# Guide to Accessing Quality Health Care Spring 2019

MolinaMarketplace.com



Your Extended Family.

# **MyMolina**

MyMolina is a secure web portal that lets you manage your own health from your computer. <u>MyMolina.com</u> is easy to use. Here are some of the things that you can do in MyMolina:

- Do a health appraisal. A health appraisal is a tool that can help you and your provider (doctor) identify ways to improve your health.
- Get self-help in the following areas:
  - Healthy weight (BMI)
  - Stop tobacco use
  - Promote physical activity
  - Healthy eating
  - Manage stress
  - Avoid drinking alcohol
  - Identify signs of depression
  - Identify signs of lack of motivation
  - Testing for cancer
  - Vaccinations
  - Safety



- Get pharmacy information such as:
  - Search for a pharmacy
- Other things you can do in the MyMolina member portal:
  - Request a Member ID card
  - Find out when and how to get referrals
  - Select or change a provider
  - Get online health records
  - Use secure e-mail to get health advice from the Nurse Advice Line
  - Send e-mail questions to Molina Member Services

To learn more or to sign up for MyMolina:

- 1. Call Molina Member Services department at 1 (888) 560-5716 or 711 for TTY/TDD
- 2. Create an account by following these easy steps:
- Step 1: Go to MyMolina.com (MiMolina.com en Español)
- Step 2: Enter your Member ID number, date of birth and zip code
- Step 3: Enter your email address
- Step 4: Create a password

# **Molina Healthcare's Quality Improvement Plan and Program**

Your health care is important to us. We want to hear how we are doing. That's why you may receive a survey about Molina Healthcare and your health care services. One of these surveys is called CAHPS<sup>®</sup>. CAHPS<sup>®</sup> stands for the Consumer Assessment of Healthcare Providers and Systems. This survey asks questions about your health care. It asks about the care you receive from Molina Healthcare. We may send you a few questions about how we are doing. We want to know what is important to you. Please take the time to complete the survey if you receive it.

We use another tool called HEDIS<sup>®</sup> to improve care. HEDIS<sup>®</sup> stands for Healthcare Effectiveness Data and Information Set. We collect information on services that you may have received. These services include:

- Shots
- Well-check exams
- Pap tests

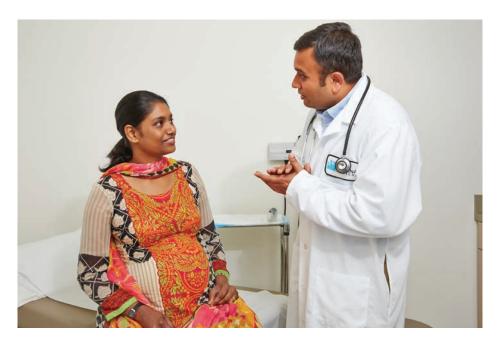
- Mammogram screenings
- Diabetes care
- Prenatal care
- Postpartum care

This process helps us learn how many of our members actually got needed services. Molina makes this information available to you. You may use it to compare one health plan to another health plan.

We strive to improve our services each year. We set goals to improve services. Our Quality Improvement (QI) plan includes these goals. We want to help you take better care of yourself and your family.

We want to make sure you get the best service possible. Some of the ways we do this include:

- Mail or call you to make sure you and your child get needed wellexams and shots
- Help you learn about ongoing health problems, if you have them
- Make sure you get prenatal care and after-delivery exams, if you are pregnant



- Remind you to get Pap tests and mammogram screenings, if you need them
- Looking at member grievances (complaints) when you send them in
- Help you find and use the information on the Molina Healthcare website
- Tell you about the special services we offer to all of our members

We review all of the services and care that you receive each year to see how well we are doing. Please visit our website at <u>www.MolinaHealthcare.com</u>. You can read the latest results of our progress on our website.

To learn more, call your Molina Healthcare Member Services Team. You can ask for a printed copy of our QI plan and results.

# **Protecting Your Privacy**

Your privacy is important to us. We respect and protect your privacy. Molina Healthcare uses and shares data to provide you with health benefits.

