

Annual Health Plan Notice of Important Information

Rocky Mountain Health Plans (RMHP) has important information about processes, programs, and services that we want PRIME Members to know. Read on to learn more:

Quality Counts for RMHP: An Operating Principle Based on Quality

RMHP is committed to looking for ways to improve the quality of care and level of service our Members receive. We know that health care is personal. We honor the rights of doctors and patients in making medical decisions. For information about our Quality Improvement program contact the Quality Department at **855-830-1565** or **970-263-5552**.

Finding a Primary Care Physician

RMHP can help you find a doctor for you or your child.

If you cannot find a primary care provider, care coordination can help identify the best option for you or your child.

Call RMHP’s Member Services at **800-421-6204** for help.

Access to Care Management

Health care can be complicated. You might have questions about surgeries, health conditions, or prior authorizations. RMHP’s Care Management team can answer questions you have about these and other topics. The Care Management team can also help coordinate your care between your primary care provider and any specialist you might see.

Care management services are free for RMHP Members. If you need help coordinating care, our nurses and care coordinators can help you. They will talk with your doctors to find the best care for you.

They can help with day-to-day management of your condition or recovery. Also, if you need more help or information, our team will help you find it. Our nurses and care coordinators can offer support to you and your family.

To reach the Care Management team, call **800-421-6204** or email rmhpcaremanagementreferrals@uhc.com. RMHP Care Management makes it easy to get help. You can access the Care Management team 24 hours a day, seven days a week. Free language assistance is also available. If you are Deaf, hard of hearing or have a speech disability, dial **711** for Relay Colorado.

Interactive Program Participation

RMHP offers a variety of interactive programs through which Members can receive support, health education or care coordination via telephone or in-person contact. Below is a listing of programs you may be eligible for. Members may opt out of any program at any time, unless otherwise specified.

Program Name	Participation Eligibility	How to Utilize the Program
Integrated Community Care Teams (ICCT)	RMHP care coordination is provided in local communities, through partnership with ICCTs based on a Member’s Primary Care Medical Provider (PCMP) location.	Referrals can be made through our one-call number 800-421-6204 or email rmhpcaremanagementreferrals@uhc.com . Referrals come from any source such as a self-referral by a Member, referrals from primary care physicians, behavioral health providers, social services, Case Management Agencies, member advocacy groups, human services, and any community organizations. ICCTs also outreach individuals following a hospital visit or if Members have complex needs.
Complex Case Management (Pediatric, Adult, Behavioral Health)	Members with complex physical and/or behavioral health needs, coexisting or chronic conditions they would like assistance managing.	The program provides intensive, personalized case management services and goal setting for Members who have complex medical needs and require a wide variety of resources to manage health and improve quality of life. Services are provided by RN Case Managers in a collaborative process to assess, plan, implement, coordinate, monitor and evaluate the options and services required to meet an individual’s health needs to promote quality outcomes.

