



<Plan Year> <Group Name>
<Packet Code>

Hello!

We're here to make this a smooth transition to Medicare and answer all your questions so you have time for the things to stay healthy for – traveling, chasing grandkids, starting a new hobby. At the end of the day, a reliable partner in your health makes all the difference. Use this booklet to get to know your HealthPartners Medicare plan offered through your employer:

Ready to enroll?

Send in your completed enrollment form. Keep in mind:

- You or your authorized representative must fill it out and sign it.
- You and your spouse need two separate forms.
- We'll need it by the last business day of the month or up to 3 months before the month you want your coverage to start. For example, if you want coverage to start Feb. 1, 2024, we would need your completed form by Jan. 31, 2024, at the very latest.
- Return your form within 30 days after you sign it. Otherwise, we'll have to send it back. We'll also return incomplete forms or call if we have questions.

Enroll now! Skip the paper and apply online. Go to **HealthPartners.com/DakotaCountyMedicare** where you can view plan information and enroll.

Have questions along the way?

Give us a call at **952-883-7428** or **866-993-7428** (TTY: **711**). From Oct. 1 through March 31, we take calls from 8 a.m. to 8 p.m. CT, seven days a week. (With the exception of some federal holidays.)

From April 1 to Sept. 30, call us 8 a.m. to 8 p.m. CT, Monday through Friday. (With the exception of some federal holidays.)

Sincerely,

Your HealthPartners Medicare Team

HealthPartners is a PPO plan and PDP with a Medicare contract. Enrollment in HealthPartners depends on contract renewal.

H4882 S1822_003902_M IR 09/2023

Dakota County #3227 Cvr Ltr 2024

HealthPartners® Medicare Group Solution 2024 Summary of Benefits

Jan. 1, 2024 – Dec. 31, 2024
Dakota County #3227

HealthPartners® Journey Group (PPO) Plan HealthPartners® Retiree National Choice (PDP) Plan

Use this summary document to get to learn about the Medicare Group Solution, which plan you are eligible to enroll in, what is covered and what you pay for those services. It doesn't list everything we cover, or every limitation or exclusion. For a complete list of covered services and how much you pay, give us a call at one of the numbers below and ask for the Evidence of Coverage or Group Certificate.

We're here to help

Call us at **952-883-7428** or **866-993-7428**
(TTY **711**)

Oct. 1 through March 31: 8 a.m. to 8 p.m. CT, seven days a week.
April 1 through Sept. 30: 8 a.m. to 8 p.m. CT, Monday through Friday.

The **HealthPartners Medicare Group Solution** brings together your medical and Part D prescription drug coverage. To be eligible you must be enrolled in the Federal Medicare Program for Part A (hospital coverage) AND Part B (medical coverage), live in the plan's service area, and meet other eligibility criteria determined by your employer group.

The HealthPartners Medicare Group Solution plan you are eligible for is based on your county of residence. The coverage under each plan is designed to be the same and there are some differences in how the plans work. These differences are highlighted below.

<p>If you live in the following Minnesota counties, you are eligible for the Journey Group (PPO) Plan.</p> <p>Service area: Aitkin, Anoka, Becker, Beltrami, Benton, Big Stone, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Clearwater, Cook, Cottonwood, Crow Wing, Dakota, Douglas, Grant, Hennepin, Hubbard, Isanti, Itasca, Jackson, Kanabec, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnommen, Marshall, McLeod, Meeker, Mille Lacs, Morrison, Murray, Nobles, Norman, Otter Tail, Pennington, Pine, Pipestone, Polk, Pope, Ramsey, Red Lake, Redwood, Renville, Rice, Rock, Roseau, Scott, Sherburne, Sibley, Stearns, Stevens, St Louis, Swift, Todd, Traverse, Wadena, Washington, Wilkin, Wright and Yellow Medicine.</p> <p>Journey Group Plan You'll receive one member ID card after you enroll, and HealthPartners will administer all of your Medicare coverage – medical and Part D prescription drug coverage.</p> <p>Note: For medical services you can see any provider that is eligible to participate in Medicare. The plan does have a network of contracted providers but for medical services, your in-network and out-of-network benefits are the same.</p>	<p>If you live in the following Minnesota counties OR outside of Minnesota, you are eligible for the Retiree National Choice (PDP) Plan.</p> <p>Service Area: Blue Earth, Brown, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, Martin, Mower, Nicollet, Olmsted, Steele, Wabasha, Waseca, Watonwan, Winona AND all other U.S. States and Puerto Rico.</p> <p>Retiree National Choice Plan (RNC) You'll receive two member ID cards from HealthPartners after you enroll. One is for your medical coverage and the other is for your Part D prescription drug coverage. For medical services present your Original Medicare and HealthPartners medical ID card. Medicare is primary and HealthPartners will coordinate with Original Medicare. When you get services, the provider will bill Medicare first and then HealthPartners.</p> <p>Note: For medical services you can see any provider that is eligible to participate in Medicare. If you need assistance locating a provider, please call our Member Services number.</p>
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Once you are enrolled in Journey Group or RNC and your plan is effective you can access your 2024 plan materials by logging in on your *myHealthPartners* account at **healthpartners.com**. If you're signed up for paperless delivery, we'll send you an email when your plan materials are available for viewing. This includes your Evidence of Coverage, provider directory (if applicable), pharmacy directory and formulary.

