

**Superior HealthPlan STAR+PLUS Medicare-Medicaid Plan (MMP) offered by  
Superior HealthPlan, Inc.**

## ***Annual Notice of Changes for 2020***

### **Introduction**

You are currently enrolled as a member of Superior STAR+PLUS MMP. Next year, there will be some changes to the plan's benefits, coverage, and rules. This *Annual Notice of Changes* tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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**If you have questions**, please call Superior STAR+PLUS MMP at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com).

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## A. Disclaimers

- ❖ This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Superior STAR+PLUS MMP Member Handbook.

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## B. Reviewing Your Medicare and Texas Medicaid Coverage for Next Year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. See section E2 for more information.

If you leave our plan, you will still be in the Medicare and Texas Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 12 to see your choices).
- If you do not want to enroll in a different Medicare-Medicaid plan after you leave Superior STAR+PLUS MMP, you will go back to getting your Medicare and Texas Medicaid services separately.



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## B1. Additional Resources

- **ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-896-1844 (TTY: 711) de 8 a. m. a 8 p. m., lunes a viernes. Después de horas hábiles, los fines de semana y los días festivos, es posible que se le pida que deje un mensaje. Le devolveremos la llamada el próximo día hábil. La llamada es gratuita.
- You can get this *Annual Notice of Changes* for free in other formats, such as large print, braille, or audio. Call 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- Our plan can also give you materials in languages other than English and in formats such as large print, braille, or audio. Our plan has written materials available in Spanish. To get materials in Spanish, or to get materials in another language or format, please call Member Services at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.

In addition to asking for materials in other languages and formats, you can also ask that we send you future materials in this same language or format. We will document your language preference. If you wish to change your language preference in the future, please call Member Services.

## B2. Information about Superior STAR+PLUS MMP

- Superior HealthPlan STAR+PLUS Medicare-Medicaid Plan (MMP) is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.
- Coverage under Superior STAR+PLUS MMP is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at <https://www.irs.gov/affordable-care-act/individuals-and-families> for more information on the individual shared responsibility requirement.
- Superior HealthPlan STAR+PLUS Medicare-Medicaid Plan (MMP) is offered by Superior HealthPlan, Inc. When this *Annual Notice of Changes* says “we,” “us,” or “our,” it means Superior HealthPlan, Inc. When it says “the plan” or “our plan,” it means Superior HealthPlan STAR+PLUS Medicare-Medicaid Plan (MMP).



**If you have questions**, please call Superior STAR+PLUS MMP at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com).

### B3. Important things to do:

- **Check if there are any changes to our benefits that may affect you.**
  - Are there any changes that affect the services you use?
  - It is important to review benefit changes to make sure they will work for you next year.
  - Look in section D for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
  - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
  - It is important to review the changes to make sure our drug coverage will work for you next year.
  - Look in section D for information about changes to our drug coverage.
  - Your drug costs may have risen since last year.
    - Talk to your doctor about lower cost alternatives that may be available for you; this may save you in annual out-of-pocket costs throughout the year.
    - To get additional information on drug prices, visit <https://go.medicare.gov/drugprices>. These dashboards highlight which manufacturers have been increasing their prices and also show other year-to-year drug price information.
    - Keep in mind that your plan benefits will determine exactly how much your own drug costs may change.
- **Check to see if your providers and pharmacies will be in our network next year.**
  - Are your doctors, including specialists you see regularly, in our network? What about your pharmacy? What about the hospitals or other providers you use?
  - Look in section C for information about our *Provider and Pharmacy Directory*.



**If you have questions**, please call Superior STAR+PLUS MMP at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com).

- **Think about your overall costs in the plan.**
  - How do the total costs compare to other coverage options?
- **Think about whether you are happy with our plan.**

#### **If you decide to stay with Superior STAR+PLUS MMP:**

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

#### **If you decide to change plans:**

If you decide other coverage will better meet your needs, you may be able to switch plans (see section E2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section E2, page 12 to learn more about your choices.

