

# 2023 IRON ROAD HEALTHCARE MEDICARE PLANS SPONSORED BY UPREHS ANNUAL NOTICE OF CHANGE (ANOC)



*This document contains important information and changes about your 2023 Medicare benefits. Please make sure you review this carefully.*

Plan sponsored by UPREHS | Annual Notice of Change 2023 | H4652

# GENERATIONS STRONG



We are very grateful to be celebrating our 75<sup>th</sup> anniversary with you. We appreciate your membership and together, we are Generations Strong. Iron Road Healthcare respects and honors the contributions you have made during your railroad career in building our great nation.

Iron Road Healthcare has a culture that enjoys providing excellent benefits and great service to our members. Today our plan covers all approved Medicare benefits, we pay your deductibles and coinsurance at 100% under our Medicare Part B HCPP and Medicare Part A and Part B Secondary Plans (sponsored by UPREHS) and Part D Prescription Drug Plan (administered by OptumRx). We have an excellent Part D formulary and offer an enhanced hearing aid benefit through Amplifon.

At Iron Road Healthcare, we work hard to provide exceptional benefits at a great value to you. We compare our plan benefits and premiums to other similar plans throughout the areas we serve, so that we can confidently continue to bring you an excellent benefit plan that is competitively priced.

Over the last four years we have been able to absorb the significant increases in existing and new medications without any premium increases. The higher cost of prescription benefits has made it necessary to increase premiums by \$15 a month effective January 1, 2023. The current rate of \$255 a month will increase to \$270.

With this letter we have enclosed the Annual Notice of Change (ANOC) for 2023. We encourage you to carefully review this document.

Please be advised that current Iron Road Healthcare Medicare Plans Members do not need to re-enroll during this Open Enrollment period, you will be automatically re-enrolled in your plans. If you have any questions, please send an email to [Help@IronRoadHealthcare.com](mailto:Help@IronRoadHealthcare.com) or call Iron Road Healthcare Customer Service at 800-547-0421 Monday through Friday from 7:30 AM until 3:30 PM (MOUNTAIN TIME). TTY users can call 711 for assistance.

Iron Road Healthcare will have an Open Enrollment for our Medicare Plans. This Open Enrollment period will be from October 15, 2022, ending December 7, 2022, with an effective date of January 1, 2023. Any former Union Pacific Railroad employee and their spouse, who are eligible for Medicare can join. More details can be found at [IronRoadHealthcare.com](https://IronRoadHealthcare.com).

We look forward to serving you in 2023 and beyond.

Iron Road Healthcare



## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

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### ***Iron Road Healthcare sponsored by UPREHS HCPP Part B Medicare Health Cost Plan & Medicare Part A & B Secondary Plan (MSP)***

#### **Annual Notice of Changes for 2023**

You are currently a member of Iron Road Healthcare's (sponsored by UPREHS) HCPP Part B Medicare Health Cost Plan & Medicare Part A & B Secondary Plan (MSP). This plan includes a Part D Prescription Drug Plan (PDP), administered by OptumRx. Next year (2023), there will be some changes to the plan's benefits. *This booklet tells you about the changes.*

- **If you want to continue your coverage with Iron Road Healthcare, do nothing and you will automatically be re-enrolled. Otherwise, you have from October 15, 2022 until December 7, 2022 to make changes to your Medicare coverage for next year.**
  - PLEASE NOTE: If you decide to enroll in a different Medicare plan, you will automatically be dis-enrolled from the Iron Road Healthcare Medicare plans. You will not be permitted to re-enroll for a minimum period of 24 months and then only during an open enrollment period.
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#### **Additional Resources**

- Please contact our Member Services department at 800-547-0421 for additional information. (TTY/TDD users should call 711; this is a free service). Member Services is available Monday through Friday from 7:30 a.m. to 3:30 p.m. (MT). You can also email us at [help@ironroadhealthcare.com](mailto:help@ironroadhealthcare.com) or visit our website at [ironroadhealthcare.com](http://ironroadhealthcare.com).
- If you speak a language other than English, language assistance services are available to you free of charge. Please refer to the back of this booklet for a list of languages.

