Emergency and urgent care away from home

For travel outside Kaiser Permanente areas
Emergencies can happen anywhere

As a Kaiser Permanente member, you’re covered for emergency and urgent care anywhere in the world. Whether you’re traveling in the United States or internationally, this brochure will explain what to do if you need emergency or urgent care while away from home.

It’s important to remember that how you get care can vary depending on where you are. So plan ahead and find out what emergency and other medical services are available where you’ll be traveling.

Before you go …

A little planning makes a big difference. Plan now for a healthy trip.

Things to do

☐ Register on kp.org and email your Kaiser Permanente doctor anytime, anywhere.
☐ Get our Kaiser Permanente mobile app to stay connected when you’re on the go.
☐ Consult your doctor if you need to manage a condition during your trip.
☐ Refill your eligible prescriptions to have enough while you’re away.
☐ Print a summary of your online medical record in case you don’t have internet access.*
☐ Make sure your immunizations are up to date, including your yearly flu shot.

Don’t forget

☐ Take along your Kaiser Permanente ID card. It has important phone numbers on the back.
☐ Take this brochure on your trip. It explains what to do if you need care.
☐ If you travel by plane, keep your medications with you in your carry-on baggage.
☐ Away from Home 24/7 Travel Line: 951-268-3900 (TTY 711) or kp.org/travel

*These features are available when you register on kp.org and seek care from Kaiser Permanente providers.

Kaiser Permanente health plans around the country: Kaiser Foundation Health Plan, Inc., in Northern and Southern California and Hawaii
* Kaiser Foundation Health Plan of Colorado • Kaiser Foundation Health Plan of Georgia, Inc., Nine Piedmont Center, 3495 Piedmont Road NE, Atlanta, GA 30305, 404-364-7000 • Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., in Maryland, Virginia, and Washington, D.C., 2101 E. Jefferson St., Rockville, MD 20852 • Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232 • Kaiser Foundation Health Plan of Washington or Kaiser Foundation Health Plan of Washington Options, Inc., 601 Union St., Suite 3100, Seattle, WA 98101
What’s inside

Types of care

• What is emergency care?
• What is urgent care?
• What is routine care?

U.S. travel

• How do I get emergency care in the U.S.?
• What if I still need care after my emergency condition has been stabilized?
• How do I report emergency care?
• How do I get urgent care in the U.S.?
• What if I’m not sure what kind of care I need?
• How do I submit a claim?

International travel

• How do I get emergency or urgent care outside the U.S.?
• What if I still need care after my emergency condition has been stabilized?
• How do I report emergency care if I’m outside the U.S.?
• Is transportation covered?
• How do I submit a claim?

For more information

This brochure is not intended to be used by Medicare, Medicaid, or Kaiser Permanente Washington Options PPO, EPO, or POS members. Medicare members should refer to the On the Go brochure or call Member Services in their home area for details. Medicaid members should refer to their Evidence of Coverage. Washington Options PPO, EPO, or POS members should refer to kp.org/wa/travel or call Washington Member Services at 1-888-901-4636.
Types of care

Anything can come up when you travel, and different health needs require different types of care. Here are some common examples, which don’t include all possible symptoms and conditions.

What is emergency care?
Emergency care is care for an emergency medical condition.*

Examples include:
- Chest pain or pressure
- Severe stomach pain that comes on suddenly
- Severe shortness of breath
- Decrease in or loss of consciousness

What is urgent care?
Urgent care is for a condition that requires prompt medical attention, usually within 24 or 48 hours, but is not an emergency medical condition.

Examples include:
- Minor injuries and cuts
- Backaches and earaches
- Upper-respiratory symptoms
- Sore throats
- Frequent or severe coughs
- Frequent urination or a burning sensation when urinating

What is routine care?
Routine care is for an expected care need, like a scheduled visit to your doctor or a recommended preventive screening or immunizations.

Examples include:
- Physical exams
- Adult and well-child checkups
- Pap tests
- Follow-up visits

Routine services aren't covered outside Kaiser Permanente areas, so make sure to get them before your trip.

Kaiser Permanente service areas include all or parts of:
- California
- Colorado
- Georgia
- Hawaii
- Maryland
- Oregon
- Virginia
- Washington
- Washington, D.C.

Find our locations at kp.org/facilities

*If you believe you have an emergency medical condition, call 911 or go to the nearest hospital. For the complete definition of an emergency medical condition, please refer to your Evidence of Coverage or other coverage documents.
Outside Kaiser Permanente areas

How do I get emergency care in the U.S.?
If you or a family member who is enrolled in Kaiser Permanente coverage has a medical emergency, get care right away. You don’t have to let Kaiser Permanente know or get approval first. Here’s what to do:

• Call 911 or go to the nearest hospital. Always use the emergency services available where you are.
• Once your condition is stable, call Kaiser Permanente to let us know you’ve received emergency care or been admitted to a hospital. See page 9 for phone numbers for reporting an emergency (or post-stabilization care).
  If appropriate, the doctor treating you can call instead.
• When you call Kaiser Permanente, we’ll talk to the doctor treating you to discuss your condition, health plan coverage information, and help decide what to do next.

What if I still need care after my emergency condition has been stabilized?
If you’ve been hospitalized, the doctor treating you may decide you still need care after your condition has been stabilized.

This is called post-stabilization care. You’ll need to get approval from Kaiser Permanente for this kind of care to be covered under your Kaiser Permanente plan.

• Call us as soon as you can, preferably before you get care. See page 9 for phone numbers for reporting an emergency (or post-stabilization care). Getting approval helps protect you from financial responsibility because we may not cover services we don’t approve first.
• If we agree you need post-stabilization care, we may authorize the doctor treating you to give you this care. Or we may choose a different provider who can provide the right care for your condition.
• Ask the doctor treating you if Kaiser Permanente has approved your care, including any transportation. In addition to post-stabilization care, you’ll need to get any related transportation approved. When medically necessary transportation is needed for your care (as determined by Kaiser Permanente), we will arrange these services for you.

