

Welcome to Kaiser Permanente Plus™

Get started in 3 easy steps



Greetings

<Subscriber first name>, we're so glad to be your partner in health. We look forward to a long and healthy relationship with you.

This guide will walk you through the most important steps to getting care with your KP Plus plan. You'll have the flexibility to choose your provider each time you need care. And we're here to help you understand your options and make well-informed decisions.

By now, you should have received your ID card in the mail. It gives you access to medical care nationwide, contains useful phone numbers, and came with a sleeve to help you get care with network providers. If you haven't received it, just give us a call.

Take a few minutes now to read through this guide – and keep it handy for quick reference. For more information, visit kp.org/choiceproducts/nw, or you can always call us at **1-866-616-0047** (TTY 711).

Welcome to Kaiser Permanente!

Welcome, <subscriber name>

Get started in 3 easy steps

Complete all 3 by visiting **kp.org/newmember** or by calling our New Member Welcome Desk at **1-888-491-1124**, Monday through Friday, 8 a.m. to 5 p.m.



For help in your language, you may request language assistance at no additional cost to you by calling language interpretation services at **1-800-324-8010**.

Please refer to your *Evidence of Coverage (EOC)* for more details on your plan or for specific limitations and exclusions.

Step 1

Create your kp.org account

Go to kp.org/newmember or use the Kaiser Permanente app.¹

If you haven't already, make sure to create your online account. Once you sign up, you can securely access time-saving tools and resources to help manage your health. You'll need your **medical record number** to create your account, which you can find on your Kaiser Permanente ID card.



You can also access your digital ID card with the Kaiser Permanente app.

Online or on the app, stay on top of your health anytime, anywhere¹

- View most lab test results.
- Refill most prescriptions.
- Email your doctor's office with nonurgent questions.
- Schedule and cancel routine appointments.
- Manage a family member's health care.²



¹To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on kp.org. These features are available when you get care from Kaiser Permanente facilities. ²Online features change when children reach age 13. Teens are entitled to additional privacy protection under state laws. When your child turns 13 years old, you will still be able to manage care for your teen, with modified access to certain features.

Step 2

Choose your doctor – and change anytime

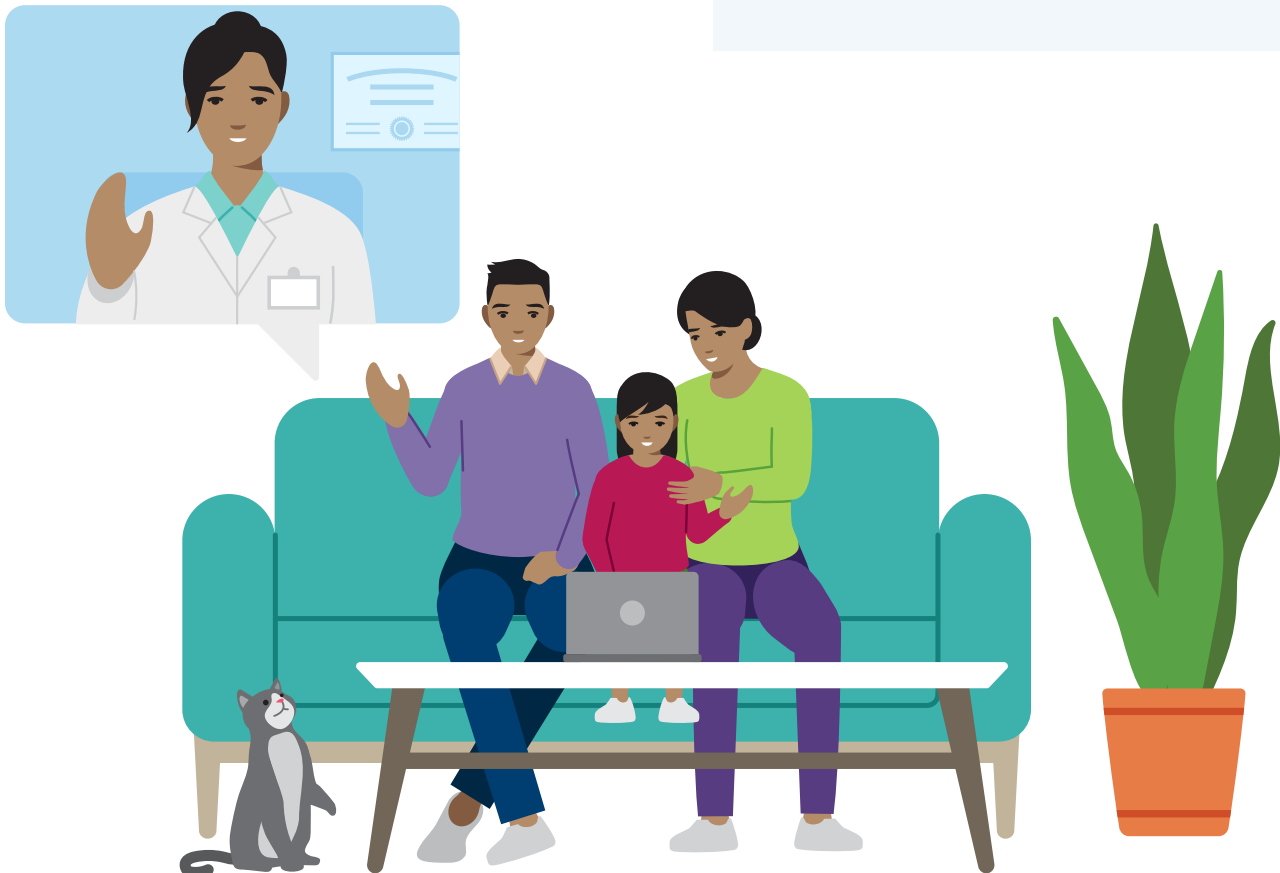
Go to kp.org/newmember or call us at **1-888-491-1124**, Monday through Friday, 8 a.m. to 5 p.m.