#### **About Iron Road Healthcare (sponsored by UPREHS)**

- Iron Road Healthcare (sponsored by UPREHS) is contracted as a Health Care Prepayment Plan (HCPP) with the Centers for Medicare and Medicaid Services (CMS), the Federal agency that administers Medicare.
  - When this booklet says "we," "us," or "our," it means Iron Road Healthcare sponsored by UPREHS. When it says "plan" or "our plan," it means the Iron Road Healthcare HCPP Part B Medicare Health Cost Plan & Medicare Part A & B Secondary Plan (MSP) and Medicare Part D prescription drug plan (PDP) administered by OptumRx.
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## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

### Benefit Changes for 2023

The table below compares the 2022 costs and 2023 costs for Iron Road Healthcare Medicare plan in several important areas. **Please note this is only a summary of changes.** A copy of the *Evidence of Coverage* is located on our website at [ironroadhealthcare.com](https://ironroadhealthcare.com) to see if other benefit changes affect you. You may also call Member Services to ask us to mail you a copy of the *Evidence of Coverage*.

Cost	2022 (this year)	2023 (next year)
<b>Monthly plan premium*</b> Your premium may be higher or lower than this amount. See Section 3.1 for details.	\$255	\$270 (\$15.00 change)
<b>Deductible</b>	Iron Road Healthcare covers your deductible Part A is \$1,556 Part B is \$233 Part D is \$480	Iron Road Healthcare covers your deductible 2023 deductibles not available at time of printing for part A and B. Part D is \$505
<b>Maximum out-of-pocket amount</b>	UPREHS/Iron Road Healthcare does not have a maximum out-of-pocket	Iron Road Healthcare does not have a maximum out-of-pocket
<b>Part D prescription drug coverage</b> (See Section 2.3 for details.)	Please refer to the 2022 ANOC from OptumRx for information on changes to Part D. Your premium of \$255 per month includes Part D coverage.	Please refer to the 2023 ANOC from OptumRx for information on changes to Part D. Your premium of \$270 per month includes Part D coverage.



## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

### SECTION 1 Unless You Choose Another Plan, You Will Be Automatically Re-Enrolled in Iron Road Healthcare Medicare plan in 2023

**If you do nothing to change your Medicare coverage by December 7, 2022, we will automatically re-enroll you in our HCPP Part B & Medicare Part A & B Secondary, and Part D Prescription Drug Plan, administered by OptumRx.**

You have choices about how to get your Medicare coverage. If you want to change to a different plan, you may do so from October 15, 2022, until December 7, 2022. Your membership in the new plan will begin on January 1, 2023. If you are eligible for long term care, low-income subsidies or Medicaid, you can change plans at any time. For more information, see your *Medicare & You* handbook.

The information in this document tells you about the differences between your current benefits and the benefits you will have on January 1, 2023.

### SECTION 2 Changes to Benefits and Costs for Next Year

#### Section 2.1 – Changes to the Monthly Premium

Cost	2022 (this year)	2023 (next year)
<b>Monthly premium</b> (You must also continue to pay your Medicare Part B premium.)	\$255	\$270 (\$15.00 change)

- **Note Invoicing Changes:** Quarterly invoicing by mail will be discontinued. IRHC members who are currently receiving quarterly invoices will start to receive monthly invoices in **2023**. Months in which dues are paid in advance will not be invoiced by mail. The monthly invoice amounts, outstanding balance or credits are viewable online through the IRHC member portal for all IRHC members. **Members already enrolled in the IRHC Automatic Dues Payment System (ADPS) will not be affected by this invoice change.** If you wish to enroll in recurring automatic dues payments debited from a checking or savings account, you may request an application form by calling 1-800-547-0421. Printable application forms are also available online through the IRHC member portal, [my.irhc.com](https://my.irhc.com).
- Your monthly plan premium will be more if you are required to pay a lifetime Part D late enrollment penalty for going without other drug coverage that is at least as good as Medicare drug coverage (also referred to as “creditable coverage”) for 63 days or more.



## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

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- If you have a higher income, you may have to pay an additional amount each month directly to the government for your Medicare prescription drug coverage.
- Your monthly premium will be less if you are receiving “Extra Help” with your prescription drug costs.

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### Section 2.2 – Changes to the Provider Network

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**Please review the 2023 Provider Directory to see if your providers are in our network.**

There are *constant* changes to in-network providers. If your provider is out-of-network, you may be partly or totally financially responsible for charges.

To see the most current provider directory, please visit First Health at [myfirsthealth.com](https://myfirsthealth.com). We strongly recommend you check the provider directory and call your provider in advance of receiving treatment to ensure the provider is in our network to receive your maximum benefits.

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### Section 2.3 – Changes to Part D and the Pharmacy Network

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A list of covered drugs is called a Formulary or “Drug List.”

**Review the Drug List from OptumRx to make sure your drugs will be covered next year and to see if there will be any restrictions.**

Amounts you pay for your prescription drugs may depend on which pharmacy you use. Medicare drug plans have a network of pharmacies. In most cases, your prescriptions are covered *only* if they are filled at an in-network pharmacy. **Our Part D Prescription Drug Plan (PDP) is administered by OptumRx. Please refer to the 2023 information you will receive from OptumRx.** If you do not receive the information, please contact OptumRx.

**We strongly suggest that you review the current Pharmacy Directory to see if your pharmacy is still in the OptumRx network.**

To reach OptumRx, call (866) 443-1095 (TTY/TDD users call 711). OptumRx is available 7 days a week, 24 hours a day. Their website is [optumrx.com](https://optumrx.com).

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## SECTION 3     Deciding Which Plan to Choose

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We want to keep you as a member next year but if you want to change for 2023 follow these steps:



## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

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### Step 1: Learn about and compare your choices

- You can join a different Medicare health plan from October 15, 2022 to December 7, 2022.

To learn more about Original Medicare and the different types of Medicare plans, read *Medicare & You 2023*, call your State Health Insurance Assistance Program, or call Medicare (see Section 8 for contact information).

You can also find information about plans in your area by using the Medicare Plan Finder on the Medicare website. Go to [medicare.gov](https://www.medicare.gov) and click “Find health & drug plans.” **Here, you can find information about costs, coverage, and quality ratings for Medicare plans.**

### Step 2: Change your coverage

- To change **to a different Medicare health plan**, you will need to enroll in the new plan. You will automatically be disenrolled from the Iron Road Healthcare Medicare plans. You will not be permitted to re-enroll in the Iron Road Healthcare Medicare plans for a minimum period of 24 months and then only during an open enrollment period.

## SECTION 4     Deadline for Changing Plans

If you want to change to a different type of plan, like a Medicare Advantage plan, or make a change to your prescription drug coverage for next year, you can do it from **October 15, 2022 until December 7, 2022**. The change will take effect on January 1, 2023.

If you want to change to a different cost plan, you can do so anytime the plan is accepting Members. The new plan will let you know when the change will take effect.

If you want to disenroll from our plan and have Original Medicare for next year, you can make the change up to December 7, 2022. The change will take effect on January 1, 2023.

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

In certain situations, changes are also allowed at other times of the year. For example, people with Medicaid, those who get “Extra Help” paying for their drugs, and those who move out of the service area may be allowed to make a change at other times of the year.

**PLEASE NOTE:** If you join another plan by December 7, 2022, your new coverage will start on January 1, 2023. You will be dis-enrolled from the Iron Road Healthcare (sponsored by UPREHS) HCPP Part B Medicare Health Cost Plan & Medicare Part A & B Secondary Plan (MSP) and Part D Prescription Drug Coverage (PDP), administered by OptumRx.



## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

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Iron Road Healthcare sponsored by UPREHS, reserves the right to hold open enrollment periods at their discretion.