# **Protected Health Information (PHI)**

PHI stands for "protected health information." PHI includes your name, member number, race, ethnicity, language needs, or other things that identify you. Molina Healthcare wants you to know how we use or share your PHI.

#### Why does Molina Healthcare use or share your PHI?

- To provide for your treatment
- To pay for your health care
- To review the quality of the care you get
- To tell you about your choices for care
- To run our health plan
- To use or share PHI for other purposes, as required or permitted by law

# When does Molina Healthcare need your written authorization (approval) to use or share your PHI?

Molina Healthcare needs your written approval to use or share your PHI for reasons not listed above.

#### What are your privacy rights?

- To look at your PHI
- To get a copy of your PHI
- To amend your PHI
- To ask us not to use or share your PHI in certain ways
- To get a list of certain people or places we have given your PHI

#### How does Molina Healthcare protect your PHI?

Your PHI can be in written word, spoken word, or on a computer. Molina Healthcare uses many ways to protect PHI across our health plan. Below are some ways Molina Healthcare protects your PHI:

- Molina Healthcare uses policies and rules to protect PHI.
- Only Molina Healthcare staff with a need to know PHI may use PHI.
- Molina Healthcare trains staff to protect and secure PHI, including written and verbal communications.



- Molina Healthcare staff must agree in writing to follow the rules and policies that protect and secure PHI.
- Molina Healthcare secures PHI on our computers. PHI on our computers is kept private by using firewalls and passwords.

### What are the duties of Molina Healthcare?

#### Molina Healthcare is required to:

- Keep your PHI private
- Provide you with a notice in the event of any breach of your unsecured PHI
- Not use or disclose your genetic information for underwriting purposes
- Not use your race, ethnicity or language data for underwriting or denial of coverage and benefits
- Follow the terms of this Notice

# What can you do if you feel your privacy rights have not been protected?

- Call or write Molina Healthcare and file a complaint
- File a complaint with the U.S. Department of Health and Human Services

The above is only a summary. Our Notice of Privacy Practices gives more information about how we use and share our members' PHI. You may find our full Notice of Privacy Practices on our website at <u>www.MolinaHealthcare.com</u>. You also may ask for a copy of our Notice of Privacy Practices by calling our Member Services Department.

# **Patient Safety Program**

Molina Healthcare wants you and your family to be safe and healthy. We have a Patient Safety Program to help us meet this goal. This program gives you safety facts so you can make better health care choices. Here are a few of the things we do to improve your safety:

- Keep track of our members' complaints about safety problems in their provider's office or hospital
- Give you information to learn more about how to make safe decisions about your care. These include:
  - Questions to ask your surgeon prior to surgery

- Questions to ask about drug interactions
- Make programs available to help you manage your care and receive care in a timely manner
- Look at reports from groups that check hospital safety. Reports tell us about things like staffing levels in the Intensive Care Unit (ICU), use of computer drug orders, and so forth.

#### Groups that check safety:

- Leap Frog Quality Index Ratings (<u>www.leapfroggroup.org</u>)
- The Joint Commission National Patient Safety Goal Ratings (www.qualitycheck.org/consumer/searchQCR.aspx)

#### You can look at these websites to:

- See what hospitals are doing to be safer
- Help you know what to look for when you pick a provider or a hospital
- Get information about programs and services for patients with problems like diabetes and asthma

Call our Member Services Department at 1 (888) 560-5716 to get more information about our Patient Safety Program. You can also visit us online at <u>www.MolinaHealthcare.com</u>.

