L.A. Care Medi-Cal

Medi-Cal Member

Annual Guide | 2022

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L.A. Care Medi-Cal

Dear L.A. Care Member,

L.A. Care Health Plan (**L.A. Care**) is sharing this yearly packet of Medi-Cal benefit information and resources to help you stay healthy.

This information will give you an overview of Medi-Cal and benefits and services to help you access care. The services are available at no cost to you.

For more information about L.A. Care and Medi-Cal benefits and services, visit our website at **lacare.org** or call Member Services at **1-888-839-9909** (**TTY 711**) 24 hours a day, 7 days a week.

Sincerely,
L.A. Care Health Plan

Note: *If you receive a Medi-Cal renewal packet from the Los Angeles County Department of Public Social Services (DPSS), it is important to fill it out and send it back to DPSS before it is due to keep your Medi-Cal coverage.*

L.A. Care Medi-Cal

Learn about your Medi-Cal Plan

Medi-Cal Managed Care

What is Medi-Cal?

- Medi-Cal (California's Medicaid program) is a public health insurance program that provides health care coverage for low-income individuals and families who meet defined eligibility requirements
- Medi-Cal offers no-cost and low-cost health coverage to eligible people living in California

What is Medi-Cal Managed Care?

- Medi-Cal Managed Care is an organized system to help members get high-quality care and stay healthy
- Medi-Cal Managed Care health plans help members find doctors, pharmacies and health education programs
- Medi-Cal Managed Care health plans also offer care coordination, referrals to specialists, 24-hour nurse advice telephone services and customer service centers

What is the L.A. Care Medi-Cal Plan?

- L.A. Care Medi-Cal Plan is a free public program that provides health care coverage to adults, families, older adults and people with disabilities who meet the income requirements
- People in managed care must see doctors who work with their health plan and their medical group (if they have one)

Who is Your Primary Care Provider (PCP)?

- Your PCP is your main doctor and is the first person you go to when you have a health problem
- Your PCP makes sure you get the right care in the right place at the right time
- All new members should see their PCP for the first time within three months of joining L.A. Care for an initial health assessment (IHA)

How to Change Your PCP?

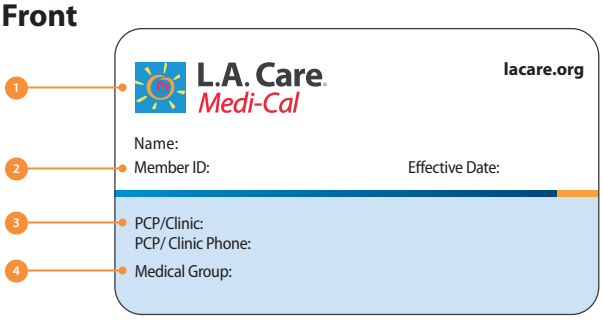
There are two ways to change your PCP:

- Call L.A. Care Member Services at **1-888-839-9909** (**TTY 711**) 24 hours a day, 7 days a week, including holidays
- Visit **lacare.org/family-resource-centers** or call **1-877-287-6290** (**TTY 711**) Monday – Friday from 9:00 a.m. to 5:00 p.m. to locate a Family/Community Resource Center near you

What's on Your L.A. Care Member ID Card?

1. The name of your health plan: L.A. Care
2. Your member ID number
3. Your Primary Care Provider (PCP) and his/her number
4. Your Medical Group (if you have one)
5. L.A Care's Member Services' phone number and other important information and telephone numbers

Front



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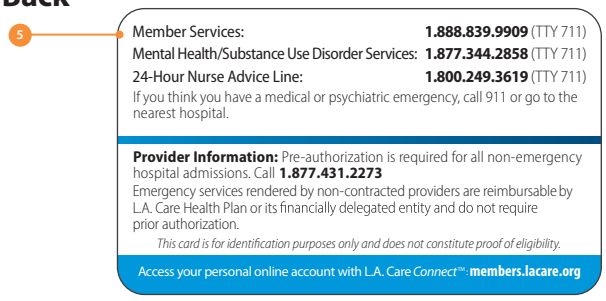


If you receive a bill from your doctor, urgent care center, hospital or other service provided by L.A. Care

- You must call L.A. Care's Member Services right away at **1-888-839-9909** (**TTY 711**) 24 hours a day, 7 days a week, including holidays
- Full scope Medi-Cal benefits and services are offered to members at no cost
- You do not need to pay
- You have the right to file a complaint or grievance report

** If you have SSI-Linked Medi-Cal you have to update your information through Social Security. You can call them at **1-800-772-1213** **TTY 1-800-325-0778** Monday–Friday from 8:00 a.m. – 7:00 p.m.*

What is a Prior Authorization?

