







# In Your Corner

YESTERDAY, TODAY, IN THE YEAR AHEAD





premera.com/sebb

Washington State Health Care Authority SCHOOL EMPLOYEES BENEFITS BOARD

## From the first day of school

Your life is full of meaningful moments and milestones. When those moments include a change to your health needs, you'll be **prepared** for whatever life brings with Premera in your corner, just as we have been since 1962. You can be **confident** knowing you have access to **quality** care and plenty of ways to find it.

## to the last

When your needs do change, you can feel secure knowing you chose the right health plan to serve you best at all stages of your life.



## The benefits of Premera health plans



#### **Best-in-class** customer service\*

Our customer service team is here for you! They can help when the task is simple, such as finding an in-network doctor, or more complex, like managing a newly diagnosed medical condition.



#### Large nationwide network

Access a large nationwide network of more than 1.7 million doctors and hospitals.\*\* All plans are also supported by virtual care (telehealth) providers.

### Virtual care

If your doctor isn't available, you have options for care anytime, day or night. Speak to a nurse or consult a U.S. board-certified doctor by phone, video chat, or text. Doctors can consult with you and provide a diagnosis, if applicable. They can also prescribe most medicationssaving you a trip to the urgent care clinic or the emergency room.



#### Zero-cost preventive care

Annual exams, preventive vaccinations, and many cancer screenings are considered preventive care and are covered at 100%.

We want to hear from you! Call us with your questions about Premera SEBB health plans at 800-807-7310 (TRS: 711), Monday through Friday, 5 a.m. to 8 p.m. Pacific Time, or visit us at premera.com/sebb.



### Mental health

Feeling anxious, listless, or angry? Dealing with a mental health diagnosis or substance use disorder? With Premera, you have access to therapists and psychiatrists in-person, by video, and by text. Find out more.

#### Pharmacy benefits

Access to 63,000+ pharmacies across the country and copays as low as \$0 for preventive medications and devices. Use this guide to find out if your prescriptions are covered.

\*Eighty-nine percent of customers are very satisfied (top box response) with the call center representative, Premera Key Performance Indicators Report, August 2022.

\*\*The nationwide network applies to the Standard and High PPO plans only.

#### Personalized support from clinicians

Our personal health support clinicians work with members to facilitate recovery and treatment plans for chronic and complex conditions.



#### Get the care you need

Have back pain? Choose a back specialist you like. Need a massage? Go get one. No permission needed. With Premera HMO, you must choose providers within the Sherwood HMO Network. With the Standard PPO or High PPO plan, you can see providers in the broader Heritage Prime Network.

## Access to high-quality doctors and hospitals

Premera health plans are supported by a network of providers offering value and quality. Find out more about the networks that come with SEBB health plans below:

#### Heritage Prime network

Supporting the High PPO and Standard PPO plans

- Access to over 45,000 in-network providers across the state
- Access to a large nationwide network of more than 1.7 million doctors and hospitals
- Coverage while traveling across the country and worldwide
- 24-hour access to nurses and U.S. board-certified doctors
- Major hospitals and medical systems in the Heritage Prime network include: Evergreen Health Medical Center, Harborview, Lourdes Medical Center, MultiCare Health System, Northwest Physicians Network, Overlake Hospital Medical Center, PeaceHealth, Seattle Cancer Care Alliance, Seattle Children's, SHC Medical Center, The Everett Clinic, The Polyclinic, UW Medicine, Virginia Mason

#### Sherwood HMO network

Supporting the Premera Blue Cross HMO plan (available in Pierce, Spokane, and Thurston counties only)

- Access to the MultiCare Health System, MultiCare Connected Care Network, MultiCare Rockwood Clinics, and Kinwell clinics in Washington state
- Nationwide emergency coverage
- 24-hour access to nurses and U.S. board-certified doctors
- Hospitals in the Sherwood HMO Network include: Allenmore Hospital, Auburn Medical Center, Covington Medical Center, Deaconess Hospital, Good Samaritan Hospital, Mary Bridge Children's Hospital, MultiCare Capital Medical Center, Seattle Children's, Tacoma General Hospital, Valley Hospital

**Explore the Premera Blue Cross HMO.** 

### PROVIDING 24-HOUR

ACCESS TO CARE

### ACCESS TO Nationwide Emergency Coverage

To search a full list of providers in either the Heritage Prime or Sherwood HMO networks, visit premera.com/sebb.

