

Michigan Complete Health (Medicare-Medicaid Plan) | 2020 *Provider and Pharmacy Directory*

Introduction

This *Provider and Pharmacy Directory* includes information about the provider and pharmacy types in Michigan Complete Health and listings of all the plan's providers and pharmacies as of the date of this Directory. The listings contain provider and pharmacy address and contact information as well as other details such as days and hours of operations, specialties, and skills. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.



If you have questions, please call Michigan Complete Health at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.michigancompletehealth.com.

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A. Disclaimers

- ❖ Michigan Complete Health (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.
- ❖ This Directory lists health care professionals (such as doctors, nurse practitioners, and psychologists), facilities (such as hospitals or clinics), and support providers (such as Adult Day Health and Home Health providers) that you may see as a Michigan Complete Health member. We also list the pharmacies that you may use to get your prescription drugs.
- ❖ Out-of-network/non-contracted providers are under no obligation to treat Michigan Complete Health members, except in emergency situations. Please call our Member Services number or see your Member Handbook for more information, including the cost-sharing that applies to out-of-network services.
- ❖ We will refer to these groups as “network providers” in this Directory. These providers signed a contract with us to provide you services. This is a list of Michigan Complete Health’s network providers for Macomb and Wayne counties.
 - Macomb County: Armada, Armada Township, Bruce Township, Center Line, Chesterfield Township, Clinton Township, Eastpointe, Fraser, Grosse Pointe Shores (Village of), Harrison Township, Lenox Township, Macomb Township, Memphis, Mount Clemens, New Baltimore, New Haven, Ray Township, Richmond, Richmond Township, Romeo, Roseville, Shelby Township, St. Clair Shores, Sterling Heights, Utica, Warren, and Washington Township.
 - Wayne County: Allen Park, Belleville, Brownstown Township, Canton Charter Township, Dearborn, Dearborn Heights, Detroit, Ecorse, Flat Rock, Garden City, Gibraltar, Grosse Ile Township, Grosse Pointe, Grosse Pointe Farms, Grosse Pointe Park, Grosse Pointe Shores, Grosse Pointe Woods, Hamtramck, Harper Woods, Highland Park, Huron Charter Township, Inkster, Lincoln Park, Livonia, Melvindale, Northville, Northville Charter Township, Plymouth, Plymouth Township, Redford Charter Township, River Rouge, Riverview, Rockwood, Romulus, Southgate, Sumpter Township, Taylor, Trenton, Van Buren Charter Township, Wayne, Westland, Woodhaven, and Wyandotte.
- ❖ This Directory lists providers of both Medicare and Medicaid services.



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- ❖ **ATTENTION:** If you do not speak English, language assistance services, free of charge, are available to you. Call 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- ❖ You can also get this document for free in other formats, such as large print, braille or audio. Call 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- ❖ If you want to get documents in a different language and/or format for future mailings, please call Member Services. This is called a “standing request”. We will document your choice. If later, you want to change the language and/or format choice, please call Member Services. Find the Member Services phone number at the bottom of this page.
- ❖ The list is up-to-date as of the day you do your search, but you need to know that:
 - Some Michigan Complete Health network providers may have been added or removed from our network after this Directory was published.
 - Some Michigan Complete Health providers in our network may no longer be accepting new members. If you are having trouble finding a provider who will accept new members, call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week, and we will help you. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.
 - To get the most up-to-date information about Michigan Complete Health’s network providers in your area, visit mmp.michigancompletehealth.com or call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.

Doctors and other health care professionals in Michigan Complete Health’s network are listed on pages in the *Primary Care Provider* section. Pharmacies in our network are listed on pages in the *Pharmacy* section.



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B. Providers

B1. Key terms

This section explains key terms you'll see in our *Provider and Pharmacy Directory*.

