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

Annual Notice of Changes for 2023

Introduction

You are currently enrolled as a member of Superior STAR+PLUS MMP. Next year, there will be 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. To get more information about benefits or rules please review the *Member Handbook*, which is located on our website at mmp.SuperiorHealthPlan.com. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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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*.

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. Refer to 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 (refer to page 14).
- If you do not want to enroll in a different Medicare-Medicaid plan after you leave Superior STAR+PLUS MMP, you will return to getting your Medicare and Texas Medicaid services separately.

B1. Additional resources

- ATTENTION: If you speak English, language assistance services, free of charge, are available to you. 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.
- 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.
- Superior HealthPlan STAR+PLUS Medicare-Medicaid Plan (MMP) wants to make sure you understand your health plan information. We can send required materials to you in a language other than English or in alternate formats if you ask for it this way. This is called a "standing request." We will document your choice for future required mailings and communications.

Please call us if:

- You want to get your materials in a language other than English or in an alternate format.
 - or
- You want to change the language (English/Spanish) or format of the materials we send you.

If you need help understanding your plan materials, please contact Superior STAR+PLUS MMP Member Services at 1-866-896-1844 (TTY: 711). Hours are 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.

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 <u>www.irs.gov/affordable-careact/individuals-and-families</u> 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).

B3. Important things to do:

- Check if there are any changes to our benefits that may affect you.
 - o 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 sections D1 and D2 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 D2 for information about changes to our drug coverage.
- Check if your providers and pharmacies will be in our network next year.
 - Are your doctors, including your specialists, 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*.

- Think about your overall costs in the plan.
 - o 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 decide to change plans:
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 other coverage will better meet your needs, you may be able to switch plans (refer to 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 10 to learn more about your choices.

C. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2023.

Please review the 2023 Provider and Pharmacy Directory to find out if your providers or pharmacy are in our network. An updated Provider and Pharmacy Directory is located on our website at 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. Hours are 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.

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, refer to Chapter 3 of your Member Handbook.

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.

	2022 (this year)	2023 (next year)
Diabetic Supplies and Services	You pay a \$0 copay Diabetic glucometer and supplies are limited to Accu- Chek and OneTouch when obtained at a Pharmacy. Other brands are not covered unless pre-authorized.	You pay a \$0 copay Diabetic glucometer and supplies are limited to OneTouch when obtained at a Pharmacy. Other brands and continuous glucose monitoring systems are not covered unless pre-authorized. Quantity limits may apply.
At Home Colon Cancer Screening-Cologuard	At Home Colon Cancer Screening is not covered.	You pay a \$0 copay Coverage begins at age 45 and frequency of coverage is the same as Medicare.
Genetic Testing - Cytogenomic	Genetic Testing is not covered.	You pay a \$0 copay for one procedure one per-lifetime. Exceptions to the limitation may be made with documentation of medical necessity. Covered for pregnant women with certain risk factors.

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. 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 find out 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, refer to Chapter 9 of the 2023 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. Refer to 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 temporary supply and how to ask for one, refer to Chapter 5 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 our plan approved in 2022, and you remain a member of Superior STAR+PLUS MMP for the next calendar

year, we may continue to cover this exception during 2023. You will receive a letter with approval dates if we decide to continue to cover your exception during 2023. However, if we decide not to continue to cover the exception during 2023, your doctor (or other prescriber) must work with Superior STAR+PLUS MMP to request a new exception for the 2023 calendar year. To learn what you must do to ask for an exception, see Chapter 9 of the 2023 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 2023. 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 find out if your drugs will be in a different tier, look them up in the Drug List.

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

	2022 (this year)	2023 (next year)
Drugs in Tier 1 (Generic Drugs) 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 \$0 per prescription .	Your copay for a one-month (30-day) supply is \$0 per prescription .
Drugs in Tier 2 (Brand Drugs) 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 \$0 per prescription .	Your copay for a one-month (30-day) supply is \$0 per prescription .
Drugs in Tier 3 (Non-Medicare Prescription and Over-the-Counter Drugs) 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 \$0 per prescription .	Your copay for a one-month (30-day) supply is \$0 per prescription .

Important Message About What You Pay for Vaccines - Our plan covers most Part D vaccines at no cost to you. Call Member Services for more information.

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 2023.

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.