Post-stabilization follow-up care is generally not covered, unless we authorize it or it’s considered urgent. This includes any follow-up care you need after an emergency or urgent care visit, like removing stitches or a cast. Call us before you get follow-up care to check whether it’s covered.

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1 For specific timing considerations, please refer to your Evidence of Coverage or other coverage documents.
2 Kaiser Permanente Georgia health plan does not cover transportation services for nonurgent, nonemergency care from outside the service area; and any request for transportation is subject to review.
U.S. travel (continued)

How do I report emergency care?
Call to let Kaiser Permanente know you’ve been admitted to a hospital with an emergency condition, or to ask for approval for post-stabilization care.\(^1\) See page 9 for phone numbers for reporting an emergency (or post-stabilization care).

What if I’m not sure what kind of care I need?
If you’re not sure what kind of care you need, and you have a secure login and password, you can use kp.org to send a nonurgent message to your primary care physician. You’ll get a response usually within 2 business days.

How do I get urgent care in the U.S.?
If you need urgent care while in a Kaiser Permanente service area, you can visit a Kaiser Permanente urgent care clinic location. Find urgent care locations by visiting kp.org/locations or calling the Away from Home Travel Line at 951-268-3900 (TTY 711).\(^2\)

If you need urgent care in a state without Kaiser Permanente providers, go to the nearest MinuteClinic\(^\circledR\) or urgent care facility.\(^3\)

For care at a MinuteClinic, you’ll be charged your standard cost share. Be sure to bring your Kaiser Permanente ID card and method of payment. Walk-ins welcome, no appointment needed.

For care at an urgent care or retail clinic location other than a MinuteClinic, you’ll be asked to pay upfront for services you receive and will need to file a claim for reimbursement.

Note: If you get urgent care at a MinuteClinic within a state with Kaiser Permanente providers, you’ll be asked to pay upfront for services you receive and will need to file a claim for reimbursement.\(^3\)

How do I submit a claim?
If you paid for emergency or urgent care while away from home, you’ll need to file a claim for reimbursement.

The following information is required for all requests for reimbursement:

- Itemized bills (should include date of service, services received, and cost of each item)
- Medical records (copies of original medical reports, admission notes, emergency room records, and/or consultation reports)
- Proof of payment (receipts or bank or credit card statements)

For help with filing a claim for reimbursement, visit kp.org/travel or call the Away from Home Travel Line at 951-268-3900.

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\(^1\)For specific timing considerations, please refer to your Evidence of Coverage or other coverage documents.

\(^2\)This number can be dialed from both inside and outside the United States. Before the phone number, dial “001” for landlines and “+1” for mobile lines if you’re outside the country. Long-distance charges may apply and we can’t accept collect calls. The phone line is closed on major holidays (New Year’s Day, Easter, Memorial Day, July Fourth, Labor Day, Thanksgiving, and Christmas). It closes early the day before a holiday at 10 p.m. Pacific time (PT), and it reopens the day after a holiday at 4 a.m. PT.

\(^3\)Some Kaiser Permanente Insurance Company PPO and POS plans include MinuteClinic as in-network while others do not. Please check your Certificate of Insurance to see if MinuteClinic is included as an in-network provider.
International travel

How do I get emergency or urgent care outside the U.S.?
If you or a family member who is enrolled in Kaiser Permanente coverage has an emergency or urgent medical situation, get care right away. You don’t have to let Kaiser Permanente know or get approval first. Here’s what to do:

• Immediately go to the nearest hospital or any facility that can give you the care you need. Kaiser Permanente won’t be able to help manage your care until your emergency or urgent care need is under control or is being managed by a doctor.

• If you get emergency care, call Kaiser Permanente when your condition is stable to let us know you’ve been treated for an emergency or admitted to a hospital. See page 9 for phone numbers for reporting an emergency (or post-stabilization care). If appropriate, the doctor treating you can call instead.

• When you call Kaiser Permanente, we’ll talk to the doctor treating you to discuss your condition, health plan coverage, and help you decide what to do next. We have interpreter services that allow us to talk to doctors who don’t speak English.

What if I still need care after my emergency condition has been stabilized?
If you’ve been hospitalized, the doctor treating you may decide you still need care after your condition has been stabilized. This is called post-stabilization care. You’ll need to get approval from Kaiser Permanente for this kind of care to be covered under your Kaiser Permanente plan.

• Call us as soon as you can, preferably before you get care. See page 9 for phone numbers for reporting an emergency (or post-stabilization care). Getting approval helps protect you from financial responsibility, since we may not cover services we don’t approve first.

• If we agree you need post-stabilization care, we may authorize the doctor treating you to give you this care. Or we may choose a different provider who can provide the right care for your condition.

• Ask the doctor treating you if Kaiser Permanente has approved your care, including any transportation. In addition to post-stabilization care, you’ll need to get any related transportation approved. When medically necessary transportation is needed for your care (as determined by Kaiser Permanente), we will arrange these services for you.\(^3\)

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\(^1\)Kaiser Permanente may cover medically necessary urgent care you get when you’re temporarily outside the country – if it can’t be delayed until you get back home. Please refer to your Evidence of Coverage or other coverage documents for any restrictions.

\(^2\)For specific timing considerations, please refer to your Evidence of Coverage or other coverage documents.

\(^3\)Kaiser Permanente Georgia health plan does not cover transportation services for nonurgent, nonemergency care from outside the service area; and any request for transportation is subject to review.
Outpatient follow-up care is generally not covered, unless we authorize it or it’s considered urgent. This includes any follow-up care you need after an emergency or urgent care visit, like removing stitches or a cast. Call us before you get follow-up care to check whether it’s covered. See page 9 for phone numbers for reporting an emergency (or post-stabilization care).

How do I report emergency care if I’m outside the U.S.?
Call to let Kaiser Permanente know you’ve been admitted to a hospital with an emergency condition, or to ask for approval for post-stabilization care. See page 9 for phone numbers for reporting an emergency (or post-stabilization care).

