsin.gov
- Medigap Part D and Prescription Drug Helpline – 1-855-677-2783 & BOALTCRXHelpline@wisconsin.gov

Medigap Helpline staff provide Medicare-related insurance counseling to thousands of Medicare beneficiaries and professionals each year.

Outreach and Public Education

The Medigap Helpline participates in various fairs, conducts presentations, and completes other media outreach across Wisconsin to share our program and SHIP network services and educate the public on Medicare related insurance options.

Medigap Helpline Online Resources

Webpage – WWW.BOALTC.WI.GOV

Medigap Helpline Services	
Medicare	▼
Medicare Supplements (Medigap)	▼
Medicare Advantage Plans	▼
Prescription Drug Options	▼
Other Types of Coverage	▼
Long Term Care Insurance (LTC)	▼
Resources	
Volunteer Program	

[BOALTC](#) > Resources

Resources

MEDIGAP HELPLINE RESOURCES

The Medigap Helpline uses the following public-facing resources in our Medicare-related insurance counseling with Medicare beneficiaries. Resources can be found below. **Click the category names below to display the corresponding resource links (green and underlined).** Medigap Helpline press releases can be found at the following link: [Medigap Helpline Press Releases](#).

Resources produced by the Board on Aging and Long Term Care are current as of the date listed on the publication. Resources in each section are listed in numerical order.

- ▶ **Medicare Part D or Advantage Plan Review Process Resources**
- ▶ **Medicare Supplement (Medigap) Policy Resources**
- ▶ **Medicare Advantage Plan Resources**
- ▶ **Medicare Part D & Prescription Drug Resources**
- ▶ **Other Medicare (CMS) Resources**
- ▶ **Medicaid & Medicare Resources**
- ▶ **Long Term Care Insurance Resources**
- ▶ **Other Insurance-Related Resources**

Thank You & Time for Questions!

Nick Lutes (he/him)

Medigap Helpline Services Director
Board on Aging and Long Term Care



Additional Questions: BOALTCMedigap@wisconsin.gov