Select a convenient facility, then browse doctor profiles by gender, languages spoken, and more to find the best fit for you.

Each covered family member may choose a personal Kaiser Permanente provider within these specialties:

- Internal medicine – adults only
- Family medicine – all ages
- Pediatrics/adolescent medicine (for children up to 18)
- Obstetrics-gynecology

Women 18 and older can choose an ob-gyn as well as a personal doctor.



Step 3

Get prescriptions

For help and information about your plan, pharmacy, or other benefits, visit kp.org or call **1-866-616-0047**, Monday through Friday, 8 a.m. to 6 p.m.

Transitioning online

Complete the Transfer Prescriptions to a Kaiser Permanente Pharmacy form in the “Pharmacy” tab of **kp.org** or the Kaiser Permanente app.*

Transitioning by phone

Sign in to **kp.org** to schedule a New Member Pharmacy Phone Visit through the “Appointments” tab or call Kaiser Permanente Customer Service at **1-866-616-0047** (TTY 711).



At Kaiser Permanente, you can receive your new or refill prescriptions by going to kp.org/refill and selecting one of these convenient options:



Kaiser Permanente mail-order pharmacy

- Most members get a 3-month supply for the cost of 2. Delivery is fast and is at no additional cost.



Same-day or 1-3 business day delivery

- This service is available for select ZIP codes.
- Prescriptions must be new or have a refill available at time of order.
- A delivery charge for same-day or 1-3 business day delivery will apply.



In-person pickup

- Order 24 hours ahead on the Kaiser Permanente app or on **kp.org/refill**. Choose “Standard Pickup” and select the Kaiser Permanente pharmacy location closest to you.

*To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on kp.org.

New member support

When to call our New Member Welcome Desk:

We are here to help you and your family understand your plan and connect to care. If you have questions or need help, please contact:

Kaiser Permanente Customer Service at **1-866-616-0047 (TTY 711)**, Monday through Friday, 8 a.m. to 6 p.m., for connecting to care or resources.

- Are you working with a health care professional to manage your medical conditions or achieve your health goals?
- Have you recently had or are you scheduled for an upcoming surgery?
- Are you currently taking any prescriptions or using any medical equipment?
- Are you on a treatment plan that you would like to continue at Kaiser Permanente?
- Are you currently pregnant?



