

2024 Member Handbook Errata

This is important information about changes to your 2024 Kaiser Foundation Health Plan, Inc. Medi-Cal Member Handbook

Your Member Handbook is also called the Combined Evidence of Coverage and Disclosure Form (“EOC/DF”). This Errata lets you know about updates to your 2024 Member Handbook. Please keep this document with your 2024 Member Handbook.

Starting July 1, 2024, Kaiser Permanente will no longer cover Specialty Mental Health Services in Sacramento and Solano Counties for new members. These services will now be covered by the County Mental Health Plan within your County, or a Mental Health Provider who works with the County.

Members who are currently getting Specialty Mental Health Services from Kaiser Permanente will continue getting those services until those services are completed, or a clinician says it is safe for the member to be covered by another Mental Health Provider, or until December 31, 2024.

Changes to the benefits are underlined below.

Revised benefit description under “Minor Consent Services” in Chapter 3 (How to get care)

Sensitive care

Minor consent services

If you are under age 18, you can get some services without a parent’s or guardian’s permission. These services are called minor consent services.

You may get these services without your parent or guardian’s permission:

- **Services for rape and other sexual assaults**
- Pregnancy **testing and counseling**
- **Contraception services such as** birth control **(excludes sterilization)**

- Abortion services

If you are 12 years old or older, you may also get these services without your parent's or guardian's permission:

- Outpatient mental health services based on your maturity level and ability to participate in your own health care
- HIV/AIDS **counseling**, prevention, testing, and treatment
- Sexually transmitted infections prevention, testing, and treatment **which may include sexually transmitted diseases such as syphilis, gonorrhea, chlamydia, and herpes simplex.**
- Substance use disorder treatment **for drug and alcohol abuse including screening, assessment, intervention, and referral services**
 - To learn more, read "Substance Use Disorder Treatment services" in Chapter 4 of this handbook.

For pregnancy testing, family planning services, birth control services, or services for sexually transmitted infections, the doctor or clinic does not have to be in the Kaiser Permanente Medi-Cal provider network. You can choose any Medi-Cal provider and go to them for these services without a referral or pre-approval (prior authorization). **For more information related to family planning services, please reference the "Preventive and Wellness Services and Chronic Disease Management" in Chapter 4 of this handbook.**

For minor consent services that are **outpatient** mental health services, you can go to a Medi-Cal network Provider **or out-of-network** provider without a referral and without pre-approval (prior authorization). Your PCP does not have to refer you and you do not need to get pre-approval (prior authorization) from us to get covered minor consent services.

Services from an Out-of-Network Medi-Cal Provider that are not related to Sensitive Care may not be covered. For help finding a Medi-Cal provider who is outside the Kaiser Permanente Medi-Cal provider network, or to ask for transportation help to get to a provider, call Member Services at 1-855-839-7613 (TTY 711).

Minor consent services that are Specialty Mental Health Services are not covered. Specialty Mental Health Services are covered by the County Mental Health Plan for the County where you live.

Minors can talk to a representative in private about their health concerns by calling the 1-866-454-8855 (TTY 711) and talk to a licensed health care professional, 24 hours a day, 7 days a week.

We will not send information about getting sensitive services to parents or guardians. To learn more about how to ask for confidential communications related to sensitive services, read “Notice of privacy practices” in Chapter 7 of this handbook.

Revised description under “Emergency Care” in Chapter 3 (How to get care)

Emergency Care

For Emergency Care, call 911 or go to the nearest hospital. For Emergency Care, you do not need pre-approval (prior authorization) from us.

Inside the United States, including any United States Territory, you have the right to use any hospital or other setting for emergency care.

If you are outside of the United States, only Emergency Care requiring hospitalization in Canada and Mexico is covered. Emergency Care and any care in other countries are not covered.

Emergency Care is for life-threatening medical conditions. It is for an illness or injury that a prudent (reasonable) layperson (not a health care professional) with average knowledge of health and medicine could expect that, if you don’t get care right away, you would place your health (or your unborn baby’s health) in serious danger – this includes risking serious harm to your bodily functions, body organs or body parts.

Examples may include, but are not limited to:

- Active labor
- Broken bone
- Severe pain
- Chest pain
- Drug overdose
- Fainting
- Psychiatric emergency conditions, such as severe depression or suicidal thoughts
- Severe burn
- Severe pain
- Trouble breathing

Do not go to the ER for Routine Care or care that is not needed right away. You should get Routine Care from your PCP, who knows you best. If you are not sure if you have an emergency, call your PCP. You can also call the advice line on the back of your Health Plan ID Card and talk to a licensed health care professional, 24 hours a day, 7 days a week.

If you need Emergency Care away from home, go to the nearest hospital even if it is not in the Kaiser Permanente Medi-Cal provider network. If you go to an ER, ask them to call us. You or the hospital that admitted you should call Kaiser Permanente within 24 hours after you get emergency care. If you are traveling outside the United States, other than to Canada or Mexico, and need Emergency Care, Kaiser Permanente will not cover your care.