Program Name	Participation Eligibility	How to Utilize the Program
General Complex Care Coordination	Members are assessed to determine if they are high risk and/or have complex health issues using a predictive health risk modeling program. This program uses over 1000 indicators to calculate Member health risk. These indicators include medical conditions and condition severity levels, inpatient and emergency department (ED) utilization, prescription (Rx) claims, Member demographics, Social Determinants of Health (SDoH) factors, lab results, gaps in care and medical claims to determine Member risk. Members with a risk score in the top 10% of RMHP’s population are considered to be the most complex and are identified as an area of focus for potential care coordination interventions and strategies.	The program provides personalized care coordination services, assessments and goal setting for Members identified as Complex. The overall goal of complex case management is to help Members regain maximum health or improved functional capability and the right level of care.
CirrusMD for RMHP	Any enrolled Medicaid, or CHP+ Member.	CirrusMD for RMHP allows Members to connect with a doctor at no cost through a computer or a smartphone. Doctors are available 24/7/365 via text messaging. Use CirrusMD for questions like: • Is this a cold or something more serious? • Should I go to the ER or Urgent Care? • What is this rash? • Why am I having this pain? To participate, Members can download the CirrusMD app or learn more at patients.cirrusmd.com/rmhp.
EmpowerHealth-Diabetes	Newly enrolled or diagnosed Members with diabetes, based on claims history.	Angel, a virtual nurse assistant, proactively calls select Members with diabetes. If Members opt into the program, Angel will call weekly. Angel can provide timely education about diabetes and can assess for potential gaps in diabetic care. If Members need assistance from a real person, Angel can transfer to the Health First Colorado NurseLine, RMHP Care Coordination, or the Member’s primary care physician office.
Maternity Program	Members who are pregnant.	Care coordinators outreach to Members to screen for prenatal care, pregnancy concerns, maternal health concerns, mental health, and social needs. Additional outreach takes place at discharge to assess needs, screen for post-partum depression and provide care planning. Care coordinators assist with making referrals to Nurse Family Partnership, Supplemental Nutrition Assistance Program (SNAP), Women, Infants, and Children (WIC) program, tobacco cessation programs and other resources to assist Members who are and babies.
EmpowerHealth-Maternity	Newly enrolled or identified Members who are pregnant based on claims and other criteria.	Angel, a virtual nurse assistant, calls select Members who are pregnant. If Members opt into the program, Angel will call and assess for needs/gaps in care at 28 weeks and 36 weeks gestation. Angel will also call at 3 weeks and 6 weeks postpartum. During these calls, Angel provides education and can transfer to RMHP Care Coordination, if immediate needs are found. Angel also provides education via text messages, for Members who opt in.

Program Name	Participation Eligibility	How to Utilize the Program
High Risk Prenatal/Pregnancy Outreach	Members who are identified as: under 17 years or over 40 years, disability status, history of preeclampsia, sepsis, prior complicated labor and delivery, pulmonary embolism or deep vein thrombosis, HIV, obesity, diabetes, hypertension, autoimmune disorders, placenta abruption, placenta previa, history of birth defects, seizures, multiples, previous intrauterine fetal demise, prior preterm delivery, previous or current pregnancy with bleeding and problematic substance use.	Care coordinators outreach to Members to screen and assess for prenatal care, pregnancy concerns, maternal health concerns, mental health, and social needs. Care coordinators ensure Members have appropriate prenatal care, specialty care and connect Members with community resources to support with needs.
Wellhop for Mom and Baby	Enrolled Medicaid Members who are pregnant.	Wellhop for Mom and Baby offers online group conversations and fun educational tools to help Members who are pregnant get ready for their new baby. These group experiences are available to RMHP Members free of charge. For more info or to enroll, visit: momandbaby.wellhop.com .
SimpliFed	Enrolled Members who are pregnant.	SimpliFed offers virtual breastfeeding and baby feeding support to RMHP Members free of charge. These visits can start before Members deliver. To learn more about services or to schedule a video appointment, visit: http://www.simplified.com/rocky-mountain-health-plans , call 888-458-1364 , or text CONNECT to 888-458-1364 .
Babyscripts	Enrolled Medicaid Members who are pregnant.	Babyscripts is a mobile app-based maternity engagement platform for members who are pregnant, designed to drive better compliance with prenatal and postpartum care. Babyscripts includes educational information, appointment reminders, and other resources. Members can also earn a \$20 gift card for signing up and up to \$30 in gift cards for completing prenatal and postpartum visits. Members can sign up by downloading the Babyscripts MyJourney app on their smartphone. For questions about Babyscripts, Members can call 800-283-3221 .
Clinical Event Management	RMHP receives alerts when Members have been admitted for a physical or behavioral concern to the hospital, skilled nursing facility, ED or other healthcare facility.	Care coordinators work with hospital staff, social workers and other professionals to support transitions of care. Care coordinators complete an assessment with Members to determine: • Health related social needs • Post-discharge needs (e.g., home care, durable medical equipment) • Understanding of medications • Need for follow-up with primary care or specialty providers • Other needs related to the transition of care Care coordinators reach out to Members who have been in the ED who are identified complex or have a primary behavioral health diagnosis.
Criminal Justice Involved	Members currently incarcerated identified by the Colorado Department of Corrections, who are about to be released or Members who have recently been released from a Department of Corrections facility.	RMHP will confirm Medicaid eligibility, assess for previous history of physical or behavioral health conditions, connect Member with a Physical health providers, specialists, and Behavioral health appointments, assess for additional barriers to include but not limited to transportation, food insecurity, homelessness and access to financial resources.
OptumRx Adherence Program	Members are identified by pharmacy claims. OptumRx in partnership with RMHP reviews pharmacy claims history to identify those with compliance rates lower than 60 percent to certain drugs.	Members who are identified as eligible, will receive communication from OptumRx Adherence Program. Members will receive either a letter or phone call from OptumRx pharmacy teams to offer assistance or reminders on ways to help you remember to take your drugs as directed by your provider(s).