Resources for healthy living¹

- Go to **kp.org/selfcareapps** to learn about Calm and Headspace Care, 2 self-care apps available at no additional cost to adult members.² They're just some of the many health and wellness resources to help keep you informed, inspired, and feeling your best.^{3,4}
- For additional resources, including wellness coaching, health education classes, and more, go to **kp.org/classes**.







For questions regarding benefits, billing, and eligibility, call Kaiser Permanente Customer Service at **1-866-616-0047 (TTY 711)**.

¹The services described are not covered under your health plan benefits and are not subject to the terms set forth in your *Evidence of Coverage* or other plan documents. These services may be discontinued at any time without notice. ²Only available to Kaiser Permanente members with medical coverage. ³Calm can be used by members 13 years and older. The Headspace Care app and services are not available to members under 18 years of age. ⁴Calm and Headspace Care are not available to Kaiser Permanente Dental-only members. The apps and services described above are not covered under your health plan benefits, are not a Medicare-covered benefit, and are not subject to the terms set forth in your *Evidence of Coverage* or other plan documents. The apps and services may be discontinued at any time. Eligible Kaiser Permanente members can text with a coach using the Headspace Care app for 90 days per year. After the 90 days, members can continue to access the other services available on the Headspace Care app for the remainder of the year at no cost.

New member care transition

Our goal is to help determine your unique needs and connect you with the doctors, specialists, and prescription medications to help effectively manage your care transition.

Types of medical needs our New Member Welcome Desk can help with:

	Common needs	<ul style="list-style-type: none">• Choose a doctor.• Schedule a routine appointment.• Transfer prescriptions. <p>Also available 24/7 for self-service at kp.org.</p>
	Parent and child needs	<ul style="list-style-type: none">• Select a pediatrician or family practice doctor.• Transfer records and health history.• Transfer prescriptions.• Schedule vaccinations.
	Specialty care needs	<ul style="list-style-type: none">• Connect with specialists such as oncologists, neurologists, and dermatologists.• Connect with mental health professionals.• Choose an ob-gyn and pediatrician.• Determine durable medical equipment needs.
	Complex medical needs	<ul style="list-style-type: none">• Connect with specialty care for conditions such as cancer, renal disease, pre-/post-surgery, and transplants.• Connect with a pharmacy for specialty prescriptions.

Help is available

Call the New Member Welcome Desk at **1-888-491-1124**, Monday through Friday, 8 a.m. to 5 p.m.



Get the care you need

Call us at **1-800-813-2000 (TTY 711)**, 24/7, to make an appointment or get **medical advice**. You can also schedule routine appointments by signing in to your online account or the Kaiser Permanente app.¹

If you believe you have an emergency medical condition, call **911** or go to the nearest hospital.

Convenient care options at Kaiser Permanente

You've got many ways to connect to quality care when and where it's most convenient for you and your family. Visit **kp.org/getcare** to learn more.

- **E-visits:** Complete an online questionnaire and receive a treatment plan or advice from a Kaiser Permanente doctor, including most prescriptions if needed, in less than one hour.
- **Video visits:** Meet face-to-face with a clinician by video, straight from your smartphone, tablet, or computer.^{2,3,4}
- **Phone appointments:** Talk with a clinician over the phone for the same high-quality care as an in-person visit.^{2,3,4}
- **Email your care team:** Message your doctor's office anytime with nonurgent health questions.²
- **In-person:** Most locations offer many services under one roof to help you save time with a single trip.
- **Get care now:** Talk to a clinician 24/7, by video or phone, for quality care when you need it – no appointment needed.
- **Urgent care:** Visit a walk-in clinic if you have a condition that requires prompt medical attention (usually within 1 or 2 days) but is not an emergency.⁵ Open 7 days a week, including evenings, weekends, and holidays.

- **Emergency care:** If you ever need emergency care, you're covered – anywhere, anytime.⁶ You can get care at any Kaiser Permanente hospital or any other hospital emergency department.

Seeing a Kaiser Permanente specialist

You don't need a referral for obstetrics-gynecology, optometry, mental health services, or treatment for substance use disorders. For other types of specialty care, your doctor will refer you.

