

Oberlin College

Group Number – 590467

2024 Annual Notice of Changes

MedMutual Advantage PPO Plan

MedMutual Advantage PPO offered by Medical Mutual of Ohio (Medical Mutual)

Annual Notice of Changes for 2024

You are currently enrolled as a member of MedMutual Advantage PPO. Next year, there will be changes to the plan's costs and benefits. *Please see page 4 for a Summary of Important Costs.*

This document tells about the changes to your plan. To get more information about costs, benefits, or rules please review the *Evidence of Coverage*, which is located on our website at MedMutual.com/MAgroup. You may also call Customer Care to ask us to mail you an *Evidence of Coverage*.

 You can make changes to your Medicare coverage for next year during your group's open enrollment period.

What to do now

| ii iteiti viinon onangoo appiy to you | 1. | ASK: Which | changes apply to you | |
|---------------------------------------|----|-------------------|----------------------|--|
|---------------------------------------|----|-------------------|----------------------|--|

- ☐ Check the changes to our benefits and costs to see if they affect you.
 - Review the changes to Medical care costs (doctor, hospital).
 - Think about how much you will spend on premiums, deductibles, and cost sharing.
- Check to see if your primary care doctors, specialists, hospitals and other providers will be in our network next year.
- Think about whether you are happy with our plan.
- 2. CHOOSE: Decide whether you want to change your plan
 - If you don't join another plan during your group's open enrollment period, you will stay in MedMutual Advantage PPO.
 - To change to a **different plan**, you can switch plans during your group's open enrollment period.
 - If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can switch plans or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

Additional Resources

- Please contact our Customer Care number at 1-800-801-4823 for additional information. (TTY users should call 711.) Hours are 8 a.m. to 8 p.m. seven days a week from October 1 through March 31 (except Thanksgiving and Christmas), and 8 a.m. to 8 p.m. Monday through Friday from April 1 through September 30 (except holidays). Our automated telephone system is available 24 hours a day, seven days a week for self-service options. This call is free.
- This document is available in alternate formats (e.g., braille, large print, audio).
- Coverage under this Plan qualifies as Qualifying Health Coverage (QHC) and satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information.

About MedMutual Advantage PPO

- MedMutual Advantage PPO is a PPO plan offered by Medical Mutual of Ohio with a Medicare contract. Enrollment in the MedMutual Advantage PPO plan depends on contract renewal.
- When this document says "we," "us," or "our," it means Medical Mutual of Ohio (Medical Mutual). When it says "plan" or "our plan," it means MedMutual Advantage PPO.

Annual Notice of Changes for 2024 <u>Table of Contents</u>

| Summary of | Important Costs for 2024 | 4 |
|-------------------|--|----|
| SECTION 1 | Changes to Benefits and Costs for Next Year | 5 |
| Section 1.1 | Changes to the Monthly Premium | 5 |
| Section 1.2 | Changes to Your Maximum Out-of-Pocket Amounts | 5 |
| Section 1.3 | Changes to the Provider Network | 6 |
| Section 1.4 | Changes to benefits and costs for medical services | 6 |
| SECTION 2 | Administrative Changes | 7 |
| SECTION 3 | Deciding Which Plan to Choose | 9 |
| Section 3.1 | If you want to stay in MedMutual Advantage PPO | 9 |
| Section 3.2 | If you want to change plans | 9 |
| SECTION 4 | Deadline for Changing Plans | 9 |
| SECTION 5 | Programs That Offer Free Counseling about Medicare | 10 |
| SECTION 6 | Programs That Help Pay for Prescription Drugs | 10 |
| SECTION 7 | Questions? | 11 |
| Section 7.1 | Getting Help from MedMutual Advantage PPO | 11 |
| Section 7.2 | Getting Help from Medicare | 11 |
| APPENDIX 1 | State Health Insurance Assistance Programs (SHIPs) | 12 |
| APPENDIX 2 | AIDS Drug Assistance Programs (ADAPs) | 19 |

Summary of Important Costs for 2024

The table below compares the 2023 costs and 2024 costs for MedMutual Advantage PPO in several important areas. **Please note this is only a summary of costs.**

| Cost | 2023 (this year) | 2024 (next year) |
|---|---|---|
| Monthly plan premium | Your group is responsible for paying your plan premium. If you are responsible for any contribution to the premium, your group's benefit administrator will let you know the amount you owe and how to pay. | Your group is responsible for paying your plan premium. If you are responsible for any contribution to the premium, your group's benefit administrator will let you know the amount you owe and how to pay. |
| Deductible | \$500 | \$500 – except for insulin furnished through an item of durable medical equipment. |
| Maximum out-of-pocket | From network providers: \$3,000 | From network providers: \$3,000 |
| amounts This is the most you will pay out-of-pocket for your covered Part A and Part B services. (See Section 1.2 for details.) | From network and out-of- network providers combined: \$3,000 | From network and out-of- network providers combined: \$3,000 |
| Doctor office visits | In Network and Out of Network Primary care visits: 15% of the total cost per visit | In Network and Out of Network Primary care visits: 15% of the total cost per visit |
| | Specialist visits: 15% of the total cost per visit | Specialist visits: 15% of the total cost per visit |
| Inpatient hospital stays | In Network and Out of Network Day 1 and thereafter: After the \$500 deductible is met, you pay 15% of the total cost. | In Network and out of Network Day 1 and thereafter: After the \$500 deductible is met, you pay 15% of the total cost. |

SECTION 1 Changes to Benefits and Costs for Next Year

Section 1.1 Changes to the Monthly Premium

| Cost | 2023 (this year) | 2024 (next year) |
|---|---|---|
| Monthly premium (You must also continue to pay your Medicare Part B premium.) | Your group is responsible for paying your plan premium. If you are responsible for any contribution to the premium, your group's benefit administrator will let you know the amount you owe and how to pay. | Your group is responsible for paying your plan premium. If you are responsible for any contribution to the premium, your group's benefit administrator will let you know the amount you owe and how to pay. |