If you need emergency transportation, call 911. You do not need to ask your PCP or Kaiser Permanente before you go to the ER.

If you need care in an Out-of-Network hospital after your emergency (Post-Stabilization Care), the hospital will call Kaiser Permanente.

Remember: Do not call 911 unless you reasonably think you are having an emergency.

Revised Contact Information under “Initial health appointment (“IHA”) in Chapter 3 (How to get care)

Initial health appointment (“IHA”)

For Medi-Cal Members who are new to Kaiser Permanente

We recommend that, as a new Medi-Cal Member, you visit your new PCP within 120 days for an initial health appointment (“IHA”). The purpose of the IHA is to help your PCP learn your health care history and needs. Your PCP might ask you questions about your health history or may ask you to complete a questionnaire. Your PCP will also tell you about health education counseling and classes that can help you.

If your PCP is at a facility that is not part of The Permanente Medical Group or the Southern California Permanente Medical Group:

- When you call to schedule your IHA, tell the person who answers the phone that you are Kaiser Permanente Medi-Cal Member. Give them your Kaiser Permanente ID number.

Take your Kaiser Permanente ID card and your photo ID to your appointment. It is a good idea to take a list of your medicines and questions with you to your visit. Be ready to talk with your PCP about your health care needs and concerns.

Be sure to call your PCP's office if you are going to be late or cannot go to your appointment.

For Medi-Cal Members with prior Kaiser Permanente coverage

If you are new to Medi-Cal and your previous health coverage was also with Kaiser Permanente, please contact your PCP to see if you need an Initial health appointment ("IHA"). If your medical record is current, you may be able to wait until your next scheduled Routine Care visit to make any additional updates to your medical record.

Northern California members

If you have questions about the IHA, call 1-833-721-6012 (TTY 711), Monday through Friday, 8:30 a.m. to 1 p.m. and 2 p.m. to 5 p.m.

Southern California members

If you have questions about the IHA, call Member Services at **1-855-839-7613 (TTY 711)**, 24 hours a day, 7 days a week.

Revised description under “What your health plan covers” in Chapter 4 (Benefits and Services)

What your health plan covers

This chapter explains your covered services as a member of Kaiser Foundation Health Plan, Inc. Your covered services are no cost to you as long as they are medically necessary and provided according to the rules outlined in this Member Handbook. Most services must be provided by a Medi-Cal Network Provider. We may cover Medically Necessary services from an Out-of-Network Provider in some cases. You must ask us for pre-approval (prior authorization) if the care is out-of-network, except for:

- Emergency Care
- Urgent Care outside your Home Region Service Area

- Some Sensitive Care as described in Chapter 3 of this Member Handbook

Medically necessary services are reasonable and necessary to protect your life, keep you from becoming seriously ill or disabled, or reduce severe pain from a diagnosed disease, illness, or injury. For members under the age of 21, Medi-Cal services include care that is medically necessary to fix or help relieve a physical or mental illness or condition. For more on your covered services, call Member Services at 1-855-839-7613 (TTY 711).

Members under 21 years old get extra benefits and services. To learn more, read Chapter 5, “Child and youth well care.”

The following are examples of the services we cover:

- Ambulatory (outpatient) services
- A limited number of outpatient prescription drugs, supplies, and supplements. Most outpatient prescription drugs, supplies, and supplements are covered under Medi-Cal Rx under Fee-for-Service Medi-Cal
- CCS-eligible services under the Whole Child Model Program in certain counties
- Emergency Care, including emergency ambulance services
- Hospice and palliative care
- Hospitalization
- Investigational services
- Laboratory and radiology services, such as X-rays
- Long-term services and supports (“LTSS”)
- Maternity and newborn care
- Mental health services for mild to moderate conditions
- Non-emergency medical transportation (“NEMT”)
- Non-medical transportation (“NMT”)
- Pediatric services
- Preventive and wellness services and chronic disease management
- Rehabilitative and habilitative (therapy) services and devices
- Reconstructive surgery

- Substance use disorder screening services
 - Telehealth services from Kaiser Permanente Medi-Cal Network Providers
 - Vision services
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Revised description under “Medi-Cal benefits covered by Kaiser Permanente” in Chapter 4 (Benefits and Services)

Maternity and newborn care

Birthing center services

We cover services at birthing centers that are a Medi-Cal-approved Comprehensive Perinatal Services Program (“CPSP”) provider. Birthing center services are an alternative to hospital-based maternity care for women with low-risk pregnancy. If you want to have your baby at one of these centers and to find out if you qualify, ask your doctor

Breast pumps and supplies

We will provide one retail-grade breast pump per pregnancy and one set of supplies to go with the pump. If it is Medically Necessary for you to use a hospital-grade breast pump, we will cover the rental or purchase of one. Hospital-grade breast pumps are Durable Medical Equipment (“DME”) and must be pre-approved for you. We will choose the vendor and you must return the hospital-grade breast pump after you no longer need it.

Breastfeeding education and aids

We cover comprehensive lactation support.

Care coordination

We provide care coordination services during maternity and for newborn care.