- **Providers** are health care professionals and support providers such as doctors, nurses, pharmacists, therapists, and other people who provide care and services. **Services** include medical care, long-term supports and services (LTSS), supplies, prescription drugs, equipment and other services.
 - The term “providers” also includes facilities such as hospitals, clinics, and other places that provide medical services, medical equipment, and long-term supports and services.
 - Providers that are a part of our plan's network are called **network providers**.
- **Network providers** are the providers that have contracted with us to provide services to members in our plan. The providers in our network generally bill us directly for care they give you. When you see a network provider, you usually pay nothing for covered services.
- A **Primary Care Provider** (PCP) is a physician, physician assistant, nurse practitioner, general practitioner, primary care clinic, or internal medicine physician who gives you routine health care. Your PCP will keep your medical records and get to know your health needs over time. Your PCP will also give you a **referral** if you need to see a specialist or other provider.
- **Specialists** are doctors who provide health care services for a specific disease or part of the body. There are many kinds of specialists. Here are a few examples:
 - Oncologists care for patients with cancer.
 - Cardiologists care for patients with heart conditions.
 - Orthopedists care for patients with certain bone, joint, or muscle conditions.



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- You may need a **referral** to see a specialist or someone that is not your PCP. A **referral** means that your primary care provider (PCP) must give you approval before you can see someone that is not your PCP. If you don't get a referral, Michigan Complete Health may not cover the service.
 - Referrals from network PCP are not needed for:
 - Emergency care;
 - Urgently needed care;
 - Kidney dialysis services that you get at a Medicare-certified dialysis facility when you are outside the plan's service area; or
 - Services from a women's health specialist.
 - Additionally, if you are eligible to get services from Indian health providers, you may see these providers without a referral. We must pay the Indian health provider for those services even if they are out of our plan's network.
 - More information on referrals is available in Chapter 3 of the *Member Handbook*.
- Your provider may need **prior authorization** or an approval from Michigan Complete Health before you get certain services. Covered services that need prior authorization are marked in the Benefits Chart in Chapter 4 of your Member Handbook. Some drugs are covered only if you get prior authorization from us. Covered drugs that need prior authorization are marked in the *List of Covered Drugs*.
- You also have access to a **Care Coordinator** and a **Care Team** that you choose.
 - A **Care Coordinator** helps you manage your medical providers and services.
 - The Care Coordinator ensures that the person-centered planning process is complete and will be responsible for:
 - Assessing your needs for supports and services
 - Coordinating Care Team meetings, as needed or as requested by you
 - Developing and Individual Integrated Care and Supports Plan (IICSP), also known as a plan of care, based on the person-centered planning process



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- Ongoing care coordination to help you get access to, and timely delivery of, supports and services that are in line with your personal goals
 - Granting access to your medical record to care team members at your direction
- Your **Care Team** includes you, your chosen allies or legal representative, your Primary Care Provider, Care Coordinator, LTSS Coordinator or PIHP Supports Coordinator (as applicable), and other as needed. The Care Team works with you to develop, implement, and maintain your care plan and to coordinate the delivery of services and benefits as needed. Everyone on the Care Team works together to make sure your care is coordinated. This means that they make sure tests and labs are done once and the results are shared with the appropriate providers. It also means that your PCP should know all medicines you take so that he or she can reduce any negative effects. Your PCP will always get your permission before sharing your medical information with other providers.

B2. Primary Care Provider (PCP)

You can get services from any provider who is in our network and accepting new members.

First, you will need to choose a Primary Care Provider. You may be able to have a specialist act as your PCP. Specialists who perform primary care functions, including specialists who provide primary care in FQHCs, rural health clinics, health departments and other similar community clinics, can serve as your PCP. To request a PCP, you can call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. You may also call your care Coordinator at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

To choose a PCP, go to the list of providers and choose a provider:

- that you use now, **or**
- who has been recommended by someone you trust, **or**
- whose offices are easy for you to get to.
- If you want help in choosing a PCP, please call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call



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will be returned within the next business day. The call is free. Or, visit mmp.michigancompletehealth.com/findadoctor.

- If you have questions about whether we will pay for any medical service or care that you want or need, call Member Services and ask **before** you get the service or care.

B3. Long-term supports and services (LTSS)

As a Michigan Complete Health member, you may be able to get long-term supports and services (LTSS), such as home health, personal care, nursing home services, and home and community based services (such as adult day program, respite, expanded community living supports, preventive nursing services, private duty nursing, and other services). LTSS help people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital.

You should discuss long term supports and services with your Care Coordinator to determine which services you qualify for and how to access them.

B4. How to identify providers in Michigan Complete Health's network

You may need a referral to see someone who is not a Primary Care Provider. There is more information about referrals in Section B1 of this Directory.