Check with the local telephone service provider where you are if you need help calling internationally. International calls to this number aren’t toll-free, and you’ll be charged at local international rates.

You should always have a plan for calling Kaiser Permanente. Get ready before you leave. Find out if your cell phone service includes international calling, or get an international calling card.

Is transportation covered?
Kaiser Permanente covers emergency medical transportation to get you to the nearest hospital, or another facility if we decide it’s necessary. However, we can’t arrange this transportation for you during an emergency. You’ll need to work with emergency transportation providers wherever you are.

We generally don’t cover or arrange other transportation, unless we decide it’s needed to manage your care. In order to lessen your potential financial liability for noncovered travel-related services, you may want to consider getting extra travel insurance to cover services that aren’t covered by your Kaiser Permanente plan.

How do I submit a claim?
If you paid for emergency or urgent care while away from home, you’ll need to file a claim for reimbursement.¹

In many countries, providers require payment before giving care. Costs can be high, so be ready to cover any unexpected costs. You may want to get extra travel insurance for your trip.

The following information is required for all international claims:

- Itemized bills (should include date of service, services received, and cost of each item)
- Medical records (copies of original medical reports, admission notes, emergency room records, and/or consultation reports)
- Proof of payment (receipts or bank or credit card statements)
- Proof of travel (copy of itinerary and/or airline tickets)

Visit kp.org/travel to download a claim form. For help with filing a claim for reimbursement, call the Away from Home Travel Line at 951-268-3900.

¹If a member receives emergency services in a country where the U.S. government has imposed sanctions, the member may have to pay for services and then submit a claim to Kaiser Permanente for reimbursement.
You’ll find more information about getting emergency and urgent care in the document below that applies to your health coverage:

• **Evidence of Coverage (EOC),** if your coverage is directly with Kaiser Foundation Health Plan or its regional health plans

• **Summary Plan Description (SPD),** if your coverage is with your employer’s self-funded plan

For a complete description of your coverage, you should read your EOC, SPD, or other coverage document, since the information in this brochure may change at any time. Contact our Member Service Contact Center to request a copy of your EOC or other coverage document. To request a copy of your SPD, contact your employer.

**Member Services phone numbers**

**California**

1-800-464-4000 (English and more than 150 languages using interpreter services)

1-800-788-0616 (Spanish)

1-800-757-7585 (Chinese dialects)

TTY 711

**Hours:** Open 7 days a week, 24 hours a day; closed holidays

**Medicare members**

1-800-443-0815 or TTY 711

**Hours:** Open 7 days a week from 7 a.m. to 8 p.m.

**Colorado Denver/Boulder**

303-338-3800 or TTY 711

**Hours:** Open Monday through Friday from 8 a.m. to 6 p.m.

**Medicare members**

1-800-476-2167 or TTY 711

**Hours:** Open 7 days a week from 8 a.m. to 8 p.m.

**Mountain Colorado**

1-844-837-6884 or TTY 711

**Hours:** Open Monday through Friday from 8 a.m. to 6 p.m.

**Medicare members**

Medicare Advantage plans are not currently available in Mountain Colorado.

**Northern Colorado**

1-844-201-5824 or TTY 711

**Hours:** Open Monday through Friday from 8 a.m. to 6 p.m.

**Medicare members**

1-800-476-2167 or TTY 711

**Hours:** Open 7 days a week from 8 a.m. to 8 p.m.

**Away from Home Travel Line**

When traveling internationally, call the travel line at 951-268-3900* to avoid challenges associated with toll-free numbers.

*This number can be dialed from both inside and outside the United States. Before the phone number, dial “001” for landlines and “+1” for mobile lines if you’re outside the country. Long-distance charges may apply and we can’t accept collect calls. The phone line is closed on major holidays (New Year’s Day, Easter, Memorial Day, July Fourth, Labor Day, Thanksgiving, and Christmas). It closes early the day before a holiday at 10 p.m. Pacific time (PT), and it reopens the day after a holiday at 4 a.m. PT.

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For more information (continued)

Southern Colorado
1-888-681-7878 or TTY 711
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.
Medicare members
1-800-476-2167 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

District of Columbia
Metro area
301-468-6000 or TTY 711
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m. (except holidays)
Outside metro area
1-800-777-7902 or TTY 711
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m.
Medicare members
1-888-777-5536 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

Georgia
1-888-865-5813 or TTY 711
404-261-2590
Hours: Open Monday through Friday from 7 a.m. to 7 p.m.
Medicare members
1-800-232-4404 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

Hawaii
1-800-966-5955 or TTY 711
Hours: Open Monday through Friday from 8 a.m. to 5 p.m.; Saturday from 8 a.m. to noon
Medicare members
1-800-805-2739 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

Maryland
D.C. metro area
301-468-6000 or TTY 711
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m.
Outside D.C. metro area
1-800-777-7902 or TTY 711
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m.
Medicare members
1-888-777-5536 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

Oregon
Portland
503-813-2000 or TTY 711
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.
Outside Portland
1-800-813-2000 or TTY 711
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.
Medicare members
1-888-777-5536 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

Virginia
D.C. metro area
301-468-6000 or TTY 711
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m. (except holidays)
Outside D.C. metro area
1-800-777-7902 or TTY 711
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m.
Medicare members
1-888-777-5536 or TTY 711
Hours: Open 7 days a week from 8 a.m. to 8 p.m.
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**Washington**  
Outside Vancouver/Longview area  
206-630-4636  
1-888-901-4636 or TTY 711  
Hours: Open Monday through Friday from 8 a.m. to 5 p.m.  
Medicare members  
1-888-901-4600 or TTY 711  
Hours: Open 7 days a week from 8 a.m. to 8 p.m.  

**Southwest Washington**  
Vancouver/Longview area  
1-800-813-2000 or TTY 711  
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.  
Medicare members  
1-877-221-8221 or TTY 711  
Hours: Open 7 days a week from 8 a.m. to 8 p.m.  