### SECTION 5 Programs That Offer Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is a government program with trained counselors in every state.

SHIP is independent (not connected with any insurance company or health plan). 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. Visit [shiptacenter.org/](https://shiptacenter.org/) for more information.



## 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. Many people are eligible and do not even know it. To see if you qualify, call:
  - 1-800-MEDICARE (1-800-633-4227). TTY/TDD 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, or automated telephone service available 24/7 at 1-800-772-1213. TTY/TDD users should call, 1-800-325-0778 (applications).
  - Contact your local State Medicaid Office to complete an application.
- **Help from your state’s pharmaceutical assistance program.** Most states have a program called SHIP that helps people pay for prescription drugs based on their financial need, age, or medical condition. To learn more about the program, check with your State Health Insurance Assistance Program or visit their website at [shiptacenter.org](https://shiptacenter.org).
- **Prescription cost-sharing assistance** for people with HIV/AIDS. The AIDS Drug Assistance Program (ADAP) helps ensure that ADAP-eligible individuals living with HIV/AIDS have access to life-saving HIV medications. Individuals must meet certain criteria, including proof of state residence and HIV status, low income as defined by the state, and uninsured/underinsured status. Medicare Part D prescription drugs that are also covered by ADAP qualify for prescription cost-sharing assistance. For more information on eligibility criteria, covered drugs, or how to enroll in the program, contact the program in your state of residence.

## SECTION 7 Questions?

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### Section 7.1 – Getting Help from Iron Road Healthcare

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Questions? We are here to help. Please call Member Services at 800-547-0421 (TTY/TDD call 711). We are open Monday through Friday from 7:30 a.m. to 3:30 p.m. (MT). You can also email us at [help@ironroadhealth.com](mailto:help@ironroadhealth.com) or visit our website at [ironroadhealthcare.com](https://ironroadhealthcare.com)



## Iron Road Healthcare Medicare Plan Annual Notice of Change 2023

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### **Read your 2023 *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 2023. For details, look in the 2023 *Evidence of Coverage* for Iron Road Healthcare. 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 [ironroadhealthcare.com](https://ironroadhealthcare.com). You may also call Member Services to ask us to mail you an *Evidence of Coverage*.

### **Visit our Website**

You can also visit our website at [ironroadhealthcare.com](https://ironroadhealthcare.com). As a reminder, our website has the most up-to-date information about our provider network (Provider Directory) and our list of covered drugs (Formulary/Drug List).

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## Section 7.2 – Getting Help from Medicare

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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/TDD users should call 1-877-486-2048.

### **Visit the Medicare Website**

You can visit the Medicare website ([medicare.gov](https://medicare.gov)). It has information about cost, coverage, and quality ratings to help you compare Medicare health plans. You can find information about plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to [medicare.gov](https://medicare.gov) and click on “Find health & drug plans.”)

### **Read Medicare & You 2023**

You can read *Medicare & You 2023* Handbook. Every year in the fall, this booklet 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 booklet, you can get it at the Medicare website ([medicare.gov](https://medicare.gov)) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY/TDD users should call 1-877-486-2048.

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## 2023 Summary of Benefits

The following is a summary of your Iron Road Healthcare (sponsored by UPREHS) HCPP Part B Medicare Health Cost Plan & Medicare Part A & B Secondary Plan benefits for 2023. The complete list of services is in the Evidence of Coverage on our website at [medicare.ironroadhealthcare.com](https://medicare.ironroadhealthcare.com) if you have questions, please call Iron Road Healthcare Member Services at 800-547-0421 Monday through Friday from 7:30 AM until 3:30 PM (MT). TTY users can call 711 for assistance. Medicare lifetime / annual maximums apply. Coverage reflected are for in-network, Medicare approved charges. Please make sure your provider is in our network.

