Your Plan Explained
2023

Take advantage of all your Medicare Advantage plan has to offer

Harford County Public Schools
UnitedHealthcare® Group Medicare Advantage (PPO)

Group Number: 13467

Effective: January 1, 2023 through December 31, 2023
Benefit Highlights

Harford County Public Schools 13467
Effective January 1, 2023 to December 31, 2023

This is a short summary of your plan benefits and costs. See your Summary of Benefits for more information. Or review the Evidence of Coverage for a complete description of benefits, limitations, exclusions and restrictions. Benefit limits and restrictions are combined in- and out-of-network.

Plan costs

<table>
<thead>
<tr>
<th></th>
<th>In-network and out-of-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual medical deductible</td>
<td>No deductible</td>
</tr>
<tr>
<td>Annual out-of-pocket maximum (the most you pay in a plan year for covered medical care)</td>
<td>Your plan has an annual combined in-network and out-of-network out-of-pocket maximum of $2,000 for this plan year.</td>
</tr>
</tbody>
</table>

Medical benefits

Medical benefits covered by the plan and Original Medicare

<table>
<thead>
<tr>
<th></th>
<th>In-network and out-of-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctor’s office visit</td>
<td></td>
</tr>
<tr>
<td>Primary care provider (PCP)</td>
<td>$5 copay</td>
</tr>
<tr>
<td>Specialist</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Virtual visits</td>
<td>$0 copay using Amwell, Doctor on Demand and Teladoc $5 copay using other providers that have the ability and are qualified to offer virtual medical visits</td>
</tr>
<tr>
<td>Preventive services</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Medicare-covered</td>
<td></td>
</tr>
<tr>
<td>Inpatient hospital care</td>
<td>$0 copay per stay</td>
</tr>
<tr>
<td>Skilled nursing facility (SNF)</td>
<td>$0 copay per day up to 100 days</td>
</tr>
<tr>
<td>Outpatient surgery</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Outpatient rehabilitation</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Physical, occupational, or speech/language therapy</td>
<td></td>
</tr>
<tr>
<td>Outpatient mental health</td>
<td>$5 copay</td>
</tr>
<tr>
<td>Group therapy</td>
<td></td>
</tr>
<tr>
<td>Individual therapy</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Virtual visits</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Diagnostic radiology services</td>
<td>$0 copay</td>
</tr>
<tr>
<td>such as MRIs, CT scans</td>
<td></td>
</tr>
</tbody>
</table>
## Medical benefits

Medical benefits covered by the plan and Original Medicare

<table>
<thead>
<tr>
<th>In-network and out-of-network</th>
<th>Lab services</th>
<th>$0 copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient X-rays</td>
<td>$0 copay</td>
<td></td>
</tr>
<tr>
<td>Therapeutic radiology services such as radiation treatment for cancer</td>
<td>$0 copay</td>
<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td>$0 copay</td>
<td></td>
</tr>
<tr>
<td>Emergency care</td>
<td>$50 copay (worldwide)</td>
<td></td>
</tr>
<tr>
<td>Urgently needed services</td>
<td>$10 copay (worldwide)</td>
<td></td>
</tr>
</tbody>
</table>