If you’re enrolled in an employer’s self-funded EPO, POS, or PPO plan administered by Kaiser Permanente Insurance Company, please call the Customer Service number on the back of your Kaiser Permanente ID card.

**Emergency care reporting phone numbers**

**Phone numbers to report emergency (or post-stabilization) care**  
If you need emergency care, call 911 or go to the nearest hospital that can give you care.

**California**  
1-800-225-8883  
Hours: Open 7 days a week, 24 hours a day

**Colorado**  
(Sr. Advantage Members)  
1-800-476-2167  
Hours: Open 7 days a week from 8 a.m. to 8 p.m.

**Mountain Colorado**  
1-844-201-5824  
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.

**Northern Colorado**  
1-800-632-9700  
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.

**Southern Colorado**  
1-888-681-7878  
Hours: Open Monday through Friday from 8 a.m. to 6 p.m.

**Hawaii**  
1-800-227-0482  
Hours: Open Monday through Friday from 8 a.m. to 4:30 p.m.

**Georgia**  
1-800-611-1811  
Hours: Open 7 days a week, 24 hours a day

**Maryland**  
(Baltimore and suburban D.C. area), Virginia, District of Columbia  
1-800-777-7904 Advice line  
Hours: Open 7 days a week, 24 hours a day  
1-800-777-7902 Member Services  
Hours: Open Monday through Friday from 7:30 a.m. to 9 p.m. (except holidays)

**Oregon and Washington**  
(Vancouver/Longview area)  
1-877-813-5993  
Hours: Open 7 days, 24 hours a day

**Washington**  
1-888-457-9516 Emergency notification  
206-901-4609 Local  
Hours: Open 7 days a week, 24 hours a day

TTY 711
NONDISCRIMINATION NOTICE

Kaiser Permanente Insurance Company (KPIC) complies with applicable federal civil rights law and does not discriminate on the basis of race, color, national origin, age, disability, or sex. KPIC does not exclude people or treat them differently because of race, color, national origin, age, disability or sex. We also:

- Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats, such as large print, audio, and accessible electronic formats

- Provide no cost language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, call: 1-866-213-3062 (TTY: 711)

If you believe that KPIC 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 mail or phone at: KPIC Civil Rights Coordinator, 3701 Boardman-Canfield Rd, Canfield OH 44406, telephone number 1-866-213-3062.


HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-213-3062 (TTY: 711).

አማርኛ (Amharic) ማስከት:


If you speak Igbo (Igbo), please call 1-866-213-3062 (TTY: 711).
Naabehó (Navajo) Díí baa akó nínízin: Díí saad bee yáníldii'go Diné Bizaad, saad bee áká'ánida'áwo'dé'é, t'áá jìik'eh, éí ná hóló, kojí' hódiílnih 1-866-213-3062 (TTY: 711).

Nepali (Nepali) ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहोस भने तपाईंको निम्नलिखित भाषा सहयोग सेवाहरू लिए सुलभ रूपमा उपलब्ध छ। 1-866-213-3062 (TTY: 711) फोन गनुहोस्।


Punjabi (Punjabi) ਧੀਆ ਨਹੀਂ: ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਣ ਦੇਣ ਦਾ ਹਿੱਸਾ ਕਰੋ।

Română (Romanian) ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-866-213-3062 (TTY: 711).

Русский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-213-3062 (TTY: 711).

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-213-3062 (TTY: 711).


Українська (Ukrainian) УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-866-213-3062 (TTY: 711).


Yorùbá (Yoruba) AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi 1-866-213-3062 (TTY: 711).
Nondiscrimination Notice

Kaiser Permanente does not discriminate on the basis of age, race, ethnicity, color, national origin, cultural background, ancestry, religion, sex, gender identity, gender expression, sexual orientation, marital status, physical or mental disability, source of payment, genetic information, citizenship, primary language, or immigration status.

Language assistance services are available from our Member Services Contact Center 24 hours a day, seven days a week (except closed holidays). Interpreter services, including sign language, are available at no cost to you during all hours of operation. Auxiliary aids and services for individuals with disabilities are available at no cost to you during all hours of operation. We can also provide you, your family, and friends with any special assistance needed to access our facilities and services. You may request materials translated in your language, and may also request these materials in large text or in other formats to accommodate your needs at no cost to you. For more information, call 1-800-464-4000 (TTY users call 711).

A grievance is any expression of dissatisfaction expressed by you or your authorized representative through the grievance process. For example, if you believe that we have discriminated against you, you can file a grievance. Please refer to your Evidence of Coverage or Certificate of Insurance or speak with a Member Services representative for the dispute-resolution options that apply to you. This is especially important if you are a Medicare, Medi-Cal, MRMIP, Medi-Cal Access, FEHBP, or CalPERS member because you have different dispute-resolution options available.

You may submit a grievance in the following ways:

- By completing a Complaint or Benefit Claim/Request form at a Member Services office located at a Plan Facility (please refer to Your Guidebook or the facility directory on our website at kp.org for addresses)
- By mailing your written grievance to a Member Services office at a Plan Facility (please refer to Your Guidebook or the facility directory on our website at kp.org for addresses)
- By calling our Member Service Contact Center toll free at 1-800-464-4000 (TTY users call 711)
- By completing the grievance form on our website at kp.org

Please call our Member Service Contact Center if you need help submitting a grievance.

The Kaiser Permanente Civil Rights Coordinator will be notified of all grievances related to discrimination on the basis of race, color, national origin, sex, age, or disability. You may also contact the Kaiser Permanente Civil Rights Coordinator directly at One Kaiser Plaza, 12th Floor, Suite 1223, Oakland, CA 94612.

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 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, 800–537–7697 (TDD). Complaint forms are available at hhs.gov/ocr/office/file/index.html.
Aviso de no discriminación

Kaiser Permanente no discrimina a ninguna persona por su edad, raza, etnia, color, país de origen, antecedentes culturales, ascendencia, religión, sexo, identidad de género, expresión de género, orientación sexual, estado civil, discapacidad física o mental, fuente de pago, información genética, ciudadanía, lengua materna o estado migratorio.

