



**To improve customer service in
our lobby, we need your help.**

Please mail all future premium payments to:

<p>BC+ c/o Wisconsin Department of Health Services P.O. Box 93187 Milwaukee, WI 53293-0187</p>	<p>Medicaid Purchase Plan P.O. Box 6738 Madison WI 53716-0738</p>
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Your cooperation is much appreciated!