### Additional benefits and programs not covered by Original Medicare

<table>
<thead>
<tr>
<th>In-network and out-of-network</th>
<th>Routine physical</th>
<th>$0 copay; 1 per plan year*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acupuncture - routine</td>
<td>$10 copay, 20 visits per plan year*</td>
<td></td>
</tr>
<tr>
<td>Chiropractic - routine</td>
<td>$10 copay, unlimited visits per plan year*</td>
<td></td>
</tr>
<tr>
<td>Foot care - routine</td>
<td>$10 copay, 6 visits per plan year*</td>
<td></td>
</tr>
<tr>
<td>Hearing - routine exam</td>
<td>$5 copay, 1 exam per plan year*</td>
<td></td>
</tr>
<tr>
<td>Hearing Aids</td>
<td>Plan pays a $5,000 allowance for hearing aids (combined for both ears) every 3 years*.</td>
<td></td>
</tr>
<tr>
<td>Vision - routine eye exam</td>
<td>$0 copay, 1 exam every 12 months*</td>
<td></td>
</tr>
<tr>
<td>Vision - routine eyewear</td>
<td>Plan pays $130 combined allowance for eyeglasses and contact lenses every 12 months.*</td>
<td></td>
</tr>
<tr>
<td>Private duty nursing</td>
<td>No allowance limit per plan year for private duty nursing services.</td>
<td></td>
</tr>
<tr>
<td>Fitness program</td>
<td>$0 copay for a standard gym membership at participating locations</td>
<td></td>
</tr>
<tr>
<td>Renew Active® by UnitedHealthcare</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post-discharge meal delivery</td>
<td>$0 copay for 84 home-delivered meals immediately following one inpatient hospitalization or SNF stay when referred by a UnitedHealthcare Engagement Specialist</td>
<td></td>
</tr>
<tr>
<td>Mom's Meals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephonic nurse services</td>
<td>Receive access to nurse consultations and additional clinical resources at no additional cost.</td>
<td></td>
</tr>
<tr>
<td>Post-discharge routine transportation</td>
<td>$0 copay for unlimited rides up to 30 days following an inpatient hospital or SNF stay when referred by a UnitedHealthcare Engagement Specialist</td>
<td></td>
</tr>
<tr>
<td>ModivCare</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Emergency Response System (PERS)</td>
<td>$0 copay for a personal emergency response system.</td>
<td></td>
</tr>
<tr>
<td>Lifeline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rally Coach™ Programs</td>
<td>$0 copay for the Rally Coach™ Programs: Real Appeal® Weight Loss and Real Appeal Diabetes Prevention, Wellness Coaching and the Quit for Life® Tobacco Cessation Program</td>
<td></td>
</tr>
</tbody>
</table>

*Refer to your Evidence of Coverage for eligibility requirements.*

*Benefits are combined in and out-of-network*
Medicare Part A
Hospital
+
Medicare Part B
Doctor and Outpatient
+
Extra Programs
Beyond Original Medicare

Your former employer or plan sponsor has chosen a UnitedHealthcare Group Medicare Advantage plan. The word “Group” means this is a plan designed just for a former employer or plan sponsor like yours. Only eligible retirees of your former employer or plan sponsor can enroll in this plan.

“Medicare Advantage” is also known as Medicare Part C. These plans have all the benefits of Medicare Part A (hospital coverage) and Medicare Part B (doctor and outpatient care) plus extra programs that go beyond Original Medicare (Medicare Parts A and B).

Make sure you know what parts of Medicare you have

You must be entitled to Medicare Part A and enrolled in Medicare Part B to enroll in this plan.

- If you’re not sure if you are enrolled in Medicare Part B, check with Social Security
- Visit ssa.gov/locator or call 1-800-772-1213, TTY 1-800-325-0778, 8 a.m.–7 p.m., Monday–Friday, or call your local office
- You must continue paying your Medicare Part B premium to be eligible for coverage under this group-sponsored plan
- If you stop paying your Medicare Part B premium, you may be disenrolled from this plan
How your Group Medicare Advantage plan works

Medicare has rules about what types of coverage you can add or combine with a group-sponsored Medicare Advantage plan.

✓ One plan at a time

- You may be enrolled in only one Medicare Advantage plan at a time.
- The plan you enroll in last is the plan that Centers for Medicare & Medicaid Services (CMS) considers to be your final decision.
- If you enroll in another Medicare Advantage plan after your enrollment in this group-sponsored plan, you will be disenrolled from this plan(s).
- Any eligible family members may also be disenrolled from their group-sponsored plan. This means that you and your family may not have hospital/medical coverage through your former employer or plan sponsor.

✓ You must have employer group-sponsored coverage

Your group-sponsored Medicare Advantage plan includes only medical coverage. It does not include prescription drug coverage.

- If you want Medicare Part D coverage, it must come through a group-sponsored plan.
- Your Medicare Part D coverage cannot be an individual prescription drug plan.
- If you enroll in an individual Part D prescription drug plan, you will be disenrolled from your former employer or plan sponsored UnitedHealthcare® Group Medicare Advantage (PPO) plan.

⚠️ Remember: If you drop or are disenrolled from your group-sponsored retiree coverage, you may not be able to re-enroll. Limitations and restrictions vary by former employer or plan sponsor.

Questions? We’re here to help.

retiree.uhc.com

Call toll-free 1-866-860-2243, TTY 711, 8 a.m.-8 p.m. local time, 7 days a week
How your medical coverage works

Your plan is a Preferred Provider Organization (PPO) plan
You have access to our nationwide coverage. You can see any provider (in-network or out-of-network) at the same cost share as long as they accept the plan and have not opted out of or been excluded or precluded from the Medicare Program.