La Central de Llamadas de Servicio a los Miembros brinda servicios de asistencia con el idioma las 24 horas del día, los siete días de la semana (excepto los días festivos). Se ofrecen servicios de interpretación sin costo alguno para usted durante el horario de atención, incluido el lenguaje de señas. Se ofrecen aparatos y servicios auxiliares para personas con discapacidades sin costo alguno durante el horario de atención. También podemos ofrecerle a usted, a sus familiares y amigos cualquier ayuda especial que necesiten para acceder a nuestros centros de atención y servicios. Puede solicitar los materiales traducidos a su idioma, y también los puede solicitar con letra grande o en otros formatos que se adapten a sus necesidades sin costo para usted. Para obtener más información, llame al 1-800-788-0616 (los usuarios de la línea TTY deben llamar al 711).

Una queja es una expresión de inconformidad que manifiesta usted o su representante autorizado a través del proceso de quejas. Por ejemplo, si usted cree que ha sufrido discriminación de nuestra parte, puede presentar una queja. Consulte su Evidencia de Cobertura (Evidence of Coverage) o Certificado de Seguro (Certificate of Insurance), o comuníquese con un representante de Servicio a los Miembros para conocer las opciones de resolución de disputas que le correspondan. Esto tiene especial importancia si es miembro de Medicare, Medi-Cal, el Programa de Seguro Médico para Riesgos Mayores (Major Risk Medical Insurance Program MRMIP), Medi-Cal Access, el Programa de Beneficios Médicos para los Empleados Federales (Federal Employees Health Benefits Program, FEHBP) o CalPERS, ya que dispone de otras opciones para resolver disputas.

Puede presentar una queja de las siguientes maneras:

- Completando un formulario de queja o de reclamación/solicitud de beneficios en una oficina de Servicio a los Miembros ubicada en un centro del plan (consulte las direcciones en Su Guía o en el directorio de centros de atención en nuestro sitio web en kp.org/espanol)
- Enviando por correo su queja por escrito a una oficina de Servicio a los Miembros en un centro del plan (consulte las direcciones en Su Guía o en el directorio de centros de atención en nuestro sitio web en kp.org/espanol)
- Llamando a la línea telefónica gratuita de la Central de Llamadas de Servicio a los Miembros al 1-800-788-0616 (los usuarios de la línea TTY deben llamar al 711)
- Completando el formulario de queja en nuestro sitio web en kp.org/espanol

Llame a nuestra Central de Llamadas de Servicio a los Miembros si necesita ayuda para presentar una queja.

Se le informará al coordinador de derechos civiles de Kaiser Permanente (Civil Rights Coordinator) de todas las quejas relacionadas con la discriminación por motivos de raza, color, país de origen, género, edad o discapacidad. También puede comunicarse directamente con el coordinador de derechos civiles de Kaiser Permanente en One Kaiser Plaza, 12th Floor, Suite 1223, Oakland, CA 94612.

無歧視公告

Kaiser Permanente禁止以年齡、人種、族裔、膚色、原國籍、文化背景、血統、宗教、性別、
性別認同、性別表達、性取向、婚姻狀況、生理或心理殘障、付款來源、遺傳資訊、公民身
份、主要語言或移民身份為由而歧視任何人。

會員服務聯絡中心每週七天每天24小時提供語言協助服務（節假日除外）。本機構在全部營業
時間內免費為您提供口譯，包括手語服務，以及殘障人士輔助器材和服務。我們還可為您和您的
親友提供使用本機構設施與服務所需要的任何特別協助。您還可免費索取翻譯成您的語言的
資料，以及符合您需求的大號字體或其他格式的版本。若需更多資訊，請致電 1-800-757-7585
（TTY專線使用者請撥711）。

申訴指任何您或您的授權代表透過申訴程序來表達不滿的做法。例如，如果您認為自己受到歧視，即可
提出申訴。若需瞭解適用於自己的爭議解決選項，請參閱《承保範圍說明書》(Evidence of Coverage)
或《保險證明書》(Certificate of Insurance)，或諮詢會員服務代表。如果您是 Medicare、Medi-Cal、
高風險醫療保險計劃 (Major Risk Medical Insurance Program, MRMIP)、Medi-Cal Access、聯邦僱員
健康保險計劃 (Federal Employees Health Benefits Program, FEHBP) 或 CalPERS 會員，採取上述行
動尤其重要，因為您可能有不同的爭議解決選項。

您可透過以下方式提出申訴：
• 在健康保險計劃服務設施的會員服務處填寫《投訴或福利索賠/申請表》（地址見《健康服
務指南》(Your Guidebook) 或我們網站 kp.org 上的服務設施名錄）
• 將書面申訴信郵寄到健康保險計劃服務設施的會員服務處（地址見《健康服務指南》或我們
網站 kp.org 上的服務設施名錄）
• 致電我們的會員服務聯絡中心，免費電話號碼是 1-800-757-7585（TTY專線請撥711）
• 在我們的網站上填寫申訴表，網址是 kp.org

如果您在提交申訴時需要協助，請致電我們的會員服務聯絡中心。

涉及人種、膚色、原國籍、性別、年齡或殘障歧視的一切申訴都將通知Kaiser Permanente的民
權事務協調員。您也可與Kaiser Permanente的民權事務協調員直接聯絡，地址：
One Kaiser Plaza, 12th Floor, Suite 1223, Oakland, CA 94612。

您還可以電子方式透過民權辦公室的投訴入口網站向美國健康與公共服務部民權辦公室提出民
權投訴，網址是 ocrportal.hhs.gov/ocr/portal/lobby.jsf 或者按照如下資訊採用郵寄或電話方式聯
絡：U.S. Department of Health and Human Services, 200 Independence Avenue SW,
Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 1-800-537-7697（TDD）。
投訴表可從網站 hhs.gov/ocr/office/file/index.html 下載。
Language Assistance Services

**English:** Language assistance is available at no cost to you, 24 hours a day, 7 days a week. You can request interpreter services, materials translated into your language, or in alternative formats. Just call us at 1-800-464-4000, 24 hours a day, 7 days a week (closed holidays). TTY users call 711.

