

# Welcome to human care

Humana Healthy Horizons® in Florida members get a Medicaid plan that does more. We offer more rewards, more daily benefits and more support to put your best health in reach. That way, you have more time to focus on what you love. We give you the resources you need to feel your best, plus support you may not even realize you need. We call that human care.

We know that to achieve your best health, you need more than benefits. You need care for the whole you to keep you feeling good even after you leave the doctor's office. We are pleased to offer these medical, behavioral health and pharmacy benefits:

- Doctor's office visits
- Care during and after pregnancy
- Hospital services
- Prescriptions

- Vision care for adults
- Programs to stop smoking
- Behavioral health care and counseling services

For a full list of benefits, including expanded benefits, in lieu of services, and how to use them, find the Member Handbook at Humana.com/FloridaHandbook. You may also request a printed copy by calling 800-477-6931 (TTY: 711).





### **Important contact information**

**Member Services** 800-477-6931 (TTY: 711) Monday – Friday, 8 a.m. – 8 p.m.

**Community and supportive** services line 813-392-5303 (TTY: 711) Monday - Friday, 8 a.m. - 4:30 p.m.

Care Management 800-229-9880 (TTY: 711) Monday - Friday, 8:30 a.m. - 5 p.m.

Humana Healthy Horizons® Long-Term Care Plan 888-998-7732 (TTY: 711)

CenterWell Pharmacy® 800-526-1490 (TTY: 711)

HumanaFirst® nurse advice line 800-477-6931 (TTY: 711)

**Hear USA** 

877-664-9353 (TTY: 711)

Statewide optometry/routine vision services iCare Health Solutions 855-373-7627 (TTY: 711) www.MyiCareHealth.com

To find an ophthalmology provider, call Customer Care at 800-477-6931 (TTY: 711), Monday - Friday, 8 a.m. - 8 p.m., Eastern time, or visit Humana.com/FloridaDocuments to view the provider directory for your area.

**Behavioral Health Services** 888-778-4651 (TTY: 711)

**Access Behavioral Health** (Region A) 866-477-6725 (TTY: 711)

Carelon Behavioral Health (Regions B-I) 800-265-7590 (TTY: 711)

See page 8 for list of counties by region.

To update your name, address, county and phone number, please call:

- The Department of Children and Families (DCF) at 866-762-2237 (TTY: 711), or
- A Member Services representative at 800-477-6931 (TTY: 711), who can explain the steps for updating your information with DCF

## How to get care



### Choosing a doctor

Your primary care physician (PCP) is your main doctor. They aren't just someone to see when you're sick. They're there for yearly checkups, to answer your questions and to keep track of your health. Make sure their office is easy for you to get to. And, find someone who can speak your language and work with your needs.

You were assigned a PCP when you became a Humana member. Your member ID card includes your PCP's contact information. Your member ID card will come to you in the mail separate from this welcome kit.

If you want to change your PCP, use our Find a Doctor tool at **Humana.com/FindADoctor**. You can compare doctors in our network. You can also use the map to see the doctors near you. Or, you can call our Member Services at **800-477-6931 (TTY: 711)** to change your PCP.



### Getting care from someone other than your PCP

You may need a referral from your PCP to see any provider in our network, including specialists and hospitals. You can request that your PCP refer you to the specialist of your choice.

You can find a list of in-network providers at **Humana.com/FindADoctor**. If you would like a printed copy of the provider directory, call 800-477-6931 (TTY: 711).

If you need a special service or procedure, call Member Services at 800-477-6931 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., to find out if you need prior approval.



# Virtual visits with MDLive

Can't see your PCP immediately? You can connect with board-certified doctors 24 hours a day, seven days a week, via virtual visits with MDLIVE®. MDLIVE can provide treatment for a variety of healthcare needs including cold and flu symptoms, chronic conditions, skin conditions, prescription refills and medication adjustments, all from the comfort of your own home or while traveling.

Getting started is easy. You can use your computer, smartphone, tablet, or cell phone to receive care (data rates may apply). Choose any of these methods to connect with MDLive:

- 1. Visit www.MDLive.com/HumanaMedicaid.
- 2. Call 866-954-3589 (TTY: 711).
- 3. Download the MDLive mobile app from the Apple App Store or GooglePlay.



## How to get care after hours

If you need care after business hours, you can call our 24-hour nurse advice line at **800-477-6931**. Or you can contact your PCP's office. Visit **Humana.com/FloridaGo** for more information about when and where to get care.

If it's an emergency, call **911** or go to the emergency room.