<table>
<thead>
<tr>
<th>Question</th>
<th>In-network</th>
<th>Out-of-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can I continue to see my doctor/specialist?</td>
<td>Yes</td>
<td>Yes, as long as they participate in Medicare and accept the plan¹</td>
</tr>
<tr>
<td>What is my copay or coinsurance?</td>
<td>Copays and coinsurance vary by service²</td>
<td>Copays and coinsurance vary by service²</td>
</tr>
<tr>
<td>Do I need to choose a primary care provider (PCP)?</td>
<td>No, but recommended</td>
<td>No, but recommended</td>
</tr>
<tr>
<td>Do I need a referral to see a specialist?</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Can I go to any hospital?</td>
<td>Yes</td>
<td>Yes, as long as they participate in Medicare and accept the plan¹</td>
</tr>
<tr>
<td>Are emergency and urgently needed services covered?</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Do I have to pay the full cost for all doctor or hospital services?</td>
<td>You will pay your standard copay or coinsurance for the services you get²</td>
<td>You will pay your standard copay or coinsurance for the services you get²</td>
</tr>
<tr>
<td>Is there a limit on how much I can spend on medical services each year?</td>
<td>Yes²</td>
<td>Yes²</td>
</tr>
<tr>
<td>Are there any situations when a doctor will balance bill me?</td>
<td>Under this plan, you are not responsible for any balance billing when seeing health care providers who have not opted out of or been excluded or precluded from the Medicare Program</td>
<td></td>
</tr>
</tbody>
</table>

¹This means that the provider or hospital agrees to treat you and be paid according to UnitedHealthcare’s payment schedule. With this plan, we pay the same as Medicare and follow Medicare’s rules. Emergencies would be covered even if out-of-network.

²Refer to the Summary of Benefits or Benefit Highlights in this guide for more information.

View Your Plan Information Online

Once you receive your UnitedHealthcare member ID card, you can create your secure online account at: retiree.uhc.com

You’ll be able to view plan documents, find a provider and access lifestyle and learning articles, recipes, educational videos and more.
Getting the health care coverage you may need

Your care begins with your doctor

- With this plan, you have the flexibility to see doctors inside or outside the UnitedHealthcare network
- Even though it’s not required it’s important to have a primary care provider
- Unlike most PPO plans, with this plan, you pay the same share of cost in and out-of-network as long as they participate in Medicare or been excluded or precluded from the Medicare Program
- With your UnitedHealthcare Group Medicare Advantage plan, you’re connected to programs, resources, tools and people that can help you live a healthier life

Finding a doctor is easy
If you need help finding a doctor or specialist, just give us a call. We can even help schedule that first appointment. When you call your doctor, tell them you have a Medicare Advantage PPO plan.

Why use a UnitedHealthcare network doctor?
A network doctor or health care provider is one who contracts with us to provide services to our members. We work closely with our network of doctors to give them access to resources and tools that can help them work with you to make better health care decisions. You pay your copay or coinsurance according to your plan benefits. Your provider will bill us for the rest.

An out-of-network provider does not have a contract with us. With the UnitedHealthcare Group Medicare Advantage (PPO) plan, you can see any out-of-network provider as long as they accept the plan and have not opted out of or been excluded or precluded from the Medicare Program. You pay your copay or coinsurance according to your plan benefits. We will pay for the rest of the cost of your covered service(s), including any charges up to the limit set by Medicare. If your provider won’t accept the plan, we will contact them on your behalf.

If a provider refuses to directly bill us, they may ask that you pay the full allowable amount upfront. In that case, you can pay the doctor and then submit a claim to us. You’ll be reimbursed for the cost of the claim minus your cost share.
Take advantage of UnitedHealthcare’s additional support and programs

**Annual Physical and Wellness Visit**
An Annual Wellness Visit with your doctor and many preventive services at $0 copay is one of the best ways to start your year off and stay on top of your health. Take control by scheduling your annual physical and wellness visit early in the year to give you the most time to take action. You and your doctor can work as a team to create a preventive care plan, review medications and talk about any health concerns. You may also be eligible to earn a reward* for completing and reporting your Annual Wellness Visit.

**In-Home Preventive Care Visit from UnitedHealthcare® HouseCalls**
With UnitedHealthcare® HouseCalls, you get a yearly in-home visit from one of our health care practitioners at no extra cost to you. A HouseCalls visit is designed to support, but not take the place of, your regular doctor's care.

*The visit takes up to an hour and is tailored to your needs. It includes health screenings and a chance to:

- Review current medications
- Receive health education, prevention tips, care and resource assistance, if needed
- Get advice and ask questions on how to manage health conditions
- Receive referrals to other health services and more

At the end of the visit, our health care practitioner will leave you with a personalized checklist and send a summary to your regular doctor.