**Arabic:** الترجمة الفورية متوفرة لديك مجانًا على مدار الساعة كافة أيام الأسبوع. بإمكانك طلب خدمة الترجمة الفورية أو ترجمة وثائق للغتك أو لصيغ أخرى. ما عليك سوى الاتصال بنا على الرقم 1-800-464-4000، مghanًا على مدار الساعة كافة أيام الأسبوع (مغلق أيام العطلات).)

**Armenian:** Ձեզ կարող է անվճար օգնություն տրամադրվել լեզվի հարցում 24 ժամ, շաբաթը 7 օր: Դուք կարող եք պահանջել բանավոր թարգմանչի ծառայություններ, Ձեր լեզվով թարգմանված կամ այլընտրանքային ձևաչափով պատրաստված նյութեր: Պարզապես զանգահարեք մեզ 1-800-464-4000 հեռախոսահամարով օրը 24 ժամ, շաբաթը 7 օր (առանց օգնությունի փոխարեն): TTY-ից օգնություն տեսք է գալու համար 711.

**Chinese:** 您每週 7 天，每天 24 小時均可獲得免費語言協助。您可以申請口譯服務、要求將資料翻譯成您所用語言或轉換為其他格式。我們每週 7 天，每天 24 小時均歡迎您打電話 1-800-757-7585 前來聯繫 (節假日 休息)。聽障及語障專線 (TTY) 使用者請撥 711.

**Farsi:** در زبانی خدمات 24 ساعت شبانروز و 7 دن به هر روزه از خانم می‌توانید حمایت یا خدمات متراکم شکفته‌های ترجمه جزوات به زبان شما و یا به صورت دیگر درخواست کنید. کافیست در 24 ساعت شبانروز و 7 روز هفته 1-800-464-4000 (به استثنای روزهای تعطیل) با ما به شماره 711 تماس بگیرید. کاربران TTY به شماره 711 می‌توانند بپرسند.

**Hindi:** बिना किसी लागत के दुभाषिया सेवाएं, दिन के 24 घंटे, साप्ताहिक से साप्ताहिक तक उपलब्ध हैं। आप एक दुभाषिया की सेवाओं के लिए, बिना किसी लागत के सामग्रियों को अपनी भाषा में अनुवाद कराने के लिए, या वैकल्पिक प्रारूपों के लिए अनुरोध कर सकते हैं। बस केवल हमें 1-800-464-4000 पर, दिन के 24 घंटे, साप्ताहिक से साप्ताहिक तक (छट्टियों के अनुसार) है। कॉल करें। TTY उपयोगकर्ता 711 पर कॉल करें।
Navajo: Saad bee áká’a ayeed náhóló t’áá jiik’é, naadinni doo biqą’ dij’ áhée’iikwee tsots’id yiskáajj damoo ná’dléelhjí. Atah halné’ é áká’adoowlwolíi gójí, t’áadoo le’é t’áá hóhazaadjí hadilyąą’ gó’, éi dooodaa’i’ nááná lá al’aq ádaat’ehíi bee hádãdilyaa’ gó. Kojí hodiiilníh 1-800-464-4000, naadinni doo biqą’ dij’ áhée’iikwee tsots’id yiskáajj damoo ná’dléelhjí (Dahodiyin biniyé é’e’aahgo éi da’deelkaal).
TTY chodeeyoolínígíí kojí hodiiilníh 711.

Punjabi: ਬਿਨ ਾਂ ਬਿਸੀ ਲ ਗਤ, ਬਦਨ ਦੇ 24 ਘੰਟੇ, ਹਫਤੇ ਦੇ 7 ਬਦਨ ਦੇ ਦੁਭ ਸੀਆ ਸੇਵਾ ਦੀ ਮਦਦ ਲਈ ਉਪਲਿਧ ਹੈ। ਤੁਸੀਂ ਇੱਕ ਦੁਭ ਸੀਆ ਦੀ ਮਦਤ ਲਈ, ਸਮੱਗਰੀਆਂ ਨਾਲ ਆਪਣੀ ਭਵਿੱਧ ਬਰਵੱਚ ਅਨੁਵਾਦ ਮੁਕਾਬਲੇ ਲਈ, ਜਾਂ ਬਿਸੀ ਵੱਖ ਫਰਮ ਬਰਵੱਚ ਪਰ ਪਤਾ ਲੈਣ ਲਈ ਹੋ। ਇਸ ਬਸਰਫ਼ ਸਨ ਦੇ 1-800-464-4000 ਤੋਂ ਫ਼ੋਨ ਲੋ। TTY ਦੇ ਉਪਯੋਗ ਲਈ 711.

Russian: Мы бесплатно обеспечиваем Вас услугами перевода 24 часа в сутки, 7 дней в неделю. Вы можете воспользоваться помощью устного переводчика, запросить перевод материалов на свой язык или запросить их в одном из альтернативных форматов. Просто позвоните нам по телефону 1-800-464-4000, который доступен 24 часа в сутки, 7 дней в неделю (кроме праздничных дней). Пользователи линии TTY могут звонить по номеру 711.

Spanish: Contamos con asistencia de idiomas sin costo alguno para usted 24 horas al día, 7 días a la semana. Puede solicitar los servicios de un intérprete, que los materiales se traduzcan a su idioma o en formatos alternativos. Solo llame al 1-800-788-0616, 24 horas al día, 7 días a la semana (cerrado los días festivos). Los usuarios de TTY, deben llamar al 711.