Program Name	Participation Eligibility	How to Utilize the Program
Medication Review Program (MRP)	Members are identified by pharmacy claims. RMHP reviews pharmacy claims history to identify those who take certain medications and/or are taking a lot of different medications daily to treat certain conditions.	Pharmacy staff calls our Members that are enrolled to see how we can assist with making it easier for you to remember to take your medications as directed by your provider and ensure you are getting appropriate treatment.
Pharmacy Home Program (PHP)	The target population includes PRIME or CHP+ Members who are 18 years of age or older that are at risk for serious adverse effects from high- risk medications, combinations of medications, and medication fill frequency. Members are individually assessed for eligibility based on the pharmacy claims history.	The interventions are based on the severity of the Member's condition. For higher severity Members, interventions include intensive care coordination from an RN that includes finding both a medical and/or a BH provider for the Member, attending healthcare appointments with the Member, providing resources about safe use of medications, and coordinating care between providers, the Member, and RMHP to ensure open lines of communication. The Member is assessed for gaps in care and social determinants of health and provided education and support in addressing the identified needs. For low severity Members, continued oversight and periodic check-in calls are the interventions. The Pharmacy Home Program requires Members to get all medications from one pharmacy, with the exception of specialty-type medication. This is to foster a relationship between the Member and the healthcare system as multiple prescribers and pharmacies have been found to be risk factors for abuse and serious adverse effects. PHP has no option for Members to opt out.
TTEC Interactive Voice Response Program	Members who are eligible for immunizations, well visits, or prenatal care, who have not received those immunizations or visits.	Live agents call eligible Members to assist them with scheduling appointments with their primary care providers or assist them with establishing care with a primary care provider.
Scene	Select Members who meet eligibility criteria.	Medication adherence program that includes a comprehensive medication review with a pharmacist, health coaching with nurses and health assistants, and video directly observed therapy. Focuses on Members with asthma, COPD, hypertension, diabetes, and/or cardiovascular disease who meet eligibility criteria. For more information about Scene, call Scene support at 970-480-8492.

If you’d like to join a program or have questions about whether you qualify, please call the RMHP Care Management team at **800-421-6204**. You can also use this number if you want to stop participating in a program (opt out). The team is available Monday through Friday, 8 a.m. to 5 p.m. (Mountain Time). If you are deaf, hard of hearing, or have a speech disability, dial **711** to use Colorado Relay.

Authorization & Medical Decisions

There are some medical, pharmacy, and behavioral health services that require authorization, or approval, before those services can be performed. The goal of RMHP is to make the authorization process as easy as possible. RMHP’s Utilization Management team receives and reviews all of these requests. A list of services and supplies that require prior authorization can be found at <https://www.uhcprovider.com/en/health-plans-by-state/colorado-health-plans/co-comm-plan-home/co-cp-prior-auth.html>.

Behavioral Health authorizations can be submitted 24 hours a day, 365 days a year by emailing RMHP’s Utilization Management team at rmhpbhvm@uhc.com or by calling **800-421-6204**. All authorization requests may be submitted by you or your provider.

Providers can submit medical, surgical, and pharmacy authorizations 24 hours a day, 365 days a year through the Provider Portal at www.uhcprovider.com. Members and providers can also call **800-421-6204** to request authorization. All authorization requests may be submitted by you or your provider.

Know the Criteria for Medical Decisions

Decisions for authorization requests are based on if the services or supplies are medically necessary. They must also be appropriate, effective, efficient, and covered under your health plan. RMHP does not reward our decision makers for denying coverage. RMHP also does not offer financial incentives to employees to encourage them to limit service.