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

1. You can change to:	Here is what to do:
A different Medicare-Medicaid Plan	Call 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
	Send Texas Medicaid an Enrollment Change Form. You can get the form by calling STAR+PLUS help line at 1-877-782- 6440 (TTY: 711) if you need them to mail you one.
	Your coverage with Superior STAR+PLUS MMP will end on the last day of the month that we get your request.
2. You can change to:	Here is what to do:
A Medicare health plan, such as a Medicare Advantage plan or a Program of All-inclusive Care for the Elderly (PACE)	 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. If you need help or more information: Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). You will automatically be disenrolled from Superior STAR+PLUS MMP when your new plan's coverage begins.

3. You can change to:	Here is what to do:
Original Medicare with a separate Medicare prescription drug plan	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.
	If you need help or more information:
	 Call the State Health Insurance Assistance Program (SHIP) at 1-800- 252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). You will automatically be disenrolled from Superior STAR+PLUS MMP when your Original Medicare coverage begins.
4. You can change to:	Here is what to do:
Original Medicare without a separate Medicare prescription drug plan	Call Medicare at 1-800-MEDICARE (1-800- 633-4227), 24 hours a day, 7 days a week.
 NOTE: 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. 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 & Advocacy Program of Texas (HICAP) at 1-800-252- 3439. 	 TTY users should call 1-877-486-2048. If you need help or more information: Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). You will automatically be disenrolled from Superior STAR+PLUS MMP when your Original Medicare coverage begins.

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 2023 Member Handbook

The 2023 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 2023 Member Handbook will be available by October 15. An up-to-date copy of the 2023 Member Handbook is available on our website at mmp.SuperiorHealthPlan.com. You may also call Member Services at 1-866-896-1844 (TTY: 711) to ask us to mail you a 2023 Member Handbook.

Our website

You can also visit our website at 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 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 1-800-252-3439.

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 (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 www.medicare.gov and click on "Find plans.")

Medicare & You 2023

You can read the Medicare & You 2023 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 (www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf) 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: 711). For more information, see Chapter 2 of your *Member Handbook*.







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, HHH Building Room 509F 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.

Declaración de No Discriminación

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

Superior STAR+PLUS MMP:

- Proporciona asistencia y servicios gratuitos a las personas con discapacidades para que puedan comunicarse adecuadamente con nosotros, tales como intérpretes calificados de lengua de señas e información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles y otros formatos).
- Proporciona servicios lingüísticos gratuitos a personas cuyo idioma principal no es el inglés, tales como intérpretes calificados e información escrita en otros idiomas.

Si necesita estos servicios, comuníquese con Servicios para Miembros de Superior STAR+PLUS MMP al **1-866-896-1844** (TTY: **711**), de 8 a.m. a 8 p.m., de lunes a viernes. Después del horario de atención, los fines de semana y días feriados, es posible que se le solicite dejar un mensaje. Se le devolverá la llamada el siguiente día hábil. La llamada es gratuita.

Si considera que Superior STAR+PLUS MMP no ha proporcionado estos servicios o lo ha discriminado por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, puede presentar una queja llamando al número indicado anteriormente mencionando que necesita ayuda para presentar una queja; el Departamento de Servicios para Miembros de Superior STAR+PLUS MMP está disponible para ayudarle.

También puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de EE. UU. de manera electrónica a través del Portal para Quejas de la Oficina de Derechos Civiles, disponible en https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, por correo postal o por teléfono a:

U.S. Department of Health and Human Services 200 Independence Avenue SW, HHH Building Room 509F Washington, DC 20201

1-800-368-1019, (TDD: 1-800-537-7697)

Los formularios de queja están 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: Contamos con servicios de asistencia lingüística, servicios y asistencia auxiliares y otros formatos alternativos para usted de forma gratuita. Para recibirlos, llame al **1-866-896-1844** (TTY: **711**).

SPANISH: ATENCIÓN: Si habla español, contamos con servicios de asistencia lingüística que se encuentran disponibles para usted de manera gratuita. Llame al **1-866-896-1844** (TTY: **711**), de 8 a.m. a 8 p.m., de lunes a viernes. Después del horario de atención, los fines de semana y días feriados, puede dejar un mensaje. Se le devolverá la llamada el siguiente día hábil. La llamada es gratuita.