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## **C. Changes to the network providers and pharmacies**

Our provider and pharmacy networks have changed for 2020.

We strongly encourage you to **review our current *Provider and Pharmacy Directory*** to see if your providers or pharmacy are still in our network. An updated *Provider and Pharmacy Directory* is located on our website at [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com). You may also call Member Services at 1-866-896-1844 (TTY: 711) for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Member Handbook*.



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## D. Changes to benefits for next year

### D1. Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The following table describes these changes.

	2019 (this year)	2020 (next year)
<b>Tobacco Cessation Counseling</b>	Tobacco Cessation Counseling for Pregnant Women is covered.	<p>Please contact the plan for details.</p> <p>Smoking and Tobacco Use Cessation Counseling is covered for all members.</p> <p>The Plan will pay for up to 8 sessions.</p> <p>Additional sessions beyond the established limit of 8 individual or group sessions per rolling year (i.e., a continuous 12-month period) require documentation of medical necessity.</p>



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	2019 (this year)	2020 (next year)
<b>Opioid treatment program services</b>	Opioid treatment services are not covered as a separate benefit. Some services for Opioid Use Treatment were covered under your Substance Abuse benefits.	<p>Prior Authorization (approval in advance) may be required. Please contact the plan for details.</p> <p>You pay a <b>\$0</b> copay.</p> <p>The plan will pay for the following services to treat opioid use disorder:</p> <ul style="list-style-type: none"> <li>• Medications approved by the Food and Drug Administration (FDA) and, if applicable, managing and giving you these medications</li> <li>• Substance use counseling</li> <li>• Individual and group therapy</li> </ul> <p>Testing for drugs or chemicals in your body (toxicology testing)</p>



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	2019 (this year)	2020 (next year)
<b>Preventive and Comprehensive Dental Services</b>	Preventive and Comprehensive Dental Services for non-HCBS waiver members is <b>not</b> covered.	<p>You pay a <b>\$0</b> copay.</p> <p>The plan covers the following services to help preserve your teeth and meet your medical needs up to \$750 combined for Preventive and Comprehensive Dental Services per year for non-HCBS waiver members ages 21 and older:</p> <p>Preventive Dental:</p> <ul style="list-style-type: none"> <li>• 2 Examinations and evaluations are covered every year</li> <li>• 2 Cleanings are covered every year</li> <li>• Silver diamine fluoride treatment is covered with a maximum of once every year</li> <li>• Bitewing x-rays are a covered benefit only once every year</li> </ul> <p>Comprehensive Dental:</p> <ul style="list-style-type: none"> <li>• Non-Routine Services</li> <li>• Diagnostic Services</li> <li>• Restorative Services <ul style="list-style-type: none"> <li>○ Fillings</li> </ul> </li> <li>• Endodontics</li> <li>• Periodontics</li> <li>• Extractions</li> <li>• Prosthodontics</li> </ul>



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## D2. Changes to prescription drug coverage

### Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com). You may also call Member Services at 1-866-896-1844 (TTY: 711) for updated drug information or to ask us to mail you a *List of Covered Drugs*.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to see if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
  - You can call Member Services at 1-866-896-1844 (TTY: 711) to ask for a list of covered drugs that treat the same condition.
  - This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
  - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber’s supporting statement).
  - To learn what you must do to ask for an exception, see Chapter 9, Section C, page 121 of the *2020 Member Handbook* or call Member Services at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day.
  - If you need help asking for an exception, you can contact Member Services or your Service Coordinator. See Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your Service Coordinator.
- Ask the plan to cover a temporary supply of the drug.
  - In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
  - This temporary supply will be for up to 30 days of medication at a retail pharmacy and at a long-term care pharmacy, up to 31 days. (To learn more about when you can get a



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temporary supply and how to ask for one, see Chapter 5, Section D1, page 122 of the *Member Handbook*.)

- When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.