The criteria RMHP uses to make medical decisions are based on scientific research. A RMHP Medical Director or Pharmacist

will review any request that may not meet these criteria. The Medical Director may work with specialists who have experience in the type of care requested.

The criteria RMHP uses to make authorization decisions are available, upon request, at no cost to you. To be sent a copy of specific criteria, please call RMHP Member Services. You can also send your request in writing to the Care Coordination address listed in the table at the end of this document.

Questions About Authorizations

RMHP staff are available Monday - Friday, 8:00 a.m. - 5:00 p.m. for calls, faxes, and secure emails about authorization requests. If you would like to speak with RMHP's Utilization Management team about any decisions that have been made, you can call or write using the contact information at the end of this document.

You can also call RMHP Member Services to make a plan to talk to our Utilization Management team after work hours if needed.

All RMHP Utilization Management staff have confidential voice mail to receive calls after normal business hours. Calls will be returned as soon as possible but no later than one business day.

Clinical Practice Guidelines

Clinical Practice Guidelines ("Guidelines") are evidence-based. They are developed and approved from nationally recognized sources. RMHP uses these Guidelines as an educational tool for you and for your provider in choosing appropriate health care for specific clinical conditions and diagnoses.

These Guidelines are not meant to replace the clinical judgement of your health care provider.

To review the complete list of Clinical Practice Guidelines, visit: <https://www.uhc.com/communityplan/assets/plandocuments/misc/CO-Clinical-Practice-Guidelines.pdf>

You Have a Right to Appeal

If you are not satisfied with a decision made by RMHP, you have the right to ask us to reconsider our decision. This process is called an appeal. You can ask for an appeal by writing or calling our Member Services department.

There are two types of appeals that can lead to multiple levels of review. These types are internal and external. Part of your appeal rights include an independent review. Details about the appeals process can be found in your Member Handbook. More information and submission guidance is also available in the MyUHC Member portal: <http://www.myuhc.com/communityplan>.

Member Complaints and Quality of Care Concerns

RMHP wants to hear from you if you have concerns about your health care. RMHP is here to help. You have the right to file a complaint or grievance.

Here are a few examples:

- Services do not meet a quality of care that you expect
- Services were not covered, and you feel the decision was wrong
- A health care provider or staff was not professional
- Unable to get care when needed
- Other concerns about your benefits

If you have concerns about the health care services you received, RMHP calls these quality of care concerns. Having quality care means that the health care services you received meet medical standards and are likely to improve your health.

If you have concerns about the quality of care you received, please submit a complaint/grievance with as many details as possible. RMHP reviews all quality of care concerns that are filed, making sure your voice is heard.

To file a complaint/grievance, call **800-421-6204** or log onto your member portal at <http://www.myuhc.com/communityplan>.

Evaluation of New Technology

RMHP reviews new changes in medical technologies or new uses of existing technologies to stay up to date with changes. This review also makes sure that Members receive services and equipment that are safe and can be expected to improve their health. This includes medical procedures, behavioral health procedures, pharmaceuticals and devices. New technology is always being developed. This yearly review determines if a new technology has been sufficiently tested.

The Medical Technology Assessment Committee includes providers from many specialties.

The reviewers consider scientific evidence of the effectiveness, safety, and appropriateness of the technology for treating specific medical conditions. They also consider standards of care and legal review. They consult with providers who specialize in the services or equipment being reviewed. The committee members use all of this information to decide which services are still experimental and which are ready to be included as covered benefits. This review helps to make sure RMHP Members only receive services and equipment that are safe and are expected to improve their health.

Colorado Immunization Information System (CIIS)

RMHP participates with the Colorado Immunization Information System (CIIS) Colorado's registry for vaccines. CIIS is a secure Confidential computerized system that collects vaccine data for Coloradans of all ages. CIIS helps your healthcare provider see the vaccines you/your child received as well as any vaccines recommended at the time of your visit.

Keeping vaccine records in one place helps ensure you/your child get the complete schedule of recommended vaccines.