- Your PCP may want to refer you to a "specialist" or prescribe a drug not covered by Medi-Cal
- A specialist is an expert in one part of the body or on one type of illness or service
- Examples are cardiologists and surgeons. If you need specialized care or service, your PCP must ask for approval before you go. This request is known as a "prior authorization"

If you move or need to update your information, you should do one of the following*

- Call your county eligibility worker at the Department of Public Social Services (DPSS) at **1-866-613-3777** or **1-626-569-1399** | **TTY 1-800-660-4026** Monday – Friday from 7:30 a.m. – 7:30 p.m., and Saturdays from 8:00 a.m. – 4:30 p.m. (excluding county holidays)
- Call L.A. Care Member Services at **1-888-839-9909** (**TTY 711**) 24 hours a day, 7 days a week, including holidays
- Visit a Family Resource Center/Community Resource Center. To locate an FRC/CRC near you visit **lacare.org/family-resource-centers** or call **1-877-287-6290** (**TTY 711**) Monday – Friday from 9:00 a.m. to 5:00 p.m.

L.A. Care Medi-Cal

Family/Community Resource Centers

What are Family/Community Resource Centers?

- L.A. Care's Family/Community Resource Centers offer many free services tailored to members and the community related to health and wellness
- Services offered include free health and wellness classes, customer care, free WiFi for telehealth services, linkage to assistance programs, Medi-Cal enrollment support and social services assistance
- You can schedule an appointment by visiting: **lacare.org/family-resource-centers** and using the online scheduling tool

Health Education Services

L.A. Care offers many health education programs and resources. Some of these resources include:

- Special programs for mothers and babies
- Cold and flu prevention
- Written materials in your desired language and format
- Community referrals
- Nurse advice line

All health education services are at no charge to you. To learn more call **1-855-856-6943** (**TTY 711**) Monday–Friday from 8:00 a.m.–5:00 p.m. or go to **lacare.org/healthy-living/health-resources/health-education**.

Community Link

- L.A. Care Community Link helps members connect with community agencies for assistance with housing, food, bills and lots more
- Visit **communitylink.lacare.org** to search for free or reduced cost services and take a Social Factors of Health Survey

Free Interpreter Services

- You have the right to get an interpreter when you speak with your doctor
- L.A. Care offers free interpreter services, including American Sign Language
- You do not have to use a family member or friend as an interpreter, except in an emergency
- To ask for an interpreter, call L.A. Care Member Services 24 hours a day, 7 days a week, including holidays, at **1-888-839-9909** (**TTY 711**) at least 10 days before your visit

Please have the following information ready when you call:

  - Your name
  - Your L.A. Care member ID number
  - Date and time of your appointment
  - Doctor's name
  - Doctor's address and phone number
- If your appointment has changed or is cancelled, please call L.A. Care Member Services as soon as possible

Medi-Cal Renewal

Why do I have to renew my Medi-Cal?

Some Medi-Cal beneficiaries must renew their Medi-Cal benefits each year to keep their health care coverage. Keep your Medi-Cal benefits by renewing on time. Here is some important renewal information:

- Some members may be renewed automatically. If DPSS is able to automatically verify your income information, you will be sent an approval notice of action (NOA) letter
  - A renewal packet will be mailed to members annually if DPSS is not able to verify your income information
  - The forms in this packet must be filled out and returned to the DPSS by the due date listed in the packet
- If you have questions about renewing your health care coverage, please call DPSS.
- Here are some important DPSS contact information to help you with your renewal:

1. BenefitsCal website: **benefitscal.com**

BenefitsCal is a website for LA County residents to apply for and to view their benefits online for CalWORKs, CalFresh, and Medi-Cal applications.

2. Website: **dpss.lacounty.gov**
   Helpful resources including links to CSC and online applications.
3. DPSS Customer Service Center (CSC) telephone numbers

Toll Free	**866-613-3777**
Local numbers	**626-569-1399** **310-258-7400** **818-701-8200**
Hours of Operation	The CSC is available to assist you: • Monday – Friday from 7:30 a.m. – 7:30 p.m. • Saturdays from 8:00 a.m. – 4:30 p.m. • Excluding holidays

How long do I have until I get disenrolled from Medi-Cal?