The information in this document is not a complete description of benefits. Call 952-883-7428 or 866-993-7428; TTY: 711 for more information.

MEDICAL BENEFITS

BENEFITS	DESCRIPTION	WHAT YOU PAY
Monthly Premium: Contact your employer for premium information. If you're billed directly by HealthPartners, call us at the numbers on the front page for your premium information.		
Deductible	What you pay out of pocket for services before your plan begins to pay	Your plan doesn't have a deductible.
Maximum out-of-pocket (does not include Part D)	The most you'll pay for covered services during the plan year. Not all services apply. Please see the plan's EOC or Group Certificate for details.	\$3,400 Journey Group: combined in- and out-of-network RNC: no network
Hospital		
Inpatient hospital coverage ¹		\$200 per stay
Outpatient hospital coverage	Observation stay and non-surgical services	\$0
	Outpatient surgery ¹	\$150
Ambulatory surgery center (ASC) ¹		\$150
Doctor Visits and Preventive Care		
Primary	Includes virtual consultation, diagnosis, and treatment via video visits	\$10
Specialist		\$25
Additional telehealth services	Includes scheduled telephone visits, e-visits, and online clinic visits, including Virtuwell®*	\$0 - \$25
Preventive care	Medicare-covered services includes "Welcome to Medicare" preventive visit (one-time), annual wellness visit, certain screenings and counseling visits, immunizations for pneumonia and influenza and other Medicare-covered preventive services	\$0
	Routine physical exams (once a year)	\$0
Emergency and Urgent Care		
Emergency care	In U.S./Worldwide	\$75 / 20%
Urgently needed services	In U.S./Worldwide	\$25 / 20%
Outpatient Diagnostic Test, Radiation Therapy, X-rays, and Labs		
Diagnostic services/Labs/Imaging (Cost for these services may vary based on place of service.)	Diagnostic Radiology (MRI, CT, PET) ¹	\$0
	Labs	\$0
	Diagnostic tests and procedures	\$0
	X-rays	\$0
	Therapeutic radiology ¹	\$0

¹ Provider authorization may be required for certain services.

*Virtuwell® online diagnosis and treatment is available in the following states – Arizona, California, Colorado, Connecticut, Iowa, Michigan, Minnesota, New York, North Dakota, Pennsylvania, South Dakota, Virginia, and Wisconsin. You must live in one of the states that Virtuwell® operates in or be traveling to one of these states to use our service.

BENEFITS	DESCRIPTION	WHAT YOU PAY
Hearing / Vision		
Hearing services	Routine exam	\$0
	Diagnostic exam	\$25
	Hearing aids through TruHearing®	\$99/\$199/\$499 per aid; one per ear annually
Vision services	Routine exam	\$0
	Diagnostic exam	\$25
	Glasses or contact lenses after cataract surgery	\$0
Dental Services		
Medicare-covered	Medicare-covered non-routine dental	\$0
Preventive	2 cleanings, 2 exams, 1 x-ray annually	\$10
Mental Health Services		
Outpatient therapy	Individual	\$10
	Group	\$5
Inpatient visit		\$200 per stay
Skilled Nursing Facility (SNF)/ Rehabilitation Services		
Skilled nursing facility	The plan covers up to 100 days in a SNF Journey Group: 3-day hospital stay waived RNC: 3-day hospital stay required	Journey Group: \$0 RNC: \$0
Rehabilitation services	Physical therapy	\$25
	Occupational therapy	\$25
	Speech and language therapy	\$25
Medical Transportation		
Ambulance	Cost per one-way trip; Air/Ground in U.S.	\$0
Other transportation	Non-emergency services	Not covered
Medicare Part B Drugs		
Medicare Part B drugs ¹	Chemotherapy and other drugs that must be administered by a health professional ²	\$0
	Insulin ³ (used in a pump)	\$0

¹ Provider authorization may be required for certain services.