For more information about CIIS including a description of the registry contact information and how to opt out visit: <https://cdphe.colorado.gov/immunization>

Find Important Plan Information

Your PRIME Member handbook contains important information. Please refer to your handbook for information about:

- Your rights and responsibilities
- Covered and non-covered benefits and services
- Copayments and other charges
- Benefit restrictions that apply to services outside the service area
- Find a copy of the drug list
- Get language assistance
- File a claim
- Find participating providers
- Get primary care, specialty care, behavioral health care services, and hospital services
- Find care after hours
- Get emergency care
- Access care outside the service area
- Submit a complaint
- Appeal a decision

For a copy of your handbook, visit: <http://www.uhccp.com/rmhp-prime> or contact Member Services to request a copy be mailed to you (at no cost) within 5 business days.

The formulary (also called a drug list) contains important information about drug coverage such as copayments, prior authorization, step therapy treatment, and the exceptions process. For your plan's formulary, contact RMHP at 800-421-6204 or visit: <http://www.uhccp.com/rmhp-prime>.

You may also visit: <http://www.uhccp.com/rmhp-prime> for more information on your benefits and RMHP services.

Understanding the EPSDT Benefit

EPSDT (Early and Periodic Screening, Diagnostic & Treatment) is a program for children, teens 20 years old and under, and pregnant women that are enrolled in Health First Colorado (Colorado's Medicaid Program). At RMHP, we want to help you understand and make the most of this benefit. Members who are a part of our regional organization (RAE) or PRIME are part of the EPSDT program. EPSDT helps make sure that children, adolescents, and expecting mothers receive appropriate preventive, dental, mental health, developmental, and specialty services.

Behavioral Health Crisis Services

If you're struggling or someone you love is hurting and you need to get help right away, call or text 988, the Colorado Mental Health Line. Coloradans can get free, confidential, and immediate help 24 hours a day, seven (7) days a week, 365 days a year from the 988 Colorado Mental Health Line. You can also get online support at 988Colorado.com.

Finding the Right Practitioner to Fit Your Needs

Looking for an in-network provider that fits your needs? Check out: <http://www.uhccp.com/rmhp-prime> and Click 'Find a Provider' or 'Find Behavioral Health Services' or call Member Services at 800-421-6204. The online provider directory or member services department can assist you in finding a provider based on location preference, languages spoken by the practitioner or language services available through the practices, services offered and more!

Health and wellness

Living healthier starts with learning about key health topics

Learning about health and wellness is one way to better understand your own health (or the health of a loved one) and help you reach your health and wellness goals.

Interactive self-management tools provide the opportunity to enter information and receive results that can help identify risk factors, provide guidance about how to reduce or maintain low risk and provide recommendations on ways to improve health.

A comprehensive site of health and wellness resources and self-management tools are available at <http://www.uhc.com/health-and-wellness>.

Recommended Articles & Tools	
What is Body Mass Index? (BMI)	http://www.uhc.com/health-and-wellness/nutrition/healthy-weight
Quit For Life: smoking cessation program	http://www.uhc.com/member-resources/health-care-programs/quit-for-life
Fitness tips	http://www.uhc.com/health-and-wellness/fitness
Healthy eating	https://www.uhc.com/health-and-wellness/nutrition/healthy-eating
Stress: Signs, Symptoms & Management	http://www.uhc.com/health-and-wellness/mental-health/stress
Substance Use Helpline	http://www.uhc.com/member-resources/health-care-programs/substance-use
Depression: what we all need to know	http://www.uhc.com/health-and-wellness/mental-health/depression

Evidence-Based Self-Management Tools	
Members can find self-management support tools on the following topics at liveandworkwell.com. You can create an account and sign in or use the following access code: RMHPBH	
Healthy Weight (BMI) Maintenance; Body Mass Index (BMI) Calculator	https://optum.hra.net/calculate/bmi/en/

Smoking and Tobacco Use Cessation; Cost of Smoking Cigarettes Calculator	https://optum.hra.net/calculate/smc/en
Encouraging Physical Activity; Target Heart Rate Calculator	https://optum.hra.net/calculate/thr/en
Healthy Eating; MyPlate Quiz!	https://www.myplate.gov/
Managing Stress; Reducing Stress: 5 steps to streamline your to-dos	https://cdn.optumwellbeing.com/pdf/December_2023_Worksheet_en-US.pdf
Avoiding at-Risk Drinking; Alcohol Spending Calculator	https://rethinkingdrinking.niaaa.nih.gov/tools/calculators/alcohol-spending-calculator
Identifying Depressive Symptoms; Depression Screener	https://screening.mhanational.org/screening-tools/depression/
Health Risk Assessment	https://www.liveandworkwell.com/

We Are Here for You

If you have questions, RMHP is here to help.