Section 1.2 Changes to Your Maximum Out-of-Pocket Amounts

Medicare requires all health plans to limit how much you pay out-of-pocket for the year. These limits are called the maximum out-of-pocket amounts. Once you reach this amount, you generally pay nothing for covered Part A and Part B services for the rest of the year.

| Cost | 2023 (this year) | 2024 (next year) |
|---|------------------|--|
| In-network maximum out- of-pocket amount Your costs for covered medical services (such as copays and deductibles) from network providers count toward your in- network maximum out-of-pocket amount. Your plan premium does not count toward your maximum out-of-pocket amount. | \$3,000 | \$3,000 (No change from 2023) Once you have paid \$3,000 out-of-pocket for covered Part A and Part B services from network providers, you will pay nothing for your covered Part A and Part B services from network providers for the rest of the calendar year. |
| Combined maximum out- of-pocket amount Your costs for covered medical services (such as copays and deductibles) from in-network and out-of- network providers count toward your combined maximum out-of-pocket amount. Your plan premium does not count toward your maximum out-of-pocket amount. | \$3,000 | \$3,000 (No change from 2023) Once you have paid \$3,000 out-of-pocket for covered Part A and Part B services, you will pay nothing for your covered Part A and Part B services from in-network or out-of- network providers for the rest of the calendar year. |

Section 1.3 Changes to the Provider Network

Updated directories are located on our website at MedMutual.com/MAgroup. You may also call Customer Care for updated provider information or to ask us to mail you a *Provider Directory*, which we will mail within three business days.

There are changes to our network of providers for next year. Please review the 2024 Provider Directory to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network.

It is important that you know that we may make changes to the hospitals, doctors and specialists (providers) that are part of your plan during the year. If a mid-year change in our providers affects you, please contact Customer Care so we may assist.

Section 1.4 Changes to benefits and costs for medical services

We are making changes to costs and benefits for certain medical services next year. The information below describes these changes.

| Cost | 2023 (this year) | 2024 (next year) |
|--|---|--|
| Partial hospitalization and Intensive outpatient services | After the \$500 deductible is met, you pay 15% of the total cost for each | In Network and Out of Network After the \$500 deductible is met, you pay 15% of the total cost for each covered partial hospitalization visit or intensive outpatient service visit. |

SECTION 2 Administrative Changes

The chart below shows some additional changes.

| Description | 2023 (this year) | 2024 (next year) |
|---|--|--|
| Claim form URL See Chapter 5, Section 2 of your Evidence of Coverage for details. | Either download a copy of the form from our website (MedMutual.com/MAgroup) or call Customer Care and ask for the form. | Either download a copy of the form from our website (MedMutual.com/Member) or call Customer Care and ask for the form. |
| Contact information for filing a complaint related to an advance directive See Chapter 6, Section 1.5 of your Evidence of Coverage for details. | Ohio Disability Rights Law and Policy Center, Inc. Disability Rights Ohio 50 W. Broad St., Suite 1400 Columbus, OH 43215-5923 614-466-7264 or 1-800-282-9181 (TTY) 614-728-2553 or 1-800-858-3542 | For complaints regarding physicians, contact the Medical Board in the state in which your physician is located. If you need that phone number, Customer Care can assist you. For complaints regarding hospital/health care facilities, contact the Department of Health in the state in which the hospital/health care facility is located. If you need that phone number, Customer Care can assist |
| Contact information for Coverage Decisions for Medical Care See Chapter 2, Section 1 of your Evidence of Coverage for details. | For coverage determinations: Medical Mutual MZ 01-5B-4200 2060 E. 9th Street Cleveland, OH 44115-1355 For expedited determinations: Medical Mutual Attn: Care Management MZ 01-5B-4200 2060 E. 9th Street Cleveland, OH 44115-1355 | For coverage determinations: Medical Mutual MZ 02-3P-7516 100 American Road Cleveland, OH 44144-2322 For expedited determinations: Medical Mutual Attn: Medicare Care Management MZ 02-3P-3982 100 American Road Cleveland, OH 44144-2322 |
| Contact information for Civil Rights Coordinator See Chapter 11, Section 2 of your Evidence of Coverage for details. | The mailing address listed is: Civil Rights Coordinator Medical Mutual of Ohio 2060 E. 9th Street Cleveland, OH 44115-1355 | The mailing address listed is: Civil Rights Coordinator Medical Mutual of Ohio 100 American Road Cleveland, OH 44144-2322 |
| Drug Assistance Program listings | Drug assistance program information is provided in Appendix 2 of the <i>Annual Notice of Changes</i> . | Drug assistance program information provided in Appendix 2 of the <i>Annual Notice of Changes</i> has been updated. |

| Description | 2023 (this year) | 2024 (next year) |
|---|---|--|
| Medicaid Agency listings | Medicaid agency information is provided in Appendix 2 of your <i>Evidence of Coverage</i> . | Medicaid agency information provided in Appendix 2 of your <i>Evidence of Coverage</i> has been updated. |
| Medicare Complaint Form URL Multiple references are given in your Evidence of Coverage. | www.medicare.gov/Medicare ComplaintForm/home.aspx | www.medicare.gov/my/medicare- complaint |
| State Health Insurance Assistance Program listings | State health insurance assistance program information is provided in Appendix 1 of the <i>Annual Notice of Changes</i> and Appendix 1 of your <i>Evidence of Coverage</i> . | State health insurance assistance program information provided in Appendix 1 of the <i>Annual Notice of Changes</i> and Appendix 1 of your <i>Evidence of Coverage</i> has been updated. |
| State Health Insurance Assistance Program (SHIP) web address/URL See Chapter 2, Section 3 of your Evidence of Coverage for details. | The web address/URL to access SHIP and other resources is www.medicare.gov. | The web address/URL to access SHIP and other resources is https://www.shiphelp.org. |
| WW®/WeightWatchers® Program name See the "Health and Wellness education programs" listing in Chapter 4, Section 2.1 of your Evidence of Coverage for details. | This program uses the name "WW [®] ". | This program uses the name "WeightWatchers®". |

SECTION 3 Deciding Which Plan to Choose

Section 3.1 If you want to stay in MedMutual Advantage PPO

To stay in our plan, you don't need to do anything. If you do not sign up for a different plan or change to Original Medicare during your group's open enrollment period, you will automatically be enrolled in our MedMutual Advantage PPO.

