


## Table of Contents

<b>A.</b>	Think about Your Medicare and Medicaid Coverage for Next Year.....	2
<b>B.</b>	Changes to the network providers and pharmacies.....	5
<b>C.</b>	Changes to benefits for next year .....	6
	Changes to benefits for medical services.....	6
	Changes to prescription drug coverage.....	6
<b>D.</b>	Deciding which plan to choose.....	9
	If you want to stay in Aetna Better Health FIDA Plan.....	9
	If you want to leave Aetna Better Health FIDA Plan and still get your Medicare and Medicaid services together from a single plan .....	9
	If you want to leave Aetna Better Health FIDA Plan and get your Medicare and Medicaid services separately.....	9
<b>E.</b>	Getting help.....	12
	Getting help from Aetna Better Health FIDA Plan.....	12
	Getting help from the state enrollment broker .....	12
	Getting help from the Independent Consumer Advocacy Network.....	12
	Getting help from the State Health Insurance Assistance Program .....	12
	Getting help from Medicare.....	13
	Getting help from Medicaid .....	13
	Getting help from the Quality Improvement Organization .....	13

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

NY-16-07-02

H8056\_17\_001R\_ANOC APPROVED

## **Aetna Better Health<sup>SM</sup> FIDA Plan (Medicare-Medicaid Plan) offered by Aetna Better Health, Inc. (NY)**

### **Annual Notice of Changes for 2017**

---

You are currently enrolled as a Participant of Aetna Better Health FIDA Plan. **Next year, there will be some changes to the plan's benefits and coverage. This Annual Notice of Changes tells you about the changes.**


---

#### **A. Think about Your Medicare and Medicaid Coverage for Next Year**

**It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you can leave the plan at any time.**

If you leave our plan, you will still be in the Medicare and Medicaid programs. You will have a choice about how to get your Medicare and Medicaid benefits (go to section D starting on page 9 to see your options).

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945 (TTY: 711)**, 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

## Additional Resources

- You can get this information for free in other languages. Call **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free.

Puede obtener esta información en otros idiomas de manera gratuita. Llame al **1-855-494-9945** y TTY al **711**, 24 horas al día, siete días de la semana. Esta llamada es gratuita.

您可以免費取得本資訊的其他語言版本。請撥打 **1-855-494-9945**，若使用 TTY 請撥打 **711**，每週 7 天、每天 24 小時均提供服務。此為免費電話。


Вы можете бесплатно получить эту информацию в переводе на другой язык. Позвоните по телефону **1-855-494-9945**. Линия работает круглосуточно и без выходных. Звонки бесплатные. Если вы пользуетесь устройством TTY, звоните по телефону **711**.

È possibile ottenere queste informazioni gratuitamente in altre lingue. Chiamare il numero **1-855-494-9945** e il numero **711** per il servizio TTY/TDD per i non udenti, 24 ore al giorno 7 giorni alla settimana. La chiamata è gratuita.

Ou kapab jwenn enfòmasyon sa a pou gratis nan lòt lang. Rele **1-855-494-9945** ak **711** pou TTY, 24 èdtan chak jou, 7 jou pa semèn. Apèl la gratis.

다른 언어로 이 정보를 무료로 받으실 수 있습니다. 연중 무휴 24시간 **1-855-494-9945**번 또는 TTY의 경우 **711** 번으로 전화해 주십시오. 통화는 무료입니다.

- You can get this information for free in other formats, such as large print, braille, or audio. Call **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week.
- A care manager will call you after you become a participant of Aetna Better Health FIDA Plan. During this call they will ask if you have a preferred language and/or format to receive plan information. You can also contact Participant Services or your care manager to change your preference at any time.

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit [www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork).

## About Aetna Better Health FIDA Plan

- Aetna Better Health FIDA Plan is a managed care plan that contracts with both Medicare and the New York State Department of Health (Medicaid) to provide benefits of both programs to Participants through the Fully Integrated Duals Advantage (FIDA) Demonstration.
- Coverage under Aetna Better Health FIDA Plan qualifies as minimum essential coverage (MEC). It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at <https://www.irs.gov/Affordable-Care-Act/Individuals-and-Families> for more information on the individual shared responsibility requirement for MEC.
- This Aetna Better Health FIDA Plan is offered by Aetna Better Health, Inc. (NY). When this *Annual Notice of Changes* says "we," "us," or "our," it means Aetna Better Health, Inc. (NY). When it says "the plan" or "our plan," it means Aetna Better Health FIDA Plan.