Call us at **800-421-6204**, Monday – Friday, 8:00 a.m. – 5:00 p.m. MT.
Para asistencia en español llame al **800-421-6204**.



If you are Deaf, hard of hearing or have a speech disability, dial **711** for Relay Colorado.



Go online at <http://www.uhccp.com/rmhp-prime>. It's available 24 hours a day.



Live Chat with us via the Member Portal at <http://www.myuhc.com/communityplan>. Monday – Friday 8:00 a.m. – 5:00 p.m. MT.

Send us a letter at PO Box 10600, Grand Junction, CO 81502

Safe and secure: How we use and protect language and cultural data

We receive information about you. This may include your race, ethnicity, language you speak, sexual orientation, and disability status including function and identity. This data and other personal information about you is protected health information (PHI). We may share this information with your health care providers as part of treatment, payment and operations in meeting your health care needs.

Examples of how we may use PHI to improve the services we provide include:

- Finding gaps in care
- Helping you in languages other than English
- Creating programs that meet your needs
- Telling your health care providers which language(s) you speak

We do not use this data to deny coverage or limit benefits. We protect this information in the same way we protect all other PHI. Access is restricted to the employees who need to use it. Our buildings and computers are secured. Computer passwords and other system protections keep your data safe. To find out more about how we protect your cultural data, visit: <https://www.uhc.com/privacy> .

To get more information on our health equity program, visit: <https://www.rmhp.org/the-pursuit-of-health-equity-in-colorado-how-rocky-mountain-health-plans-is-collaborating-for-change/>.

Notice of nondiscrimination

Rocky Mountain Health Plans comply with applicable civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex (consistent with 45 CFR § 92.101(a)(2)). We do not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

We provide free aids and services to help you communicate with us. You can ask for interpreters and/or for communications in other languages or formats such as large print. We also provide reasonable modifications for persons with disabilities.

If you need these services, call Member Services at **1-800-421-6204, TTY 711.**

If you believe that we failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can send a complaint to the Civil Rights Coordinator:

Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130
UHC_Civil_Rights@uhc.com

Optum Civil Rights Coordinator
1 Optum Circle
Eden Prairie, MN 55344
Optum_Civil_Rights@Optum.com

If you need help filing a complaint, call Member Services at **1-800-421-6204, TTY 711.**

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

Online: **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**
Phone: **1-800-368-1019, 800-537-7697** (TDD)
Mail: U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201

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

This notice is available at: **<https://www.uhc.com/nondiscrimination-med>**
<https://www.optum.com/en/language-assistance-nondiscrimination.html>

Notice of availability of language assistance services and alternate formats

ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call Member Services 1-800-421-6204, TTY 711.

ATENCIÓN: Si habla <español> (**Spanish**), tiene acceso a servicios gratuitos de asistencia lingüística y a materiales gratuitos en otros formatos, como letra grande. Llame a Servicios para Miembros al 1-800-421-6204, TTY 711.

تنبيه: إذا كنت تتحدث اللغة <العربية> (**Arabic**)، فتتوفر لك خدمات مساعدة لغوية مجانًا ووسائل تواصل مجانية بتنسيقات أخرى، مثل الطباعة بحجم كبير. اتصل بخدمات الأعضاء على الرقم 1-800-421-6204، الهاتف النصي 711.