Section 3.2 If you want to change plans

We hope to keep you as a member next year, but if you want to change plans for 2024, follow these steps:

Step 1: Learn about and compare your choices

- · You can join a different Medicare health plan,
- --OR-- You can change to Original Medicare. If you change to Original Medicare, you will need to decide whether to join a Medicare drug plan. If you do not enroll in a Medicare drug plan, there may be a potential Part D late enrollment penalty.

To learn more about Original Medicare and the different types of Medicare plans, use the Medicare Plan Finder (www.medicare.gov/plan-compare), read the *Medicare & You 2024* handbook, call your State Health Insurance Assistance Program (see Section 5), or call Medicare (see Section 7.2).

Step 2: Change your coverage

- To change to a different Medicare health plan, enroll in the new plan. You will automatically be disenrolled from MedMutual Advantage PPO.
- To change to Original Medicare with a prescription drug plan, enroll in the new drug plan. You will automatically be disenrolled from MedMutual Advantage PPO.
- To change to Original Medicare without a prescription drug plan, you must either:
 - Send us a written request to disenroll. Contact Customer Care if you need more information on how to do so.
 - or Contact Medicare, at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call 1-877-486-2048.

SECTION 4 Deadline for Changing Plans

If you want to change to a different plan or to Original Medicare for next year, you can do it during your group's open enrollment period. The change will take effect on January 1, 2024.

Are there other times of the year to make a change?

In certain situations, changes are also allowed at other times of the year. Examples include people with Medicaid, those who get "Extra Help" paying for their drugs, those who have or are leaving employer coverage, and those who move out of the service area.

If you enrolled in a Medicare Advantage plan for January 1, 2024, and don't like your plan choice, you can switch to another Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without Medicare prescription drug coverage) between January 1 and March 31, 2024.

If you recently moved into, currently live in, or just moved out of an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage at any time. You can change to any other Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

SECTION 5 Programs That Offer Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. It is a state program that gets money from the Federal government to give **free** local health insurance counseling to people with Medicare. SHIP counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. Please see Appendix 1 to find the SHIP for your state.

SECTION 6 Programs That Help Pay for Prescription Drugs

You may qualify for help paying for prescription drugs. Below we list different kinds of help:

- "Extra Help" from Medicare. People with limited incomes may qualify for "Extra Help" to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs including monthly prescription drug premiums, annual deductibles, and coinsurance. Additionally, those who qualify will not have a coverage gap or late enrollment penalty. To see if you qualify, call:
 - 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/7 days a week;
 - The Social Security Office at 1-800-772-1213 between 8 am and 7 pm, Monday through Friday for a representative. Automated messages are available 24 hours a day. TTY users should call 1-800-325-0778; or
 - o Your State Medicaid Office (applications).
- Help from your state's pharmaceutical assistance program. Some states have programs that help pay for prescription drugs based on their financial aid, need, age, or medical condition. To learn more about these programs, check with your local State Health Insurance Assistance Program.
- What if you have coverage from an AIDS Drug Assistance Program (ADAP)? The AIDS Drug Assistance Program (ADAP) helps ADAP-eligible individuals living with HIV/AIDS have access to life-saving HIV medications. Medicare Part D prescription drugs that are also covered by ADAP qualify for prescription cost-sharing assistance through the ADAP in some states see Appendix 2 for details. Note: To be eligible for the ADAP operating in your State, individuals must meet certain criteria, including proof of State residence and HIV status, low income as defined by the State, and uninsured/under-insured status.

If you are currently enrolled in an ADAP, it can continue to provide you with Medicare Part D prescription cost-sharing assistance for drugs on the ADAP formulary. In order to be sure you continue receiving this assistance, please notify your local ADAP enrollment worker of any changes in your Medicare Part D plan name or policy number. See Appendix 2 for state-specific contact information.

For information on eligibility criteria, covered drugs, or how to enroll in the program, please call the number for your state's ADAP listed in Appendix 2.

SECTION 7 Questions?

Section 7.1 Getting Help from MedMutual Advantage PPO

Questions? We're here to help. Please call Customer Care at 1-800-801-4823. (TTY only, call 711). We are available for phone calls 8 a.m. to 8 p.m. seven days a week from October 1 through March 31 (except Thanksgiving and Christmas), and 8 a.m. to 8 p.m. Monday through Friday from April 1 through September 30 (except holidays). Our automated telephone system is available 24 hours a day, seven days a week for self-service options. Calls to these numbers are free.

Read your 2024 Evidence of Coverage (it has details about next year's benefits and costs)

This Annual Notice of Changes gives you a summary of changes in your benefits and costs for 2024. For details, look in the 2024 Evidence of Coverage for MedMutual Advantage PPO. The Evidence of Coverage is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. A copy of the Evidence of Coverage is located on our website at MedMutual.com/MAgroup. You may also call Customer Care to ask us to mail you an Evidence of Coverage.

Visit our Website

You can also visit our website at MedMutual.com/MAgroup. As a reminder, our website has the most up-to-date information about our provider network (Provider Directory).

Section 7.2 Getting Help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227)

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Visit the Medicare Website

Visit the Medicare website (www.medicare.gov). It has information about cost, coverage, and quality Star Ratings to help you compare Medicare health plans in your area. To view the information about plans, go to www.medicare.gov/plan-compare.