# What to do in an emergency

Emergency services are services that you get when you are very ill or injured. If your condition is severe, call 911 or go to the nearest emergency room (ER) right away. You can go to any hospital or ER. If you are not sure if it is an emergency, call your primary care physician. Your PCP will tell you what to do.

The hospital or ER does not need to be part of our network or in our service area. You also do not need to get approval ahead of time to get emergency care. You don't need approval for the services you get in the ER to treat your condition.

If you have an emergency when you are away from home, get the medical care you need. Be sure to call Member Services when you are able and let us know.

# Digital support and information



### Humana's website

Your member webpage is at Humana.com/HealthyFlorida. There, you can find links to resources that will help you use your Humana plan, like:

- Member Handbook
- Provider directory
- Over-the-counter (OTC) information
- Find a Doctor tool
- Expanded benefits and more

You can download and print copies of these items at any time—and at no cost. You can also get printed copies, as well as items in other languages and formats. Just call Member Services at 800-477-6931 (TTY: 711), Monday - Friday, 8 a.m. - 8 p.m., Eastern time.



### MyHumana app

You're always on the go. That's why Humana has created the MyHumana app to use on your mobile device. You can:

- Review your health services history.
- Access your Humana member ID card.
- Find a provider by specialty or location. The app can even use your current location to find the nearest in-network provider—no matter where you are.\*

Download the MyHumana app for iPhone or Android by going to the Apple App Store® or Google Play®.



### MyHumana on the web

The app isn't the only way to get the tools you need. You can also use MyHumana on any web browser.

### How to sign in

When you go to **Humana.com/HealthyFlorida**, select the green "Sign in" button at the top right, then type in your username and password. You'll be able to see your coverage as well as tools and resources.

### How to sign up for MyHumana

If you have not signed up for MyHumana, you'll need to create an account. (Only members who are 18 and older are eligible for a MyHumana account.)

- Go to Humana.com/LogOn and select "Activate online account" under the heading "Don't have an account?"
- On the next screen, select "Start activation now."
- Choose Medicaid as your member type, then fill out the member information. You'll need to enter your member ID number, date of birth and ZIP code. Select "Continue" when you're ready.
- \* May require location sharing enabled on your phone.

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- Now, you'll get to set up your account information. Enter your email address, create a username and password, and choose a security question. Select "Submit" when you are done.
- A confirmation email will be sent to you to confirm your email address. Select the link in the email you receive to finish setting up your account.

You're all set! Now you can sign in to your MyHumana account online or in the app.



## **Go365 for Humana Healthy Horizons**

With Go365 for Humana Healthy Horizons®, you can earn rewards for healthy actions. This includes going to the doctor for an Annual Wellness Visit, getting a mammogram, colorectal and cervical cancer screenings, and much more.



#### How to earn and redeem rewards

If you have not registered for MyHumana, you'll need to create an account. (Only members who are 18 and older are eligible for a MyHumana account.)

- Download the Go365 for Humana Healthy Horizons app from the Apple App Store or Google Play on a mobile device.
- Create an account with Go365 for Humana Healthy Horizons. If you have a MyHumana account, you can access Go365® with the same username and password.
- Members under the age of 18 must have a parent or guardian register for them. The person registering a minor must have the minor's Medicaid member ID.





# Free smartphone

Smartphones can provide easy access to health-related information and enable members to stay connected to their care team and health plan. Humana members who qualify for the Federal Lifeline program are eligible to receive a free smartphone with monthly talk minutes, text and data.

### Extra benefits



### **OTC item orders**

You can order some over-the-counter (OTC) health and wellness items through the mail. Our mail-order pharmacy is CenterWell Pharmacy®. You will get generic versions of name-brand OTC items you order. Ask your doctor before taking any OTC medicine or vitamins.

For more information:

- Go to Humana.com/FloridaDocuments
- Call CenterWell Pharmacy at 800-526-1490 (TTY: 711), Monday Friday, 8 a.m. 6 p.m., Eastern time
- Call Member Services at 800-477-6931 (TTY: 711), Monday Friday, 8 a.m. 8 p.m., Eastern time



### **Care Management**

You may be able to work with a care manager if you:

- Have long-term care (LTC) coverage
- Need help managing your health and qualify for care management
- Join our HumanaBeginnings® program for pregnant moms

Your care manager will:

- Help you choose the doctor(s) you need to see
- Contact the doctor(s) so you can begin your services
- Work with you, your family, your caregivers, your doctors and other providers to make sure your services work with your medical care and other parts of your life

To speak with a care manager or enroll in Care Management, call 800-229-9880 (TTY: 711).