You must get all of your covered services from providers within our network. If you go to providers who are not in Michigan Complete Health's network (without prior authorization or approval from us), you will have to pay the bill.

A **prior authorization** is an approval from Michigan Complete Health before you can get a specific service, drug, or see an out-of-network provider. Michigan Complete Health may not cover the service or drug if you don't get approval.

The exceptions to this rule are when you need urgent or emergency care or dialysis and cannot get to a provider in the plan, such as when you are away from home. You can also go outside the plan for other non-emergency services if Michigan Complete Health gives you permission first.

- You may change providers within the network at any time during the year. If you have been going to one network provider, you do not have to keep going to that same provider. For some providers, you may need a referral from your PCP.
- Michigan Complete Health works with all the providers in our network to accommodate the needs of people with disabilities. As applicable, the list of



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network providers in this Directory includes information about the accommodations they provide.

- If you need to see a provider and are not sure if they offer the accommodations you need, Michigan Complete Health can help you. Talk to your Care Coordinator for assistance.

B5. How to find Michigan Complete Health providers in your area

This provider directory is organized by provider type. Look for the type of provider first (for example, PCP, cardiologist, etc.). Then look for your county and city to find a provider close to your home. You can also visit the website at mmp.michigancompletehealth.com for the most current provider listing.

B6. List of network providers

This Directory of Michigan Complete Health's network providers contains:

- **Health care professionals** including primary care providers, who may be physicians, physician assistants, or nurse practitioners; hearing, dental, or vision specialists;
- **Facilities** including hospitals; urgent care centers; skilled nursing facilities/nursing facilities; Prepaid Inpatient Health Plan (PIHP) facilities for needs related to behavioral health, intellectual/developmental disability, and/or substance use; and
- **Support providers** including adult day programs; assistive technology; chore services; community transitions; environmental modifications; home-delivered meals; LTSS and non-LTSS home health agencies; medical supplies; non-medical transportation; personal care; preventive nursing; private duty nursing; respite care.

Providers are listed in alphabetical order by last name. In addition to contact information, provider listings also include specialties and skills, for example, such as languages spoken or completion of cultural competence training.

Cultural competence training is additional instruction for our health care providers that helps them better understand your background, values, and beliefs to adapt services to meet your social, cultural, and language needs.



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Accessibility Information

Below is information used in the provider directory to indicate accessibility at a provider office or building site. This information is not a promise that every doctor will always have the access that you may need. If you have a disability, you should call the doctor's office to talk about your access needs.



Accessibility Requirements:


Basic: Facility represents all seven accessibility requirements.

Limited: Facility is missing one or more of the seven accessibility requirements.

<i>Indicator</i>	<i>Definition</i>	<i>Criteria</i>
ASL	Signage (ASL)	Signage with Braille and raised tactile text characters at office, elevator, and restroom doors.
E	Exam room	The entrance to the exam room is accessible, with a clear path. The doors open wide enough to accommodate a wheelchair or scooter and are easy to open. The exam room has enough room for a wheelchair or scooter to turn around.
EB	Exterior building	Curb ramps and other ramps to the building are wide enough for a wheelchair or scooter user. Handrails are provided on both sides of the ramp. Doors open wide enough to let a wheelchair or scooter user enter, and have handles that are easy to use.
IB	Interior building	Doors open wide enough to let a wheelchair or scooter user enter, and have handles that are easy to use. Interior ramps are wide enough and have handrails. Stairs, if present, have handrails. The elevator has easy to hear sounds and Braille buttons within reach. The elevator has enough room for a wheelchair or scooter user to turn around. If there is a platform lift, it can be used without help.
P	Parking	Parking spaces, including van accessible space(s), are accessible. Pathways have curb ramps between the parking lot, office, and at drop-off locations.
R	Restroom	The restroom is accessible and the doors are wide enough to accommodate a wheelchair or scooter and are easy to open. The restroom has enough room for a wheelchair or scooter to turn around and close the door. There are grab bars which allow easy transfer from wheelchair to toilet. The sink is easy to get to and the faucets, soap, and toilet paper are easy to reach and use.
T	Exam table/scale	The exam table moves up and down and the scale is accessible with handrails to assist people with wheelchairs and scooters. The weight scale is able to accommodate a wheelchair.