Read Medicare & You 2024

Read the *Medicare & You 2024* handbook. Every fall, this document is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this document, you can get it at the Medicare website (https://www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

APPENDIX 1 State Health Insurance Assistance Programs (SHIPs)

| | nsurance Assistance Programs (SHIPs) | | | |
|-------------|---|---------------------------------------|--|--|
| | equire special telephone equipment and are only for people | who have difficulties | | |
| State | with hearing or speaking. If there is no TTY number indicated, dial 711. | | | |
| Alabama | Address/Website State Health Insurance Assistance Program (SHIP) Alabama Department of Senior Services 201 Monroe St., Suite 350 Montgomery, AL 36104 www.alabamaageline.gov/ship/ | Phone 1-800-243-5463 | | |
| Alaska | State Health Insurance Assistance Program (SHIP) Alaska Medicare Information Office 1835 Bragaw Street, Suite 350 Anchorage, AK 99508 http://hss.medicare@aalaska.gov | 1-800-478-6065 TTY: 1-800-770-8973 | | |
| Arizona | State Health Insurance Assistance Program (SHIP) Individuals should contact the SHIP office in the county in which they reside. https://des.az.gov//medicare-assistance | 1-800-432-4040 | | |
| Arkansas | Senior Health Insurance Information Program Arkansas Insurance Department One Commerce Way Little Rock, AR 72202 https://www.shiipar.com | 1-800-224-6330 | | |
| California | State Health Insurance Assistance Program (SHIP) California Health Insurance Counseling and Advocacy Program (HICAP) 2880 Gateway Oaks Drive, Suite 200 Sacramento, CA 95833 https://www.aging.ca.gov/hicap/ | 1-800-434-0222 | | |
| Colorado | Senior Health Insurance Assistance Program (SHIP) Division of Insurance Colorado Department of Regulatory Agencies 1560 Broadway, Suite 850 Denver, CO 80202 https://doi.colorado.gov/insurance-products/health-insurance/senior-health-care-medicare | 1-888-696-7213 | | |
| Connecticut | The CHOICES Program https://portal.ct.gov/ADS-CHOICES | 1-800-994-9422 | | |
| Delaware | Delaware Medicare Assistance Bureau (DMAB) DMAB@delaware.gov https:/insurance.delaware.gov/dmab | 1-800-336-9500 Local 302-674-7364 | | |

Oberlin College 600663

Boise, ID 83720-0043 https://www.shiba.idaho.gov

3840 W 9th St. Waterloo. IA 50702

https://shiip.iowa.gov

Senior Health Insurance Program (SHIP)

State Health Insurance Assistance Program (SHIP)

Senior Health Insurance Information Program SHIIP-SMP 1-800-351-4664

One Natural Resources Way, #100

https://www2.illinois.gov/aging/ship

https://www.medicare.in.gov/ship

Northeast Iowa Area Agency on Aging

Springfield, IL. 62702-1271

Illinois

Indiana

Iowa

State Health Insurance Assistance Programs (SHIPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone **District of** Health Insurance Counseling Project (HICP) 1-202-727-8370 500 K St., NE TTY:711 Columbia Washington, D.C. 20002 https://dcoa.dc.gov/service/dc-state-health-insuranceassistance-program-ship **Florida** Serving Health Insurance Needs of Elders (SHINE) 1-800-963-5337 Program TTY: 1-800-955-8770 Florida Department of Elder Affairs 4040 Esplanade Way Tallahassee, FL 32399-7000 https://www.floridashine.org/ Georgia SHIP 1-866-552-4464 Georgia Georgia Department of Human Services' (DHS) Division (Option #4) of Aging Services (DAS) State Health Insurance Monday through Assistance Program Friday, 8 a.m. – 5 p.m. 47 Trinity Ave. S.W. Atlanta, GA, 30334 https://aging.georgia.gov/georgia-ship Hawaii Hawaii State Health Insurance Assistance Program 1-808-586-7299 Toll Free 1-888-875-9229 Executive Office on Aging – No. 1 Capitol District 250 South Hotel St., Suite 406 Honolulu, HI 96813-2831 https://www.hawaiiship.org/ Idaho Senior Health Insurance Benefits Advisors (SHIBA) -1-800-247-4422 Idaho Department of Insurance Monday through 700 West State St., 3rd Floor Friday, 8 a.m. to 5 P.O. Box 83720 p.m.

1-800-252-8966

1-800-452-4800

TTY: 1-888-206-1327

TTY: 1-800-735-2942

Maryland Department of Aging 301 West Preston St., Suite 1007

Massachusetts Serving Health Information Needs of Elders (SHINE)

https://mn.gov/senior-linkage-line/

Baltimore, MD 21201

https://www.mmapinc.org Minnesota Senior LinkAge Line

program.aspx

540 Cedar St. St. Paul, MN 55164

Maryland

Michigan

Minnesota

State Health Insurance Assistance Programs (SHIPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone Kansas Senior Health Insurance Counseling for Kansas (SHICK) 1-800-860-5260 Kansas Department for Aging and Disability Services New **England Building** 503 South Kansas Ave. Topeka, KS 66603-3404 https://www.kdads.ks.gov/commissions/commission-onaging/medicare-programs/shick State Health Insurance Assistance Program (SHIP) 1-877-293-7447 Kentucky Kentucky Cabinet for Health and Family Services (Option #2) Department for Aging and Independent Living Office of the Secretary 275 East Main St., 3E-E Frankfort, KY 40621 https://chfs.ky.gov/agencies/dail/Pages/ship.aspx Senior Health Insurance Information Program (SHIIP) Louisiana 1-800-259-5300 1702 N. Third St. P.O. Box 94214 Baton Rouge, LA 70802 https://www.ldi.la.gov/consumers/senior-health-shiip Maine State Health Insurance Assistance Program (SHIP) 1-800-262-2232 Maine Maine Department of Health and Human Services (SHIP) 1-877-353-3771 109 Capital Street 11 State House Station (ADRC) Augusta, ME 04333 https://www.maine.gov/dhhs/oads/get-support/olderadults-disabilities/older-adult-services/ship-medicareassistance State Health Insurance Assistance Program (SHIP)

https://aging.maryland.gov/Pages/state-health-insurance-

https://www.mass.gov/health-insurance-counseling

Michigan Medicare Assistance Program (MMAP, Inc.)

