



Quartz Champion

(800) 394-5566 (TTY: 711)

QuartzBenefits.com/DualEligible



2027 Summary of Benefits

Effective January 1, 2027

Quartz Dual Eligible with Rx plans
Gundersen • UW Health



Summary of Benefits

This Summary of Benefits booklet gives you an overview of what **Quartz Medicare Advantage Dual Eligible with Rx plans** cover and what you pay. It doesn't list every service that we cover or every limitation or exclusion. To get a complete list of services we cover, call a Quartz Champion and ask for the "Evidence of Coverage." Phone numbers are listed on the next page.

Quartz Medicare Advantage Dual Eligible with Rx is a D-SNP HMO plan that has a contract with Medicare and with a State Medicaid program. Enrollment in this plan depends on contract renewal. Benefits, premiums, copayments, and coinsurance **may change on January 1 of each year**. Limitations, copayments, and restrictions may apply. Other pharmacies/physicians/providers are available in our network. Other plans may be available in the service area. The formulary, pharmacy network, and provider network may change at any time. You will receive notice about these changes when necessary.

This information is not a complete description of the benefits. Call **(800) 394-5566 (TTY: 711)** for more information.

Who can join?

To join Quartz Medicare Advantage, you must be entitled to Medicare Part A, enrolled in Medicare Part B, live in the service areas listed below, and be a U.S. citizen or lawfully present in the U.S. To qualify and remain enrolled in a Quartz Dual Eligible plan, you must be eligible for both Medicare and Medicaid. Our service area includes the following Wisconsin counties:

- **Gundersen Quartz Medicare Advantage Dual Eligible with Rx:** La Crosse County.
- **UW Health Quartz Medicare Advantage Dual Eligible with Rx:** Dane County.

These plans are for people with **both Medicare and Medicaid**. How much Medicaid covers depends on your income, resources, and other factors. You can join a Quartz Dual Eligible plan if you are in one of these Medicaid groups:

- 1. Qualified Medicare Beneficiary Plus (QMB+).**
 - You get Medicaid coverage of Medicare cost-share.
 - You get full Medicaid benefits.
 - Medicaid pays your Part A and Part B premiums, deductibles, coinsurance, and copays for Medicare-covered services.
- 2. Qualified Medicare Beneficiary (QMB).**
 - You get Medicaid coverage of Medicare cost-share.
 - You do not get full Medicaid benefits.
 - Medicaid only pays your Part A and Part B premiums, deductibles, coinsurance, and copays for Medicare-covered services.

Which doctors, hospitals, and pharmacies can I use?

Quartz offers access to a network of doctors, hospitals, pharmacies, and other providers. Generally, you need to use network pharmacies to fill your prescriptions for covered Part D drugs. If you use providers not in our network, the plan may not pay for those services. For some services, you can use providers that are not in our network. You can see our provider and pharmacy directories on our website at QuartzBenefits.com/DualFindADoctor and QuartzBenefits.com/MAFindAPharmacy, or call us and we will send you a copy.

What do we cover?

We cover everything that Original Medicare covers – and more. Our plan members get more benefits than what is covered by Original Medicare. You may pay more in our plan for some of these benefits than you would in Original Medicare. For others, you may pay less. You’ll find some of these benefits outlined in this booklet.

We cover Part D drugs. We also cover Part B drugs such as chemotherapy and some drugs administered by your provider. You can see the complete plan formulary (list of covered Part D drugs) and any restrictions on our website, QuartzBenefits.com/2027MAFormulary, or call us and we will send you a copy of the formulary.

BadgerCare Plus and Wisconsin Medicaid covered benefits

In addition to the plan benefits covered in the grid on the following pages, members eligible for full Medicaid benefits (QMB+) will have coverage of the items listed below. This is not a complete list. You can find more details on Medicaid-covered and non-covered benefits in the ForwardHealth Enrollment and Benefits Handbook at dhs.wisconsin.gov/library/p-00079.htm.