² You may pay less for certain drugs on the CMS rebate list.

³ You will pay no more than \$35 for a one-month supply.

This plan may not cover all of your health care expenses. It's important to read your Evidence of Coverage or Group Certificate closely to see which expenses are covered.

PRESCRIPTION DRUG BENEFITS

The costs listed below are what you pay at in-network pharmacies. Generally, you have to use network pharmacies to fill your prescription meds. Costs may change depending on your pharmacy and when you enter a new Part D phase.

If you reside in a long-term care facility, you pay the same as at a retail pharmacy. You may get drugs from an out-of-network pharmacy at the same cost as an in-network pharmacy.

Prescription Drug Formulary	Your prescription drug formulary is Medicare Formulary II												
Phase 1: Deductible	You plan does not have a deductible.												
Phase 2: Initial Coverage	What you pay at standard retail and standard mail order pharmacies:												
	<table border="0"> <tr> <td>One-month supply</td> <td>Three-month supply</td> </tr> <tr> <td>Tier 1: \$15</td> <td>Tier 1: \$45</td> </tr> <tr> <td>Tier 2: \$15</td> <td>Tier 2: \$45</td> </tr> <tr> <td>Tier 3: \$30</td> <td>Tier 3: \$90</td> </tr> <tr> <td>Tier 4: \$60</td> <td>Tier 4: \$180</td> </tr> <tr> <td>Tier 5: 33%</td> <td>Tier 5: Not offered</td> </tr> </table>	One-month supply	Three-month supply	Tier 1: \$15	Tier 1: \$45	Tier 2: \$15	Tier 2: \$45	Tier 3: \$30	Tier 3: \$90	Tier 4: \$60	Tier 4: \$180	Tier 5: 33%	Tier 5: Not offered
One-month supply	Three-month supply												
Tier 1: \$15	Tier 1: \$45												
Tier 2: \$15	Tier 2: \$45												
Tier 3: \$30	Tier 3: \$90												
Tier 4: \$60	Tier 4: \$180												
Tier 5: 33%	Tier 5: Not offered												
Tier 1: Preferred Generic Tier 2: Generic Tier 3: Preferred Brand Drugs Tier 4: Non-preferred Brand Drugs Tier 5: Specialty	At preferred cost sharing mail order pharmacies, you get a three-month supply for the price of two months. You pay the same amount listed above for a one-month supply.												
Phase 3: Coverage Gap	The same cost-sharing applies to each tier in the Coverage Gap Phase as the Initial Coverage Phase.												
Phase 4: Catastrophic Coverage	\$0 after Catastrophic Threshold is met												
Insulin Coverage	You won't pay more than \$35 or the tier cost sharing if less than \$35 for a one-month supply of each insulin product covered by our plan. Not subject to any Part D deductible.												
Vaccine Coverage	Our plan covers most Part D vaccines at no cost to you. Not subject to any Part D deductible.												

ADDITIONAL BENEFITS

BENEFITS	DESCRIPTION	WHAT YOU PAY
Acupuncture	Medicare-covered	\$25
	Non-Medicare covered	\$25
Assist America	Emergency services and support when more than 100 miles from home or in a foreign country	Available
Chiropractic care	Medicare-covered	\$20
Fitness Benefit	SilverSneakers® Fitness Program Gym membership or one home kit per year	\$0
Immunizations	Pneumonia, Influenza, Hepatitis B, COVID-19	\$0
Medical equipment/ supplies ¹	Durable medical equipment (DME)	20%
	Prosthetics	20%
	Diabetic Supplies	20%
Travel Counseling	Health advice before traveling internationally	\$10

¹ Journey Group: Provider prior authorization may be required for certain services

ADDITIONAL PLAN INFORMATION

MAKE SURE YOUR DOCTORS AND PHARMACIES ARE COVERED

You can access your 2024 plan materials by logging in on your online account at healthpartners.com. If you're signed up for paperless delivery, we'll send you an email when your plan materials are available for viewing. This includes your Evidence of Coverage or Group Certificate, provider directory (if applicable), pharmacy directory and formulary.