CURRENTLY THE HEALTH PLAN FOR

66,000

SEBB MEMBERS ACROSS THE STATE

PREMERA HEALTH PLANS ARE BACKED BY THE

Blue Cross **Blue Shield** ASSOCIATION

SUPPORTING SCHOOL **EMPLOYEES FOR** 

YEARS

## Health plan checklist

Choosing the right health plan is critical. Use this handy guide to help you select a School Employees Benefits Board (SEBB) health plan:

Premera is here to make your plan selection simple and easy. Contact us with questions about Premera SEBB health plans at **800-807-7310** (TRS: 711), Monday through Friday, 5 a.m. to 8 p.m. Pacific Time, or visit **premera.com/sebb**.

#### Location, location, location

Pick a plan based on the county where you live OR where you work.

#### Individual or family coverage

Do you plan to cover only yourself or your whole family? This will affect your monthly premium contribution.

#### In-network doctors

Is your current doctor in network? Check if your primary care provider and local hospital are in network with the health plan you are considering.

#### Pharmacy coverage

Do you take medications regularly? It's important to understand the pharmacy benefit connected to the health plan.

#### Monthly premium contribution

Would you rather pay more on your monthly premium or more when you need care? Some plans cost more each month but have a lower deductible and/or costs when you need care.

#### Out-of-state coverage

Are you covering dependents living out of state, or do you like to travel during school breaks? Make sure you pick a plan that provides a broad nationwide network of doctors and hospitals. Note: The Premera Blue Cross HMO does not provide coverage nationwide, except for emergency care.

# What's new for 2023– Key plan changes

#### Introducing Premera HMO Core Plus, a health maintenance organization plan

#### PREMERA 🔯 HMO

The Premera Blue Cross HMO plan is centered around you and your whole health. The HMO plan will replace Peak Care starting January 1, 2023. It offers the same great providers, like MultiCare, plus many more including Kinwell, a new primary care clinic exclusive to Premera health plan members like you.

If you had Peak Care in 2022, relax, you don't have to do a thing. Unless you select another SEBB medical plan for 2023, you will automatically be moved to the HMO plan AND you can keep all the providers you're used to. Plus, you'll have a lower monthly premium.

#### All plans offer expanded alternative care benefits

Benefit limits are doubling for massage, chiropractic care, and acupuncture. Starting in 2023, you'll be able to get:

24 visits annually for **massage** 

24 visits annually for **chiropractic care** 

Get ready to say "Ahhh..."

#### New in-network primary care clinics

### 🔂 Kınwell

Premera has teamed up with Kinwell to improve access to primary care in Washington. Kinwell primary care clinics across the state will exclusively serve Washingtonians with a Premera health plan, including SEBB members.

24 visits annually for **acupuncture** 

In the Spokane area, Vivacity Care Centers are now part of **Kinwell**.