- Case management services
- Chiropractic services
- Dental services
- Family planning services and supplies
- HealthCheck (early and periodic screening, diagnosis and treatment) for people under age 21
- Some home and community-based services
- Home health services or nursing services if a home health agency is unavailable
- Hospice care
- Inpatient hospital services other than services in an institution for mental disease
- Inpatient hospital, skilled nursing facility, and intermediate care facility services for patients in institutions for mental disease who are:
 - Under 21 years of age
 - Under 22 years of age and was getting services when they turned 21 years of age
 - 65 years of age or older
- Intermediate care facility services, other than services at an institution for mental disease
- Laboratory and X-ray services
- Medical supplies and equipment
- Mental health and medical day treatment
- Mental health and psychosocial rehabilitative services, including case management services, provided by staff of a certified community support program
- Nurse midwife services
- Nursing services, including services performed by a nurse practitioner
- Optometric/optical services, including eyeglasses
- Outpatient hospital services
- Personal care services
- Physical and occupational therapy
- Physician services
- Podiatry services

How do I know how much my drug will cost?

The amount you pay for your drug depends on whether or not you have Extra Help, also known as Part D Low-Income Subsidy (LIS), and the LIS Level you qualify for. Please see the prescription drug chart on page 14 for details on how much you would pay for each available LIS Level or the standard Part D benefit (do not receive Extra Help).

Need more information?

If you’re a member or would like to become one, please call us at **(800) 394-5566 (TTY: 711)**, or go to our website at QuartzBenefits.com/DualEligible.
Hours: From October 1 to March 31, you can call us seven days a week from 8 a.m. to 8 p.m. From April 1 to September 30, you can call us Monday through Friday from 8 a.m. to 8 p.m.

More information about Original Medicare

If you want to know more about the coverage and costs of Original Medicare, look in the current “Medicare and You” handbook. View it online at [medicare.gov](https://www.medicare.gov) or get a copy by calling **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY users, **1-877-486-2048**.

Pre-enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a Quartz Champion at **(800) 394-5566 (TTY: 711)**.

Understanding the benefits

- ❑ **The Evidence of Coverage (EOC)** provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. To view a copy of the EOC, visit QuartzBenefits.com/DualEligible or call **(800) 394-5566 (TTY: 711)**.
- ❑ **The Provider Directory.** Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- ❑ **The Pharmacy Directory.** Review the pharmacy directory to make sure the pharmacy you use for any prescription medicine is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- ❑ **The Formulary.** Review the formulary to make sure your drugs are covered.

Understanding important rules

- ❑ You will need to continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- ❑ Benefits, premiums, and/or copayments/coinsurance may change on **January 1, 2027**.
- ❑ Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in our provider and pharmacy directories).
- ❑ Effect on current coverage. If you are currently enrolled in a Medicare Advantage plan, your current Medicare Advantage health care coverage will end once your new Medicare Advantage coverage starts. If you have TRICARE, your coverage may be affected once your new Medicare Advantage coverage starts. Please contact TRICARE for more information. If you have a Medigap plan, once your Medicare Advantage coverage starts, you may want to drop your Medigap policy because you will be paying for coverage you cannot use.

This plan is a Dual Eligible Special Needs Plan (D-SNP). Your ability to enroll will be based on verification that you are entitled to both Medicare and medical assistance from a state plan under Medicaid.