## Disclaimers


Limitations and restrictions may apply. For more information, call Aetna Better Health FIDA Plan Participant Services or read the Aetna Better Health FIDA Plan *Participant Handbook*. This means that you need to follow certain rules to have Aetna Better Health FIDA Plan pay for your services.

**The *List of Covered Drugs* and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.**

Benefits may change on January 1 of each year.

The State of New York has created a participant ombudsman program called the Independent Consumer Advocacy Network (ICAN) to provide Participants free, confidential assistance on any services offered by Aetna Better Health FIDA Plan. ICAN may be reached toll-free at 1-844-614-8800 or online at [icannys.org](http://icannys.org). (TTY users call 711, then follow the prompts to dial 844-614-8800.)

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

### Important things to do:

- Check if there are any changes to our benefits that may affect you.** Are there any changes that affect the services you use? It is important to review benefit changes to make sure they will work for you next year. Look in section C for information about benefit changes for our plan.
- Check if there are any changes to our prescription drug coverage that may affect you.** Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies? It is important to review the changes to make sure our drug coverage will work for you next year. Look in section C for information about changes to our drug coverage.
- Check to see if your providers and pharmacies will be in our network next year.** Are your doctors in our network? What about your pharmacy? What about the hospitals or other providers you use? Look in section B for information about our *Provider and Pharmacy Directory*.
- Think about whether you are happy with our plan.**

#### If you decide to stay with Aetna Better Health FIDA Plan:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

#### If you decide to change plans:

If you decide other coverage will better meet your needs, you can switch plans at any time. If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section D to learn more about your choices.


---

## B. Changes to the network providers and pharmacies

We have not made any changes to our network of providers and pharmacies for next year.

However, it is important that you know that we may make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your *Participant Handbook*.

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

## C. Changes to benefits for next year

### Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The table below describes these changes.

	2016 (this year)	2017 (next year)
<b>Day treatment</b>	Day treatment is covered by Aetna Better Health FIDA Plan.	Day treatment is covered by Medicare or Medicaid. Services can be accessed by your care manager.
<b>Freestanding birth centers</b>	Freestanding birth centers are covered by Aetna Better Health FIDA Plan.	Freestanding birth centers are covered by Medicaid. Services can be accessed by your care manager.
<b>Over-the-Counter products</b>	Over-the-counter products are covered: \$20 per month for certain over-the-counter products through a mail order catalog service	Over-the-counter products are covered: \$50 per month for certain over-the-counter products through a mail order catalog service


### Changes to prescription drug coverage

#### *Changes to our Drug List*

We sent you a copy of our 2017 *List of Covered Drugs* in this envelope.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

NY-16-07-02


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

If you are affected by a change in drug coverage, we encourage you to:

- **Work with your doctor (or other prescriber) to find a different drug** that we cover. You can call Participant Services at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week to ask for a list of covered drugs that treat the same condition. This list can help your provider find a covered drug that might work for you.
- **Existing members, who are taking a Part D drug that was removed** from the formulary or the drug now has a new utilization requirement or limitation at the beginning of the new plan year, also get a “transition period.” You can get a 30-day supply of medication during the first 90-days of the new plan year. If your prescription is written for less than a 30-day supply, you can get it refilled until you reach the 30-day supply. In general, we will determine your right to a 30-day fill at the pharmacy when you go to fill your prescription. In some situations, we will need to get additional information from your doctor before we can determine if you are entitled to a transition 30-day fill.
- For members in a nursing home or other long-term care facility: If your drug is no longer on our Drug List or is now restricted in some way, the plan will cover a temporary supply of your drug during the first 90 days of your membership or the first 90 days of the plan year, until we have given you at least a 91-day supply and may be up to a 98-day supply.

If you have a current exception for a drug that is not on the Drug List, the exception is set to expire on December 31, 2016. If the drug is not on the 2017 Drug List, you can make a new request to Aetna Better Health FIDA Plan to make an exception to cover the drug for 2017.

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.


**Changes to prescription drug costs**

There are no changes to the amount you pay for prescription drugs in 2017. Read below for more information about your prescription drug coverage.

**We moved some of the drugs on the Drug List to a lower or higher drug tier.** To see if your drugs will be in a different tier; look them up in the Drug List.

The table below shows your costs for drugs in each of our 3 drug tiers.