#### **2023 PLAN OPTIONS**

	Standard PPO Plan \$49 / \$98 / \$86 / \$147		High PPO Plan \$97 / \$194 / \$170 / \$291		HMO Plan \$25 / \$50 / \$44 / \$75	
<b>Ionthly employee (emp) premium contribution</b> mployee only / Employee+Spouse* /						
mployee+Child(ren) / Employee+Spouse*+Child(ren)	In network	Out of network	In network	Out of network	In network	Out of network
nnual medical deductible: per calendar year (PCY), Individual / Family	\$1,250 / \$3,125	\$2,000 / \$5,000	\$750 / \$1,875	\$1.500 / \$3.750	\$750 / \$1500	
insurance: amount you pay after your deductible is met	20%	50%	25%	50%	20%	
t-of-pocket maximum (OOP max): Individual / Family						
ludes deductible, coinsurance, and copays	\$5,000 / \$10,000	Unlimited	\$3,500 / \$7,000	Unlimited	\$3,500 / \$7,000	
fice visit copay: includes naturopathy services (deductible waived)	\$25 copay nonspecialist / \$50 copay specialist	Deductible, then 50%	\$25 copay nonspecialist / \$50 copay specialist	Deductible, then 50%	\$10 copay PCP / \$40 copay specialist	
gent care	Deductible, then 20%		Deductible, then 25%		\$25 copay	Not covered
r <b>tual care</b> (deductible waived) General medical and dermatology Behavioral health	\$5 copay \$25 copay nonspecialist	Not covered	\$5 copay \$25 copay nonspecialist	Not covered	\$5 copay \$10 copay	
ernative care						
Spinal manipulation: 24 visits PCY						
Acupuncture: 24 visits PCY	\$25 copay per visit	Deductible, then 50%	\$25 copay per visit	Deductible, then 50%	\$10 copay per visit	
lassage therapy: 24 visits PCY						
nergency services imergency care (copay waived if directly admitted to an apatient facility)	\$150 copay, then deductible, then 20%	\$150 copay, then deductible, then 20%	\$150 copay, then deductible, then 25%	\$150 copay, then deductible, then 25%	\$150 copay, then deductible, then 20% \$	150 copay, then deductible, the
mbulance transportation (air and ground)	Deductible, then 20%	Deductible, then 20%	Deductible, then 25%	Deductible, then 25%	Deductible, then 20%	Deductible, then 20%
spitalization						
ipatient and outpatient services rgan and tissue transplants	Deductible, then 20%		Deductible, then 25%		Deductible, then 20%	
ental health and substance use disorder services, cluding behavioral health Office visit	\$25 copay nonspecialist		\$25 copay nonspecialist		\$10 copay	
npatient and outpatient hospital: mental/behavioral health	Deductible, then 20%		Deductible, then 25%		Deductible, then 20%	
nabilitative and habilitative services and devices		-		-		
patient: Physical, speech, occupational (45 days combined PCY); eurodevelopmental therapy (45 days PCY)	Deductible, then 20%	Deductible, then 50%	Deductible, then 25%	Deductible, then 50%	Deductible, then 20%	Not covered
Dutpatient: Physical, speech, occupational (45 visits combined PCY); Neurodevelopmental therapy (45 visits PCY)	\$50 copay specialist		\$50 copay specialist		\$40 copay specialist	
urable medical equipment	Deductible, then 20%		Deductible, then 25%		Deductible, then 20%	
<b>poratory services:</b> Minor includes x-ray, pathology, imaging/ gnostic, standard ultrasound, major imaging includes MRI, CT, PET	Deductible, then 20%		Deductible, then 25%		Basic: \$75 copay Major: \$150 copay	
eventive and wellness services						
creenings	\$0	Not covered	\$0	Not covered	\$0	
xams and vaccinations	· · · · · · · · · · · · · · · · · · ·					
nual prescription deductible (PCY), Individual / Family	\$250 / \$750	\$250 / \$750	\$125 / \$312	\$125 / \$312	\$0 (No Rx deductible)	\$0 (No Rx deductible)
scription drugs	Applies to medical OOP max for		Applies to medical OOP max for		Applies to medical OOP max for	
ail and specialty: 30-day supply/ il order: 90-day supply	in-network prescriptions. The member pays the difference when requesting a		in-network prescriptions. The member pays the difference when requesting a		in-network prescriptions. The member pays the difference when requesting a	
	brand-name drug.		brand-name drug.		brand-name drug.	
eferred generic	\$9 / \$18 copay (deductible waived)		\$9 / \$18 copay (deductible waived)		\$9 / \$18 copay (deductible waived)	
eferred brand	30%	Cost share, then 40% (to allowable amount)	\$40 / \$80 copay	Cost share, then 40% (to allowable amount)	\$40 / \$80 copay	Cost share, then 40% (to allowable amount)
referred specialty (30-day supply; mail order only)	40%		\$75 copay		\$75 copay	(to allowable amount)
Ion-preferred drugs	50%	Not covered for mail order	50%	Not covered for mail order	50%	Not covered for mail orde
rug list (view full E4 drug list at premera.com/sebb)	E4	E4	E4	E4	E4	E4
ns available in these counties:	Adams, Asotin, Benton, Chelan, Clallam, Columbia, Cowlitz, Ferry, Franklin, Garfield, Grant, Grays Harbor, Jefferson, King, Kitsap, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, and Yakima		Adams, Asotin, Benton, Chelan, Clallam, Columbia, Cowlitz, Ferry, Franklin, Garfield, Grant, King, Kitsap, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pend Oreille, Pierce, Skagit, Skamania, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, and Yakima		Pierce, Spokane, and Thurston	