Benefit	Gundersen Quartz Dual Eligible with Rx (La Crosse County)	UW Health Quartz Dual Eligible with Rx (Dane County)
Monthly premium, deductible, and limits on how much you pay for covered services*		
Monthly plan premium	\$0 per month If you have full Medicaid benefits and are a Qualified Medicare Beneficiary, you will pay \$0 for your Medicare-covered services	\$0 per month If you have full Medicaid benefits and are a Qualified Medicare Beneficiary, you will pay \$0 for your Medicare-covered services
Medical deductible	None	None
Medical maximum out-of-pocket responsibility Please note that you will still need to pay your monthly premiums. If you reach the limit on out-of-pocket costs, you will keep getting covered hospital and medical services, and we will pay the full cost for the rest of the year.	Your yearly limit(s) in this plan: \$9,850 for services you receive from in-network providers	Your yearly limit(s) in this plan: \$9,850 for services you receive from in-network providers
Inpatient hospital coverage	No cost for members, up to Medicare limits	No cost for members, up to Medicare limits
Outpatient hospital coverage	\$0 copay	\$0 copay
Doctor's office visits Telehealth visits with your in-network provider or specialist have the same copays as a doctor's office visit.	\$0 copay	\$0 copay

Benefit	Gundersen Quartz Dual Eligible with Rx (La Crosse County)	UW Health Quartz Dual Eligible with Rx (Dane County)
Preventive care	You pay nothing	You pay nothing
	Our plan covers many preventive services, including: • Abdominal aortic aneurysm screening • Alcohol misuse counseling • Bone mass measurement • Breast cancer screening (mammogram) • Cardiovascular disease (behavioral therapy) • Cardiovascular screening • Cervical and vaginal cancer screening • Colorectal cancer screenings (colonoscopy, fecal occult blood test, flexible sigmoidoscopy) • Depression screening • Diabetes screening • HIV screening <i>List continues to the right.</i>	Covered preventive services continued: • Lung cancer screening • Medical nutrition therapy services • Obesity screening and counseling • Prostate cancer screenings (PSA) • Sexually transmitted infections screening and counseling • Tobacco use cessation counseling (for people with no sign of tobacco-related diseases) • Vaccines, including flu shots, hepatitis B shots, pneumococcal shots • “Welcome to Medicare” preventive visit (one-time) • One annual wellness visit per calendar year • One annual routine physical per calendar year Quartz covers all preventive services approved by Medicare.
Emergency/Urgent care	\$0 copay \$20,000 max benefit/yearly combined for all coverages outside the United States and its territories (emergency care, urgent care, and ambulance)	\$0 copay \$20,000 max benefit/yearly combined for all coverages outside the United States and its territories (emergency care, urgent care, and ambulance)
Diagnostic services, labs, and imaging	\$0 copay	\$0 copay
Hearing services	Annual routine hearing exam: \$0 copay Hearing aids: \$3,000 limit for hearing aids every 2 years	Annual routine hearing exam: \$0 copay Hearing aids: \$3,000 limit for hearing aids every 2 years
Dental services Covers preventive & comprehensive dental services with a Delta Dental network provider who also accepts Medicaid. Open network available with balance billing.	Medicare-covered dental exam: \$0 copay Coverage for preventive and comprehensive dental services: \$2,500 limit	Medicare-covered dental exam: \$0 copay Coverage for preventive and comprehensive dental services: \$2,500 limit
Vision services	Initial routine eye exam each year: \$0 copay \$500 annual limit for eyeglasses and contacts (frames, lenses, and upgrades)	Initial routine eye exam each year: \$0 copay \$500 annual limit for eyeglasses and contacts (frames, lenses, and upgrades)

Benefit	Gundersen Quartz Dual Eligible with Rx (La Crosse County)	UW Health Quartz Dual Eligible with Rx (Dane County)
Mental health services Includes mental well-being support, with access to therapy, coaching, and virtual appointments within five days.	\$0 copay	\$0 copay
Skilled nursing facility Prior authorization may be required. A hospital stay is not required.	\$0 copay	\$0 copay
Rehabilitation services Prior authorization may be required.	\$0 copay	\$0 copay
Ambulance for ground and air (per trip)	\$0 copay \$20,000 max benefit/yearly combined for all coverages outside the United States and its territories (emergency care, urgent care, and ambulance)	\$0 copay \$20,000 max benefit/yearly combined for all coverages outside the United States and its territories (emergency care, urgent care, and ambulance)
Non-emergent transportation	Quartz® CashCard is preloaded with \$500 a year to use for Uber, Lyft, and taxi rides to and from routine medical appointments and toward fitness memberships	Quartz® CashCard is preloaded with \$500 a year to use for Uber, Lyft, and taxi rides to and from routine medical appointments and toward fitness memberships
Medicare Part B Drugs These drugs are generally given to you in the clinic by your doctor. Prior authorization may be required.	For Part B drugs (such as chemotherapy, etc.): \$0 copay	For Part B drugs (such as chemotherapy, etc.): \$0 copay
Chiropractic (per visit)	20% coinsurance	20% coinsurance
Podiatry benefit	20% coinsurance	20% coinsurance