1-800-243-3425

1-800-243-4636

1-800-803-7174

1-800-333-2433

2370

TTY/ASCII (800) 439-

State Health Insurance Assistance Programs (SHIPs)

TTY numbers require special telephone equipment and are only for people who have difficulties

| | speaking. If there is no TTY number indicated, dial 711. | wild have difficulties |
|------------------|---|--|
| State | Address/Website | Phone |
| Mississippi | State Health Insurance Assistance Program (SHIP) Mississippi Department of Human Services Division of Aging & Adult Services 200 S. Lamar St. Jackson, MS 39201 https://www.mdhs.ms.gov/adults-seniors/services-for-seniors/state-health-insurance-assistance-program | 1-844-822-4622 (SHIP) 1-601-359-4500 |
| Missouri | Missouri SHIP, State Health Insurance Assistance Program (SHIP) https://www.missouriship.org | 1-800-390-3330 |
| Montana | Montana State Health Insurance Assistance Program (SHIP) https://dphhs.mt.gov/sltc/aging/SHIP | 1- 800-551-3191 |
| Nebraska | Nebraska Senior Health Insurance Information Program (SHIIP) Nebraska Department of Insurance 2717 S. 8th St., Suite 4 Lincoln, NE 68508 https://doi.nebraska.gov/ship | 1-800-234-7119 |
| Nevada | Nevada Medicare Assistance Program (MAP) 3208 Goni Rd., Suite 181 Carson City, NV 89706 https://www.nevedacareconnection.org/care-options/types-of-services/healthcare/medicare-assistance-program-map/ | 1-800-307-4444 |
| New Hampshire | New Hampshire State Health Insurance Assistance Program (SHIP) https://www.dhhs.nh.gov | 1-866-634-9412 |
| New Jersey | State Health Insurance Assistance Program (SHIP) New Jersey Department of Human Services Division of Aging Services https://www.state.nj.us/humanservices/doas/services/ship/ | |
| New Mexico | New Mexico ADRC – State Health Insurance Assistance Program (SHIP) New Mexico Aging & Long-Term Services Dept. 2550 Cerrillos Road Santa Fe, NM 87505 https://www.nmaging.state.nm.us/ | 1-800-432-2080 TTY: 1-505-476-4937 |
| New York | Health Insurance Information Counseling and Assistance Program (HIICAP) https://aging.ny.gov/health-insurance-information-counseling-and-assistance | 1-800-701-0501 |

State Health Insurance Assistance Programs (SHIPs) TTY numbers require special telephone equipment and are only for people who have difficulties

| with hearing or speaking. If there is no TTY number indicated, dial 711. | | | | |
|--|--|---|--|--|
| State | Address/Website | Phone | | |
| North Carolina | Seniors' Health Insurance Information Program (SHIIP) North Carolina Department of Insurance Albemarle Building 325 N. Salisbury Street Raleigh, NC 27603 https://www.ncdoi.gov/consumers/medicare-and-seniors-health-insurance-information-program-shiip. | 1-855-408-1212 | | |
| North Dakota | State Health Insurance Counseling Program (SHIC) 600 E. Boulevard Ave. Bismarck, ND 58505 https://www.insurance.nd.gov/shic-medicare | 1-888-575-6611 | | |
| Ohio | Ohio Senior Health Insurance Information Program (OSHIIP) Ohio Department of Insurance 50 West Town St., 3rd Floor, Suite 300 Columbus, OH 43215 https://insurance.ohio.gov/about-us/divisions/oshiip | 1-800-686-1578 Monday through Friday, 7:30 a.m. – 5 p.m. | | |
| Oklahoma | Senior Health Insurance Counseling Program (SHIP) Oklahoma Insurance Department 400 NE 50th St. Oklahoma City, OK 73105 https://www.oid.ok.gov | 1-800-763-2828 | | |
| Oregon | Senior Health Insurance Benefits Assistance (SHIBA) https://shiba.oregon.gov | 1-800-722-4134 | | |
| Pennsylvania | Pennsylvania Medicare Education and Decision Insight – PA MEDI http://www.aging.pa.gov | 1-800-783-7067 8 a.m. to 5 p.m. Monday-Friday | | |
| Puerto-Rico | State Health Insurance Assistance Program SHIP https://agencias.pr.gov/ship | 1-877-725-4300 TTY: 787-919-7291 | | |
| Rhode Island | Rhode Island State Health Insurance Assistance Program (SHIP) Rhode Island Department of Human Services Office of Healthy Aging 25 Howard Ave. Building 57 Cranston, RI 02920 https://oha.ri.gov/medicare | 1-888-884-8721 TTY: 1-401-462-0740 | | |
| South Carolina | State Health Insurance Assistance Program (SHIP) 1301 Gervais St., Suite 350 Columbia, SC 29201 https://www.getcaresc.com/guide/insurance-counseling-medicaremedicaid- | 1-800-868-9095 | | |

State Health Insurance Assistance Programs (SHIPs)

TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711.

| with hearing or speaking. If there is no TTY number indicated, dial 711. | | | | |
|--|---|---|--|--|
| State | Address/Website | Phone | | |
| South Dakota | Senior Health Information and Insurance Education (SHIINE) https://www.shiine.net | Eastern South Dakota: 1-800-536-8197 Central South Dakota: 1-877-331-4834 Western South Dakota: 1-877-286- 9072 | | |
| Tennessee | Tennessee State Health Insurance Assistance Program (SHIP) https://tn.gov/aging/ship | 1-877-801-0044 | | |
| Texas | Health Information Counseling and Advocacy Program (HICAP) – Texas Department of Aging and Disability https://www.hhs.texas.gov/services/health/medicare | 1-800-252-9240 | | |
| US Virgin Islands | The Virgin Islands State Health Insurance Assistance Program (VI SHIP) https://ltg.gov.vi/departments/vi-ship-medicare | 1-340-773-6459 x3105 (St. Croix) 1- 340-774-7166 x4510 (St. Thomas/St. John) | | |
| Utah | Senior Health Insurance Information Program (SHIP) Aging and Adult Services of Utah https://daas.utah.gov/seniors/ | 1-800-541-7735 | | |
| Vermont | State Health Insurance Assistance Program (SHIP) Vermont Association for Area Agencies on Aging https://asd.vermont.gov. | 1-800-642-5119 802-241-0294 | | |
| Virginia | Virginia Insurance Counseling and Assistance Program (VICAP) Virginia Division for the Aging 1610 Forest Ave., Suite 100 Henrico, VA 23229 https://www.vda.virginia.gov/vicap.htm | 1-800-552-3402 | | |
| Washington | Statewide Health Insurance Benefits Advisors (SHIBA) Office of the Insurance Commissioner https://www.insurance.wa.gov/about-oic/what-we-do/advocate-for-consumers/shiba/ | 1-800-562-6900 TTY: 1-360-586-0241 8 a.m. to 5 p.m. Monday-Friday | | |
| West Virginia | West Virginia State Health Insurance Assistance Program (WV SHIP) West Virginia Bureau of Senior Services 1900 Kanawha Boulevard East Town Center Mall, 3 rd Level Charleston, WV 25305 https://www.wvship.org | 1-877-987-4463 304-558-3317 | | |