Certified Nurse Midwife (CNM) Services

We cover Medically Necessary services provided by certified nurse midwives who act within their scope of practice.

Counseling

We provide counseling services to pregnant, and postpartum persons before, during, and after childbirth by certified healthcare professionals.

Delivery and postpartum care

We cover services in the hospital and postpartum care.

Diagnosis of fetal genetic disorders and counseling

We cover diagnostic tests and counseling related to fetal genetic disorders.

Doula Services

Doulas are birth workers who provide health education, advocacy, and physical, emotional, and non-medical support for pregnant and postpartum persons before, during, and after childbirth, including support during miscarriage, stillbirth, and abortion.

We cover services of a qualified doula during your pregnancy through labor and delivery, and the postpartum period. Medi-Cal does not cover all doula services. To be covered by Medi-Cal, doula services must be recommended by a Medi-Cal Network Provider. If you have a Medi-Cal Network Provider recommendation, we will cover:

- One initial visit.
- Up to eight additional one-hour visits that may be provided in any combination of prenatal and postpartum visits.
- Support during labor and delivery, abortion, or miscarriage.
- Up to two extended three-hour postpartum visits after the end of a pregnancy. You are covered for a defined number of visits under Medi-Cal.

Additional visits are subject to pre-approval.

Licensed Midwife (LM)

We cover Medically Necessary services provided by licensed nurse midwives who act within their scope of practice.

Maternal mental health services

If you develop a mental health condition during your pregnancy or during the

postpartum period, we will cover the mental health services you need, as described in the “Mental health services” section in this chapter.

Newborn care

Newborns are babies from 0 to 2 months old. If the mother is a Medi-Cal member at the time of the birth, we cover Medically Necessary services under the mother’s Medi-Cal coverage for newborns. It is important to enroll your newborn in Medi-Cal so that your newborn can have their own Medi-Cal coverage. For more information on how to enroll your newborn in Medi-Cal, call your county office.

Nutrition education

We provide nutrition education to the mothers by certified healthcare professionals.

Prenatal care

We cover a series of prenatal care exams.

Social and mental health assessments and referrals

We provide social and mental health assessments without needing pre-approval. To learn more about mental health services read “Mental Health Services” in Chapter 4 of this Member Handbook.

Vitamin and mineral supplements

Outpatient prescription drugs, supplies, and supplements related to maternity and newborn care services are covered under Medi-Cal Rx. For more information on Medi-Cal Rx, go to the “Medi-Cal Rx” heading in the section “Other Medi-Cal programs and services not covered by Kaiser Permanente” in Chapter 4.

Revised description under “Mental Health Services” in Chapter 4 (Benefits and Services)

Specialty Mental Health benefit changes for members in Sacramento and Solano Counties

Starting July 1, 2024, Kaiser Permanente will no longer cover Specialty Mental Health Services in Sacramento and Solano Counties for new members. This change will make Sacramento and Solano Counties like the other Medi-Cal Counties, with the County Mental Health Plans now covering Specialty Mental Health Services and members getting these services from the County, or a Mental Health Provider who works with the County.

If your care includes the need for Specialty Mental Health Services to continue between July 1, 2024, and December 31, 2024, you and your Kaiser Permanente provider will decide when to move your care to the County Mental Health Plan. We will share your Specialty Mental Health needs with your County Mental Health Plan and work with you and the County to make sure you get the care you need.

Mental health assessments

You do not need a referral or pre-approval to get an initial mental health assessment from a Medi-Cal Network Provider or from a county mental health plan provider. You may get a mental health assessment at any time from a licensed mental health provider who is a qualified Medi-Cal provider. You can look at our online provider listings at **kp.org/finddoctors** to find a mental health provider in our network or call Member Services at **1-855-839-7613** (TTY 711).

We will cover prevention, screening, assessment, and treatment services for mild-to-moderate mental health conditions that may be provided to you before you receive a formal diagnosis related to your mental health.

Outpatient mental health services for mild to moderate conditions

If your mental health provider determines that you have a mild or moderate mental health condition or have impairment of mental, emotional, or behavioral functioning, we

cover the following outpatient mental health services:

- Individual and group mental health evaluation and treatment (psychotherapy)
- Psychological testing when clinically indicated to evaluate a mental health condition
- Development of cognitive skills to improve attention, memory, and problem solving
- Outpatient services for the purposes of monitoring drug therapy
- Imaging and laboratory services related to treatment of your mental health condition (see “Laboratory and radiology services” in this chapter 4)
- Psychiatric consultation
- Family therapy when Medically Necessary and includes at least two family members. Examples of family therapy include, but are not limited to:
 - Child-parent psychotherapy (ages 0 through 5)
 - Parent child interactive therapy (ages 2 through 12)
 - Cognitive-behavioral couple therapy (adults)
- Medically Necessary dyadic behavioral health (“DBH”) services for Members and their caregivers. A dyad is a child and their parents or caregivers. Dyadic care serves parents or caregivers and child together. It targets family wellbeing to support healthy child development and mental health. Dyadic care services include dyadic behavioral health (DBH) well-child visits, dyadic comprehensive Community Supports services, dyadic psychoeducational services, dyadic parent or caregiver services, dyadic family training dyadic family training, and counseling for child development, and maternal mental health services.