### How We Work with our Providers to Make Choices about Your Health Care

Molina Healthcare wants you to get the care you need. Sometimes your provider may need to ask us to approve the service before you receive the service (prior authorization), while you are receiving services (concurrent) or after you have got the service (post-service). We will work with your provider to decide if you need the services. We call this process Utilization Management (UM). We make choices about your care based on medical need and your benefits. We do not reward providers or others to deny coverage for services you need. We do not pay extra money to providers or our UM staff to make choices that result in giving less care. If you have a question about our UM process or decisions, you can call us. Please call our Member Services Department toll-free at 1 (888) 560-5716 (TTY/TDD: 711). Staff can also accept collect calls. If you need help in your language, a bilingual staff member or interpreter is available. We also offer TTY/TDD services for members who have hearing or speech disabilities. Our Member Services staff can answer your call Monday through Friday (except holidays) between 8:00 a.m. and 7:00 p.m. local time. If you call after 5:00 p.m. or over the weekend, please leave a message and your phone number. The Member Services staff will return your call within one business day.

#### Looking at What's New

We look at new types of services, and we look at new ways to provide those services. We review new studies to see if new services are proven to be safe for possible added benefits. Molina Healthcare reviews the type of services listed below at least once a year:

- Medical services
- Mental health services
- Medicines
- Equipment



# What to Do When You Need Care After Hours or in an Emergency

#### **After Hours Care**

There may be times when you may need care when your Primary Care Provider's (PCP) office is closed. If it is after hours and your PCP's office is closed, you can call Molina Healthcare's Nurse Advice Line at 1 (888) 275-8750. Nurses are available to help you 24 hours a day, 7 days a week.

Highly trained nurses answer our Nurse Advice Line. They can help you decide if you should see a provider right away. The nurses can also help you make an appointment if you need to see a provider quickly. Sometimes, you may have questions but do not think you need to see your PCP. You can call the Nurse Advice Line and talk to a nurse.

# **Emergency Care**

Emergency care is for sudden or severe problems that need care right away. It can also be needed care if your life or health is in danger. Emergency care is a covered benefit. If you need emergency care, call 911 or go to the nearest hospital. You do not need prior approval. If you have an urgent matter that does not threaten your life, you can also call our Nurse Advice Line. Call 1 (888) 275-8750, 24 hours a day, 7 days a week.

# Where to Find Answers to Drug Benefits

Molina Healthcare wants you to speak to your provider about drugs you need. You can visit our website at <u>www.MolinaHealthcare.com</u> if you want to know more about your drug benefits. Our website also explains our pharmacy process. On the website, you can find:

- A list of generic and brand name drugs that we cover and do not cover (drug formulary)
- Limits on covered drugs
- Limits include items such as the numbers of refills you may receive or drug doses you may get
- How your provider can ask us to approve certain drugs
- How your provider can ask for the amount of a drug you may need

- Information needed from your provider to get approval for some of your drugs
- Details about the process that your provider will use for generic substitution, therapeutic interchange and step-therapy protocols
- Updates made to the drug list at any time during the year

If you need more information on your pharmacy benefits, you can also call Member Services.

#### Getting you Extra Help when you have Ongoing Health Problems

Taking care of your own health problems can be hard. Molina Healthcare has a program that can help. We offer a Case Management Program to help members deal with difficult health problems. We offer this help to anyone receiving health services for an ongoing health problem. Our staff will work with you to make sure you receive the right care.

Molina Healthcare staff can help you:

- Find and access eligible services.
- Arrange doctor visits and tests.
- Arrange transportation.



- Identify any gaps in care or health care needs.
- Access resources to help individuals with special health care needs and/or their caregivers deal with day-to-day stress.
- Coordinate moving from one setting to another. This can include working with you and your caregiver(s) when a hospital discharges you.
- Assess eligibility for long-term care services.
- Connect with community resources.
- Find services that might not be covered benefits. This can include physical therapy with schools or in community settings or "Meals on Wheels."
- Arrange services with a primary care provider (PCP), family members, caregivers, representatives and any other identified provider.

Members can be referred to Case Management through:

- A provider
- Member Services, the Health Education line or 24-hour Nurse Advice Line
- A family member or caregiver
- Yourself

These programs are voluntary. Molina Healthcare offers them at no cost to you. You can choose to be removed from any program at any time.