Tagalog: May magagamit na tulong sa wika nang wala kang babayaran, 24 na oras bawat araw, 7 araw bawat linggo. Maaari kang humingi ng mga serbisyo ng tagasalin sa wika, mga babasahin na isinalin sa iyong wika o sa mga alternatibong format. Tawagan lamang kami sa 1-800-464-4000, 24 na oras bawat araw, 7 araw bawat linggo (sarado sa mga pista opisyal). Ang mga gumagamit ng TTY ay maaaring tumawag sa 711.

Thai: เราให้บริการแปลที่ไม่คิดค่าตอบแทน 24 ชั่วโมง ทุกวันตลอดปี เราสามารถให้บริการแปลภาษาในหลากหลายถ้าคุณต้องการให้บริการแปลภาษาที่ต้องการให้เราทำการแปลให้คุณ หมายถึงเรามีการแปลภาษาที่เป็นภาษาที่คุณใช้ได้โดยไม่มีการคิดค่าบริการเพียงโทร หมายเลขทายน่าจะถูก 1-800-464-4000 ตลอด 24 ชั่วโมงทุกวัน (ประกันบริการในเว็บไซต์ราชการ) คุณใช้ TTY โปรดโทรไปที่ 711.

Vietnamese: DỊCH VỤ THÔNG DỊCH ĐƯỢC CUNG CẤP MIỄN PHÍ CHO QUÝ VỊ 24 GIỜ MỖI NGÀY, 7 NGÀY TRONG TUẤN. QUÝ VỊ CÓ THỂ YÊU CẦU DỊCH VỤ THÔNG DỊCH, TÀI LIỆU PHIẾN DỊCH RA NGÓN NGỮ CỦA QUÝ VỊ HOẶC TÀI LIỆU BỊNH HƯƠNG HÌNH THỨC KHÁC. QUÝ VỊ CHỈ CẦN GỌI CHO CHƯNG TỔI TẠI SỐ 1-800-464-4000, 24 GIỜ MỖI NGÀY, 7 NGÀY TRONG TUẤN (TRừ CẢ CÁC NGÀY LỄ). NGƯỜI ĐƯNG TTY XIN GỌI 711.
NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of Colorado (Kaiser Health Plan) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

• Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
  • Qualified sign language interpreters
  • Written information in other formats, such as large print, audio, and accessible electronic formats

• Provide no cost language services to people whose primary language is not English, such as:
  • Qualified interpreters
  • Information written in other languages

If you need these services, call 1-800-632-9700 (TTY: 711)

If you believe that Kaiser Health Plan 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 mail at: Customer Experience Department, Attn: Kaiser Permanente Civil Rights Coordinator, 2500 South Havana, Aurora, CO 80014, or by phone at Member Services: 1-800-632-9700.


HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-632-9700 (TTY: 711).


 العربية (Arabic) ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-632-9700 (TTY: 711).

Ɓǎ sɔ́ ɔ̀  Wù ɖù  (Bassa) Dè ḍɛ̀ nià kɔ̀ dyédu gbo: ԋ jù jì m̀ Bàssò-wùqù-po-nyò jì nì, nìì, à wùqù kà kò qò po-poò bëin m̀ gbo kpàa. Dà 1-800-632-9700 (TTY: 711).

中文 (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 1-800-632-9700 (TTY: 711)。
Farsi (فارسی): توجه: اگر به زبان فارسی گفتگو می‌کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می‌باشد. با 1-800-632-9700 (TTY: 711) تماس بگیرید.

Français (French) ATTENTION: Si vous parlez français, des services d’aide linguistique vous sont proposés gratuitement. Appelez le 1-800-632-9700 (TTY: 711).

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-632-9700 (TTY: 711).

Igbo (Igbo) NRUBAMA: O buru na i na asu Igbo, oru enyemaka asusù, n’efu, dijiri gi. Kpọọ 1-800-632-9700 (TTY: 711).

日本語 (Japanese) 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。1-800-632-9700 (TTY: 711)まで、お電話にてご連絡ください。

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-632-9700 (TTY: 711) 번으로 전화해 주십시오.


Nepali नेपाली (Nepali) ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निष्ठुर्न प्रभाव सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ। 1-800-632-9700 (TTY: 711) फोन गर्नुहोस्।

Afaan Oromoo (Oromo) XIYYEEFFANNA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bibilaa 1-800-632-9700 (TTY: 711).

Pусский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-632-9700 (TTY: 711).

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-632-9700 (TTY: 711).

Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbinsyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-632-9700 (TTY: 711).

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-632-9700 (TTY: 711).

Yorùbá (Yoruba) AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi 1-800-632-9700 (TTY: 711).
NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of Georgia, Inc. (Kaiser Health Plan) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

• Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
  • Qualified sign language interpreters
  • Written information in other formats, such as large print, audio, and accessible electronic formats

• Provide no cost language services to people whose primary language is not English, such as:
  • Qualified interpreters
  • Information written in other languages

If you need these services, call 1-888-865-5813 (TTY: 711)

If you believe that Kaiser Health Plan 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 mail at: Member Relations Unit (MRU), Attn: Kaiser Civil Rights Coordinator, Nine Piedmont Center, 3495 Piedmont Road, NE Atlanta, GA 30305-1736. Telephone Number: 1-888-865-5813.


HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-865-5813 (TTY: 711).

አማርኛ (Amharic) የታገር ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወሻ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቅ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቅ ከማስታወቀ ከማስታወቅ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቅ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቅ ከማስታወቅ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስታወቀ ከማስATTER: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-865-5813 (TTY: 711).

العربية (Arabic) ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل برقم 1-888-865-5813 (TTY: 711).

中文 (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 1-888-865-5813（TTY: 711）。

فارسی (Farsi) توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-888-865-5813 تماس بگیرید.
Français (French) ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-865-5813 (TTY: 711).

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-888-865-5813 (TTY: 711).

Gujarati (Gujarati) સુઝાના: જ્યારે તમે ગુજરાતી બોલતા હો, તો તમારી સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. કોલ કરો 1-888-865-5813 (TTY: 711).