If you have LTC coverage, your care manager will contact you in the next five working days to set up time in your home to explain and review your long-term care services. If you need to speak with someone sooner, call 888-998-7732 (TTY: 711).



#### **Dental** care

Medicaid recipients in Florida can pick from three statewide dental plans:

#### **DentaQuest**

www.DentaQuest.com/State-Plans/Regions/Florida 888-468-5509

#### Liberty

Client.LibertyDentalPlan.com/FLMedicaid 833-276-0850

#### MCNA Dental

www.MCNA.net 800-282-3089

To pick a dental plan:

- Go to www.FLMedicaidManagedCare.com
- Call **877-711-3662** to speak with a Florida Medicaid Choice Counselor

You will get a dental ID card in the mail. Bring this ID card with you to all dental appointments. Learn more at Humana.com/FloridaDental.



### Special care from pregnancy to parenthood

At Humana Healthy Horizons, we know you want your baby to have a good start in life. We support both of you with benefits designed especially for your needs, including:

- Prenatal coverage
- Rewards for OB-GYN visits
- One-on-one care management

#### HumanaBeginnings

All moms need help before and after giving birth. HumanaBeginnings helps pregnant women and new moms—and their babies—get the special care they need. You can even earn rewards for going to your doctor visits. You will work one-on-one with a nurse care manager who can:

- Provide support and education on what to expect during your pregnancy
- Help schedule doctor visits for you and your baby
- Offer healthy eating and exercise advice
- Provide information and support for you and your newborn after you give birth, which can include breastfeeding education with one of our certified lactation consultants

To learn more about our HumanaBeginnings program:

- Call 800-322-2758 (ext. 1394119), Monday Friday, 8:30 a.m. 5 p.m., Eastern time
- Email CareManagementMemberOutreach FLMMA@humana.com
- Go to Humana.com/FloridaMoms



### We can help you quit smoking

We want to help you lead your healthiest life. Our tobacco and vaping cessation program connects you with a wellness coaching team. The program includes:

- Up to eight health coaching and support calls within 12 months of the first coaching session for members age 12 and older
- Nicotine replacement therapy upon request for members age 18 and older



### Need help getting to a medical appointment?

To set up a free ride to and from a healthcare appointment, members can:

- Call ModivCare at 866-779-0565, Monday Friday, 8 a.m. 5 p.m., Eastern time
- Call your care manager if you get LTC services

You must set up transportation at least 24 hours in advance.



### Therapy and counseling

We cover behavioral health to help with alcohol or drug use, crisis intervention, inpatient or outpatient mental health treatment, and more. Find a counselor, therapist or behavioral health provider through:

#### **Access Behavioral Health**

(Regions A)

866-477-6725 (TTY: 711)

www.ABHFL.org

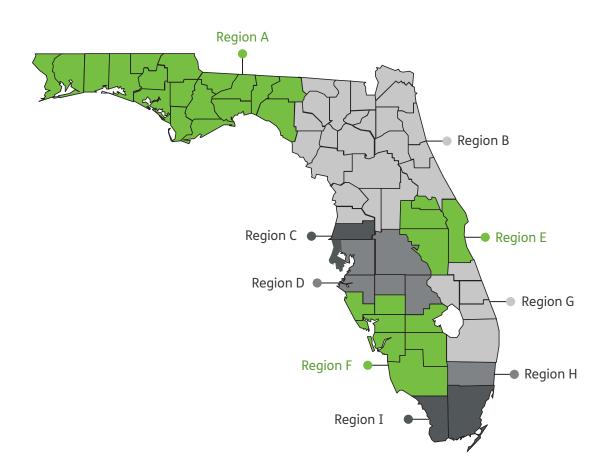
#### Carelon Behavioral Health

(Regions B-I)

800-265-7590 (TTY: 711)

www.CarelonBehavioralHealth.com

You do not need a referral from your PCP to call. In case of a behavioral health emergency, you can call the Suicide and Crisis Lifeline by dialing 988. Visit Humana.com/FloridaBH for more information.