- Medi-Cal benefits will discontinue at the end of the renewal due month if the renewal packet is not returned
- Members have up to 90 days from the effective date of discontinuance to provide the information needed to re-establish coverage
- After 90 days, members will have to submit a new Medi-Cal application

How do I update my information?

Correct personal information is important to get needed care and to renew your Medi-Cal coverage when it is due to prevent a gap in benefits.

- If your name has changed, you have moved to a different address, have a new telephone number, or need to report a correction to your personal information, please call the Los Angeles County Department of Public Social Services at **1-866-613-3777** Monday – Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (excluding holidays) or visit **dpss.lacounty.gov**.

What happens after I return my form?

- DPSS will send you a letter to let you know if you still qualify for Medi-Cal coverage. If additional information is needed to renew your coverage, DPSS will send you a letter requesting the missing information

If you have questions about Medi-Cal renewal:

- Contact your Medi-Cal case worker at your local DPSS office at **1-866-613-3777** or **1-626-569-1399** (**TTY/TDD 1-800-660-4026**) Monday – Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (excluding holidays)
- More information including contact information is included in the letter you may receive

L.A. Care Medi-Cal

Benefits Highlights

L.A. Care Health Plan provides a comprehensive set of health benefits.*

More details about your benefits can be found in the Medi-Cal Member Handbook available online at ***lacare.org****.*

More Benefits. At No Cost To You.

Ambulatory & General Benefits and Services

- Primary Care Doctor and Specialist Visits
- Outpatient Surgery
- Urgent Care and Retail Clinics
- Lab Services and X-Rays
- Flu Shots and Other Recommended Vaccines
- COVID-19 Testing and Vaccination
- Maternity and Newborn Care
- Delivery and Postpartum Care
- Nurse and Midwife Services
- Pediatric Services (Early and Periodic Screening, Diagnostic and Treatment)
- Podiatry
- Chiropractic
- Treatment Therapies
- Dialysis/Hemodialysis
- Nurse Advice Line
- Telehealth

Preventive & Wellness Benefits

- Health in Motion™ Program
- Disease Management Programs
- Smoking Cessation Services
- Family Planning Services

Behavioral Health Services

- Outpatient Mental Health Services
- Outpatient and Inpatient Specialty Mental Health Services
- Outpatient Substance Use Disorder Services/Alcohol Misuse Screening
  - Voluntary Inpatient Detoxification

** This is a summary only.*

Hospital Services

- Inpatient Services
- Surgical Services
- Major Organ and Tissue Transplant

Emergency Services

- Emergency Room Services
- Ambulance Services

Pharmacy Benefits

- Prescription Drugs (via Medi-Cal Rx: **medi-calrx.dhcs.ca.gov**)

Rehabilitative & Habilitative Services

- Physical Therapy
- Occupational Therapy
- Audiology
- Speech Therapy
- Hearing Exams
- Durable Medical Equipment
- Acupuncture
- Home Health Services
- Orthotics/Prostheses
- Medical Supplies, Equipment and Appliances
- Skilled Nursing Facility (Up to 90 Days)

Other Services

- Vision/Optometry
- Transportation
- Non-Emergency Medical Transportation
  - Litter Van
  - Wheelchair Van
  - Ambulance
- Non-Medical Transportation
  - Private or public vehicle for people who do not have another way to get to their appointment
- Long Term Services and Supports
  - Skilled Nursing Facilities (91+ Days)
  - Home and Community Based Services
- Dental Care (via Medi-Cal Dental formally known as Denti-Cal: (**dental.dhcs.ca.gov**)

** Benefits are subject to change. Please call L.A.Care Member Services at **1-888-839-9909 (TTY 711)** 24 hours a day, 7 days a week, including holidays for more information or go to **lacare.org**. Your health care provider may need to get approval for some benefits and services.*

L.A. Care Medi-Cal | VSP Vision Care

Keep your eyes healthy

with VSP Vision Care

We make your eye health our top priority. *As a Vision Care member, you'll receive access to care from great eye doctors, quality eyewear, and affordable eye care, so you can see clearly and live a healthy life.*

Regular Eye Exams are Important

With VSP® you'll get great care from a VSP network doctor, including a WellVision Exam® — an exam designed to find signs of vision and health conditions like diabetes and high blood pressure.

Using Your VSP Benefit is Easy

View your coverage. Review your personalized coverage details and find an in-network doctor by creating an account at vsp.com using your L.A. Care Health Plan ID number (located on your card).