State Health Insurance Assistance Programs (SHIPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone Wisconsin State Health Insurance Assistance Program (SHIP) 1-800-242-1060 https://www.dhs.wisconsin.gov/benefitspecialists/medicare-counseling.htm Wyoming Wyoming State Health Insurance Information 1-800-856-4398 Program (WSHIIP) http://www.wyomingseniors.com/services/wyoming-statehealth-insurance-information-program

APPENDIX 2 AIDS Drug Assistance Programs (ADAPs)

| _ | sistance Programs (ADAPs) | | |
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| | require special telephone equipment and are only for people | who have difficulties | |
| with hearing or speaking. If there is no TTY number indicated, dial 711. | | | |
| State | Address/Website | Phone | |
| Alabama | Alabama AIDS Drug Assistance Program Alabama Department of Public Health HIV/AIDS Division, The RSA Tower 201 Monroe St., Suite 1400 Montgomery, AL 36104 https://www.alabamapublichealth.gov/hiv/adap.html | 1-866-574-9964 | |
| Alaska | Alaskan AIDS Assistance Association 1057 W. Fireweed Ln., Suite 102 Anchorage, AK 99503 https://www.alaskanaids.org/ | 1-800-478-2437 | |
| Arizona | Arizona Department of Health Services 150 N. 18th Ave., Phoenix, AZ 85007 https://azdhs.gov//preparedness/epidemiology-disease-control/disease-integration-services/index.php | 1-800-334-1540 602-364-3610 | |
| Arkansas | Arkansas Department of Health HIV/STD/Hepatitis C section – ADAP Division 4815 W. Markham St., Slot 33 Little Rock, AR 72205 https://www.healthy.arkansas.gov/programs- services/topics/ryan-white-program | 1-501-661-2408 | |
| California | Office of AIDS California Department of Public Health MS 0500, P.O. Box 997377 Sacramento, CA 95899-7377 https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA Main.aspx | 1-844-421-7050 ADAP CALL CENTER 1-916-558-1784 | |
| Colorado | Colorado Department of Public Health Environment Care and Treatment Program ADAP-3800 4300 Cherry Creek Dr. South Denver, CO 80246 https:// colorado.gov/PACIFIC/CDPHE/state-drug-assistance-program | 1-303-692-2000 | |
| Connecticut | Connecticut Department of Public Health c/o Magellan Rx 410 Capitol Ave. Hartford, CT. 06134 https://ctdph.magellanrx.com/ | 1-800-424-3310 | |

AIDS Drug Assistance Programs (ADAPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone Delaware Division of Public Health, Ryan White Program Local: 1-302-744-1050 Thomas Collins Building 540 S. DuPont Highway Dover, DE 19901 https://ramsellcorp.com/medical_professionals/de.aspx District of Columbia Department of Health, HIV/AIDS, **District of** 202-671-4900 or 202-Columbia Hepatitis, STD, and TB Administration, AIDS 671-4815 (DC ADAP Drug Assistance Program Hotline) 899 North Capitol St., NE Washington, DC 20002 https://dchealth.dc.gov/DC-ADAP Florida Florida Department of Health 1-850-245-4422 **HIV/AIDS Section** 1-844-381-2327 ADAP AIDS Drug Assistance Program HELP DESK 4052 Bald Cypress Way 1-800-352-2437 Tallahassee, FL 32399 HIV/AIDS HOTLINE https://www.floridahealth.gov/diseases-andconditions/aids/adap/index.html Georgia Department of Public Health, Health Protections, 1-404-656-9805 Georgia Office of HIV/AIDS 2 Peachtree St., NW Atlanta, GA 30303 https://dph.georgia.gov/hiv-care/aids-drug-assistanceprogram Hawaii Hawaii Department of Health 1-808-733-9360 Harm Reduction Services Branch 728 Sunset Ave. Honolulu, HI 96816 https://health.hawaii.gov/harmreduction/about-us/hivprograms/hiv-medical-management-services/ Idaho Ryan White Part B Program Idaho 1-208-334-5612 450 West State St. P.O. Box 83720 Boise, ID 83720 https://healthandwelfare.idaho.gov/Healthwellness/diseases-conditions/hiv Illinois Illinois Medication Assistance Program 1-800-825-3518 525 W. Jefferson St., 1st Floor Springfield, IL 62761 https://www.dph.illinois.gov/topics-services/diseasesand-conditions/hiv-aids/ryan-white-care-and-hopwaservices