KNOW ALL YOUR OPTIONS

You can get your Medicare coverage through an employer group-sponsored plan, like HealthPartners, or through Original Medicare. However, if you decide not to enroll in the employer group plan you may not be allowed to return or may have to wait until your employer group's next Open Enrollment Period. To learn more about what Original Medicare covers and what it costs, read through your "Medicare & You" handbook. Or, visit [medicare.gov](https://www.medicare.gov) to view it online. Want a hard copy? Call **800-MEDICARE (800-633-4227)** to get yours. They're available 24 hours a day, seven days a week. (TTY **877-486-2048**.)

For Journey Group, out-of-network providers are under no obligation to treat HealthPartners members, except in emergency situations. If you need assistance locating a provider, please call our Member Services number.

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HealthPartners® Medicare Group Solution

HealthPartners® Journey Group (PPO) Plan

HealthPartners® Retiree National Choice (PDP) Plan

HealthPartners and your employer make sure your health care needs are covered so you can get back to doing what you love.

Signing up is easy. Our Medicare experts will help you understand everything you need to know. They'll even walk you through step by step. Here are a few additional benefits and perks of being a HealthPartners member.

Get care anywhere

From home: Get unlimited visits to Virtuwell®, your 24/7 online clinic. It treats everyday medical conditions, like colds, coughs, ear pain and flu. Nurse practitioners give you personalized care, a treatment plan and, if needed, a prescription sent right to your pharmacy. Visit virtuwell.com to learn more.

Across the U.S.: You're covered nine months out of the year when you travel in the U.S. And, you get worldwide emergency and urgently needed care.

Stay active

With a SilverSneakers® membership, you'll have access to thousands of fitness locations nationwide – and you can visit as many as you'd like. Don't like the gym? Stream live, online classes or use on-demand workout videos from the comfort of home. Or join a SilverSneakers Community class at a nearby park or community center. All this at no additional cost to you. Learn more at silversneakers.com.

Travel with Assist America®

If something unexpected happens while you're more than 100 miles from home, you'll have

Assist America on your side – at no cost to you. Call 24/7 from anywhere in the world:

- Talk to experienced clinicians who can help you decide whether or not you need medical care
- Coordinate post-stabilization to the nearest facility or your home

Learn more at

healthpartners.com/getcareeverywhere.

Hearing aids through TruHearing

We partner with TruHearing® to offer a hearing aid benefit. You can get up to two hearing aids per year for a copayment per device. You'll also have a TruHearing consultant to answer your questions. Keep in mind, you must use TruHearing providers to use this benefit. Call TruHearing at **833-718-5803** (TTY: **711**) from 8 a.m. – 8 p.m. Monday through Friday to learn more or schedule an appointment.

Stay organized with online tools

Log on to your account at healthpartners.com to:

- Get your plan materials online. To sign up for paperless, visit healthpartners.com/green.
- Email questions about your benefits, eligibility or claims.
- Check your plan balances, including your deductible, out-of-pocket maximum and more.

Already a member of our HealthPartners family?

It's a seamless transition. You'll keep your same online account and member ID number. Plus, continue to get the same outstanding service you've come to know.

Get your meds your way

Skip the trip to the pharmacy with the HealthPartners preferred cost-sharing mail order pharmacy, WellDyne. Get most of your prescriptions delivered right to your door. There's no additional cost and shipping is free.

Typically, you can expect to get your meds within five to eight business days from the time the pharmacy gets your order.

Most HealthPartners members get a three-month supply of medicine for just two copays!

Head to healthpartners.com/mailtome to sign up. Or, call **800-591-0011** (TTY: **711**). You can also choose to get your medicines from one of our many in-network pharmacies.

Here are your next steps

Call our Medicare experts at **952-883-7428** or **866-993-7428** (TTY: **711**). From Oct. 1 through March 31, we take calls from 8 a.m. to 8 p.m. CT, seven days a week. You'll speak with a representative. From April 1 through Sept. 30, call us 8 a.m. to 8 p.m. CT, Monday through Friday to speak with a representative. On Saturdays, Sundays and Federal holidays, you can leave a message and we'll get back to you within one business day.

Get quick advice from our team of experts

Don't spend time searching the Web for answers. Call your personal support team:

- **CareLineSM Service:** To find out if you should see a doctor, ask questions about a medicine you're taking, or learn about home treatment options, call **612-339-3663** or **800-551-0859**.
- **Member Services:** For questions about your plan benefits, account balance or finding a doctor in your network, call **952-883-6655** or **866-233-8734**.
- **Nurse NavigatorSM Program:** For questions about your health care and benefits, or help choosing a treatment option, call Member Services and ask to talk to a Nurse Navigator.
- **Behavioral Health Navigators:** To find a mental or chemical health professional in your network, call Member Services and ask for a Behavioral Health Navigator.