VIETNAMESE: LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi có các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Vui lòng gọi **1-866-896-1844** (TTY: **711**), từ 8 a.m. đến 8 p.m., Thứ Hai đến Thứ Sáu. Sau giờ làm việc, vào cuối tuần và ngày lễ, quý vị có thể để lại tin nhắn. Cuộc gọi của quý vị sẽ được trả lời vào ngày làm việc tiếp theo. Cuộc gọi này được miễn phí.

CHINESE: 注意:如果您説中文,您可以免費獲得語言協助服務。請致電 1-866-896-1844 (TTY:711),服務時間為週一至週五,早上8點到晚上8點。非服務時間、週末和假日,您可以留言。我們將在下 一個工作日內回電給您。此為免付費專線。

KOREAN: 주의: 한국어를 구사할 경우, 언어 보조 서비스를 무료로 이용 가능합니다. 해당 서비스는 1-866-896-1844(TTY: 711)번으로, 월요일~금요일, 오전 8시부터 오후 8시까지 문의해 주십시오. 근무시간 이후나 주말 및 공휴일에는 메시지를 남겨 주실 수 있습니다. 그러면 다음 근무일에 전화드리겠습니다. 통화는 무료입니다.

ARABIC: انتباه: في حال كنت تتحدث اللغة العربية، تتوفر لك خدمات مساعدة لغوية مجانية. اتصل على الرقم 1844-896-1866 (TTY: 711)، من الساعة 8 صباحًا ولغاية الساعة 8 مساءً من الاثنين إلى الجمعة. ويمكنك ترك رسالة بعد انتهاء ساعات العمل وفي عطلات نهاية الأسبوع والإجازات. وستتم معاودة الاتصال بك خلال يوم العمل التالي. والاتصال مجاني.

URDU: توجہ: اگر آپ اردو بولت ے ہیں تو زبان معاون سروسز، مفت، آپ ک ے لیے دستیاب ہیں۔ **1844-896-1846** (TTY: **117**) پر کال کریں، سوموار تا جمعہ صبح 8 بجے سے شام 8 بجے تک۔ اوقات کے بعد، ویکینڈز اور چھٹیوں میں، آپ ایک پیغام بھیج سکتے ہیں۔ آپ کی کال اگلے کاروباری دن میں واپس کی جائے گی۔ کال مفت ہے۔

TAGALOG: PAALALA: Kung nagsasalita ka ng Tagalog, may mga available na libreng tulong sa wika para sa iyo. Tumawag sa **1-866-896-1844** (TTY: **711**), 8 a.m. hanggang 8 p.m., Lunes hanggang Biyernes. Pagkalipas ng oras ng trabaho, tuwing Sabado at Linggo, at sa mga holiday, maaari kang mag-iwan ng mensahe. Tatawagan ka sa susunod na araw ng negosyo. Libre ang tawag.

FRENCH: ATTENTION : si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Appelez le **1-866-896-1844** (TTY : **711**) du lundi au vendredi, de 8 h à 20 h. En dehors des heures d'ouverture et durant le week-end et les jours fériés, vous pouvez laisser un message. Vous serez rappelé le jour ouvrable suivant. L'appel est gratuit.

HINDI: ध्यान दें: अगर आप हिंदी बोलते हैं, तो आपके लिए मुफ़्त में भाषा संबंधी सहायता सेवाएं उपलब्ध होंगी. सोमवार से लेकर शुक्रवार तक सुबह 8 बजे से लेकर रात 8 बजे तक **1-866-896-1844** (TTY: **711**) पर कॉल करें. उपरोक्त समय के अलावा, वीकेंड या छुट्टी के दिनों में आप मैसेज छोड़ सकते हैं. आपके कॉल का जवाब अगले कामकाज के दिन के भीतर दे दिया जाएगा. यह कॉल मुफ़्त है.







PERSIAN/FARSI: توجه: اگر به فارسی صحبت میکنید، خدمات کمک زبانی به صورت رایگان در دسترس شما است. با شماره PERSIAN/FARSI (**711**: **117**) از 8 صبح تا 8 شب، دوشنبه تا جمعه تماس بگیرید. در ساعات غیرکاری، روزهای آخر هفته و تعطیلات، میتوانید پیام بگذارید. به تماس شما ظرف روز کاری بعدی پاسخ داده خواهد شد. تماس رایگان است.