If you have a current formulary exception that has been approved by our plan in 2019, and you remain a member of Superior STAR+PLUS MMP for the next calendar year, we may continue to cover this exception during 2020. You will receive a letter with approval dates if we decide to continue to cover your exception during 2020. However, if we decide not to continue to cover the exception during 2020, your doctor (or other prescriber) must work with Superior STAR+PLUS MMP to request a new exception for the 2020 calendar year. To learn what you must do to ask for an exception, see Chapter 9, Section C, page 121 of the *2020 Member Handbook* or call Member Services at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day.

### **Changes to prescription drug costs**

There are no changes to the amount you pay for prescription drugs in 2020. Read below for more information about your prescription drug coverage.

**We moved some of the drugs on the Drug List to a lower or higher drug tier.** To see if your drugs will be in a different tier, look them up in the Drug List.



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The following table shows your costs for drugs in each of our 3 drug tiers.

	2019 (this year)	2020 (next year)
<b>Drugs in Tier 1</b> <i>(Generic Drugs)</i>  Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy	Your copay for a one-month (30-day) supply is <b>\$0 per prescription.</b>	Your copay for a one-month (30-day) supply is <b>\$0 per prescription.</b>
<b>Drugs in Tier 2</b> <i>(Brand Drugs)</i>  Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your copay for a one-month (30-day) supply is <b>\$0 per prescription.</b>	Your copay for a one-month (30-day) supply is <b>\$0 per prescription.</b>
<b>Drugs in Tier 3</b> <i>(Non-Medicare Rx / OTC Drugs)</i>  Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your copay for a one-month (30-day) supply is <b>\$0 per prescription.</b>	Your copay for a one-month (30-day) supply is <b>\$0 per prescription.</b>

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## E. How to choose a plan

### E1. How to stay in our plan

We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2020.

### E2. How to change plans

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another Medicare-Medicaid Plan, or moving to Original Medicare.



**If you have questions**, please call Superior STAR+PLUS MMP at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com).

These are the four ways people usually end membership in our plan:

<p><b>1. You can change to:</b></p> <p><b>A different Medicare-Medicaid Plan</b></p>	<p><b>Here is what to do:</b></p> <p>Call the STAR+PLUS help line at 1-877-782-6440, from 8 a.m. to 6 p.m., Monday through Friday. TTY users should call 711. Tell them you want to leave Superior STAR+PLUS MMP and join a different Medicare-Medicaid plan. If you are not sure what plan you want to join, they can tell you about other plans in your area; OR</p> <p>Send Texas Medicaid an Enrollment Change Form. You can get the form by calling the STAR+PLUS help line at 1-877-782-6440 (TTY: 711) if you need them to mail you one.</p> <p>Your coverage with Superior STAR+PLUS MMP will end on the last day of the month that we get your request.</p>
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<p><b>2. You can change to:</b></p> <p><b>A Medicare health plan (such as a Medicare Advantage Plan or a Program of All-inclusive Care for the Elderly (PACE))</b></p>	<p><b>Here is what to do:</b></p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048 to enroll in the new Medicare-only health plan.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> <li>• Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-9240. In Texas, the SHIP is called the Health Information Counseling &amp; Advocacy Program of Texas (HICAP).</li> </ul> <p>You will automatically be disenrolled from Superior STAR+PLUS MMP when your new plan's coverage begins.</p>
<p><b>3. You can change to:</b></p> <p><b>Original Medicare with a separate Medicare prescription drug plan</b></p>	<p><b>Here is what to do:</b></p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> <li>• Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-9240. In Texas, the SHIP is called the Health Information Counseling &amp; Advocacy Program of Texas (HICAP).</li> </ul> <p>You will automatically be disenrolled from Superior STAR+PLUS MMP when your Original Medicare coverage begins.</p>