Benefit	Gundersen Quartz Dual Eligible with Rx (La Crosse County)	UW Health Quartz Dual Eligible with Rx (Dane County)
Care Management programs for the prevention, management, and support of chronic conditions Members with diabetes meeting criteria will have 0% cost-sharing on continuous glucose monitors (CGMs).	For members with select chronic conditions and enrolled in a Quartz Care Management program, the following benefits can be available: • Blood pressure monitor: Plan provides one device every four years for specified devices and suppliers for members with congestive heart failure or hypertension • Scales: Plan provides \$20 limit every three years for members with congestive heart failure, hypertension, and/or diabetes • Quartz Nourishing Meal Program: Two meals for up to six weeks, and then one food box monthly for up to six months, plus one call with a registered dietitian for members with congestive heart failure	For members with select chronic conditions and enrolled in a Quartz Care Management program, the following benefits can be available: • Blood pressure monitor: Plan provides one device every four years for specified devices and suppliers for members with congestive heart failure or hypertension • Scales: Plan provides \$20 limit every three years for members with congestive heart failure, hypertension, and/or diabetes • Quartz Nourishing Meal Program: Two meals for up to six weeks, and then one food box monthly for up to six months, plus one call with a registered dietitian for members with congestive heart failure
Medical equipment & supplies Prior authorization may be required.	Durable medical equipment (e.g., wheelchairs, oxygen), continuous glucose monitors (CGMs), and insulin pumps: \$0 copay Prosthetics (e.g., braces, artificial limbs): \$0 copay Preferred brand Accu-Chek diabetes supplies, such as blood glucose meters (BGMs), test strips, lancets, etc.: \$0 copay Self-management training: \$0 copay	Durable medical equipment (e.g., wheelchairs, oxygen), continuous glucose monitors (CGMs), and insulin pumps: \$0 copay Prosthetics (e.g., braces, artificial limbs): \$0 copay Preferred brand Accu-Chek diabetes supplies, such as blood glucose meters (BGMs), test strips, lancets, etc.: \$0 copay Self-management training: \$0 copay
Quartz® CashCard	Quartz CashCard is preloaded with \$500 a year to use toward fitness memberships and rides to routine medical appointments Over-the-counter (OTC) Get \$325/quarter for health and wellness items, first-aid supplies, and other qualifying items Grocery and utilities Get \$60/quarter for internet, phone, cable services, electric, and gas bills, or groceries OTC and grocery & utilities benefits reload every 3 months (Jan, Apr, Jul, Oct). Use your Quartz CashCard at participating retailers	Quartz CashCard is preloaded with \$500 a year to use toward fitness memberships and rides to routine medical appointments Over-the-counter (OTC) Get \$325/quarter for health and wellness items, first-aid supplies, and other qualifying items Grocery and utilities Get \$75/quarter for internet, phone, cable services, electric, and gas bills, or groceries OTC and grocery & utilities benefits reload every 3 months (Jan, Apr, Jul, Oct). Use your Quartz CashCard at participating retailers