- Region A: Bay, Calhoun, Escambia, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton and Washington (Formerly Regions 1 & 2)
- Region B: Alachua, Baker, Bradford, Citrus, Clay, Columbia, Dixie, Duval, Flagler, Gilchrist, Hamilton, Hernando, Lafayette, Lake, Levy, Marion, Nassau, Putnam, St. Johns, Sumter, Suwanee, Union and Volusia (Formerly Regions 3 & 4)
- Region C: Pasco and Pinellas

- Region D: Hardee, Highlands, Hillsborough, Manatee and Polk
- **Region E:** Brevard, Orange, Osceola and Seminole
- Region F: Charlotte, Collier, DeSoto, Glades, Hendry, Lee and Sarasota
- Region G: Indian River, Martin, Okeechobee, Palm Beach and St. Lucie
- Region H: Broward
- Region I: Miami-Dade and Monroe

# Medicaid plan enrollment



### **Initial Enrollment**

When you first join our plan, you have 120 days from your plan effective date to try our plan. If you do not like it, you can change your plan for any reason. After the 120 days, your enrollment is locked in for the rest of the plan year as long as you are eligible for Medicaid.

To change your plan, call the State's Enrollment Broker at 877-711-3662 (TTY: 866-467-4970), Monday -Thursday, 8 a.m. - 8 p.m., and Friday, or visit 8 a.m. - 7 p.m., or visit www.FLMedicaidManagedCare.com.



### **Open Enrollment Period**

Each year, you will have 60 days when you can change your plan if you want. This is called your Open Enrollment Period. The State's Enrollment Broker will send you a letter to tell you when your Open Enrollment Period is.

You do not have to change plans during your Open Enrollment Period. If you do choose to leave our plan and enroll in a new one, you will start with your new plan at the end of your Open Enrollment Period. Once you are enrolled in the new plan, you are locked-in until your next pen enrollment period. You can call the Enrollment Broker at 1-877-711-3662 (TDD 1-866-467-4970).



### Disenrollment for cause

If you want to change plans after you are locked in, you must have a state-approved good cause reason. For a list of state-approved reason to change plans., please refer to your Member Handbook or call the Statewide Medicaid Managed Care Help Line at 877-711-3662 (TTY: 866-467-4970), Monday – Thursday, 8 a.m. – 8 p.m., and Friday, 8 a.m. – 7 p.m.



### Reinstatement

If you lose your Medicaid eligibility and get it back within 180 days, you will be enrolled back into Humana Healthy Horizons. We will let you know in writing if you are re-enrolled in Humana Healthy Horizons in Florida.



### **Questions?**

If you have questions, need help getting to a doctor or other healthcare appointment, or want to find a doctor, please call us at 800-477-6931 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time. Our automated phone system may answer your call on Saturdays, Sundays, and some holidays. If you are asked to leave a message, we will call you back within 24 hours or on the next business day.

# **Insurance ACE Notice of Privacy Practices**

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The privacy of your personal and health information is important. You do not need to do anything unless you have a request or complaint.

This Notice of Privacy Practices applies to all entities that are part of the Insurance ACE, an Affiliated Covered Entity under HIPAA. The ACE is a group of legally separate covered entities that are affiliated and have designated themselves as a single covered entity for purposes of HIPAA. A complete list of the members of the ACE is available at https://huma.na/insuranceace

We may change our privacy practices and the terms of this notice at any time, as allowed by law, including information we created or received before we made the changes. When we make a significant change in our privacy practices, we will change this notice and send the notice to our health plan subscribers.

#### What is nonpublic personal or health information?

Nonpublic personal or health information includes both medical information and personal information, like your name, address, telephone number, Social Security number, account numbers, payment information, or demographic information. The term "information" in this notice includes any nonpublic personal and health information. This includes information created or received by a healthcare provider or health plan. The information relates to your physical or mental health or condition, providing healthcare to you, or the payment for such healthcare.

#### How do we collect information about you?

We collect information about you and your family when you complete applications and forms. We also collect information from your dealings with us, our affiliates, or others. For example, we may receive information about you from participants in the healthcare system, such as your doctor or hospital, as well as from employers or plan administrators, credit bureaus, and the Medical Information Bureau.

#### What information do we receive about you?

The information we receive may include such items as your name, address, telephone number, date of birth, Social Security number, premium payment history, and your activity on our website. This also includes information regarding your medical benefit plan, your health benefits, and health risk assessments.