See an in-network doctor. Log-in to your account on **vsp.com** to find a VSP Participating Provider for Medi-Cal near you or call VSP Member Services Department at **1-800-877-7195** (**TTY 1-800-428-4833**), Monday through Friday 5 a.m. to 6 p.m.

At your appointment, tell them you have VSP through L.A. Care Health Plan. Show your L.A. Care Health Plan card at your appointment.

That's it! We'll handle the rest—there are no claim forms to complete when you see a VSP Participating Provider.

Questions? Visit **vsp.com** or call VSP at **1-800-877-7195** (**TTY 1-800-428-4833**), Monday through Friday 5 a.m. to 6 p.m.

Know Your Care Options

Types of Care	Types of Provider	Examples of Services	Estimated Wait Times
Nurse Advice Line	**Licensed RN** Talk to a nurse 24/7	• Self-care advice • Answers to health questions • Choosing where to get care	• No wait time
Primary Care	**Primary Care Provider (PCP)** Call your PCP first when you need care	• Preventive care • Sudden or short-term health problems • Long-term conditions or diseases like diabetes	• 10 business days or less • Some same-day appointments
Urgent Care	**Telehealth Services** Talk with a doctor over the phone or online	• Cold/flu/fever • Rashes • Infections (skin/eye/ear/UTI) • Respiratory (wheezing/cough) • Stomach (pain/vomiting/diarrhea) • Minor injuries	• Minutes to hours
	Retail Clinics Located in retail pharmacy and staffed by a nurse practitioner		• Minutes to hours • Schedule a visit and check approximate walk-in wait times online
	Urgent Care Center Receive same day care from doctors, even after hours and weekends		• Minutes to hours
Emergency Care	**Emergency Room** Care for life-threatening conditions. Do not use the ER for routine care or mild illness	• Chest pain • Sudden vision changes • Weakness/trouble talking	• Wait depends on how sick/ hurt you are

For more information on cost and how to access these services visit: **lacare.org/members/getting-care** or call the number on the back of your Member ID Card.

If you need further assistance, contact L.A. Care Member Services at **1-888-839-9909** (**TTY 711**), 24 hours a day, 7 days a week, including holidays.

Medi-Cal, Cal MediConnect, PASC and L.A. Care Covered™ members may use telehealth services. Members who also have Medicare may not be able to use telehealth services. All telehealth services may not be covered by your health plan. Please refer to your plan handbook or call L.A. Care at the number on your ID card.

L.A. Care Medi-Cal

COVID-19

is a very contagious infection caused by the coronavirus

The virus is spread from person to person and can be prevented.
It's time to get back to care. Your health care providers are working to keep you safe during health care visits.

Health care providers are keeping their offices clean and safe in ways like:	**Remember to always follow the 3 C's:**
• Wearing masks at all times • Frequently cleaning exam rooms and waiting areas • Socially distancing at least 6 feet • Limiting appointment times to keep healthy and sick patients separate	• Avoid closed spaces • Avoid crowded places • Avoid close-contact settings, such as close conversations
It is important to take care of your health:	
• Call your health care provider to find out about safety practices at their office, like changes to the check-in process and waiting room • Ask your health care provider if your visit can be done over the phone or through video	• Ask your health care provider or pharmacy about home delivery for prescriptions. If you have a chronic condition, you can request a 90-day supply of medication • Don't skip visits • Get your COVID-19 vaccine

If you think you may have COVID-19, call your health care provider's office right away. Do not go to the provider's office without calling first. You can also call L.A. Care's Nurse Advice Line at **1-800-249-3619** (**TTY 711**). Do not delay getting emergency or urgent care for any health issues.