	2016 (this year)	2017 (next year)
<p><b>Drugs in Tier 1</b> (Part D prescription generic drugs)</p> <p>Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is <b>\$0</b> per prescription.</p>	<p>Your copay for a one-month (30-day) supply is <b>\$0</b> per prescription.</p>
<p><b>Drugs in Tier 2</b> (Part D prescription brand name drugs)</p> <p>Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is <b>\$0</b> per prescription.</p>	<p>Your copay for a one-month (30-day) supply is <b>\$0</b> per prescription.</p>
<p><b>Drugs in Tier 3</b> (Non Part D prescription and over-the-counter drugs)</p> <p>Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is <b>\$0</b> per prescription.</p>	<p>Your copay for a one-month (30-day) supply is <b>\$0</b> per prescription.</p>

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit [www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork).



## **D. Deciding which plan to choose**

### **If you want to stay in Aetna Better Health FIDA Plan**

We hope to keep you as a Participant next year.

**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, you will automatically stay enrolled as a Participant of our plan for 2017.

### **If you want to leave Aetna Better Health FIDA Plan and still get your Medicare and Medicaid services together from a single plan**


If you want to keep getting your Medicare and Medicaid services together from a single plan, you can join a different FIDA Plan. You can enroll in the new FIDA Plan by calling New York Medicaid Choice at 1-855-600-FIDA, Monday through Friday from 8:30 am to 8:00 pm and Saturday from 10:00 am to 6:00 pm. TTY users should call 1-888-329-1541.

If you don't want a different FIDA Plan but you still want to get your Medicare and Medicaid services together from a single plan, you may be able to enroll in the Program of All-Inclusive Care for the Elderly (PACE) or the Medicaid Advantage Plus (MAP) Program. For more information, call New York Medicaid Choice.

### **If you want to leave Aetna Better Health FIDA Plan and get your Medicare and Medicaid services separately**

If you do not want to enroll in a different FIDA, PACE, or MAP Plan after you leave Aetna Better Health FIDA Plan, you will go back to getting your Medicare and Medicaid services separately.


---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

***How you will get Medicare services***

You will have three options for getting your Medicare services. By choosing one of these options, you will automatically end your participation in our FIDA Plan:

<p><b>1. You can change to:</b></p> <p><b>A Medicare health plan, such as a Medicare Advantage plan</b></p>	<p><b>Here is what to do:</b></p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.</p> <p>You will automatically be disenrolled from Aetna Better Health FIDA Plan when your new plan's coverage begins.</p>
<p><b>2. You can change to:</b></p> <p><b>Original Medicare <i>with</i> a separate Medicare prescription drug plan</b></p>	<p><b>Here is what to do:</b></p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.</p> <p>You will automatically be disenrolled from Aetna Better Health FIDA Plan when your Original Medicare coverage begins.</p>

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

<p><b>3. You can change to:</b></p> <p><b>Original Medicare <i>without</i> a separate Medicare prescription drug plan</b></p> <p><b>NOTE:</b> If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you get drug coverage from an employer, union or other source. If you have questions about whether you need drug coverage, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.</p>	<p><b>Here is what to do:</b></p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information, call the Health Insurance Information, Counseling and Assistance Program (HIICAP) at 1-800-701-0501.</p> <p>You will automatically be disenrolled from Aetna Better Health FIDA Plan when your Original Medicare coverage begins.</p>
--	--


***How you will get Medicaid services***

You will have the opportunity to switch to a Medicaid Managed Long-Term Care plan for your long-term services and supports and to get your Medicaid physical and behavioral health services through Medicaid Fee-for-Service.

- ➔ Note: You can choose to completely stop getting long-term services and supports. However, it may take extra time to complete a safe discharge process. During that time, you will be enrolled into the Medicaid Managed Long-Term Care plan operated by the same company as Aetna Better Health FIDA Plan. Your change request on your Medicare coverage will not be delayed and will take effect on the first day of the month after you request the change.

If you were getting services through the Nursing Home Transition & Diversion (NHTD) 1915(c) waiver before enrolling in a FIDA Plan, you will have the opportunity to re-apply for the waiver. You will continue to get any existing Nursing Home Transition & Diversion services from Aetna Better Health FIDA Plan or enroll in a Medicaid Managed Long-Term Care plan to get your Medicaid services until your NHTD application is approved. New York Medicaid Choice can help you with your NHTD application.

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

## E. Getting help

### Getting help from Aetna Better Health FIDA Plan

Questions? We're here to help. Please call Participant Services at **1-855-494-9945** (TTY: **711**). We are available for phone calls 24 hours a day, 7 days a week. Calls to these numbers are free.

### Read your *2017 Participant Handbook*

The *2017 Participant Handbook* is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

An up-to-date copy of the *2017 Participant Handbook* is always available on our website at **www.aetnabetterhealth.com/newyork**. You may also call Participant Services at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week to ask us to mail you a *2017 Participant Handbook*.