Please call Molina Healthcare's Member Services Department to:

- Be removed from a program
- Learn more about a program
- Ask for a referral

### Population Health (Health Education, Disease Management, Care Management and Complex Case Management)

The tools and services described here are educational support for our members. We may change them at any time as necessary to meet the needs of our members.

#### Health Education/ Disease Management

Molina Healthcare offers programs to help you and your family manage a diagnosed health condition. Our programs include:

- Asthma management
- Depression management
- Diabetes management
- High blood pressure management
- Cardiovascular Disease (CVD) management
- Chronic Obstructive Pulmonary Disease (COPD) management

You can learn more, enroll in or dis-enrolled from any of the programs above by calling the Molina Health Management Department at 1 (866) 891-2320, TTY/TDD: 711, 9:00 a.m. to 9:00 p.m. local time., Monday through Friday.

# Newsletters

Newsletters are posted on the <u>www.MolinaHealthcare.com</u> website. The articles are about topics asked by members like you. The tips can help you and your family stay healthy.



#### **Health Education Materials**

Our materials are on nutrition, preventive services guidelines, stress management, exercise, cholesterol management, asthma, diabetes and other topics. To get these materials, ask your doctor or visit our website at <u>http://www.molinahealthcare.com/MFLMarketplacePublications</u>.

Department/ Program	Type of Help Needed	Number to Call/Contact Information
Molina Member Services Department	If you have a problem with any of Molina's services, we want to help fix it. You can call Member Services for help or to file a grievance or complaint Monday through Friday from 8:00 a.m. to 7:00 p.m. local time.	Member Services Toll-Free: 1 (888) 560-5716 TTY/TDD: 711
Health Management	To request information on programs for conditions such as asthma, diabetes, high blood pressure, Cardiovascular Disease (CVD), or Chronic Obstructive Pulmonary Disease (COPD).	1 (866) 891-2320 between 9:00 a.m. and 9:00 p.m. local time., Monday through Friday
Health Education	To request information on smoking cessation and weight management.	1 (866) 472-9483 between 9:00 a.m. and 9:00 p.m. local time., Monday through Friday
Maternity Screening and High Risk OB support	For information on our pregnancy and maternity screening programs please contact our Member Services department.	Member Services 1 (888) 560-5716 TTY/TDD: 711

#### Your Health Care Quick Reference Guide

Nurse Advice Line 24-Hours, 7 days a week Secretary of the	If you have questions or concerns about your or your family's health. The Nurse Advice Line is staffed by registered nurses. If you believe that we have	1 (888) 275-8750 for Spanish: 1 (866) 648-3537 TTY/TDD: 711 1 (800) 368-1019
U.S. Department of Health and Human Services Office for Civil Rights	not protected your privacy and wish to complain, you may call to file a complaint (or grievance).	TDD: 1 (800) 527-7697 FAX: 1 (404) 331-1807
Medicare	Medicare is health insurance offered by the federal government to most people who are 65 and older. Medicare helps pay for health care, but does not cover all medical expenses.	1 (800) MEDICARE 1 (800) 633-4227 TTY: 1 (877) 486-2048 www.Medicare.gov
Florida Department of Financial Services (FLDFS)	The Florida Department of Financial Services (FLDFS) is responsible for regulating health care services plans. If you have a grievance against your health plan, you should first call Molina toll-free at 1 (888) 560-5716, and use Molina's grievance process before contacting this department.	1 (877)-693-5236 or TDD: 1 (800) 640-0886 <u>Myfloridacfo.com</u>

#### **Behavioral Health**

Molina Healthcare offers behavioral health services to help with problems such as stress, depression or confusion. There are services to help with substance abuse as well. Your PCP can offer a brief screening and help guide you to services. You can also look for services on your own by calling Member Services at 1 (888) 560-5716. You can access many types of services. These types of problems can be treated. Molina Healthcare will assist you in finding the support or service you need.