Kreyòl Ayisyen (Haitian Creole) ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis éd pou lang ki disponib gratis pou ou. Rele 1-888-865-5813 (TTY: 711).

Hindi (Hindi) ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-888-865-5813 (TTY: 711) पर कॉल करें।

日本語 (Japanese) 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。1-888-865-5813 (TTY: 711) まで、お電話にてご連絡ください。

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-865-5813 (TTY: 711) 번으로 전화해 주십시오.


Русский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-865-5813 (TTY: 711).

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-865-5813 (TTY: 711).

Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-865-5813 (TTY: 711).

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-865-5813 (TTY: 711).
NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan, Inc. (Kaiser Health Plan) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

• Provide free aids and services to people with disabilities to communicate effectively with us, such as:
  • Qualified sign language interpreters
  • Written information in other formats, such as large print, audio, and accessible electronic formats

• Provide free language services to people whose primary language is not English, such as:
  • Qualified interpreters
  • Information written in other languages

If you need these services, call 1-800-966-5955 (TTY: 711)

If you believe that Kaiser Health Plan 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 mail or phone at:

Membership Services
Attn: Kaiser Civil Rights Coordinator
711 Kapiolani Blvd
Honolulu, HI 96813
1-800-966-5955


HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-966-5955 (TTY: 711).

Cebuano (Bisaya) ATENSYON: Kung nagsulti ka og Cebuano, aduna kay magamit nga mga serbisyo sa tabang sa lengguwahe, nga walay bayad.
Tawag sa 1-800-966-5955 (TTY: 711).

中文 (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 1-800-966-5955（TTY：711）。

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ʻŌlelo Hawai'i (Hawaiian) E NĀNĀ MAI: Inā hoʻopuka 'oe i ka ʻōlelo Hawaiʻi, hiki iā ʻoe ke loaʻa i ke kōkua manuahi. E kelepona i ka helu 1-800-966-5955 (TTY: 711).

Ilokano (Ilocano) PAKDAAR: No agsasaoka iti Ilokano, dagiti awan bayadna a serbisio a para iti beddeng ti lengguahe ket sidadaan para kenka. Awagan ti 1-800-966-5955 (TTY: 711)
NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (Kaiser Health Plan) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

- Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats, such as large print, audio, and accessible electronic formats

- Provide no cost language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, call 1-800-777-7902 (TTY: 711)

If you believe that Kaiser Health Plan 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 mail or phone at: Kaiser Permanente, Appeals and Correspondence Department, Attn: Kaiser Civil Rights Coordinator, 2101 East Jefferson St., Rockville, MD 20852, telephone number: 1-800-777-7902.


HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-777-7902 (TTY: 711).

አማርኛ (Amharic) ይጉለጉት: በሚያካለወት ከምስክር እርዳታ ይደርጉት ይደርጉት; ከወል ለመንሳር የሚለጠው ለማሳል ባለ ለማሳል የሚለጠው ለማሳል ለማሳል 1-800-777-7902 (TTY: 711).

العربية (Arabic) ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجàn.


Ɓasɔɔ Wùɖù (Bassa) Dè qè nià ke dyèdé gbo: Ը jù kè m Bàsɔɔ-wùɖù-po-nyò jù ni, ni, a wuɖu kà kò ṭo po-poò bèn m gbo kpáa. Đà 1-800-777-7902 (TTY: 711)

বাংলা (Bengali) নক্ষ করুন: যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিষ্ক্রিয়ভাবে ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন 1-800-777-7902 (TTY: 711).

中文 (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 1-800-777-7902（TTY：711）。

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If you are speaking Farsi, free language services are available. Call 1-800-777-7902 (TTY: 711).

If you speak Haitian Creole, free language services are available. Call 1-800-777-7902 (TTY: 711).

If you are speaking Hindi, free language services are available. Call 1-800-777-7902 (TTY: 711).

If you are speaking Tagalog, free language services are available. Call 1-800-777-7902 (TTY: 711).

If you are speaking Vietnamese, free language services are available. Call 1-800-777-7902 (TTY: 711).

If you are speaking Yoruba, free language services are available. Call 1-800-777-7902 (TTY: 711).
NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of the Northwest (Kaiser Health Plan) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

- Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats, such as large print, audio, and accessible electronic formats

- Provide no cost language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, call 1-800-813-2000 (TTY: 711)

If you believe that Kaiser Health Plan 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 mail or phone at: Member Relations, Attention: Kaiser Civil Rights Coordinator, 500 NE Multnomah St. Ste 100, Portland, OR 97232, telephone number: 1-800-813-2000.


HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-813-2000 (TTY: 711).


中文 (Chinese) 注意：如果您使用繁体中文，您可以免费获得语言援助服务。请致电1-800-813-2000 (TTY: 711)。

فارسی (Farsi) توجه: اگر به زبان فارسی گفتگو می‌کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می‌شود. با 1-800-813-2000 تماس بگیرید (TTY: 711).


KAISER PERMANENTE NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. ("Kaiser Permanente") comply with applicable federal civil rights laws and do not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, sex, sexual orientation, gender identity, or any other basis protected by applicable federal, state, or local law. We also:

Provide free aids and services to people with disabilities to help ensure effective communication, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, and accessible electronic formats)
- Assistive devices (magnifiers, Pocket Talkers, and other aids)

Provide free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact Kaiser Permanente.

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can file a grievance. Please call us if you need help submitting a grievance. The Civil Rights Coordinator will be notified of all grievances related to discrimination.

**Kaiser Permanente**
Phone: 206-630-4636
Toll-free: 1-888-901-4636
TTY Washington Relay Service: 1-800-833-6388 or 711
TTY Idaho Relay Service: 1-800-377-3529 or 711
Electronically: kp.org/wa/feedback

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, 800-537-7697 (TDD)
Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

For Medicare Advantage Plans Only: Kaiser Permanente is an HMO plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.
If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-888-901-4636 (TTY: 1-800-833-6388 or 711).

If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-888-901-4636 (TTY: 1-800-833-6388 or 711).