



* Si usted necessita esta informacion en espanol por favor llame al 1-866-593-2538.

<<Date>>

<<Member First Name>> <<Member Last Name>>

<<Address>>

<<City>> <<State>> <<Postal Code>>

WellCare Health Plans wants to help you take get more involved in your child’s health care. Our records show that your child may have heart problems or congestive heart failure (CHF). **(If this is incorrect, please call the number below and let us know). Getting involved is up to you.**

Below is a list of educational material that can help you learn more about your child’s CHF. Please check off the brochure(s) that you would like to receive. Tear off the bottom portion of this letter and mail it back to us. Use the enclosed postage paid envelope. We will send the educational materials to you.

Also, we would like to learn more about your child’s health care needs. Please fill out the enclosed Member Questionnaire and mail it back to us. You can use the same envelope that you mail your request for educational materials in.

If you want to speak with one of our nurses about our Program, please **call toll free 1-866-593-2538**. (If you are a TTY/TTD user, please call 1-877-247-6272.) Our nurse case managers are available Monday-Friday 8 a.m.-5 p.m. ET.

If you have a medical question and would like to speak with a nurse, please call the Personal Health Advisor Line at 1-800-919-8807. (If you are a TTY/TTD user, please call 1-877-247-6272.) A nurse is available to help you 24 hours a day, seven days a week. The nurse can also help you decide if you should call your doctor or go to the hospital. The nurse may also give you tips you can use to care for yourself at home.

Working together as a team, we can make a difference!

Thank you,
WellCare Health Plans



Member Name: _____ Address: _____
Telephone Number: _____

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|---|--|--|--|
| <input type="checkbox"/> Heart Failure | <input type="checkbox"/> Diuretics | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Weight Loss |
| <input type="checkbox"/> High Blood Pressure | <input type="checkbox"/> Digoxin | <input type="checkbox"/> Low Salt Diet | <input type="checkbox"/> Smoking Cessation |
| <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Ace Inhibitors | <input type="checkbox"/> Cholesterol | <input type="checkbox"/> Depression |
| <input type="checkbox"/> Understanding Your Medications | <input type="checkbox"/> Overview of Complications | <input type="checkbox"/> Women’s Health Issues | <input type="checkbox"/> Sick Day |

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