# Your Rights as a Molina Healthcare Member

Did you know that as a member of Molina Healthcare, you have certain rights and responsibilities? Knowing your rights and responsibilities will help you, your family, your provider and Molina Healthcare ensure that you get the covered services and care that you need. You have the right to:

- Receive the facts about Molina Healthcare, our services, our practitioners, and providers who contract with us to provide services, and member rights and responsibilities.
- Have privacy and be treated with respect and dignity.
- Help make decisions about your health care. You may refuse treatment.
- Request and receive a copy of your medical records.
- Request a change or correction to your medical records.
- Discuss your treatment options with your doctor or other health care provider in a way you understand them. Cost or benefit coverage does not matter.
- Voice any complaints or send in appeals about Molina Healthcare or the care you were given.
- Use your member rights without fear of negative results.
- Receive the members' rights and responsibilities each year.
- Suggest changes to Molina Healthcare's member rights and responsibilities policy.

You also have the responsibility to:

- Give, if possible, all facts that Molina Healthcare and our practitioners and providers need to care for you.
- Know your health problems and take part in making mutually agreed upon treatment goals as much as possible.
- Follow the treatment plan instructions for the care you agree to with your practitioner.
- Keep doctor visits and be on time. If you're going to be late or cannot keep a doctor visit, call your provider.

Please visit our website at <u>www.MolinaHealthcare.com</u> or view your Evidence of Coverage for a complete list of member rights and responsibilities.

# Second Opinions

If you do not agree with your provider's plan of care for you, you have the right to a second opinion. Talk to another provider. This service is at no cost to you. Call Member Services at 1 (888) 560-5716 to learn how to get a second opinion.

### **Out-of-Network Services**

If a Molina Healthcare provider is unable to provide you with necessary and covered services, Molina Healthcare must cover the needed services through an out-of-network provider. The cost to you should be no greater than it would be if the provider were in Molina Healthcare's network. This must be done in a timely manner for as long as Molina's provider network is unable to provide the service.

# **Grievances and Appeals**

Are you having problems with your medical care or our services? If so, you have a right to file a grievance (complaint) or appeal.

A grievance can be for things like:

- The care you get from your provider or hospital
- The time it takes to get an appointment or be seen by a provider
- Provider availability in your area

You may file an appeal when you do not agree with Molina Healthcare's decision to:

- Stop, change, suspend, reduce or deny a service
- Deny payment for services

You may request an expedited review if the decision may risk your life or health. You may also ask for an External Appeal with the External Reviewer if your appeal is denied. Visit our website, <u>www.MolinaHealthcare.com</u>, or your Evidence of Coverage to read about:

- Grievance, appeal and External Appeal processes and rights
- Grievance, appeal and External Appeal timeframes
- Who can file a grievance/appeal

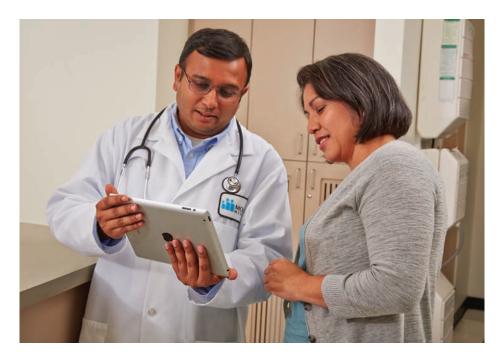
Call Member Services at 1 (888) 560-5716 if you have any grievance questions.

# Your Right to Appeal Denials

#### What is a denial?

A denial means that services or bills will not be paid. If we deny your service or claim, you have the right to request why your services or bills were denied. You have a right to appeal.

If we deny your service or claim, you will get a letter from Molina Healthcare telling you about this decision. This letter will tell you about your right to appeal. You can read about these rights in your



Evidence of Coverage. You can learn how to file an appeal on our website, <u>www.MolinaHealthcare.com</u>. Member Services can also help you file an appeal.

If you are not happy with the result of your appeal, you can ask for an External Appeal. This means providers outside Molina Healthcare review all the facts in your case and make a decision. We will accept that finding.

Would you like to ask for a review of an appeal? Call Member Services at 1-888-560-5716 and ask them to help set this up for you.