### Visit our website

You can also visit our website at **www.aetnabetterhealth.com/newyork**. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

### Getting help from the state enrollment broker

New York Medicaid Choice is New York State's managed care enrollment program. New York Medicaid Choice counselors can tell you about all your managed care options. You can call New York Medicaid Choice at 1-855-600-FIDA, Monday through Friday from 8:30 am to 8:00 pm and Saturday from 10:00 am to 6:00 pm. TTY users should call 1-888-329-1541.


### Getting help from the Independent Consumer Advocacy Network

The Independent Consumer Advocacy Network (ICAN) can help you if you are having a problem with Aetna Better Health FIDA Plan. ICAN is not connected with us or with any insurance company or health plan. ICAN may be reached toll-free at 1-844-614-8800 or online at [icannys.org](http://icannys.org). (TTY users call 711, then follow the prompts to dial 844-614-8800.) The services are free.

### Getting help from the State Health Insurance Assistance Program

You can also call the State Health Insurance Assistance Program (SHIP). In New York State, the SHIP is called the Health Insurance Information, Counseling, and Assistance Program (HIICAP). The HIICAP counselors can help you understand your FIDA Plan choices and answer questions about switching plans. HIICAP is not connected with us or with any insurance company or health plan. The HIICAP phone number is 1-800-701-0501.

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **www.aetnabetterhealth.com/newyork**.

## 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

You can visit the Medicare website (<http://www.medicare.gov>). If you choose to disenroll from your FIDA Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans. You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to <http://www.medicare.gov> and click on “Find health & drug plans.”)

## Read *Medicare & You 2017*

You can read *Medicare & You 2017* 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 (<http://www.medicare.gov>) 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.


## Getting help from Medicaid

To get information directly from Medicaid, call the Medicaid Helpline at 1-800-541-2831 (TTY: 1-877-898-5849). The Medicaid Helpline is available Monday through Friday from 8:00 am to 8:00 pm and Saturday from 9:00 am to 1:00 pm.

## Getting help from the Quality Improvement Organization

Call Livanta, the Quality Improvement Organization (QIO) designated for the state of New York. The QIO works to improve the quality of care for people with Medicare. Call Livanta at (1-866-815-5440), TTY: 1-866-868-2289. The call is free.

---

 **If you have questions**, please call Aetna Better Health FIDA Plan at **1-855-494-9945** (TTY: **711**), 24 hours a day, 7 days a week. The call is free. **For more information**, visit **[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**.

**AETNA BETTER HEALTH FIDA PLAN**

55 W 125<sup>th</sup> St, Suite 1300  
New York, NY 10027



Aetna, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Aetna, Inc. does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Aetna, Inc.:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - 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
  - Information written in other languages

If you need these services, contact Aetna Medicaid Civil Rights Coordinator

If you believe that Aetna, Inc. 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 with: Aetna Medicaid Civil Rights Coordinator, 4500 Cotton Center Blvd., Phoenix, AZ 85040, 1-888-234-7358, TTY 711, 860-900-7667, [MedicaidCRCoordinator@aetna.com](mailto:MedicaidCRCoordinator@aetna.com). You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Aetna Medicaid Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, 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, D.C. 20201

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

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

**[www.aetnabetterhealth.com/newyork](http://www.aetnabetterhealth.com/newyork)**

**English:** ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-800-385-4104** (TTY: **711**).

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-385-4104** (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 **1-800-385-4104** (TTY: **711**)。

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-385-4104** (телетайп: **711**).

**French Creole:** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-800-385-4104** (TTY: **711**).

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-385-4104** (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 **1-800-385-4104** (TTY: **711**).

**Yiddish:** אויפמערקזאם: אויב איר רעדט אידיש, זענען פארהאן פאר אייך שפראך הילף סערוויסעס פריי פון אפצאל.  
**1-800-385-4104** (TTY: **711**) רופט

**Bengali:** লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নীচেরচায় ভাষা সহায়তা পরষিবো উপলব্ধ আছে। ফোন করুন **1-800-385-4104** (TTY: **711**)।

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-800-385-4104** (TTY: **711**).

**Arabic:** ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-800-385-4104** (رقم هاتف الصم والبكم: **711**).

**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-385-4104** (ATS: **711**).

**Urdu:** خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں **1-800-385-4104** (TTY: **711**)۔

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-385-4104** (TTY: **711**).

**Greek:** ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε **1-800-385-4104** (TTY: **711**).

**Albanian:** KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në **1-800-385-4104** (TTY: **711**).