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<p><b>4. You can change to:</b></p> <p><b>Original Medicare without a separate Medicare prescription drug plan</b></p> <p><b>NOTE:</b> If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call the Health Information Counseling &amp; Advocacy Program of Texas (HICAP) at 1-800-252-9240.</p>	<p><b>Here is what to do:</b></p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> <li>• Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-9240. In Texas, the SHIP is called the Health Information Counseling &amp; Advocacy Program of Texas (HICAP).</li> </ul> <p>You will automatically be disenrolled from Superior STAR+PLUS MMP when your Original Medicare coverage begins.</p>
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## F. How to get help

### F1. Getting help from Superior STAR+PLUS MMP

Questions? We're here to help. Please call Member Services at 1-866-896-1844 (TTY only, call 711). We are available for phone calls from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and holidays, you may be asked to leave a message. Your call will be returned within the next business day. Calls to these numbers are free.

#### Your 2020 Member Handbook

The *2020 Member Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The *2020 Member Handbook* will be available by October 15. An up-to-date copy of the *2020 Member Handbook* is always available on our website at [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com). You may also call Member Services at 1-866-896-1844 (TTY: 711) to ask us to mail you a *2020 Member Handbook*.



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### **Our website**

You can also visit our website at [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com). As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

### **F2. Getting help from the STAR+PLUS help line**

The STAR+PLUS help line provides information about health care options in the state of Texas. You can call STAR+PLUS help line at 1-877-782-6440 (TTY: 711) from 8 a.m. to 6 p.m., Monday through Friday.

### **F3. Getting help from the HHSC Office of the Ombudsman**

The HHSC Office of the Ombudsman helps people enrolled in Texas Medicaid with service or billing problems. The ombudsman's services are free.

- The HHSC Office of the Ombudsman is an ombudsman program that works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- The HHSC Office of the Ombudsman can help you file a complaint or an appeal with our plan. They can help you if you are having a problem with Superior STAR+PLUS MMP.
- The HHSC Office of the Ombudsman makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- The HHSC Office of the Ombudsman is not connected with us or with any insurance company or health plan. The phone number for the HHSC Office of the Ombudsman is 1-866-566-8989.

### **F4. Getting help from the State Health Insurance Assistance Program (SHIP)**

You can also call the State Health Insurance Assistance Program (SHIP). The SHIP counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). HICAP is not connected with any insurance company or health plan, and HICAP's services are free.

The HICAP phone number is 1-800-252-9240.



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## **F5. Getting help from Medicare**

To get information directly from Medicare:

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

### **Medicare's Website**

You can visit the Medicare website (<http://www.medicare.gov>). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to <http://www.medicare.gov> and click on "Find health & drug plans.")

### ***Medicare & You 2020***

You can read the *Medicare & You 2020* Handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (<http://www.medicare.gov>) or 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.

## **F6. Getting help from Texas Medicaid**

The phone number for Texas Medicaid is 1-800-252-8263. This call is free. TTY users should call 1-800-753-8583 or 7-1-1.

## **F7. Getting help from your Quality Improvement Organization (QIO)**

The QIO is a group of doctors and other health care professionals who help improve the quality of care for people with Medicare. In Texas, the QIO is an organization called KEPRO. KEPRO is not connected with our plan. You can call KEPRO at 1-888-315-0636 (TTY: 1-855-843-4776). For more information, see Chapter 2, Section C2, page 34 of your *Member Handbook*.



**If you have questions**, please call Superior STAR+PLUS MMP at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit [mmp.SuperiorHealthPlan.com](http://mmp.SuperiorHealthPlan.com).

## Statement of Non-Discrimination

Superior HealthPlan (Superior) STAR+PLUS Medicare-Medicaid Plan (MMP) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Superior STAR+PLUS MMP does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

### Superior STAR+PLUS MMP:

- 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 (large print, audio, accessible electronic formats, other formats).
- 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 Superior STAR+PLUS MMP's Member Services at 1-866-896-1844 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.