#### How do we protect your information?

We have a responsibility to protect the privacy of your information in all formats including electronic and oral information. We have administrative, technical, and physical safeguards in place to protect your information in various ways including:

- Limiting who may see your information
- Limiting how we use or disclose your information
- Informing you of our legal duties about your information
- Training our employees about our privacy program and procedures

#### How do we use and disclose your information?

We use and disclose your information:

- To you or someone who has the legal right to act on your behalf
- To the Secretary of the Department of Health and Human Services

We have the right to use and disclose your information:

- To a doctor, a hospital, or other healthcare provider so you can receive medical care.
- For payment activities, including claims payment for covered services provided to you by healthcare providers and for health plan premium payments.
- For healthcare operation activities, including processing your enrollment, responding to your inquiries, coordinating your care, improving quality, and determining premiums.
- For performing underwriting activities. However, we will not use any results of genetic testing or ask questions regarding family history.
- To your plan sponsor to permit them to perform, plan administration functions such as eligibility, enrollment, and disenrollment activities. We may share summary level health information about you with your plan sponsor in certain situations. For example, to allow your plan sponsor to obtain bids from other health plans. Your detailed health information will not be shared with your plan sponsor. We will ask your permission, or your plan sponsor must certify they agree to maintain the privacy of your information.
- To contact you with information about health-related benefits and services, appointment reminders, or treatment alternatives that may be of interest to you. If you have opted out, we will not contact you.
- To your family and friends if you are unavailable to communicate, such as in an emergency.
- To your family and friends, or any other person you identify. This applies if the information is directly relevant to their involvement with your health care or payment for that care. For example, if a family member or a caregiver calls us with prior knowledge of a claim, we may confirm if the claim has been received and paid.
- To provide payment information to the subscriber for Internal Revenue Service substantiation.
- To public health agencies, if we believe that there is a serious health or safety threat.
- To appropriate authorities when there are issues about abuse, neglect, or domestic violence.
- In response to a court or administrative order, subpoena, discovery request, or other lawful process.
- For law enforcement purposes, to military authorities and as otherwise required by law.
- To help with disaster relief efforts.
- For compliance programs and health oversight activities.
- To fulfill our obligations under any workers' compensation law or contract.
- To avert a serious and imminent threat to your health or safety or the health or safety of others.
- For research purposes in limited circumstances and provided that they have taken appropriate measures to protect your privacy.
- For procurement, banking, or transplantation of organs, eyes, or tissue.
- To a coroner, medical examiner, or funeral director.

#### Will we use your information for purposes not described in this notice?

We will not use or disclose your information for any reason that is not described in this notice, without your written permission. You may cancel your permission at any time by notifying us in writing.

The following uses and disclosures will require your written permission:

- Most uses and disclosures of psychotherapy notes
- Marketing purposes
- Sale of personal and health information

#### What do we do with your information when you are no longer a member?

Your information may continue to be used for purposes described in this notice. This includes when you do not obtain coverage through us. After the required legal retention period, we destroy the information following strict procedures to maintain the confidentiality.

#### What are my rights concerning my information?

We are committed to responding to your rights request in a timely manner

- Access You have the right to review and obtain a copy of your information that may be used to make decisions about you. You also may receive a summary of this health information. As required under applicable law, we will make this personal information available to you or to your designated representative.
- Adverse Underwriting Decision If we decline your application for insurance, you have the right to be provided a reason for the denial.
- Alternate Communications To avoid a life-threatening situation, you have the right to receive your information in a different manner or at a different place. We will accommodate your request if it is reasonable.
- Amendment You have the right to request correction of any of this personal information through amendment or deletion. Within 60 business days of receipt of your written request, we will notify you of our amendment or deletion of the information in dispute, or of our refusal to make such correction after further investigation. If we refuse to amend or delete the information in dispute, you have the right to submit to us a written statement of the reasons for your disagreement with our assessment of the information in dispute and what you consider to be the correct information. We shall make such a statement accessible to any and all parties reviewing the information in dispute.\*
- \*This right applies only to our Massachusetts residents in accordance with state regulations.
- Disclosure You have the right to receive a listing of instances in which we or our business associates have disclosed your information. This does not apply to treatment, payment, health plan operations, and certain other activities. We maintain this information and make it available to you for six years. If you request this list more than once in a 12-month period, we may charge you a reasonable, cost-based fee.
- Notice You have the right to request and receive a written copy of this notice anytime.
- Restriction You have the right to ask to limit how your information is used or disclosed. We are not required to agree to the limit, but if we do, we will abide by our agreement. You also have the right to agree to or terminate a previously submitted limitation.

#### If I believe that my privacy has been violated, what should I do?

If you believe that your privacy has been violated, you may file a complaint with us by calling us at 1-866-861-2762 anytime.