Benefit	Gundersen Quartz Dual Eligible with Rx (La Crosse County)	UW Health Quartz Dual Eligible with Rx (Dane County)
Virtual visits	Emplify Health by Gundersen virtual care allows you to get non-urgent medical care right from your phone or online with MyChart at MyChart.EmplifyHealth.org. Virtual care options include video visits, an online MyChart questionnaire, or MyChart messages provided by a physician or other medical professional.	UW Health Care Anywhere app or website Get 24/7 online access to non-emergency urgent care services via a mobile or web-based device: \$0 copay per visit
Acupuncture benefit	Routine acupuncture care is covered when you visit a network provider. \$20 copay per visit	Routine acupuncture care is covered when you visit a network provider. \$20 copay per visit
Quartz Nourishing Meal Program after a hospital or skilled nursing facility stay	Get 20 meals delivered to your home after a hospital or skilled nursing facility stay, at no extra charge. Limited to four times per calendar year	Get 20 meals delivered to your home after a hospital or skilled nursing facility stay, at no extra charge. Limited to four times per calendar year
Travel benefit	You may receive all plan-covered services at in-network costs for one-month increments, up to six months when traveling nationwide outside of the states of Illinois, Iowa, Minnesota, and Wisconsin	You may receive all plan-covered services at in-network costs for one-month increments, up to six months when traveling nationwide outside of the states of Illinois, Iowa, Minnesota, and Wisconsin
Personal Emergency Response System benefit	A wearable monitoring device connects you to live emergency operators 24/7/365 at the touch of a button. This helps maintain your independence, knowing that emergency medical services and first responders are accessible in the event of an emergency. Eligibility for a Personal Emergency Response System is based on factors including, but not limited to: living situation, living alone, history of falls, mobility, fall risk, and medical diagnoses. \$0 copay	A wearable monitoring device connects you to live emergency operators 24/7/365 at the touch of a button. This helps maintain your independence, knowing that emergency medical services and first responders are accessible in the event of an emergency. Eligibility for a Personal Emergency Response System is based on factors including, but not limited to: living situation, living alone, history of falls, mobility, fall risk, and medical diagnoses. \$0 copay
Fitness memberships	Quartz® CashCard is preloaded with \$500 a year to use toward fitness memberships and for Uber, Lyft, and taxi rides to and from routine medical appointments	Quartz® CashCard is preloaded with \$500 a year to use toward fitness memberships and for Uber, Lyft, and taxi rides to and from routine medical appointments



Part D prescription coverage

Type	Retail or mail-order		
	30-day	31 to 60-day	61 to 100-day
Extra Help Copay if you have LIS Level 3			
Generic drugs	\$0	\$0	\$0
Brand/Other drugs	\$0	\$0	\$0
Select Care drugs	\$0	\$0	\$0
Vaccines	\$0	\$0	\$0
Extra Help Copay if you have LIS Level 2			
Generic drugs	\$1.65	\$1.65	\$1.65
Brand/Other drugs	\$5.00	\$5.00	\$5.00
Select Care drugs	\$0	\$0	\$0
Vaccines	\$0	\$0	\$0
Extra Help Copay if you have LIS Level 1			
Generic drugs	\$5.80	\$5.80	\$5.80
Brand/Other drugs	\$14.40	\$14.40	\$14.40
Select Care drugs	\$0	\$0	\$0
Vaccines	\$0	\$0	\$0
Standard Part D Benefit – Does not receive Extra Help			
Generic drugs	Deductible \$700, then 25% coinsurance	Deductible \$700, then 25% coinsurance	Deductible \$700, then 25% coinsurance
Brand/Other drugs	Deductible \$700, then 25% coinsurance	Deductible \$700, then 25% coinsurance	Deductible \$700, then 25% coinsurance
Insulins	\$35 or 25% (whichever is less)	\$70 or 25% (whichever is less)	\$105 or 25% (whichever is less)
Select Care drugs	\$0	\$0	\$0
Vaccines	\$0	\$0	\$0

Fill your prescriptions at any in-network retail or mail order pharmacy (except Tier 5).
Tier 5 (Specialty) 30-day supply is available in retail and specialty pharmacy locations only;
not available through mail-order pharmacies. Covered opioid pain medications limited to a
30-day supply.