Learn more at healthpartners.com/myteam.

For Journey members, Journey is a network plan. And even though it is a network plan, your in- and out-of-network cost-sharing is the same.

*Assist America services are only available during the first 90 consecutive days that you're away from your home and all arrangements must be made through Assist America.

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H4882 S1822_003816_M IR 09/2023

IMPORTANT INFORMATION:

2024 Medicare Star Ratings

Official U.S.
Government
Medicare
Information



HealthPartners - H4882

For 2024, HealthPartners - H4882 received the following Star Ratings from Medicare:

Overall Star Rating: ★★★★★

Health Services Rating: ★★★★★

Drug Services Rating: ★★★★★

Every year, Medicare evaluates plans based on a 5-star rating system.

Why Star Ratings Are Important

Medicare rates plans on their health and drug services.

This lets you easily compare plans based on quality and performance.

Star Ratings are based on factors that include:

- Feedback from members about the plan's service and care
- The number of members who left or stayed with the plan
- The number of complaints Medicare got about the plan
- Data from doctors and hospitals that work with the plan

More stars mean a better plan – for example, members may get better care and better, faster customer service.

The number of stars show how well a plan performs.

- ★★★★★ EXCELLENT
- ★★★★☆ ABOVE AVERAGE
- ★★★☆☆ AVERAGE
- ★★☆☆☆ BELOW AVERAGE
- ★☆☆☆☆ POOR

Get More Information on Star Ratings Online

Compare Star Ratings for this and other plans online at [medicare.gov/plan-compare](https://www.medicare.gov/plan-compare).

Questions about this plan?

Contact HealthPartners 7 days a week from 8:00 a.m. to 8:00 p.m. Central time at 866-993-7428 (toll-free) or 711 (TTY), from October 1 to March 31. Our hours of operation from April 1 to September 30 are Monday through Friday from 8:00 a.m. to 8:00 p.m. Central time. Current members please call 866-233-8734 (toll-free) or 711 (TTY).

HealthPartners is a PPO plan with a Medicare contract. Enrollment in HealthPartners depends on contract renewal.

IMPORTANT INFORMATION:

2024 Medicare Star Ratings

Official U.S.
Government
Medicare
Information



HealthPartners - S1822

For 2024, HealthPartners - S1822 received the following Star Ratings from Medicare:

Overall Star Rating: ★★★★★
Health Services Rating: Service not offered
Drug Services Rating: ★★★★★

Every year, Medicare evaluates plans based on a 5-star rating system.

Why Star Ratings Are Important

Medicare rates plans on their health and drug services.

This lets you easily compare plans based on quality and performance.

Star Ratings are based on factors that include:

- Feedback from members about the plan's service and care
- The number of members who left or stayed with the plan
- The number of complaints Medicare got about the plan
- Data from doctors and hospitals that work with the plan

More stars mean a better plan – for example, members may get better care and better, faster customer service.



This plan got
**MEDICARE'S
HIGHEST
RATING** (5 stars)

The number of stars show how well a plan performs.

- ★★★★★ EXCELLENT
- ★★★★☆ ABOVE AVERAGE
- ★★★☆☆ AVERAGE
- ★★☆☆☆ BELOW AVERAGE
- ★☆☆☆☆ POOR

Get More Information on Star Ratings Online

Compare Star Ratings for this and other plans online at [medicare.gov/plan-compare](https://www.medicare.gov/plan-compare).

Questions about this plan?

Contact HealthPartners 7 days a week from 8:00 a.m. to 8:00 p.m. Central time at 866-993-7428 (toll-free) or 711 (TTY), from October 1 to March 31. Our hours of operation from April 1 to September 30 are Monday through Friday from 8:00 a.m. to 8:00 p.m. Central time. Current members please call 877-816-9539 (toll-free) or 711 (TTY).

HealthPartners Retiree National Choice is a PDP with a Medicare contract. Enrollment in HealthPartners depends on contract renewal.

Multi-Language Insert

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-233-9645. Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-233-9645. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-233-9645。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-233-9645。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-800-233-9645. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-233-9645. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-233-9645 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-233-9645. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-233-9645 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-233-9645. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-800-233-9645. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-233-9645 पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-233-9645. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-233-9645.irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-233-9645. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-233-9645. Ta usługa jest bezpłatna.

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