https://accesshealthma.org

AIDS Drug Assistance Programs (ADAPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone Indiana Indiana State Department of Health, HIV/STD Viral 1-866-588-4948 **Hepatitis Division** 2 North Meridian St., Suite 6C Indianapolis, IN 46204 https://www.in.gov/health/hiv-std-viral-hepititis/hivservices/#programs Iowa Iowa Department of Public Health 1-515-380-6942 321 East 12th St. Des Moines, IA 50319-0075 https://idph.iowa.gov/hivstdhep/hiv/support Kansas Department of Health & Environment 1-785-296-6174 Kansas 1000 South West Jackson, Suite 210 Topeka, KS 66612 https://www.kdhe.ks.gov/355/The-Ryan-White-Part-B-Program Kentucky Kentucky Department for Public Health 1-502-564-6539 Cabinet for Health and Family Services HIV/AIDS Branch 275 East Main St., HS2E-C Frankfort, KY 40621 https://chfs.ky.gov/agencies/dph/dehp/hab/Pages/service s.aspx Louisiana Louisiana Office of Public Health 1-504-568-7474 Louisiana Health Access Program 1450 Poydras St., Suite 2136 New Orleans, LA 70112 https://www.lahap.org/ Maine Maine Center for Disease Control and Prevention ADAP 1-207-287-3747 40 State House Station Augusta, ME 04330 https://www.maine.gov/dhhs/mecdc/infectiousdisease/hiv-std/services/ryan-white-b.shtml Maryland AIDS Drug Assistance Program (MADAP) 1-410-767-6535 Maryland 1223 W. Pratt St. Baltimore, MD 21223 https://health.maryland.gov/OIDPCS/ Pages/madap.aspx Massachusetts | AccessHealth MA Attn: HIV Drug Assistance Program 1-800-228-2714 The Schrafft's City Center 617-502-1700 ext.2 529 Main St., Suite 301 Boston, MA 02129

| | sistance Programs (ADAPs) require special telephone equipment and are only for people | who have difficultie |
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| with hearing or speaking. If there is no TTY number indicated, dial 711. | | |
| State | Address/Website | Phone |
| Michigan | Michigan Department of Health and Human Services Michigan Drug Assistance Program, HIV Care Section, Division of Health Wellness and Disease Control (MIDAP) 109 Michigan Ave., 9th Floor Lansing, MI 48913 https://www.michigan.gov/mdhhs | 1-888-826-6565 |
| Minnesota | HIV/AIDS Programs Minnesota Department of Human Services P.O. Box 64972 St. Paul, MN 55164 https://mn.gov/dhs/people-we-serve/adults/health-care/hiv-aids/ | 1-800-657-3761 |
| Mississippi | Mississippi State Department of Health Office of STD/HIV Care and Services Division P.O. Box 1700 Jackson, MS 39215 https://msdh.ms.gov/msdhsite/_static/14,13047,150.html | 1-888-343-7373 |
| Missouri | Bureau of HIV, STD, and Hepatitis Missouri Department of Health and Senior Services P.O. Box 570 Jefferson City, MO 65102 https://health.mo.gov/living/healthcondiseases/communic able/hivaids/casemgmt.php | 1-573-751-6439 |
| Montana | Montana AIDS Drug Assistance Program The Ryan White HIV/AIDS Program 1400 Broadway Cogswell Bldg Room C-211 Helena, MT 59620 https://dphhs.mt.gov/publichealth/hivstd/treatmentprogram.aspx | 1-406-444-3565 1-406-444-5622 |
| Nebraska | Nebraska AIDS Drug Assistance Program P.O. Box 95026 Lincoln, NE 68509 https://dhhs.ne.gov/Pages/HIV-Care.aspx | 1-402-471-2101 |
| Nevada | Nevada AIDS Drug Assistance Program 2290 S. Jones Blvd, Suite 110 Las Vegas, NV 89104 https://endhivnevada.org/end-hiv-nevada- program/nevadas-aids-drug-assistance-program-adap/ | 1-702-486-0768 |

AIDS Drug Assistance Programs (ADAPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone New DHHS-NH CARE Program 1-603-271-4496 Hampshire 29 Hazen Dr. Concord, NH 03301 https://www.dhhs.nh.gov/dphs/bchs/std/care.htm New Jersey ADDP Office **New Jersey** 1-877-613-4533 P.O. Box 722 Trenton, NJ 08625 https://www.nj.gov/health/hivstdtb/hivaids/medications.shtml **New Mexico** 1-505-476-3628 New Mexico Department of Health **HIV Services Program** 1190 St. Francis Dr., Suite S-1200 Santa Fe. NM 87502 https://nmhealth.org/about/phd/idb/hats/ **New York** 1-800-542-2437 or HIV Uninsured Care Programs, Empire Station P.O. Box 2052 1-844-682-4058 Albany, NY 12220 https://www.health.ny.gov/diseases/aids/general/resourc es/adap/ **North Carolina** N.C. Dept. of Health and Human Services, Epidemiology 1-877-466-2232 or Section 919-733-9161 Communicable Disease Branch 1907 Mail Service Center Raleigh, NC 27699 https://epi.dph.ncdhhs.gov/cd/hiv/hmap.html North Dakota Department of Health North Dakota 1-800-472-2180 or Division of Disease Control 701-328-2378 2635 East Main Ave. P.O. Box 5520 Bismarck, ND 58506-5520 https://www.ndhealth.gov/hiv/RyanWhite/ Ohio Ohio AIDS Drug Assistance Program (ADAP), HIV Client 1-800-777-4775 Services, Ohio Department of Health 246 North High St. Columbus, OH 43215 https://odh.ohio.gov/wps/portal/gov/odh/know-ourprograms/Ryan-White-Part-B-HIV-Client-Services/AIDS-Drug-Assistance-Program/

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| _ | istance Programs (ADAPs) | |
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| | quire special telephone equipment and are only for people | who have difficulties |
| | speaking. If there is no TTY number indicated, dial 711. | DI |
| State | Address/Website | Phone |
| Oklahoma | HIV/STD Services Division Oklahoma State Department of Health 1000 N.E. 10th Mail Drop 0308 Oklahoma City, OK 73117-1299 https://oklahoma.gov/health/prevention-and-preparedness/sexual-health-and-harm-reduction-service/care-delivery-ryan-white-adap-hepatitis/hiv-drug-assistance-program-hdap-or-adap.html | 1-405-271-4636 |
| Oregon | CAREAssist Program 800 NE Oregon St., Suite 1105 Portland, OR 97232 https://www.oregon.gov/oha/PH/DISEASESCONDITION S/HIVSTDVIRALHEPATITIS/HIVCARETREATMENT/CA REASSIST/Pages/index.aspx | 1-971-673-0144 |
| Pennsylvania | Pennsylvania Department of Health Special Pharmaceutical Benefits Program 625 Forster St., H & W Bldg, Rm 611 Harrisburg, PA 17120 https://www.health.pa.gov/topics/programs/HIV/Pages/Services.aspx | 1-800-922-9384 |
| Rhode Island | Executive Office of Health and Human Services Office of HIV/AIDS Virks Building 3 West Rd. Suite 227 Cranston, RI 02920 https://www.eohhs.ri.gov/Consumer/Adults/RyanWhiteHIVAIDS.aspx | 1-401-462-3295 |
| South Carolina | South Carolina Drug Assistance Program 2600 Bull Street Columbia, SC 29211 https://scdhec.gov/aids-drug-assistance-program | 1-800-856-9954 |
| South Dakota | South Dakota Department of Health Ryan White Part B CARE Program 615 East 4th St. Pierre, SD 57501 https://doh.sd.gov/topics/diseases- conditions/infectious/ryanwhite/ | 1-800-592-1861 or 605-773-3737 |
| Tennessee | Tennessee Department of Health, HIV/STD Program, Ryan White Part B Services 710 James Robertson Parkway 4th Floor Andrew Johnson Tower Nashville, TN 37243 https://www.tn.gov/health/health-program- areas/std/std/ryan-white-part-b.html | 1-800-525-2437 or 615-741-7500 |