Outpatient prescription drugs, supplies, and supplements related to mental health services are covered under Medi-Cal Rx. For more information on Medi-Cal Rx, go to the “Medi-Cal Rx” heading in the section “Other Medi-Cal programs and services not covered by Kaiser Permanente” in this Chapter 4.

If the treatment you need for a mental health disorder is not available in our Medi-Cal provider network or your PCP or mental health provider cannot give the care you need in the time listed above in “Timely access to care”, we will cover and help you get out-of-network services.

For help finding more information on mental health services provided by Kaiser Permanente you can call Member Services at 1-855-839-7613 (TTY 711).

Revised description under “Other Medi-Cal programs and services not covered by Kaiser Permanente” in Chapter 4 (Benefits and Services)

Specialty Mental Health Services

County Mental Health Plans provide Medically Necessary Specialty Mental Health Services to Medi-Cal Members. Specialty Mental Health Services include the following:

Outpatient services:

- Mental health services
- Medication support services
- Day treatment intensive services
- Day rehabilitation services
- Crisis intervention services
- Crisis stabilization services
- Targeted case management
- Therapeutic behavioral services (for Members under age 21)
- Intensive care coordination (“ICC”) (for Members under age 21)
- Intensive home-based services (“IHBS”) (for Members under age 21)
- Therapeutic foster care (“TFC”) (for Members under age 21)
- Peer Support Services (“PSS”).

Residential services:

- Adult and pediatric residential treatment services
- Crisis residential treatment services Inpatient services:
- Psychiatric inpatient hospital services
- Psychiatric health facility services

To learn more about Specialty Mental Health Services in your County, you can call the County. To locate all Counties’ free telephone numbers online, visit

<http://www.dhcs.ca.gov/individuals/Pages/MHPContactList.aspx>.

Revised Contact Information Under “Other Benefits and Programs Covered by Kaiser Permanente” in Chapter 4

Long-term care services and supports (“LTSS”)

We cover, for members who qualify, long-term services and supports provided in the following types of long-term care facilities or homes:

- Skilled nursing facilities
- Subacute care facilities
- Intermediate care facilities, including:
 - ◆ Intermediate care facilities/developmentally disabled (“ICF/DD”)
 - ◆ Intermediate care facilities/developmentally disabled-habilitative (“ICF/DD-H”)
 - ◆ Intermediate care facilities/developmentally disabled-nursing (“ICF/DD-N”)

If you qualify for long-term care services, we will make sure you are placed in a health care facility or home that gives the level of care most appropriate to your medical needs.

LTSS information in Northern California Region

If you have questions about long-term care services, call **1-833-721-6012** (TTY **711**), Monday through Friday, 8:30 a.m. to 1 p.m. and 2 p.m. to 5 p.m.

LTSS information in Southern California Region

If you have questions about long-term care services, call Member Services at **1-855-839-7613**, (TTY **711**), 24 hours a day, 7 days a week.

Revised Contact Information under “Care Coordination” in Chapter 4

Basic care management

Getting care from many different providers or in different health systems is challenging. We want to make sure Members get all Medically Necessary services, prescription medicines, and behavioral health services. We can help coordinate and manage your health needs, at no cost to you. This help is available even when another program covers the services.

It can be hard to figure out how to meet your health care needs after you leave the hospital or if you get care in different systems. Here are some ways [MCP] can help members:

- If you have trouble getting a follow-up appointment or medicines after you are discharged from the hospital, we can help you.
- If you need help getting to an in-person appointment, we can help you get free transportation.

Care Coordination information in Northern California Region

If you have questions or concerns about your health or the health of your child, call 1-833-721-6012 (TTY 711), Monday through Friday, 8:30 a.m. to 1 p.m. and 2 p.m. to 5 p.m.

Care coordination information in Southern California Region

If you have questions or concerns about your health or the health of your child, call Member Services at 1-855-839-7613, (TTY 711), 24 hours a day, 7 days a week.

Revised Contact Information under “Community Supports” in Chapter 4

Community Supports information in Northern California Region

If you need help or want to find out what Community Supports might be available for you, call 1-833-721-6012 (TTY 711), Monday through Friday, 8:30 a.m. to 1 p.m. and 2 p.m. to 5 p.m. for information on Community Supports

Community Supports information for Southern California Region

If you need help or want to find out what Community Supports might be available for you, call Member Services at **1-855-839-7613**, (TTY 711), 24 hours a day, 7 days a week.

Revised description under “Pediatric services (Children under age 21)” in Chapter 5 (Child and youth well care)

Child and youth members under 21 years old can get special health services as soon as they are enrolled. This makes sure they get the right preventive, dental, and mental health care, including developmental and specialty services. This chapter explains these services.