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~	Rx	This pharmacy can provide an extended day supply.
+	New patients	Physician is currently accepting new patients.
#	Existing only	Physician is currently accepting existing patients only.
*	No patients	Physician is currently not accepting patients at this time.
	Bus route	Provider indicated this location is on bus route.



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C. Michigan Complete Health's network providers

You may get services from any of the providers on the list.



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D. Michigan Complete Health's Network Pharmacies

This pharmacy directory is organized by pharmacy type, county, and city. Look for the type of pharmacy first (for example, retail, mail order, home infusion, etc.), then look for your county and city to find a pharmacy close to your home. You can also visit the website at mmp.michigancompletehealth.com/findadoctor for the most current pharmacy listing.

You can go to any of the pharmacies in our network.

D1. Mail order pharmacy(ies)

You can get prescription drugs shipped to your home through our network mail order delivery program. If the mail order pharmacy gets a prescription directly from a prescriber, they will call you first to confirm you want the drug(s). Please make sure to let the pharmacy know the best way to contact you. Mail order pharmacies are required to get your approval before shipping or delivering any prescriptions that you did not ask for.

You also have the choice to sign up for automated mail order delivery. Typically, you should expect to get your prescription drugs 10 days from the time that the mail order pharmacy gets the order. If you do not get your prescription drug(s) within this time or if you would like to cancel an automatic order, please contact us at 1-844-239-7387 (TTY: 711) 24 hours a day, 7 days a week. Or call your mail order pharmacy, CVS Caremark at 1-888-624-1139, TTY: 711 or Homescripts at 1-888-239-7690, TTY: 711. These calls are free. To learn more about mail order pharmacies, see Chapter 5 of the *Member Handbook*.

D2. Home infusion pharmacies

To get information on home infusion pharmacies, please call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.



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D3. Long-term care pharmacies

Residents of a long-term care facility, such as a nursing home, may access their prescription drugs covered under Michigan Complete Health through the facility's pharmacy or another network pharmacy. To learn more about drug coverage in special cases, see Chapter 5 of the *Member Handbook*.

Long-term care pharmacies are generally for residents of a long-term care facility and may not be available to all members. To get information on long-term care pharmacies, please call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

D4. Network pharmacies outside the Macomb and Wayne county areas

You can get your drugs covered at any of our network pharmacies. This includes our network pharmacies outside of our service area.

D5. Specialty pharmacies

Specialty pharmacies dispense drugs that are specialized, are high cost, or that require special handling, shipping, or storage.

To get information on specialty pharmacies, please call Member Services at 1-844-239-7387 from 8 a.m. to 8 p.m., seven days a week. TTY users call 711. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.



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Notice of Non-Discrimination. Michigan Complete Health (Medicare-Medicaid Plan) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Michigan Complete Health does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Michigan Complete Health:

- 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, other formats).
- 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, contact Michigan Complete Health's Member Services at 1-844-239-7387 (TTY: 711) from 8 a.m. to 8 p.m., seven days a week. On weekends and on state or federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

If you believe that Michigan Complete Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance; Michigan Complete Health's Member Services is available to help you.

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 <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, (TDD: 1-800-537-7697).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Language Services

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-844-239-7387 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-239-7387 (TTY: 711).

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-844-239-7387 (رقم هاتف الصم والبكم: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請電1-844-239-7387 (TTY : 711)。

اہم نوٹ: اگر آپ انگریزی نہیں سمجھتے، تو ہمیں مفت میں زبان کی مدد فراہم کرنے کے لیے تیار ہیں۔ 1-844-239-7387 (TTY: 711) پر بلا کال کریں۔

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-844-239-7387 (TTY: 711).

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-844-239-7387 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-844-239-7387 (TTY: 711) 번으로 전화해 주십시오.

লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন ১-৮৪৪-২৩৯-৭৩৮৭ (TTY: ৭১১)।

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-844-239-7387 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-844-239-7387 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-844-239-7387 (TTY: 711).

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-844-239-7387 (TTY: 711) まで、お電話にてご連絡ください。

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-844-239-7387 (TTY: 711).

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-844-239-7387 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 711).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-844-239-7387 (TTY: 711).