**24/7 Nurse Support**
Speak to a registered nurse 24/7 over the phone about your medical concerns at no additional cost to you.

**Chronic Conditions Programs**
UnitedHealthcare offers special programs to help members who are living with a chronic disease like diabetes or heart disease or complex health needs. You get personal attention and your doctors get up-to-date information to help them make decisions.
Virtual Visits
See a doctor or a behavioral health specialist using your computer, tablet or smartphone. With Virtual Visits, you’re able to live video chat — anytime, day or night. You will first need to register and then schedule an appointment. On your tablet or smartphone, you can download the Amwell®, Doctor On Demand™ or Teladoc® (medical visits only) apps.

Virtual Doctor Visits
You can ask questions, get a diagnosis or even get medication prescribed and have it sent to your pharmacy. All you need is a strong internet connection. Virtual doctor visits may be good for minor health concerns like:

- Allergies, bronchitis, cold/cough
- Fever, seasonal flu, sore throat
- Migraines/headaches, sinus problems, stomachache
- Bladder/urinary tract infections, rashes

Virtual Behavioral Health Visits
May be best for:

- Initial evaluation
- Behavioral Health medication management
- Addiction
- Depression
- Trauma and loss
- Stress or anxiety

Mental and Behavioral Health
Nothing is more important than your health, which includes your mental health. You have access to many resources that may help improve your emotional and mental health, including:

- Personalized virtual therapy programs with AbleTo
- Ongoing mental health support with Optum® Behavioral Health
- Health and wellness resources with Renew by UnitedHealthcare

Custom-Programmed Hearing Aids
Your hearing health is important to your overall well-being and can help you stay connected to those around you. With UnitedHealthcare Hearing, you’ll get access to hundreds of name-brand and private-labeled hearing aids — available in person at any of our 7,000+3 UnitedHealthcare Hearing providers nationwide4 or delivered to your doorstep with direct delivery and virtual care (select products only) — so you’ll get the care you need to hear better and live life to the fullest.
UnitedHealthcare Fitness Program
Renew Active® is the gold standard in Medicare fitness programs for body and mind, available at no additional cost. You’ll receive a free gym membership with access to our nationwide network of gyms and fitness locations. This includes access to many premium gyms, on-demand workout videos and live streaming fitness classes, social activities, an online Fitbit® Community for Renew Active (no Fitbit device is needed) and an online brain health program from AARP® Staying Sharp®.

And so much more to help you live a healthier life
After you become a member, we will connect you to many programs and tools that may help you on your wellness journey. You will get information soon after your coverage becomes effective.
Tools and resources to help put you in control

**Go online for valuable plan information**
As a UnitedHealthcare member, you will have access to a safe, secure website where you'll be able to:

- Look up your latest claim information
- Review benefit information and plan materials
- Print a temporary ID card and request a new one
- Search for network doctors
- Learn more about health and wellness topics and explore all Renew has to offer based on your interests and goals
- Sign up to get your Explanation of Benefits online

**Live Healthier with Renew**
Explore Renew by UnitedHealthcare, our member-only health and wellness experience. Renew helps inspire you to take charge of your health and wellness every day by providing a wide variety of useful resources and activities, including:

- Brain games, healthy recipes, fitness activities, learning courses and more—all at no additional cost

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1A copay or coinsurance may apply if you receive services that are not part of the Annual Physical/Wellness Visit.
2HouseCalls may not be available in all areas.
3Network size varies by market.
4Please refer to your Summary of Benefits for details regarding your benefit coverage.
5Renew by UnitedHealthcare is not available in all plans.
*Reward offerings will vary by member and terms of participation apply. Rewards are not available in all plans.
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**Required Information**

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan’s contract renewal with Medicare.

Plans may offer supplemental benefits in addition to Part C benefits.

If you want to know more about the coverage and costs of Original Medicare, look in your current "Medicare & You" handbook. View it online at www.medicare.gov or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

UnitedHealthcare does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

UnitedHealthcare provides free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact our Customer Service number at 1-888-867-5581 for additional information (TTY users should call 711). Hours are 7 a.m.-8 p.m. local time, 7 days a week.

UnitedHealthcare ofrece servicios gratuitos para ayudarle a que se comunique con nosotros. Por ejemplo, cartas en otros idiomas, braille, letra grande, audio o bien, usted puede pedir un intérprete. Comuníquese con nuestro número de Servicio al Cliente al 1-888-867-5581, para obtener información adicional (los usuarios de TTY deben comunicarse al 711). Los horarios de atención son de 7 a.m. a 8 p.m., hora local, los 7 días de la semana.