Pediatric services (Children under age 21)

Members under 21 years old are covered for needed care. The list below includes Medically Necessary services to treat or care for any defects and physical or mental diagnoses. Covered Services include, but are not limited to:

- Well-child visits and teen check-ups (important visits children need)
- Immunizations (shots)
- Behavioral health assessment and treatment
- Mental Health evaluation and treatment, including individual, group, and family psychotherapy (Specialty Mental Health Services are covered by the County Health Plans or Providers that work with County)
- Adverse childhood experiences (ACE) screening
- Lab tests, including blood lead poisoning screening
- Health and preventive education
- Vision services
- Dental services (covered under Medi-Cal or Dental Managed Care)
- Hearing services (covered by California Children’s Services (the Whole Child Model or CCS) for children who qualify. We will cover Medically Necessary

hearing services for children that Whole Child Model or CCS do not cover)

These services are called Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services. EPSDT services that are recommended by pediatricians' Bright Futures guidelines to help you, or your child, stay healthy are covered at no cost to you.

To read these guidelines, go to

https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf.

Nondiscrimination Notice

Discrimination is against the law. Kaiser Permanente¹ follows State and Federal civil rights laws.

Kaiser Permanente does not unlawfully discriminate, exclude people, or treat them differently because of age, race, ethnic group identification, color, national origin, cultural background, ancestry, religion, sex, gender, gender identity, gender expression, sexual orientation, marital status, physical or mental disability, medical condition, source of payment, genetic information, citizenship, primary language, or immigration status.

Kaiser Permanente provides the following services:

- No-cost aids and services to people with disabilities to help them communicate better with us, such as:
 - ◆ Qualified sign language interpreters
 - ◆ Written information in other formats (braille, large print, audio, accessible electronic formats, and other formats)
- 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 our Member Service Contact Center, 24 hours a day, 7 days a week (closed holidays). The call is free:

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- All others: **1-800-464-4000 (TTY 711)**

Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form. To obtain a copy in one of these alternative formats, or another format, call our Member Service Contact Center and ask for the format you need.

How to file a grievance with Kaiser Permanente

You can file a discrimination grievance with Kaiser Permanente if you believe we have failed to provide these services or unlawfully discriminated in another way. You can file a grievance by phone, by mail, in person, or online. Please refer to your *Evidence of Coverage or Certificate of Insurance* for details. You can call Member Services for more information on the options that apply to you, or for help filing a grievance. You may file a discrimination grievance in the following ways:

- **By phone:** Medi-Cal members may call **1-855-839-7613 (TTY 711)**. All other members may call **1-800-464-4000 (TTY 711)**. Help is available 24 hours a day, 7 days a week (closed holidays)
- **By mail:** Download a form at **kp.org** or call Member Services and ask them to send you a form that you can send back.

¹ Kaiser Permanente is inclusive of Kaiser Foundation Health Plan, Inc, Kaiser Foundation Hospitals, The Permanente Medical Group, and the Southern California Medical Group

- **In person:** Fill out a Complaint or Benefit Claim/Request form at a member services office located at a Plan Facility (go to your provider directory at kp.org/facilities for addresses)
- **Online:** Use the online form on our website at **kp.org**

You may also contact the Kaiser Permanente Civil Rights Coordinator directly at the addresses below:

Attn: Kaiser Permanente Civil Rights Coordinator
 Member Relations Grievance Operations
 P.O. Box 939001
 San Diego CA 92193

How to file a grievance with the California Department of Health Care Services Office of Civil Rights *(For Medi-Cal Beneficiaries Only)*

You can also file a civil rights complaint with the California Department of Health Care Services Office of Civil Rights in writing, by phone or by email:

- **By phone:** Call DHCS Office of Civil Rights at **916-440-7370** (TTY **711**)
- **By mail:** Fill out a complaint form or send a letter to:

Deputy Director, Office of Civil Rights
 Department of Health Care Services
 Office of Civil Rights
 P.O. Box 997413, MS 0009
 Sacramento, CA 95899-7413

Complaint forms are available at: http://www.dhcs.ca.gov/Pages/Language_Access.aspx

- **Online:** Send an email to CivilRights@dhcs.ca.gov

How to file a grievance with the U.S. Department of Health and Human Services Office of Civil Rights

You can file a discrimination complaint with the U.S. Department of Health and Human Services Office for Civil Rights. You can file your complaint in writing, by phone, or online:

- **By phone:** Call **1-800-368-1019** (TTY **711** or **1-800-537-7697**)
- **By mail:** Fill out a complaint form or send a letter to:

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

Complaint forms are available at:

<https://www.hhs.gov/ocr/complaints/index.html>

- **Online:** Visit the Office of Civil Rights Complaint Portal at:
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

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, or materials translated into your language or alternative formats. You can also request auxiliary aids and devices at our facilities. Call our Member Service Contact Center for help, 24 hours a day, 7 days a week (closed holidays).