Support for mental health

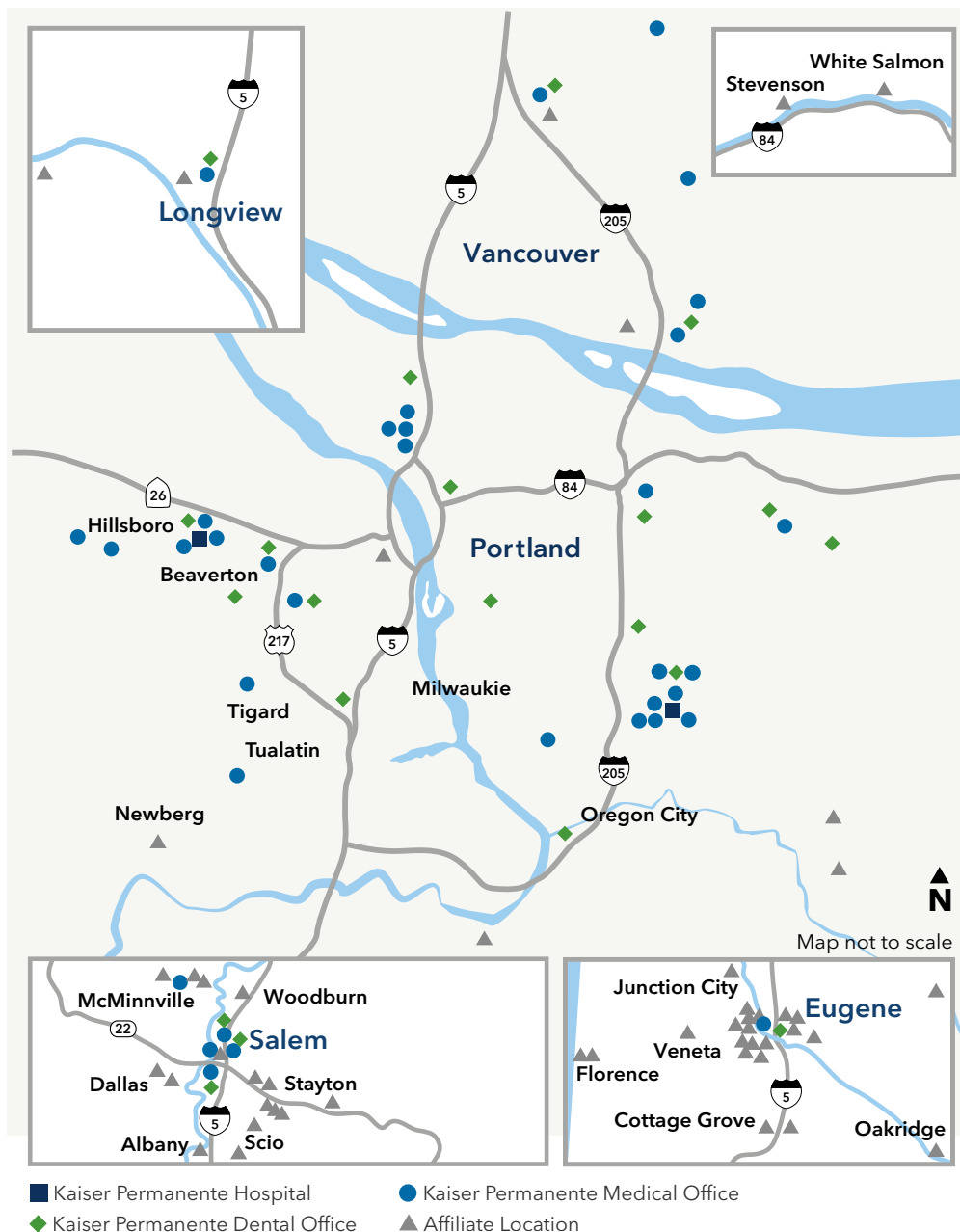
Everyone's mental health and wellness journey is different. We're committed to helping you find the best path for you. Services include:

- Online self-assessments
- Counseling and therapy
- Personalized healthy lifestyle programs
- Classes and support groups⁷