AIDS Drug Assistance Programs (ADAPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website Phone Texas Texas HIV Medication Program 1-800-255-1090 or ATTN: MSJA, MC 1873 737-255-4300 P.O. Box 149347 Austin, TX 78714 https://www.dshs.texas.gov/hivstd/meds/ Utah Utah Department of Health 1-801-538-6191 Bureau of Epidemiology 288 North 1460 West, P.O. Box 142104 Salt Lake City, UT 84114-2104 https://ptc.health.utah.gov/ treatment/ryan-white/ Vermont Vermont Department of Health 1-802-951-4005 Vermont Medication Assistance Program 108 Cherry St., P.O. Box 70 Burlington, VT 05402 https://www.healthvermont.gov/immunizations-infectiousdisease/hiv/care Virginia Virginia Department of Health 1-855-362-0658 Virginia Medication Assistance Program (VA MAP) James Madison Building HCS Unit. 1st Floor 109 Governor St. Richmond, VA 23219 https://www.vdh.virginia.gov/disease-prevention/vamap/ Washington Client Services 1-877-376-9316 The Early Intervention Program (EIP) P.O. Box 47841 Olympia, WA 98504 https://www.doh.wa.gov/YouandYourFamily/IllnessandDi sease/HIVAIDS/HIVCareClientServices/ADAPandEIP West Virginia Jay Adams, HIV Care Coordinator 1-304-232-6822 P.O. Box 6360 Wheeling, WV 26003 https://oeps.wv.gov/rwp/pages/default.aspx Wisconsin Department of Health Services 1-800-991-5532 or Division of Public Health, Attn: ADAP 608-267-6875 P.O. Box 2659 Madison, WI 53701

https://www.dhs.wisconsin.gov/aids-hiv/adap.htm

AIDS Drug Assistance Programs (ADAPs) TTY numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking. If there is no TTY number indicated, dial 711. State Address/Website **Phone** Wyoming Wyoming Department of Health 1-307-777-7529 Public Health Sciences Section Communicable Disease 6101 Yellowstone Rd. Suite 510 Cheyenne, WY 82002 https://health.wyo.gov/publichealth/communicabledisease-unit/hiv/resources-for-patients/

Multi-Language Interpreter Services & Nondiscrimination Notice



This document notifies individuals of how to seek assistance if they speak a language other than English.

Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-382-5729 (TTY: 711).

Chinese

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-382-5729 (TTY: 711)。

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-382-5729 (TTY: 711).

Arabic

تر الكتحدث اذامغة، فإن خدات ال ةعداالمسا غويةتتوافر لك قرم هاتف الصم البوكم 711). ما ذاإ :حوظةكنت (بصتن. االمجال برقم 1-800-382-5729

Pennsylvania Dutch

Wann du Deitsch schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-800-382-5729 (TTY: 711).

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-382-5729 (телетайп: 711).

French

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-382-5729 (ATS: 711).

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-382-5729 (TTY: 711).

Navajo

Díí baa akó nínízin: Díí saad bee yáníłti' go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, koji' hódíílnih 1-800-382-5729 (TTY: 711).

Order Number: Z8188-MCA R8/23

Dept of Ins. Filing Number: Z8188-MCA R9/16

Oromo

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-800-382-5729 (TTY: 711).

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-382-5729 (TTY: 711)번으로 전화해 주십시오.

Italian

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-382-5729 (TTY: 711).

Japanese

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-800-382-5729 (TTY: 711) まで、お電話にてご連絡ください。

Dutch

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-800-382-5729 (TTY: 711).

Ukrainian

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-800-382-5729 (телетайп: 711).

Romanian

ATENŢIE: Dacă vorbiţi limba română, vă stau la dispoziţie servicii de asistenţă lingvistică, gratuit. Sunaţi la 1-800-382-5729 (TTY: 711).

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-382-5729 (TTY: 711).

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QUESTIONS ABOUT YOUR BENEFITS OR OTHER INQUIRIES ABOUT YOUR HEALTH INSURANCE SHOULD BE DIRECTED TO MEDICAL MUTUAL'S CUSTOMER CARE DEPARTMENT AT 1-800-382-5729.

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- Medical Mutual provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters, and written information in other formats (large print, audio, accessible electronic formats, etc.).
- Medical Mutual provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services or if you believe Medical Mutual failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, with respect to your health care benefits or services, you can submit a written complaint to the person listed below. Please include as much detail as possible in your written complaint to allow us to effectively research and respond.

Civil Rights Coordinator

Medical Mutual of Ohio 100 American Road Cleveland, OH 44144

Email: CivilRightsCoordinator@MedMutual.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights.

- Electronically through the Office for Civil Rights Complaint Portal available at: ocrportal.hhs.gov/ocr/portal/lobby.jsf
- By mail at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F HHH Building Washington, DC 20201-0004

By phone at:

1-800-368-1019 (TDD: 1-800-537-7697)

 Complaint forms are available at: hhs.gov/ocr/office/file/index.html