GERMAN: HINWEIS: Wenn Sie Deutsch sprechen, steht Ihnen ein kostenloser Übersetzungsdienst zur Verfügung. Wählen Sie dafür **1-866-896-1844** (TTY: **711**) von Montag bis Freitag zwischen 8 und 20 Uhr. Außerhalb dieser Zeiten, an Wochenenden und Feiertagen, können Sie eine Nachricht hinterlassen. Ihr Anruf wird innerhalb des nächsten Arbeitstages beantwortet. Der Anruf ist kostenlos.

GUJARATI: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો તમારા માટે ભાષા સંબંધી સહાયતાની સેવાઓ વગર કોઈ શુલ્કે ઉપલબ્ધ છે. સોમવારથી શુક્રવાર દરમિયાન સવારે 8 વાગ્યાથી રાત્રે 8 વાગ્યા સુધી **1-866-896-1844** (TTY: **711**) પર કૉલ કરો. કામકાજના સમયની બહારના સમયે, શનિ-રવિએ અને રજાઓમાં, તમે મેસેજ છોડી દઈ શકો છો. તમારા કૉલ માટે કામકાજના આગલા દિવસની અંદર વળતો કૉલ કરવામાં આવશે. એ કૉલ મફત હોય છે.

RUSSIAN: ВНИМАНИЕ: если вы говорите на русском языке, вы можете бесплатно получить помощь переводчика. Позвоните по номеру **1-866-896-1844** (ТТҮ: **711**), с 8 а.т. до 8 р.т. с понедельника по пятницу. В нерабочее время, в выходные и праздничные дни вы можете оставить сообщение. Вам перезвонят на следующий рабочий день. Звонки бесплатные.

JAPANESE: 注目:日本語を話す場合、言語支援サービスを無料でご利用いただけます。月曜日から金曜日の午前8時から午後8時の間に1-866-896-1844(TTY:711)までお電話ください。対応時間外や週末、祝日 に電話をかけると、メッセージをお残しください。次の営業日に折り返しお電話いたします。通話は無料 です。

LAOTIAN: ຄຳເຕືອນ: ຖ້າທ່ານເວົ້າພາສາລາວ, ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໄດ້ຟຣີ. ໂທ **1-866-896-1844** (TTY: **711**), 8 ໂມງເຊົ້າ ຫາ 8 ໂມງແລງ, ວັນຈັນເຖິງວັນສຸກ. ນອກໂມງເຂົ້າການ ໃນວັນທ້າຍອາທິດ ແລະ ວັນພັກ, ທ່ານສາມາດຝາກ ຂໍ້ຄວາມໄດ້. ກທ່ານຈະໄດ້ຮັບການຕິດຕໍ່ກັບຄືນພາຍໃນມື້ເຂົ້າການຕໍ່ໄປ. ການໂທແມ່ນຟຣີ.

ITALIAN: ATTENZIONE: se parla italiano, sono disponibili gratuitamente servizi di assistenza linguistica. Chiami il numero **1-866-896-1844** (TTY: **711**), dalle 8:00 alle 20:00, dal lunedì al venerdì. Al di fuori di questa fascia oraria, nei fine settimana e nei giorni festivi è possibile lasciare un messaggio. La sua chiamata sarà gestita entro il giorno lavorativo successivo. La chiamata è gratuita.

PORTUGUESE: ATENÇÃO: se falar português, estão disponíveis serviços de assistência gratuitos no seu idioma. Ligue para o número **1-866-896-1844** (TTY: **711**) de segunda-feira a sexta-feira, das 8:00 às 20:00. Se ligar fora deste horário, num fim de semana ou num feriado, pode deixar mensagem. A sua chamada será devolvida no próximo dia útil. A chamada é gratuita.

FRENCH CREOLE: ATANSYON: Si ou pale Kreyòl-Franse, sèvis asistans lang disponib gratis pou ou. Rele **1-866-896-1844** (TTY: **711**), 8è a.m. pou 8è p.m., soti lendi pou rive vandredi. Apre lè travay, nan wikenn ak jou konje, ou ka kite yon mesaj. Y ap retounen w apèl la nan pwochen jou ouvrab la. Apèl la gratis.

POLISH: UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-866-896-1844** (TTY: **711**), od poniedziałku do piątku, od 8 do 20. Poza godzinami pracy, w weekendy i święta państwowe możesz zostawić wiadomość. Nasz agent oddzwoni w kolejnym dniu roboczym. Połączenie jest bezpłatne.