You may also submit a written complaint to the U.S. Department of Health and Human Services, Office for Civil Rights (OCR). We will give you the appropriate OCR regional address on request. You can also email your complaint to **OCRComplaint@hhs.gov**. If you elect to file a complaint, your benefits will not be affected, and we will not punish or retaliate against you in any way. We support your right to protect the privacy of your personal and health information.

#### **Our Responsibilities**

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

#### How do I exercise my rights or obtain a copy of this notice?

All of your privacy rights can be exercised by obtaining the applicable forms. You may obtain any of the forms by:

- Contacting us at 1-866-861-2762
- Accessing our website at Humana.com and going to the Privacy Practices link
- Send completed request form to: Humana Inc. Privacy Office 003/10911 101 E. Main Street Louisville, KY 40202

#### Notice of Non-Discrimination

Humana Inc. and its subsidiaries comply with applicable Federal civil rights laws and do not discriminate or exclude people because of their race, color, religion, gender, gender identity, sex, sexual orientation, age, disability, national origin, military status, veteran status, genetic information, ancestry, ethnicity, marital status, language, health status, or need for health services. Humana Inc.:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services 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 assistance services to people whose primary language is not English, which may include:
  - Qualified interpreters
  - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids, or language assistance services contact 800-477-6931 (TTY: 711), Monday through Friday, from 8 a.m. to 8 p.m., Eastern time. If you believe that Humana, Inc. has not provided these services or discriminated on the basis of race, color, religion, gender, gender identity, sex, sexual orientation, age, disability, national origin, military status, veteran status, genetic information, ancestry, ethnicity, marital status, language, health status, or need for health services, you can file a grievance in person or by mail, or email with Humana Inc.'s Non-Discrimination Coordinator at P.O. Box 14618, Lexington, KY 40512-4618, 800-477-6931 (TTY: 711), or accessibility@humana.com. If you need help filing a grievance, Humana Inc.'s Non-Discrimination Coordinator can help you.

You can also file a 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, S.W., Room 509F, HHH Building Washington, D.C. 20201. 800-368-1019, 800-537-7697 (TDD).

This notice is available at Humana.com/FloridaAccessibility.

Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan, Inc.

FLHMEDTEN ITN25 Approved

ENGLISH: This information is available for free in other languages and formats. Please contact our Customer Service number at **800-477-6931**. If you use **TTY**, call **711**, Monday – Friday, 8 a.m. to 8 p.m.

SPANISH: Esta información está disponible gratuitamente en otros idiomas y formatos. Comuníquese con nuestro Servicio al Cliente llamando al 800-477-6931. Si usa un TTY, marque 711. El horario de atención es de lunes a viernes de 8 a.m. a 8 p.m.

**CREOLE:** Enfòmasyon sa a disponib gratis nan lòt lang ak fòma. Tanpri kontakte nimewo Sèvis Kliyan nou an nan 800-477-6931. Si ou itilize TTY, rele 711, Lendi - Vandredi, 8 a.m. a 8 p.m.

**FRENCH:** Ces informations sont disponibles gratuitement dans d'autre langues et formats. N'hésitez pas à contacter notre service client au 800-477-6931. Si vous utilisez un appareil de télétype (TTY), appelez le 711 du lundi au vendredi, de 8h00 à 20h00.

ITALIAN: Queste informazioni sono disponibili gratuitamente in altre lingue e formati. La preghiamo di contattare il servizio clienti al numero 800-477-6931. Se utilizza una telescrivente (TTY), chiami il numero 711 dal lunedì al venerdì tra le 8 e le 20:00.

RUSSIAN: Данную информацию можно получить бесплатно на других языках и в форматах. Для этого обратитесь в отдел обслуживания клиентов по номеру 800-477-6931. Если Вы пользователь ТТҮ, звоните по номеру 711 с понедельника по пятницу, с 8.00 до 20.00. Auxiliary aids and services, free of charge, are available to you. 800-477-6931 (TTY: 711), Monday through Friday, from 8:00 a.m. to 8:00 p.m., Eastern time.

Humana Inc. and its subsidiaries comply with Section 1557 by providing free auxiliary aids and services to people with disabilities when auxiliary aids and services are necessary to ensure an equal opportunity to participate. Services include qualified sign language interpreters, video remote interpretation, and written information in other formats.

English: ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 800-477-6931 (TTY: 711).

Español: (Spanish) ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-477-6931 (TTY: 711).

Kreyòl Ayisyen: (French Creole) ATANSYON: Si w pale Kreyòle Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 800-477-6931 (TTY: 711).

Tiếng Việt: (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Goi số 800-477-6931 (TTY: 711).

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