If you believe that Superior STAR+PLUS MMP 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 by calling the number above and telling them you need help filing a grievance; Superior STAR+PLUS MMP's 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, (TDD: 1-800-537-7697)

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

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## Declaración de no discriminación

Superior HealthPlan (Superior) STAR+PLUS Medicare-Medicaid Plan (MMP) cumple con las leyes federales de derechos civiles aplicables y no discrimina por cuestiones de raza, color, nacionalidad, edad, discapacidad o sexo. Superior STAR+PLUS MMP no excluye a ninguna persona ni la trata de manera diferente por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

### Superior STAR+PLUS MMP:

- Proporciona servicios y dispositivos gratuitos a personas con discapacidades para que se comuniquen eficazmente con nosotros, como intérpretes calificados de lengua de señas e información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles y otros formatos).
- Brinda servicios lingüísticos gratis a aquellas personas cuya lengua materna no es el inglés, como intérpretes calificados e información escrita en otros idiomas.

Si necesita estos servicios, póngase en contacto con Servicios para afiliados de Superior STAR+PLUS MMP al 1-866-896-1844 (los usuarios de TTY deben llamar al 711) de 8 a. m. a 8 p. m., lunes a viernes. Después de horas hábiles, los fines de semana y los días festivos, es posible que se le pida que deje un mensaje. Le devolveremos su llamada el próximo día hábil. La llamada es gratuita.

Si usted considera que Superior STAR+PLUS MMP no le ha brindado estos servicios o lo ha discriminado de alguna otra manera debido a su raza, color, nacionalidad, edad, discapacidad o sexo, puede presentar un reclamo llamando al número que aparece arriba e informando que necesita ayuda para presentar el reclamo; el Departamento de Servicios para afiliados de Superior STAR+PLUS MMP está disponible para ayudarlo.

También puede presentar una queja sobre derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Sociales de los EE. UU. de manera electrónica a través del Office for Civil Rights Complaint Portal (Portal de quejas de la Oficina de Derechos Civiles) disponible en <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, o bien, por correo electrónico o a los teléfonos que figuran a continuación:

U.S. Department of Health and Human Services  
200 Independence Avenue SW., Room 509F  
HHH Building, Washington, DC 20201  
1-800-368-1019, (TDD: 1-800-537-7697)

Los formularios de quejas se encuentran disponibles en <http://www.hhs.gov/ocr/office/file/index.html>.

**ENGLISH:** Language assistance services, auxiliary aids and services, and other alternative formats are available to you free of charge. To obtain this, call 1-866-896-1844 (TTY: 711).

**SPANISH:** Tiene a su disposición sin costo alguno servicios de ayuda con el idioma, servicios y dispositivos auxiliares, y otros formatos alternativos. Para obtenerlos, llame al 1-866-896-1844 (TTY: 711).

**SPANISH:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-896-1844 (TTY: 711).

**VIETNAMESE:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-896-1844 (TTY: 711).

**CHINESE:** 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 1-866-896-1844 (TTY: 711)。

**KOREAN:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-896-1844 (TTY: 711) 번으로 전화해 주십시오.

**ARABIC:** ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-866-896-1844 (رقم هاتف الصم والبكم: 711).

**URDU:** خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-866-896-1844 (TTY: 711).

**TAGALOG:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-896-1844 (TTY: 711).

**FRENCH:** ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-896-1844 (ATS : 711).

**HINDI:** ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-866-896-1844 (TTY : 711) पर कॉल करें।

**PERSIAN/  
FARSI:** توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-866-896-1844 (TTY : 711) تماس بگیرید.

**GERMAN:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-896-1844 (TTY: 711).

<b>GUJARATI:</b>	સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિઃશુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-866-896-1844 (TTY: 711).
<b>RUSSIAN:</b>	ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-896-1844 (телетайп: 711).
<b>JAPANESE:</b>	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。1-866-896-1844 (TTY: 711) まで、お電話にてご連絡ください。
<b>LAOTIAN:</b>	ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-866-896-1844 (TTY: 711).