¹To use the Kaiser Permanente app, you must be a Kaiser Permanente member registered on kp.org. ²These features apply to care you get at Kaiser Permanente facilities. ³When appropriate and available. ⁴If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state. To have a video visit, members must be registered on kp.org and have a camera-equipped computer or mobile device. ⁵An urgent care need is one that requires prompt medical attention, usually within 24 or 48 hours, but is not an emergency medical condition. This can include minor injuries, backaches, earaches, sore throats, coughs, upper-respiratory symptoms, and frequent urination or a burning sensation when urinating. ⁶If you reasonably believe you have an emergency medical condition, call 911 or go to the nearest emergency department. An emergency medical condition is a medical or psychiatric condition that requires immediate medical attention to prevent serious jeopardy to your health. For the complete definition of an emergency medical condition, please refer to your *Evidence of Coverage (EOC)* or other coverage documents. ⁷Classes may vary by location, and some may require a fee.

Where to find care

We provide quality care to more than 600,000 members in Oregon and Southwest Washington. Our service area extends from Eugene, Oregon, to Longview, Washington, and includes medical offices, dental offices, Vision Essentials by Kaiser Permanente optical retail locations, urgent care clinics, and hospitals. We also have a network of affiliated providers for routine, urgent, or emergency care.



Get care now

Choose from convenient options, like 24/7 phone and video or an e-visit, and find the care you need, when and where you need it.*

kp.org/getcare



Facility information current as of July 2024.

Go to kp.org/locations to see all our current locations and to find the facility closest to you. Or call Member Services at **1-800-813-2000 (TTY 711)**.

*When appropriate and available. These features are available when you get care at Kaiser Permanente facilities. For high deductible health plan members, e-visits, phone visits, and video appointments are subject to your plan's annual deductible. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state. To have a video visit, members must be registered on kp.org and have a camera-equipped computer or mobile device. Applicable cost shares will apply for services or items ordered during an e-visit.

Where to find care



Dental

With Kaiser Permanente's coordinated medical and dental care and coverage, it can be simpler to take care of your total health. Our skilled dentists, convenient dental locations, and quality services will make you smile.

Learn more at kp.org/dental/nw.



visionessentials by KAISER PERMANENTE

Our optometrists, ophthalmologists, and opticians work together within our integrated care delivery system and are able to connect to our larger team of medical professionals and services.

Learn more at kp.org/locations.



Pharmacy

Most of our Kaiser Permanente medical offices include pharmacy services. You also have the option of using our mail-order pharmacy service to fill and refill most prescriptions, and the shipping is on us.



Affiliated Providers

Kaiser Permanente health plans include access to many affiliated providers for primary and specialty care.

Getting the most out of your KP Plus plan

Care from in-network providers, including Kaiser Permanente doctors and affiliated providers

- **Fixed out-of-pocket costs** with set cost share amounts for most covered services
- **Preventive care services**, such as routine physicals, well-child visits, and certain screening tests, with \$0 copay
- **Talk to a clinician by phone or video** with Kaiser Permanente 24/7 virtual care
- **Anytime access to kp.org**, including most test and lab results, scheduling routine appointments, and more
- **A deductible may or may not apply**, depending on your plan²
- **Integrated care delivery system** and the ability to connect to our larger team of medical professionals and services; your medical record is updated and your referrals are seamlessly managed no matter where you go within Kaiser Permanente
- **Prescription fills at Kaiser Permanente pharmacies** and the ability to check prescription status



Care from out-of-network providers









- **Maximum of 10 outpatient medical services per year, combined**, including preventive care services, lab, and radiology
- **Maximum 5 prescription fills** per year
- **There is no out-of-network deductible or out-of-pocket maximum**
- **Cost shares you pay for out-of-network services** do not apply to the in-network out-of-pocket maximum¹
- **Some providers** may require payment in full at the time of service, and you'd need to submit a claim for reimbursement; when using an out-of-network provider, you may be responsible for the amount you are billed above the maximum allowable charge by your plan
- **Some services** – including inpatient care, outpatient surgery, and maternity care – are only covered when received from Kaiser Permanente doctors and other participating providers²
- **You don't need a referral** or prior authorization for covered, out-of-network services
- **Get care from out-of-network providers when traveling** in or outside the Kaiser Permanente service area
- **Emergency services** you receive from out-of-network providers are covered at the in-network cost share and are not counted toward the limit of 10 services per year
- **Track your services** by calling Kaiser Permanente Customer Service for an update at **1-866-616-0047** or log in to your member account at **kp.org** to check your current out-of-network service accumulations

¹With one exception: Cost shares you pay for out-of-network services you receive under the Out-of-Area Coverage for Dependents benefit **do** apply to the in-network out-of-pocket maximum. ²Refer to your plan's *Evidence of Coverage* for more details.

