PROVIDER DIRECTORY

State of Wisconsin Group Health Plan

MEDICAL ASSOCIATES

1605 Associates Drive, Dubuque, IA 52002
Local (563) 584-4885 • Toll-Free (866) 821-1365
http://ww2.mahealthcare.com/MAHPProvDBExternalSearch/Reports/WISEDirectory.pdf

Participating Provider Directory

This Directory lists the doctors, hospitals, and healthcare providers that participate in our Health Plan. At the time of printing, this listing is up to date. However, ongoing changes happen as new providers are added and other providers end their participation with Medical Associates Health Plan. If you have any questions about a provider, please call the provider's office, the Medical Associates Health Plan office or visit www.mahealthplans.com and select Find a Provider.

Medical Associates Health Plans has developed a network, which includes primary care practitioners and specialists as well as local hospitals and other providers of medical care. Medical Associates Health Plans maintains a stable, consistent network of providers throughout the service area for members to utilize without a referral. Medical Associates Health Plans issues a referral to tertiary centers or other specialists and hospitals when care cannot be provided within the local network.

Obtaining Primary & Specialty Care

You have direct access to any Participating In-Network primary care practitioner (Internal Medicine, Pediatrics, Family Practice or General Practice) and most Participating In-Network specialists. We encourage you to establish yourself with a Participating In-Network primary care practitioner for continuity of care. If you need to see a specialist, you have direct access to most of them by calling the phone number listed in this directory. If you have questions in regard to accessing any of our Participating In-Network providers, questions about a medical condition and aren't certain who you should see, please call our Member Services Department at (563) 584-4885 or 1-866-821-1365.

PRACTITIONERS BY SPECIALTY

Disclaimer: The Provider network may change at any time. You will receive notice when necessary. For more current information, please contact the Member Services Department at 1-866-821-1365 or 563-584-4885.

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F=Female, M=Male, N=Non-Binary *NOT accepting new patients

+ Telehealth services offered, for more details see Telehealth Section of document

Discrimination is Against the Law

Medical Associates Health Plans complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Medical Associates Health Plans does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Medical Associates Health Plans provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats.

Medical Associates Health Plans provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Member Services at 563-584-4885 or 1-866-821-1365.

If you believe that Medical Associates Health Plans has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Member Services, Address: 1605 Associates Drive Dubuque, IA 52002, Phone: 563-584-4885 or 1-866-821-1365, TTY: 1-800-735-2942, Fax: 563-584-4760, Email: memberservices@mahealthcare.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Member Services is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Language Access Services:

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-821-1365 (TTY: 1-800-735-2942).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-866-821-1365 (TTY: 1-800-735-2942)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-821-1365 (TTY: 1-800-735-2942).

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-866-821-1365 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 1-800-735-2942).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-821-1365 (TTY: 1-800-735-2942).

ملحوظة: إذا كنت تتحدث اللغة اذكر، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-866-821-1365 (رقم هاتف الصم والبكم: 1-800-735-2942).

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-866-821-1365 (TTY: 1-800-735-2942).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-821-1365 (TTY: 1-800-735-2942)번으로 전화해 주십시오.

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-866-821-1365 (TTY: 1-800-735-2942) पर कॉल करें।

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-821-1365 (ATS: 1-800-735-2942).

Wann du [Deitsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-866-821-1365 (TTY: 1-800-735-2942).

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-866-821-1365 (TTY: 1-800-735-2942).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-821-1365 (TTY: 1-800-735-2942).

ဟ်သူဉ်ဟ်သး– နမ့်ကတိၤ ကညီ ကျိာ်အဃိ, နမၤန့် ကျိာ်အတ်မၤစၢၤလၢ တလာ်ဘူဉ်လာ်စ့ၤ နီတမံၤဘဉ်သ့နှဉ်လီၤ. ကိး 1-866-390-3872 (TTY: 1-800-735-2942).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-821-1365 (телетайп: 1-800-735-2942).

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-866-821-1365 (TTY: 1-800-735-2942)

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-866-821-1365 (TTY: 1-800-735-2942).

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-866-821-1365 (TTY: 1-800-735-2942).

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નઃશુલ્કભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધછે. ફોન કરો 1-866-821-1365 (TTY: 1-800-735-2942).

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی مفت خدمات دستیاب ہیں ۔ کال کریں 1-866-821-1365 (TTY: 1-800-735-2942).

ATTENZIONE: In caso la lingua parlata sia l'italiano, s ono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-866-821-1365 (TTY: 1-800-735-2942).

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-866-821-1365 (TTY: 1-800-735-2942).

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-866-821-1365 (TTY: 1-800-735-2942).

ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1-866-821-1365 (टिटिवाइ: 1-800-735-2942) ।

ئاگاداری: ئەگەر بە زمانی کوردی قسە دەکەیت، خزمەتگوزاریەکانی یارمەتی زمان، بەخۆڕایی، بۆ تۆ بەردەستە.
پەیوەندی بە 1365-821-866 -1 (1-800-735-2942) TTY بکە.

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با (TTY: 1-800-735-2942) 1-866-821-1365 تماس بگیرید.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-866-821-1365（TTY:1-800-735-2942）まで、お電話にてご連絡ください。