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- All others: **1-800-464-4000 (TTY 711)**

Arabic: خدمات الترجمة الفورية متوفرة لك مجاناً على مدار الساعة كافة أيام الأسبوع. بإمكانك طلب خدمة الترجمة الفورية أو ترجمة وثائق اللغتك أو لصيغ أخرى. يمكنك أيضاً طلب مساعدات إضافية وأجهزة في مرافقتنا. اتصل مع مركز اتصال خدمة الأعضاء لدينا، على مدار 24 ساعة في اليوم و 7 أيام في الأسبوع (العطلات مغلق).

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- جميع الآخرين: **1-800-464-4000 (TTY 711)**

Armenian: Ձեզ կարող է անվճար լեզվական աջակցություն տրամադրվել օրը 24 ժամ, շաբաթը 7 օր: Դուք կարող եք պահանջել բանավոր թարգմանչի ծառայություններ, Ձեր լեզվով թարգմանված կամ այլընտրանքային ձևաչափով պատրաստված նյութեր: Դուք նաև կարող եք խնդրել օժանդակ օգնություններ և սարքեր մեր հաստատություններում: Օգնության համար զանգահարեք մեր Անդամների սպասարկման կապի կենտրոն օրը 24 ժամ, շաբաթը 7 օր (տոն օրերին փակ է):

- Medi-Cal` **1-855-839-7613 (TTY 711)**
- Այլ` **1-800-464-4000 (TTY 711)**

Chinese: 我们每周 7 天，每天 24 小时免费提供语言帮助。您可以要求提供口译员、或将材料翻译为您所用语言或其他格式。您还可以在我们的设施中要求使用辅助工具和设备。请打电话给我们的会员服务联络中心，服务时间为每周 7 天，每天 24 小时（节假日除外）。

- 所有会员: **1-800-757-7585 (TTY 711)**

Farsi: خدمات زبانی در 24 ساعت شبانهروز و 7 روز هفته بهصورت رایگان در اختیار شماست. می‌توانید خدمات مترجم شفاهی، یا ترجمه مدارک به زبان خود یا به فرمت‌های دیگر را درخواست کنید. همچنین می‌توانید دستگاه‌ها و کمک‌های دیگر را در مراکز ما درخواست نمایید. برای دریافت کمک، در 24 ساعت شبانهروز و 7 روز هفته (بهجز تعطیلات) با مرکز تماس خدمات اعضای ما تماس بگیرید.

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- سایر: **1-800-464-4000 (TTY 711)**

Hindi: बिना किसी लागत के भाषा सहायता, दिन के 24 घंटे, सप्ताह के सातों दिन उपलब्ध हैं। आप दुभाषिये की सेवाओं के लिए, या बिना किसी लागत के सामग्रियों को अपनी भाषा में अनुवाद करवाने के लिए, या वैकल्पिक प्रारूपों का अनुरोध कर सकते हैं। आप हमारे सुविधा-स्थलों में सहायक साधनों और उपकरणों के लिए भी अनुरोध कर सकते हैं। सहायता के लिए हमारी सदस्य सेवाओं के सम्पर्क केंद्र को, दिन के 24 घंटे, सप्ताह के सातों दिन (छुट्टियों वाले दिन बंद रहता है) कॉल करें।

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- बाकी दूसरे: **1-800-464-4000 (TTY 711)**

Hmong: Muaj kev pab txhais lus pub dawb rau koj, 24 teev tuaj ib hnub twg, 7 hnub tuaj ib lim tiam twg. Koj thov tau cov kev pab txhais lus, muab cov ntaub ntauv txhais ua koj hom lus, los yog ua lwm hom. Koj kuj thov tau lwm yam kev pab thiab khoom siv hauv peb tej tsev hauj lwm. Hu rau peb Qhov Chaw Pab Cov Tswv Cuab 24 teev tuaj ib hnub twg, 7 hnub tuaj ib lim tiam twg (cov hnub caiv kaw).

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- Dua lwm cov: **1-800-464-4000 (TTY 711)**

Japanese: 多言語による情報支援を無料で24時間年中無休でご利用いただけます。通訳サービス、日本語に翻訳された資料、あるいは別の形式による資料もご所望いただけます。また、当施設における補助的な支援や機器についてもご所望いただけます。お気軽にご連絡ください（祝祭日を除き24時間週7日）。

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- その他のご連絡先: **1-800-464-4000 (TTY 711)**

Khmer (Cambodian): ជំនួយភាសា គឺឥតគិតថ្លៃដល់អ្នកឡើយ 24 ម៉ោងក្នុងមួយថ្ងៃ 7 ថ្ងៃក្នុងមួយសប្តាហ៍។ អ្នកអាចស្នើសុំសេវាអ្នកបកប្រែ ឬឯកសារដែលបានបកប្រែ ជាភាសាខ្មែរ ឬទម្រង់ជំនួសផ្សេងទៀត។ អ្នកក៏អាចស្នើសុំឧបករណ៍និងបរិក្ខារជំនួយ ទំនាក់ទំនងសម្រាប់អ្នកពិការនៅទីតាំងរបស់យើងផងដែរ។ ទូរស័ព្ទទៅមជ្ឈមណ្ឌល ទំនាក់ទំនងសេវាកម្មសមាជិករបស់យើងសម្រាប់ជំនួយ 24 ម៉ោងក្នុងមួយថ្ងៃ 7 ថ្ងៃក្នុងមួយសប្តាហ៍ (ថ្ងៃឈប់សម្រាកបិទ)។