Optimizing your out-of-network KP Plus benefits

In this example, you develop a severe case of the flu and visit a provider who is out-of-network. In addition to your office visit, the provider orders 2 lab tests and directs you to an out-of-network lab. You are also given a prescription for a flu medication.

Here are 2 options you could consider with a KP Plus plan:

1 OPTION 1: 100% out-of-network services	2 OPTION 2: Combined in-network and out-of-network services
 <p>Out-of-network provider office visit:</p> <ul style="list-style-type: none">• You pay the higher cost share• Visit counts as 1 service toward the 10-service limit	 <p>Out-of-network provider office visit:</p> <ul style="list-style-type: none">• You pay the higher cost share• Visit counts as 1 service toward the 10-service limit
 <p>Out-of-network lab service (2 labs):</p> <ul style="list-style-type: none">• You pay the higher cost share• The lab tests count as up to 2 services toward the 10-service limit	 <p>You bring the lab orders to a Kaiser Permanente medical office (2 labs):</p> <ul style="list-style-type: none">• You pay the lower cost share• The lab tests do not count toward your 10-service limit
 <p>Out-of-network pharmacy fill:</p> <ul style="list-style-type: none">• You pay the higher cost share• The prescription fill counts as 1 fill toward your 5-fill limit	 <p>You bring the prescription to a Kaiser Permanente pharmacy:</p> <ul style="list-style-type: none">• You pay the lower cost share• The prescription fill does not count toward your 5-fill limit
RESULT:	
 <p>Overall, you pay a higher cost share for your covered services, and you use up to 3 of your 10 out-of-network services and 1 of your 5 out-of-network prescription fills.</p>	 <p>Overall, you pay a lower cost share for your covered services, and you use only 1 of your 10 out-of-network services and none of your 5 out-of-network prescription fills.</p>

Getting out-of-network care with your Kaiser Permanente Plus™ plan

You already have access to the best of Kaiser Permanente through your plan. But as a KP Plus member, you get even more.¹

With KP Plus, your choices are covered. In addition to Kaiser Permanente and affiliated providers, you can choose to see out-of-network providers for up to 10 outpatient medical services and 5 prescription fills per year.²

Out-of-network visits

Your plan includes 10 out-of-network services per year, combined, including preventive care outpatient medical services, lab, and radiology.

What counts as a service? Here's an example – this scenario counts as 3 separate services:

- You have an exam with an out-of-network provider.
- The out-of-network provider refers you for a lab test from an out-of-network facility.
- You're then referred for an X-ray from an out-of-network facility.

For each of the 3 services above, you'll pay a separate copay or coinsurance at your out-of-network rate. Your out-of-pocket costs are usually higher with out-of-network providers. Cost shares you pay for out-of-network services do not apply to the in-network out-of-pocket maximum.³

Make the most of your 10 out-of-network outpatient medical services by saving them for office visits with your preferred out-of-network provider. See Kaiser Permanente and affiliated providers for lab tests, X-rays, and other services. That way, they'll be covered at the Kaiser Permanente rate rather than the out-of-network rate. We can also send information about your Kaiser Permanente visits to your out-of-network provider.

Kaiser Permanente Plus information for outside providers can be found at kp.org/choiceproducts/nw.



¹Your plan details depend on which plan your employer offers or you've selected. ²In plan documents like your *Evidence of Coverage (EOC)*, Kaiser Permanente and affiliated providers may also be referred to as "in-plan providers." Out-of-network providers may also be referred to as "KP Plus providers." ³With one exception: Cost shares you pay for out-of-network services you receive under the Out-of-Area Coverage for Dependents benefit **do** apply to the in-network out-of-pocket maximum.