Premium Information	
Monthly premium	\$270
Annual deductible	100%
Benefit - In-Network Care	Plan Covers
Provider Care	
Physician visits	100%
Preventative care / Wellness Exam (Per Medicare Guidelines)	100%
Emergency & Urgent Care	
Emergency transport / ambulance	100%
Emergency room	100%
Telemedicine (limited)**	100%
Urgent care	100%
Diagnostic tests and procedures	
Blood work, Labs, etc.	100%
Radiology, X-rays	100%
Imaging (scans, MRI, etc.)	100%
Outpatient procedures	
Facility fee (i.e., Ambulatory Surgery center)	100%
Physician fees	100%
Inpatient / Hospitalization	
Facility fee (hospital)	100%

Physician fees	100%
<b>Mental health services</b>	
Physician (specialist and non-specialist)	100%
Intensive outpatient services (per incident)	100%
Inpatient (per incident)	100%
<b>Recovery, special care, rehabilitation</b>	
Home health care	100%
Rehabilitation services	100%
Habilitation services	100%
Skilled nursing (limited)**	100%
Durable medical equipment (limited)**	100%
Hospice care	100%
Speech therapy	100%
Chiropractic	100%
Physical therapy	100%
<b>Other benefits</b>	
Dialysis	100%
Diabetes	100%
Durable Medical Equipment (DME)	100%
Transplants	100%
Hearing Services (including aids, tests, etc.) Covered through Amplifon only - <b>Enhanced Benefit</b>	Copay varies by hearing aid selected
Acupuncture	100%
Medical-related Vision & Dental*	100%
CPAP	100%
Medicare Part B Drugs	100%

\*Annual or routine vision or dental services are NOT covered by Medicare or Iron Road Healthcare. \*\*Please see the EOC for details. To Access or order a Medicare & You handbook click here [Medicare & You handbook](#) or you may call 1-800-Medicare (1-800-633-4227).

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**UNION PACIFIC RAILROAD CO.**

**1040 N 2200 W STE 200  
Salt Lake, UT 84116-2929**

**Summary Annual Report for the  
UNION PACIFIC RAILROAD EMPLOYEES HEALTH SYSTEMS**

This is the summary annual report for the UNION PACIFIC RAILROAD EMPLOYEES HEALTH SYSTEMS, EIN 94-6001323, Plan number 501 for the period January 1, 2021 to December 31, 2021. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

**Basic Financial Statement**

The value of plan assets, after subtracting liabilities of the plan, was \$115,126,679 as of December 31, 2021, compared to \$125,119,294 as of January 1, 2021. During the plan year the plan experienced an increase or (decrease) in its net assets of \$-9,992,615. This increase or (decrease) includes unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. During the plan year, the plan had total income of \$148,237,723 including employer contributions of \$85,874,450, employee contributions of \$46,439,710, realized gains or (losses) of \$0 from the sale of assets, and earnings from investments of \$9,629,817.

Plan expenses were \$158,230,238. These expenses included \$11,848,568 in administrative expenses, \$146,381,770 in benefits paid to participants and beneficiaries, and \$0 in other expenses.

**Your rights to additional information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report.

- An accountant's report
- Financial information and information on payments to service providers
- Assets held for investment

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To obtain a copy of the full annual report, or any part thereof, write or call the office of UNION PACIFIC RAILROAD EMPLOYEES HEALTH SYSTEM, who is the plan administrator, 1040 N 2200 W STE 200, Salt Lake City, UT, 84116, 801-595-4388. These portions of the report are furnished without charge.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan:

UNION PACIFIC RAILROAD EMPLOYEES  
HEALTH SYSTEM  
Plan Administrator  
1040 N 2200 W STE 200  
Salt Lake City, UT 84116

and at the following address:

UNION PACIFIC RAILROAD CO.  
Plan Sponsor  
1040 N. 2200 W., STE 200  
Salt Lake, UT 84116-2929

and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to:

Public Disclosure Room  
Room N-1513  
Employee Benefits Security Administration  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

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## **Nondiscrimination**

The Iron Road Healthcare Medicare Plan (sponsored by UPREHS) does not discriminate based on race, ethnicity, nationality, origin, color, gender, mental or physical disability, religion, sex, health status, ethnicity, age, national origin, medical history, genetic information, evidence of insurability or geographic location.