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- ផ្សេងទៀតទាំងអស់: **1-800-464-4000 (TTY 711)**

Korean: 요일 및 시간에 관계없이 언어지원 서비스를 무료로 이용하실 수 있습니다. 귀하는 통역 서비스 또는 귀하의 언어로 번역된 자료 또는 대체 형식의 자료를 요청할 수 있습니다. 또한 저희 시설에서 보조기구 및 기기를 요청하실 수 있습니다. 저희 가입자 서비스 연락 센터에 주 7일, 하루 24시간(공휴일 휴무) 전화하셔서 도움을 받으십시오.

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- 기타 모든 경우: **1-800-464-4000 (TTY 711)**

Laotian: ມີການຊ່ວຍເຫຼືອດ້ານພາສາບໍ່ເສຍຄ່າໃຫ້ແກ່ທ່ານ, 24 ຊົ່ວໂມງຕໍ່ວັນ, 7 ວັນຕໍ່ອາທິດ. ທ່ານຍັງສາມາດຂໍບໍລິການຜູ້ແປພາສາ ຫຼື ເອກະສານທີ່ແປເປັນພາສາຂອງທ່ານ ຫຼື ໃບຮູບແບບອື່ນໄດ້. ທ່ານຍັງສາມາດຂໍອຸປະກອນຊ່ວຍເຫຼືອ ແລະ ເຄື່ອງມືຢູ່ສະຖານບໍລິການຂອງພວກເຮົາໄດ້. ໂທຫາສູນຕິດຕໍ່ບໍລິການສະມາຊິກຂອງພວກເຮົາເພື່ອຂໍຄວາມຊ່ວຍເຫຼືອ, 24 ຊົ່ວໂມງຕໍ່ວັນ, 7 ວັນຕໍ່ອາທິດ (ເປີດໃນວັນພັກ).

- Medi-Cal: **1-855-839-7613** (TTY 711)
- ອື່ນໆທັງໝົດ: **1-800-464-4000** (TTY 711)

Mien: Mbenc nzoih liouh wangv-henh tengx nzie faan waac bun muangx meih maiv cingv, yietc hnoi mbenc maaih 24 norm ziangh hoc, yietc norm leiz baaix mbenc maaih 7 hnoi. Meih se haih tov heuc tengx faan benx meih nyei waac bun muangx, a'fai zoux benx nyungc horngh jaa-sic zoux benx meih nyei waac. Meih corc haih tov tengx nyungc horngh jaa-dorngx aengx caux jaa-sic nzie bun yiem njiec zorc goux baengc zingh gorn zangc. Beiv hnavgv qiexm zuqc longc mienh nzie weih nor douc waac lorx taux yie mbuo ziux goux baengc mienh nyei gorn zangc, yietc hnoi tengx duqv 24 norm ziangh hoc, yietc norm leiz baaix tengx duqv 7 hnoi (simv cuotv gingc nyei hnoi se guon oc).

- Medi-Cal: **1-855-839-7613** (TTY 711)
- Yietc zungv da'nyeic deix: **1-800-464-4000** (TTY 711)

Navajo: Díí hózhó nízhoní bee hane' dóó jiiik'ah jóóní dooníwo'. Ndik'é yádi naaltsoos bee haz'áanii bee hane' dóó yádi nihookaa dóó nádaáhágíí yádi nihookaa. Shí éí bee háidínii bíbee' haz'áanii dóó bee t'ah kodí bízikinii wo'da'gi doolyé. Ahéhee' bik'ehgo nohólqon'ígíí, 24 t'áádawo'íí, 7 t'áádawo'íigo (t'áadoo t'áálwo').

- Medi-Cal: **1-855-839-7613** (TTY 711)
- Yádilzingo bílk'ehgo bee: **1-800-464-4000** (TTY 711)

Punjabi: ਬਿਨਾਂ ਕਿਸੀ ਲਾਗਤ ਦੇ, ਦਿਨ ਦੇ 24 ਘੰਟੇ, ਹਫ਼ਤੇ ਦੇ 7 ਦਿਨ, ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਤੁਹਾਡੇ ਲਈ ਉਪਲਬਧ ਹੈ। ਤੁਸੀਂ ਦੁਭਾਸ਼ੀਏ ਦੀਆਂ ਸੇਵਾਵਾਂ ਲਈ, ਜਾਂ ਸਮੱਗਰੀਆਂ ਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਅਨੁਵਾਦ ਕਰਵਾਉਣ ਲਈ, ਜਾਂ ਕਿਸੇ ਵੱਖ ਫਾਰਮੈਟ ਵਿੱਚ ਪ੍ਰਾਪਤ ਕਰਨ ਲਈ ਬੇਨਤੀ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਸੀਂ ਸਾਡੀਆਂ ਸੁਵਿਧਾਵਾਂ ਵਿੱਚ ਵੀ ਸਹਾਇਕ ਸਾਧਨਾਂ ਅਤੇ ਉਪਕਰਣਾਂ ਲਈ ਬੇਨਤੀ ਕਰ ਸਕਦੇ ਹਾਂ। ਮਦਦ ਲਈ ਸਾਡੀ ਮੈਂਬਰ ਸੇਵਾਵਾਂ ਦੇ ਸੰਪਰਕ ਕੇਂਦਰ ਨੂੰ, ਦਿਨ ਦੇ 24 ਘੰਟੇ, ਹਫ਼ਤੇ ਦੇ 7 ਦਿਨ (ਛੁੱਟੀਆਂ ਵਾਲੇ ਦਿਨ ਬੰਦ ਰਹਿੰਦਾ ਹੈ) ਕਾਲ ਕਰੋ।