# Finding Information about Molina Providers Using our Website (POD)

Molina Healthcare offers a provider online directory. To access the provider online directory, visit <u>www.MolinaHealthcare.com</u>. Click on "Find a Doctor". The provider online directory includes information, such as:

- A current list with the names, addresses and phone numbers of Molina Healthcare providers.
- A provider's board certification status. You can also visit the American Board of Medical Specialties at <u>www.abms.org</u> to check if a provider is board certified.
- Office hours for all sites.
- Providers accepting new patients.
- Languages spoken by the provider or staff.
- Hospital information including name, location and accreditation status.

If you cannot access the Internet, or need additional information (such as your provider's medical school or residency information), Member Services can help. They can send you a printed copy of the provider online directory.

# Your Right to an Advance Directive

All members have the right to accept or refuse treatment offered by a provider. However, what if you are not able to tell the provider what

you want? To avoid decisions that may be made against your will, it is important to have an Advance Directive.

An Advance Directive is a legal form that tells medical providers what kind of care you want if you cannot speak for yourself. You can write an Advance Directive before you have an emergency. This keeps other people from making important health decisions for you if you are not well enough to make your own. There are different types of Advance Directive forms. Some examples are:

- Power of Attorney for Health Care
- Living Will

It is your choice to complete an Advance Directive. No one can deny you care based on whether or not you have an Advance Directive. Talk with someone you trust, like a family member or friend. They can help you make decisions about your health care. You can also talk with your lawyer or PCP if you have questions, or would like to complete an Advance Directive form.

You may call Molina Healthcare to get information on how to obtain Advance Directive forms that comply with applicable state laws.



If you have signed an Advance Directive and you believe the provider has not followed your instructions, you may file a complaint. Please visit the website at <u>www.MolinaHealthcare.com</u> or call Member Services for more information on how to file a complaint.

# Visit the Molina Healthcare Website

Visit our website at <u>www.MolinaHealthcare.com</u>. Choose your state at the top of the page. You can get information on our website about:

- Benefits and services, included and excluded from coverage and restrictions
- Co-payments and other charges for which you are responsible (if they apply)
- What to do if you get a bill for a claim
- FAQs (frequently asked questions and answers)
- Other pharmacy procedures including drugs we do not cover, drug limits or quotas, the process to request an exception for drugs not on the formulary, and the process for generic substitution, therapeutic interchange (using drugs that are different but have the same effects) and step-therapy protocols (certain drugs are tried first before we cover another drug for the same condition)
- Preventive health guidelines and shot schedules
- How to get specialty care and hospital services

You can ask for printed copies of anything posted on the website by calling Member Services. Your Evidence of Coverage is also a good resource. You can find it on our website.



#### **Translation Services**

We can provide information in your preferred language. We can have an interpreter to help you speak with us or your provider in almost any language (including sign language). We also provide written materials in different languages and formats. If you need an interpreter or written materials in a language other than English, please contact Member Services at 1 (888) 560-5716 TTY/TDD users should dial 711. There is no cost to you for these services.



#### Non-Discrimination Notification Molina Healthcare

Molina Healthcare (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members and does not discriminate based on race, color, national origin, ancestry, age, disability, or sex.

Molina also complies with applicable state laws and does not discriminate on the basis of creed, gender, gender expression or identity, sexual orientation, marital status, religion, honorably discharged veteran or military status, or the use of a trained dog guide or service animal by a person with a disability.

To help you talk with us, Molina provides services free of charge, in a timely manner:

- Aids and services to people with disabilities
  - Skilled sign language interpreters
  - Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
  - Skilled interpreters
  - Written material translated in your language

If you need these services, contact Molina Member Services. The Molina Member Services number is on the back of your Member Identification card. (TTY: 711).

If you think that Molina failed to provide these services or discriminated based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY: 711.

Mail your complaint to: Civil Rights Coordinator, 200 Oceangate, Long Beach, CA 90802. You can also email your complaint to <u>civil.rights@molinahealthcare.com</u>.