Find out more about Premera SEBB health plans: Visit **premera.com/sebb** for complete benefit highlights, Summary of Benefits and Coverage (SBC), and benefits booklets.

Monthly premium contribution information can be found at **hca.wa.gov/sebb-employee**.

This is not a complete explanation of covered services, exclusions, limitations, reductions or the terms under which the program may be continued in force. This benefit highlight is not a contract. For full coverage provisions, including a description of waiting periods, limitations, and exclusions please refer to the benefit booklets or call customer service.

PCY = per calendar year; OOP = out-of-pocket

## Rx benefits when and where you need them

All Premera SEBB health plans come with access to a large number of in-network pharmacies. Key pharmacy benefits include:

### Zero-cost preventive medications and devices

Preventive medications, including breast cancer prevention drugs, cholesterol medications, vitamins, contraception, smoking cessation, and digestive regimens are covered in full for Premera members.

### Access to a large network of retail and mail-order pharmacies

Our large pharmacy network makes it easy to get your medications nationwide. Plus, mail-order services deliver your medications to your door and at a fair price.

#### **Covered prescriptions**

Our pharmacy benefit provides access to a large variety of affordable and safe medications for all conditions.

### The Premera specialty pharmacy program

Premera delivers your specialty medication promptly to your door, while also giving you access to a clinical pharmacist who specializes in your condition. They can help you with any questions you may have about your medication.

## Premera in your pocket

Premera makes healthcare easier with one app for your plan details and another app for on-demand virtual care.

#### Premera health plan app

Easy, convenient, on-the-go access to your health plan info:

- Track your claims
- Show your digital ID card
- Find in-network providers
- View your individual and family medical costs



### Current member?

Download the Premera app now.



Google Play and the Google Play logo are trademarks of Google Inc.

#### Premera MyCare app

Why wait to feel better when you have 24/7 access to all your virtual care providers, including for:

- Primary care
- Urgent care
- Mental health
- Substance use
   treatment
- Diabetes and hypertension management

### Current member? Download Premera MyCare now.





## Supporting our community



#### We invest in Washington to:

- Improve health in rural areas
- Destigmatize behavioral health concerns
- Combat homelessness

The Premera Social Impact Program has helped bridge gaps in community care by supporting groups underserved due to race, ethnicity, gender, geographic distance, and economics.

We are honored to be in your corner in good times and tough times.











#### FREE COVID Vaccine Mobile Clinic

Saturday, July 31 10 a.m. to 2 p.m.