- Medi-Cal: **1-855-839-7613** (TTY 711)
- ਹੋਰ ਸਾਰੇ: **1-800-464-4000** (TTY 711)

Russian: Языковая помощь доступна для вас бесплатно круглосуточно, ежедневно. Вы можете запросить услуги переводчика или материалы, переведенные на ваш язык или в альтернативные форматы. Вы также можете заказать вспомогательные средства и приспособления. Для получения помощи позвоните в наш центр обслуживания участников ежедневно, круглосуточно (кроме праздничных дней).

- Medi-Cal: **1-855-839-7613** (линия ТТУ 711)
- Все остальные: **1-800-464-4000** (линия ТТУ 711)

Spanish: Tenemos disponible asistencia en su idioma sin ningún costo para usted 24 horas al día, 7 días a la semana. Usted puede solicitar los servicios de un intérprete, que los materiales se traduzcan a su idioma o formatos alternativos. También puede solicitar recursos para discapacidades en nuestros centros de atención. Llame a nuestra Central de Llamadas de Servicio a los Miembros para recibir ayuda 24 horas al día, 7 días a la semana (excepto los días festivos).

- Para todos los demás: **1-800-788-0616 (TTY 711)**

Tagalog: May magagamit na tulong sa wika nang wala kayong babayaran, 24 na oras sa isang araw, 7 araw sa isang linggo. Maaari kayong humiling ng mga serbisyo ng interpreter, o mga babasahin na isinalin sa inyong wika o sa mga alternatibong format. Maaari rin kayong humiling ng mga pantulong na gamit at device sa aming mga pasilidad. Tawagan ang aming Center sa Pakikipag-ugnayan ng Serbisyo sa Miyembro para sa tulong, 24 na oras sa isang araw, 7 araw sa isang linggo (sarado sa mga pista opisyal).

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- Lahat ng iba pa: **1-800-464-4000 (TTY 711)**

Thai: มีบริการช่วยเหลือด้านภาษาตลอด 24 ชั่วโมงทุกวันโดยไม่มีค่าใช้จ่าย โดยคุณสามารถขอใช้บริการล่าม บริการแปลเอกสารเป็นภาษาของคุณหรือในรูปแบบอื่นๆ ได้ คุณสามารถขออุปกรณ์และเครื่องมือช่วยเหลือได้ที่ศูนย์บริการของเราโดยโทรหาเราที่ศูนย์ติดต่อฝ่ายบริการสมาชิกของเราเพื่อขอความช่วยเหลือตลอด 24 ชั่วโมงทุกวัน (ปิดทำการในช่วงวันหยุด)

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- ที่อื่นๆทั้งหมด: **1-800-464-4000 (TTY 711)**

Ukrainian: Послуги перекладача надаються безкоштовно, цілодобово, 7 днів на тиждень. Ви можете зробити запит на послуги усного перекладача або отримання матеріалів у перекладі мовою, якою володієте, чи в альтернативних форматах. Також ви можете зробити запит на отримання допоміжних засобів і пристроїв у закладах нашої мережі компаній. Телефонуйте в наш контактний центр для обслуговування клієнтів цілодобово, 7 днів на тиждень (крім святкових днів).

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- Усі інші: **1-800-464-4000 (TTY 711)**

Vietnamese: Dịch vụ hỗ trợ ngôn ngữ được cung cấp miễn phí cho quý vị 24 giờ mỗi ngày, 7 ngày trong tuần. Quý vị có thể yêu cầu dịch vụ thông dịch, hoặc tài liệu được dịch ra ngôn ngữ của quý vị hoặc nhiều hình thức khác. Quý vị cũng có thể yêu cầu các phương tiện trợ giúp và thiết bị hỗ trợ tại các cơ sở của chúng tôi. Gọi cho Trung Tâm Liên Lạc ban Dịch Vụ Hội Viên của chúng tôi để được trợ giúp, 24 giờ mỗi ngày, 7 ngày trong tuần (trừ các ngày lễ).

- Medi-Cal: **1-855-839-7613 (TTY 711)**
- Mọi chương trình khác: **1-800-464-4000 (TTY 711)**