This information is available for free in other languages. Please call our Customer Service number located on the first page of this book.

Benefits, features and/or devices vary by plan/area. Limitations and exclusions may apply.

The provider network may change at any time. You will receive notice when necessary.

You must continue to pay your Medicare Part B premium.

Out-of-network/non-contracted providers are under no obligation to treat UnitedHealthcare members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

The Telephonic Nurse Services should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. Access to this service is subject to terms of use.

Participation in the Renew Active® program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. Renew Active includes standard fitness membership and other offerings. Fitness membership, equipment, classes, personalized fitness plans, caregiver access and events may vary by location. Certain services, classes, and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services are subject to your acceptance of their respective terms and policies. AARP® Staying Sharp is the registered trademark of AARP. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. The Renew Active program varies by plan/area. Access to gym and fitness location network may vary by location and plan.
The company does not treat members differently because of sex, age, race, color, disability or national origin.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

**Online:** UHC_Civil_Rights@uhc.com  
**Mail:** Civil Rights Coordinator. UnitedHealthcare Civil Rights Grievance. P.O. Box 30608 Salt Lake City, UTAH 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the member toll-free phone number listed in the front of this booklet.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

**Online:** https://ocrportal.hhs.gov/ocr/portal/lobby.jsf  
**Complaint forms are available at:** http://www.hhs.gov/ocr/office/file/index.html.  
**Phone:** Toll-free 1-800-368-1019, 800-537-7697 (TDD)  
**Mail:** U.S. Dept. of Health and Human Services. 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the member toll-free phone number listed in the front of this booklet.

ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en la portada de esta guía.

請注意：如果您說中文 (Chinese)，我們免費為您提供語言協助服務。請撥打本手冊封面所列的免費會員電話號碼。

XIN LUU Y: Nếu quý vị nói tiếng Việt (Vietnamese), quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Xin vui lòng gọi số điện thoại miễn phí dành cho hội viên trên trang bìa của tập sách này.

알림: 한국어(Korean)을 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 이 책자 앞 페이지에 기재된 무료 회원 전화번호로 문의하십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog (Tagalog), may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nakalista sa harapan ng booklet na ito.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русским (Russian). Позвоните по бесплатному номеру телефона, указанному на лицевой стороне данной брошюры.

تنبيه: إذا كنت تتحدث العربية (Arabic)， فإن خدمات المساعدة اللغوية المجانية متاحة لك. يرجى الاتصال على رقم الهاتف المجاني للعضو الموجودة في مقدمة هذا الكتاب.
ATANSYON: Si w pale Kreyòl ayisyen (Haitian Creole), ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo telefon gratis pou manm yo ki sou kouvèt ti liv sa a.

ATTENTION: Si vous parlez français (French), des services d’aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone sans frais pour les affiliés figurant au début de ce guide.

UWAGA: Jeżeli mówisz po polsku (Polish), udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny członkowski numer telefonu podany na okładce tej broszury.

ATENÇÃO: Se você fala português (Portuguese), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número do membro encontrado na frente deste folheto.

ATTENTION: in caso la lingua parlata sia l’italiano (Italian), sono disponibili servizi di assistenza linguistica gratuiti. Si prega di chiamare il numero verde per i membri indicato all'inizio di questo libretto.

ACHTUNG: Falls Sie Deutsch (German) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer für Mitglieder auf der Vorderseite dieser Broschüre an.

注意事項：日本語 (Japanese) を話される場合、無料の言語支援サービスをご利用いただけます。本冊子の表紙に記載されているメンバー用フリーダイヤルにお電話ください。

DHÝÁN DÝ: यदि आप हिंदी (Hindi) बोलते हैं, आपको भाषा सहायता सेवाएं, निजी उपलब्ध हैं। कृपया इस पुस्तिका के सामने के पृष्ठ पर सूचीबद्ध सदस्यों के टोल-फ्री फ़ोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus Hmoob (Hmong), muaj kev ptxais lus pub dawb rau koj. Thov hu tus tswv cuab xov tooj hu dawb teev nyob ntawm sab xub ntiag ntawm phau ntawv no.

OGOW: Haddii aad ku hadasho Soomaali (Somali), adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka xubinta ee telefonka bilaashka ah ee ku qoran xagga hore ee buugyarah.