Section 1557 builds on long-standing and familiar Federal civil rights laws: Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975. Section 1557 extends nondiscrimination protections to individuals. Section 1557 has been in effect since its enactment in 2010 and the HHS Office for Civil Rights has been enforcing the provision since it was enacted.

If you believe that we have failed to provide these services or discriminated in another way based on race, ethnicity, nationality, origin, color, gender, mental or physical disability, religion, sex, health status, ethnicity, age, national origin, medical history, genetic information, evidence of insurability or geographic location you may send a complaint to:

Iron Road Healthcare Civil Rights Coordinator  
1040 North 2200 West Suite 200  
Salt Lake City, UT 84116  
Phone: 1-800-547-0421 (MT), TTY/TDD use 711  
Fax: 1-801-595-2069  
Email: [help@ironroadhealthcare.com](mailto:help@ironroadhealthcare.com)

If you need help filing a complaint, or need this information in another format, including large print, please call our Member Services at 1-800-547-0421 MT, TTY/TDD 711 A representative will assist you.

You can also file a complaint directly with the U.S. Dept. of Health and Human services online, by phone, or by mail:

Complaint forms are available at:  
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>  
Phone: Toll-free 1-800-368-1019, 800-537-7697 (TDD)  
Mail: U.S. Dept. of Health and Human Services, 200 Independence Avenue, SW Room 509F, HI-IH Building Washington, D.C. 20211

## Multi-language Interpreter Services

**ATTENTION:** If you speak a language other than English, then language assistance services are available to you free of charge. Please call 1-800-547-0421 our Customer Service representatives are available Monday through Friday, from 7:30am to 3:30pm, Mountain Time. TTY/TDD users call the national number 711.

**ATENCIÓN:** Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文

**(Chinese)**, 我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話 號碼

**XIN LƯU Ý:** Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

**PAALALA:** Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

**ВНИМАНИЕ:** бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

فِي بَرَعْلَا تُدَحِّثُ نَزَكَ إِذَا (**Arabic**)، بَلَعُ دُجُومَلَا بِنَاغَمَلَا قَتَاهَلَا مَوْرُ بَلَعُ لَاصْتَلَا ءَا جَرَلَا. لِكُلِّ عَرَاتِمَ فَيَنَاجِمَلَا قَتَوَغْلَا قَدْعَاسَمَلَا تَامَدَخُ نَبْ هَيِّنَتْ. قَتِي وَضَعْلَا فَرَعَم:

**ATANSYON:** Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

**ATTENTION:** Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

**UWAGA:** Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić

pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

**ATENÇÃO:** Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.



ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語(**Japanese**)を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

یسراف امش نابز رگا (**Farsi**) تیراک یور هک یناگیار زفک مراش اب افطل. دشاب یم امش رایخا رد ناگیار روط هب ینابز دادما تامدخ، تسا هجوت بیرگیب سامن هدش دیق امش یواسانش:

Úyanad: यिदआप **िहदी(Hindi)** बोलतह, आपकोभाषासहायतासबाए, िन:शर्देकउपलधहाकपया अपन पहचान पत्र पर सचिबद्ध टोल-फ्री फोन नंबर परकॉलकर।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បេសអកសយាយភាសាខ្មែរ(**Khmer**)ស្វែងរកជនយាយភាសាខ្មែរជាយុត្តិធម៌ក្នុងគម្រោងសហប្រតិបត្តិការ។ សមទ្រព្យពេទ្យដែលខិតខំកែច្នៃផែនការនៅលើអតិសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyan. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yáníłti'go, saad bee áka'anída'awo'ígíí, t'áá jííł'eh, bee ná'ahóót'i'. T'áá shqódi ninaaltsoos nitł'izí bee nééhozinígíí bine'dęę' t'áá jííł'ehgo béésh hane'ibiká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

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Address Panel