Tukwila Pantry 3118 S. 140th Street, Tukwila, WA

PREMERA

Walgreens

premera.com/sebb





Independent Licensees of the Blue Cross Blue Shield Association

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#### Language Assistance

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-807-7310 (TRS: 711). 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 800-807-7310 (TRS: 711) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 800-807-7310 (TRS: 711). 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 800-807-7310 (TRS: 711) 번으로 전화해 주십시오. ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 800-807-7310 (служба коммутируемых сообщений: 711). PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 800-807-7310 (TRS: 711). УВАГА! Якщо ви розмовляете українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 800-807-7310 (служба комутованих повідомлень: 711). ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាងំនួយផ្នែកភាសា ដោយមិនកិតឈ្លួល ក៏អាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 800-807-7310 (TRS: 711)។ 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。800-807-7310(TRS:711)まで、お電話にてご連絡ください。 ማስታወሻ: የሚናንሩት ቋንቋ ኣማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 800-807-7310 (በስልከ ማንናኛ አንልግሎት: 711). XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 800-807-7310 (TRS: 711). ملحوظة. إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 2010-808 (رقم خدمة ترحيل الاتصالات للصم والبكم. 211). ਧਿਆਨ ਦਿਓ: ਜੇ ਤਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤਹਾਡੇ ਲਈ ਮਫਤ ਉਪਲਬਧ ਹੈ। 800-807-7310 (TRS: 711) 'ਤੇ ਕਾਲ ਕਰੇ। ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 800-807-7310 (TRS: 711). ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 800-807-7310 (TRS: 711). ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 800-807-7310 (TRS: 711). ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 800-807-7310 (SRT : 711). UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 800-807-7310 (TRS: 711). ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 800-807-7310 (TRS: 711). ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 800-807-7310 (TRS: 711).

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**Discrimination is against the law.** Premera Blue Cross (Premera) complies with applicable Federal and Washington state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. Premera provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information written in other languages. If you need these services, contational origin, age, disability, sex, gender identity, or sexual orientation. Premera provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written in other languages. If you need these services, contact the Civil Rights Coordinator. If you believe that Premera 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: Civil Rights Coordinator — Complaints and Appeals, PO Box 91102, Seattle, WA 98111, Toll free: 855-332-4535, Fax: 425-918-5592, TRS: 711, Email <u>AppealsDepartmentInquiries@Premera.com</u>. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, 200 Independence Ave SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-800-386-1019, 800-537-7697 (TDD). Complaint of the Insurance Commissioner complaint Portal available at <u>http://www.hs.gov/cor/office/file/index.html</u>. You can also file a civil rights complaint writh the Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner, electronically through the Office or file complaint-or-check-your-complaint-status, or by phone at 800-562-6900, 360-586-0241 (TDD). Complain

#### Language Assistance

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-807-7310 (TRS: 711). 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 800-807-7310 (TRS:711) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 800-807-7310 (TRS: 711). 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 800-807-7310 (TRS: 711) 번으로 전화해 주십시오. ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 800-807-7310 (служба коммутируемых сообщений: 711). PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 800-807-7310 (TRS: 711). УВАГА! Якщо ви розмовляете українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 800-807-7310 (служба комутованих повідомлень: 711). ប្រយ័ត្ន៖ បើសិនងាអ្នកនិយាយ ភាសាខ្មែរ, សេវាងំនួយផ្នែកភាសា ដោយមិនភិកឈ្លួល ភីអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 800-807-7310 (TRS: 711)។ 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。800-807-7310(TRS:711)まで、お電話にてご連絡ください。 ማስታወሻ፦ የሚናንፉት ቋንቋ ኣማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግነዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 800-807-7310 (በስልከ ማንናኛ አንልግሎት: 711). XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 800-807-7310 (TRS: 711). ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 7310-807 (وقم خدمة ترحيل الاتصالات للصم والبكم: 711). ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 800-807-7310 (TRS: 711) 'ਤੇ ਕਾਲ ਕਰੋ। ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 800-807-7310 (TRS: 711). ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 800-807-7310 (TRS: 711). ATANSYON: Si w pale Kreyòl Avisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 800-807-7310 (TRS: 711). ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 800-807-7310 (SRT : 711). UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 800-807-7310 (TRS: 711). ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 800-807-7310 (TRS: 711). ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 800-807-7310 (TRS: 711). **توجه**: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با (TRS: 711) (TRS تماس بگیرید. 054047 (07-01-2021)