ማሳሰቢያ:- <አማርኛ> (**Amharic**) የሚናገሩ ከሆነ ነፃ የቋንቋ እርዳታ አገልግሎቶች እና እንደ ትልቅ ህትመት ያሉ በሌሎች ቅርጾች የሚቀርቡ ነፃ የመገናኛ ዘዴዎች ለእርስዎ ይገኛሉ። ለአገላት አገልግሎት በ1-800-421-6204፣ TTY 711 ይደውሉ።

注意：如果您說<中文> (**Chinese**)，您可以獲得免費語言協助服務和其他格式（例如大字版）的免費通訊。請致電 1-800-421-6204（聽障專線 (TTY) 711）與會員服務部聯絡。

توجه: اگر به <فارسی> (**Farsi**) صحبت نمی‌کنید، خدمات رایگان کمکی زبان و مطالب رایگان در قالب‌های دیگر، مانند پرینت درشت، برای شما فراهم است. با خدمات اعضاء به شماره 1-800-421-6204 (TTY 711) تماس بگیرید.

ATTENTION: Si vous parlez <français> (**French**), des services d'assistance linguistique gratuits et des communications gratuites dans d'autres formats, tels que du texte en gros caractères, sont à votre disposition. Veuillez appeler le département des services aux membres au 1-800-421-6204, ATS 711.

HINWEIS: Wenn Sie <Deutsch> (**German**) sprechen, stehen Ihnen kostenlose Sprachdienste und kostenlose Mitteilungen in anderen Formaten, beispielsweise in Großdruck, zur Verfügung. Rufen Sie den Mitgliederservice unter 1-800-421-6204, TTY 711 an.

注意：Japanese）を話される場合は、無料の言語支援サービスや、大きな活字などの他の形式での無料コミュニケーションをご利用いただけます。次のメンバーサービスにお電話ください：1-800-421-6204, TTY 711。

참고: 귀하가 <한국어> (**Korean**)를 구사하시는 경우, 무료 언어 지원 서비스와 다른 형식의 무료 커뮤니케이션(예, 큰 활자체로 된 정보)을 이용하실 수 있습니다 가입자 서비스부에 1-800-421-6204, TTY 711번으로 전화하십시오.

ध्यान दिनुहोस: तपाईं <नेपाली> (**Nepali**) बोल्नुहुन्छ भने, तपाईंलाई निःशुल्क भाषिक सहायता सेवा दिइने छ र ठुलो अक्षरमा प्रिन्ट जस्ता अन्य ढाँचामा पनि सूचना आदानप्रदान गराइने छ। सदस्य सेवा कार्यालयलाई 1-800-421-6204, TTY 711 मा कल गर्नुहोस्।

UWAGA: Jeśli mówi Pan/Pani w języku <**polskim**> (**Polish**), dostępne są dla Pana/Pani bezpłatne usługi pomocy językowej i komunikacji w innych formatach, np. duży druk. Proszę zadzwonić do działu obsługi klienta pod numer 1-800-421-6204, TTY 711.

ВНИМАНИЕ: Если Вы говорите <**по-русски**> (**Russian**), Вы можете бесплатно воспользоваться помощью переводчика и информационными материалами в альтернативных форматах, например крупным шрифтом. Обращайтесь в отдел обслуживания участников по телефону 1-800-421-6204, TTY 711.

FIIRO GAAR AH: Haddii aad ku hadasho <**Somaali**> (**Somali**), adeegyada kaalmada luqadda oo bilaash ah iyo adeegyada wada-xiriirka oo bilaash ah oo ah qaabab kale, sida far waaweyn, ayaad heli kartaa. Ka wac Adeegyada Xubnaha lambarka 1-800-421-6204, TTY 711.

ATENSYON: Kung nagsasalita ka ng <**Tagalog**> (**Tagalog**), may makukuha kang mga libreng serbisyong tulong sa wika at mga libreng komunikasyon sa mga ibang pormat, tulad ng malaking letra. Tawagan ang Mga Serbisyo sa Miyembro sa 1-800-421-6204, TTY 711.

LƯU Ý: Nếu quý vị nói tiếng <**Việt**> (**Vietnamese**), quý vị sẽ nhận được các dịch vụ hỗ trợ ngôn ngữ miễn phí và các hình thức giao tiếp miễn phí khác, chẳng hạn như bản in chữ lớn. Gọi cho Dịch Vụ Hội Viên theo số 1-800-421-6204, TTY 711.