Out-of-network pharmacy services

Your plan includes up to 5 out-of-network prescription fills per year. Coverage depends on your plan, so before you fill any prescriptions, take a few minutes to review your *Evidence of Coverage*, available at kp.org/coverageandcosts.

Keep in mind that:

- There's no home delivery service with this pharmacy option
- Each prescription fill can be for up to a 30-day supply
- You may have a higher copay or coinsurance than with a Kaiser Permanente pharmacy
- You may be asked to pay the full cost for out-of-network prescriptions and submit a claim for reimbursement

What services are covered out-of-network?

You can use your out-of-network services for:*

- Routine office visits (primary or preventive care)
- Specialty care visits
- Mental health services and substance use disorder treatment
- Physical, occupational, and speech therapy office visits
- Allergy injections received at an office
- Lab services and diagnostic X-rays

What services aren't covered out-of-network?

These services are only covered by your plan if you receive them at Kaiser Permanente or an affiliated facility:

- Inpatient hospital services
- Outpatient surgery
- Radiation and chemotherapy
- Fertility services
- Prenatal and maternity care
- Skilled nursing facilities
- Advanced imaging (MRI, CT)
- Acupuncture or massage services
- Genetic testing
- Contact lens fittings
- Durable medical equipment
- Home health services
- Hospice services
- Special procedures
- Many other services not described as covered out-of-network services

Services that aren't covered under your in-network Kaiser Permanente benefits won't be covered under your out-of-network benefits.

Track your services



You can call Kaiser Permanente Customer Service for an update at **1-866-616-0047** or log in to your member account at kp.org to check your current out-of-network service accumulations.

*Each item or service counts as a separate out-of-network visit and will apply toward your annual out-of-network visit limit, even if it occurs on the same day or during a single visit to a provider. For additional details, please refer to your *Evidence of Coverage*.

Understanding claims

You won't need to file claims for services if:

- You get medical care and services from Kaiser Permanente or affiliated providers
- You pay a cost share

If you file a claim:

- You have up to 180 days from the date you got care to submit your claim
- Kaiser Permanente will review the claim and decide what payment or reimbursement may be owed to you
- Care needs to be medically necessary – refer to your plan documents for details

How to file a claim

To request reimbursement online, sign in to your **kp.org** account. Select "Coverage & Costs" and click "Submit a claim."

Along with your member reimbursement form (claim form), you'll need to include this information with your claim:

- Itemized bills, which should include the date of service, services received, and cost of each service
- Medical records, including copies of original medical reports, admission notes, emergency room records, and consultation reports
- Proof of payment – for example, receipts or bank or credit card statements

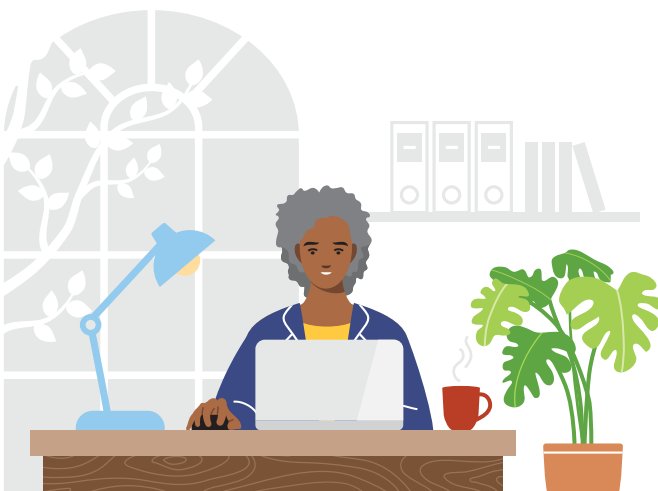
You can also download and print the member reimbursement form at **kp.org/choiceproducts/nw**. Complete the form and mail it with your required documents to:

Medical Claims:
Kaiser Permanente
Claims Administration
PO Box 370050
Denver, CO 80237-9998
EDI Payor ID: 93079

Out-of-network providers may bill you for the difference, if any, between their cost of care and what your plan pays.