Opioids

You can get up to a 30-day supply of covered opioid pain medications. To help promote safe use,
extended-day supplies are not covered.

Protecting your privacy

Quartz Health Plan Corporation and Quartz Health Plan MN Corporation are committed to
protecting the privacy and confidentiality of your protected personal and health information. We
comply with all state and federal privacy laws, including the Gramm-Leach-Bliley Act (GLBA),
the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information
Technology for Economic and Clinical Health Act (HITECH). These laws require that we provide
our members with a Privacy Notice that explains our privacy practices. We must also provide
you with access to your records, allow you to request corrections to your information and allow
you to request that access to your information be limited. In order to provide you with insurance
products and services, we must collect healthcare and personal information about you. Access
to your information is restricted to those persons who need to know in order to provide service
or administer Quartz Health Plan Corporation and Quartz Health Plan MN Corporation insurance
products and services. We maintain physical, electronic, and procedural safeguards that comply
with state and federal laws to protect your information. Quartz Health Plan Corporation and Quartz
Health Plan MN Corporation do not use, disclose, sell, or make available any protected personal
or health information about you to affiliates or non-affiliated third parties, unless required or
permitted by law. Furthermore, if any of this information is disclosed without your authorization, we
will notify you as required by law.

Our Notice of Privacy Practices is available online at [QuartzBenefits.com/Privacy-Practices](https://www.QuartzBenefits.com/Privacy-Practices) or by
calling a Quartz Champion at **(800) 394-5566 (TTY: 711)** to request a copy.

Notice of nondiscrimination

Discrimination is against the law.

Quartz Medicare Advantage (HMO) and Quartz Med Advantage Dual Eligible w/Rx are the marketing names operating under the entities of Quartz Health Plan Corporation and Quartz Health Plan MN Corporation. These companies are separate legal entities. In this notice, “we” refers to these companies. We comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex (includes sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes). We do not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

- We provide 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)
- We provide 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 these services, contact **Customer Success** at **(800) 362-3310**.

If you believe that we have 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:

Chief Compliance Officer; 2650 Novation Parkway, Fitchburg, WI 53713
Phone: (800) 362-3310 (TTY: 711); Fax: (608) 644-3500
Email: AppealsSpecialists@QuartzBenefits.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our Chief Compliance Officer 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 **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
(800) 368-1019; (800) 537-7697 (TDD)

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



Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

ATTENTION: If you speak another language, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call (800) 394-5566 (TTY: 711) or speak to your provider.

Español / Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al (800) 394-5566 (TTY: 711) o hable con su proveedor.

Lus Hmoob / Hmong

LUS CEEV TSHWJ XEEB: Yog hais tias koj hais Lus Hmoob muaj cov kev pab cuam txhais lus pub dawb rau koj. Cov kev pab thiab cov kev pab cuam ntxiv uas tsim nyog txhawm rau muab lus qhia paub ua cov hom ntaub ntawv uas tuaj yeem nkag cuag tau rau los kuj yeej tseem muaj pab dawb tsis xam tus nqi dab tsi ib yam nkaus. Hu rau (800) 394-5566 (TTY: 711) los sis sib tham nrog koj tus kws muab kev saib xyuas kho mob.

Soomaali / Somali

FIIRO GAAR AH: Haddaad ku hadasho Soomaali, adeegyo kaalmada luuqadda ah oo bilaash ah ayaad heli kartaa. Qalab caawinaad iyo adeegyo oo habboon si loogu bixiyo macluumaadka qaabab la adeegsan karo ayaa sidoo kale bilaa lacag heli karaa. Wac (800) 394-5566 (TTY: 711) ama la hadal bixiyahaaga.

Việt / Vietnamese

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số (800) 394-5566 (Người khuyết tật: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

中文 / Chinese

注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 (800) 394-5566（文本电话：711）或咨询您的服务提供商。

РУССКИЙ / Russian

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону (800) 394-5566 (TTY: 711) или обратитесь к своему поставщику услуг.