You can also file your complaint with Molina Healthcare AlertLine, twenty four hours a day, seven days a week at: <u>https://molinahealthcare.alertline.com</u>.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at <u>http://www.hhs.gov/ocr/office/file/index.html</u>. You can mail it to:

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

You can also send it to a website through the Office for Civil Rights Complaint Portal at <u>https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</u>.

If you need help, call (800) 368-1019; TTY (800) 537-7697.

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You have the right to get this information in a different format, such as audio, Braille, or large font due to special needs or in your language at no additional cost.

Usted tiene derecho a recibir esta información en un formato distinto, como audio, braille, o letra grande, debido a necesidades especiales; o en su idioma sin costo adicional.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services. The number is on the back of your Member ID card. (English)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a Servicios para Miembros. El número de teléfono está al reverso de su tarjeta de identificación del miembro. (Spanish) 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 會員服務。電話號碼載於您的會員證背面。(Chinese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi Dịch vụ Thành viên. Số điện thoại có trên mặt sau thẻ ID Thành viên của bạn. (Vietnamese)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa Mga Serbisyo sa Miyembro. Makikita ang numero sa likod ng iyong ID card ng Miyembro. (Tagalog)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 회원 서비스로 전화하십시오. 전화번호는 회원 ID 카드 뒷면에 있습니다. (Korean)

تنبيه: إذا كنت تستخدم اللغة العربية، نتاح خدمات المساعدة اللغوية، مجانًا، لك. اتصل بقسم خدمات الأعضاء. ورقم الهاتف هذا موجود خلف (Arabic). بطاقة تعريف العضو الخاصة بك

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele Sèvis Manm. W ap jwenn nimewo a sou do kat idantifikasyon manm ou a. (French Creole) ВНИМАНИЕ: Если вы говорите на русском языке, вы можете бесплатно воспользоваться услугами переводчика. Позвоните в Отдел обслуживания участников. Номер телефона указан на обратной стороне вашей ID-карты участника. (Russian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ Եթե դուք խոսում եք հայերեն, կարող եք անվձար օգտվել լեզվի օժանդակ ծառայություններից։ Զանգահարե՛ք Հաձախորդների սպասարկման բաժին։ Հեռախոսի համարը նշված է ձեր Անդամակցության նույնականացման քարտի ետևի մասում։ (Armenian)

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。「員サ「ビスまでお電話ください。電話番」は「員IDカ「ドの裏面に記載されております。(Japanese)

توجه؛ اگر به زبان فارسی صحبت میکنید، خدمات کمک زبانی، بدون هزینه در دستر س شما هستند. با خدمات اعضا تماس بگیرید. شمار ه (Farsi) . تلفن روی پشت کارت شناسایی عضویت شما درج شده است

ਧਿਆਨ ਦਿਓ: ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ। ਮੈਂਬਰ ਸਰਵਿਸਿਜ (Member Services) ਨੂੰ ਫੋਨ ਕਰੋ। ਨੰਬਰ ਤੁਹਾਡੇ Member ID (ਮੈਂਬਰ ਆਈ.ਡੀ.) ਕਾਰਡ ਦੇ ਪਿਛਲੇ ਪਾਸੇ ਹੈ। (Punjabi)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Wenden Sie sich telefonisch an die Mitgliederbetreuungen. Die Nummer finden Sie auf der Rückseite Ihrer Mitgliedskarte. (German)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez les Services aux membres. Le numéro figure au dos de votre carte de membre. (French)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Cov npawb xov tooj nyob tom qab ntawm koj daim npav tswv cuab. (Hmong)

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អ្នកមានសិទ្ធិទទួលបានព័ត៌មាននេះក្នុងទម្រង់ផ្សេង ដូចជា ទម្រង់ជាសម្លេង
អក្សរស្ទាបទំហំអក្សរធំដោយសារតែតម្រូវការជាពិសេសរបស់អ្នក ឬជាភាសារបស់អ្នក
ដោយមិនគិតតម្លៃបន្ថែមឡើយ។ (Cambodian)
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