What you'll get from us

An Explanation of Benefits that will detail what you need to pay and what we'll pay.





Contact Kaiser Permanente

Customer Service Desk

If you have questions or need help, please contact us at **1-866-616-0047** (TTY **711**).

Appointment and advice line

To make an appointment or get 24/7 medical advice, call **1-800-813-2000** (TTY **711**).

Member Services

We're here to help. Call us at **1-800-813-2000** (TTY **711**), Monday through Friday, 8 a.m. to 6 p.m. (closed holidays) if you have questions about your benefits and coverage or to request a copy of your *Evidence of Coverage (EOC)*, which has a list of the types of services covered in your plan.

If you are a Medicare health plan member, call **1-800-443-0815** (TTY **711**), 7 days a week, 8 a.m. to 8 p.m.

Find more information about Kaiser Permanente benefits, availability, and restrictions and member rights and responsibilities at **kp.org/disclosures**.

Care away from home

Plan ahead, travel well, and come home healthy. Visit **kp.org/travel** or call the Away from Home Travel Line at **951-268-3900** for 24/7 travel support anytime, anywhere.*

The website and our travel team will help you:

- Learn how to refill an eligible prescription early or away from home
- Learn about out-of-area dependent care
- Find care in a Kaiser Permanente region
- File a claim for reimbursement when you're back

Notice of your right to decline participation in genetic research

We may collect health information and biological samples from you as part of your care, and we may use these in future genetic research with certain protections to ensure your privacy. If you receive care in Oregon, state law gives you the right to tell us not to use your information or samples for genetic research. Your decision will not affect your care. To learn more about your choice or to decline participation, visit **kp.org/disclosures**.

*This number can be dialed from 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 cannot 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.

Nondiscrimination Notice

Kaiser Foundation Health Plan of the Northwest (Kaiser Health Plan) complies with applicable federal and state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. 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 Member Services at **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, sex, gender identity, or sexual orientation, you can file a grievance with our Civil Rights Coordinator, by mail, phone, or fax. If you need help filing a grievance, our Civil Rights Coordinator is available to help you. You may contact our Civil Rights Coordinator at: Member Relations Department, Attention: Kaiser Civil Rights Coordinator, 500 NE Multnomah St. Ste 100, Portland, OR 97232-2099, Phone: **1-800-813-2000** (TTY: **711**), Fax: **1-855-347-7239**.

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, Phone: 1-800-368-1019, TDD: 1-800-537-7697. Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

For Washington Members

You can also file a complaint with the Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint portal, available at <https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>, or by phone at 1-800-562-6900, or 360-586-0241 (TDD). Complaint forms are available at <https://fortress.wa.gov/oic/onlineServices/cc/pub/complaintinformation.aspx>.

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)**.

አማርኛ (Amharic) ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ **1-800-813-2000 (TTY: 711)**.

العربية (Arabic) ملحوظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-800-813-2000 (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**1-800-813-2000 (TTY: 711)**。

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

Français (French) ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-813-2000 (TTY: 711)**.

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-800-813-2000 (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。**1-800-813-2000 (TTY: 711)** まで、お電話にてご連絡ください。

ខ្មែរ (Khmer) ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតថ្លៃល គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ **1-800-813-2000 (TTY: 711)**។

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-813-2000 (TTY: 711)** 번으로 전화해 주십시오.

ລາວ (Laotian) ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ແຈ້ງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ **1-800-813-2000 (TTY: 711)**.

Afaan Oromoo (Oromo) XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa **1-800-813-2000 (TTY: 711)**.

ਪੰਜਾਬੀ (Punjabi) ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। **1-800-813-2000 (TTY: 711)** 'ਤੇ ਕਾਲ ਕਰੋ।

Română (Romanian) ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la **1-800-813-2000 (TTY: 711)**.

Русский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-813-2000 (TTY: 711)**.

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-813-2000 (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 **1-800-813-2000 (TTY: 711)**.

ไทย (Thai) เรียน: ถ้าคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร **1-800-813-2000 (TTY: 711)**.

Українська (Ukrainian) УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером **1-800-813-2000 (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 **1-800-813-2000 (TTY: 711)**.



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