Deutsch / German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie (800) 394-5566 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

QuartzBenefits.com

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ລາວ / Laotian

ເຊີນຊາບ: ຖ້າທ່ານເວົ້າພາສາ ລາວ, ຈະມີບໍລິການຊ່ວຍດ້ານພາສາແບບບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ມີເຄື່ອງຊ່ວຍ ແລະ ການບໍລິການແບບບໍ່ເສຍຄ່າທີ່ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນໃນຮູບແບບທີ່ສາມາດເຂົ້າເຖິງໄດ້. ໂທຫາເບີ (800) 394-5566 (TTY: 711) ຫຼື ລົມກັບຜູ້ໃຫ້ບໍລິການຂອງທ່ານ.

አማርኛ / Amharic

ማሳሰቢያ:- አማርኛ የሚናገሩ ከሆኑ፣ የቋንቋ ድጋፍ አገልግሎት በነፃ ይቀርብልዎታል። መረጃን በተደራሽ ቅርጸት ለማቅረብ ተገቢ የሆኑ ተጨማሪ እገዛዎች እና አገልግሎቶች እንዲሁ በነፃ ይገኛሉ። በስልክ ቁጥር (800) 394-5566 (TTY: 711) ይደውሉ ወይም አገልግሎት አቅራቢዎን ያናግሩ።

ထာန့်လီဖဲအံ / Karen

ဆူ- နမ့်ကတိၤ ထာန့်လီဖဲအံၤ အဃိ, တၢ်အိၣ်ဒီး ကျိၣ်တၢ်ဆိၣ်ထွဲမၤစၢၤ လၢတလၢ် ဘျုၣ်လၢ်စ့ၤလၢနဂီၢ်လီၤ. တၢ်အိၣ်ဒီး တၢ်မၤစၢၤတၢ်န့ၢ်ဟူၤပီးလီၤဒီး တၢ်မၤစၢၤတၢ်မၤ လၢအ ကြၢးအဘၣ် လၢကဟ့ၣ်တၢ်ဂ့ၢ်တၢ်ကျိၤ လၢတၢ်မၤန့ၢ်အိၤသ့တဖၣ် လၢတလၢ်ဘျုၣ်လၢ်စ့ၤ လၢနဂီၢ်လီၤ. ကိး (800) 394-5566 (TTY: 711) မ့တမ့ၢ် ကတိၤတၢ်ဒီး နပှၤလၢဟ့ၣ် နၤတၢ်ကွၢ်ထွဲမၤစၢၤတက့ၢ်.

Српски / Serbian

ПАЖЊА: Ако говорите Српски, обезбеђена вам је преводилачка услуга. Додатна одговарајућа помоћ и услуге за пружање информација у доступним форматима такође су доступни без надокнаде. Назовите (800) 394-5566 (TTY: 711) или разговарајте са вашим пружаоцем услуга.

ភាសាខ្មែរ / Khmer

សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយ ភាសាខ្មែរ បសវាកម្មជំនួយភាសា ឥតគិតថ្លៃគឺមានសង្ហារម្មក។ ជំនួយ និងបសវាកម្មខ្មែរជាការជួយសមរម័យ ក្នុងការផ្តល់ព័ត៌មានតាមទម្រង់ ខ្មែរអាចចូលប្រើប្រាស់នៃ កម្មវិធីរក្សាបទប្បញ្ញត្តិខ្មែរ។ ជៀសវាងការប្រើប្រាស់ (800) 394-5566 (TTY: 711) ឬនិយាយជៀសវាងនឹងអ្នកផ្តល់បសវាកម្មសម្រាប់អ្នក។

Français / French

ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le (800) 394-5566 (TTY : 711) ou parlez à votre fournisseur.

한국어 / Korean

주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. (800) 394-5566 (TTY: 711) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Tagalog / Tagalog

PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa (800) 394-5566 (TTY: 711) o makipag-usap sa iyong provider.