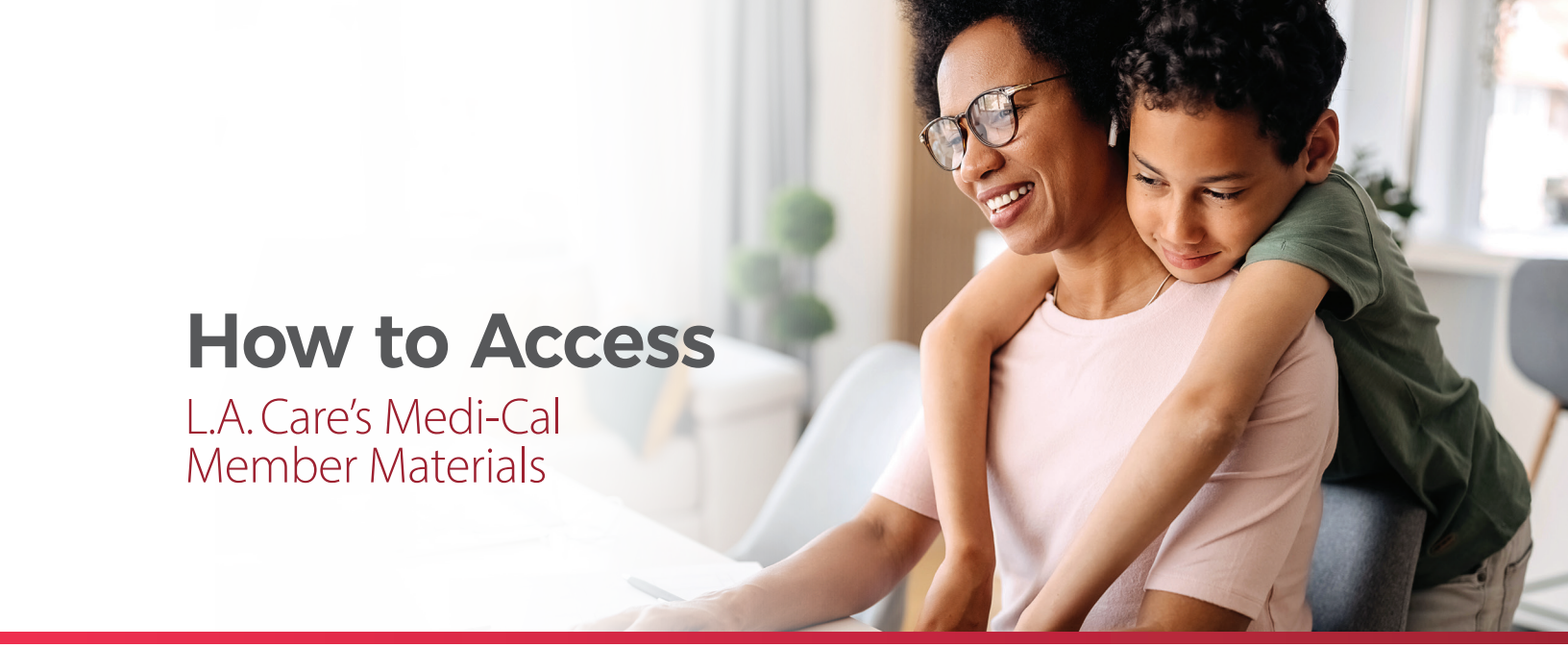
Wear a mask to protect your family, friends and community.

COVID-19 vaccines save lives. L.A. Care and public health agencies recommend that everyone who is eligible get the COVID-19 vaccine.

The vaccines are safe and highly effective in preventing serious illness, hospitalization and death. The vaccines do not infect you with the COVID-19 virus. The vaccines do not make you sterile and they do not include a microchip. Side effects are generally mild and go away after a day or two, while the benefit of the vaccine remains. Getting vaccinated will help end the pandemic.

For more information on COVID-19, visit: **lacare.org/vaccine**.

Free language assistance services are available. Call L.A. Care **1-888-839-9909** (**TTY 711**) 24 hours a day, 7 days a week, including holidays. **The call is free.**



How to Access

L.A. Care's Medi-Cal Member Materials

L.A. Care Health Plan *provides you information about your Medi-Cal benefits, covered drugs and the doctors that work with L.A. Care. It is easy to view or print the Medi-Cal Member Handbook, Provider Directory and Pharmacy Drug Formulary.*

Search

lacare.org | 24 hours a day, 7 days a week

To view and print the Medi-Cal Member Materials, you can visit L.A. Care's website and click on Member Materials (Medi-Cal).

Visit L.A Care

During normal business hours

Visit the L.A. Care Welcome Center or one of L.A. Care's Community Resource Centers to get a print copy of our Medi-Cal Member Materials, to have a customer service representative answer your questions, or to receive a new member orientation on how to access your new Medi-Cal benefits.

Call

1-888-839-9909 (**TTY 711**)
24 hours a day, 7 days a week, including holidays

A L.A. Care Member Services staff can help you with any questions you have about how to access the Member Handbook, Provider Directory and the Pharmacy Drug Formulary.

To get this information in another language or in an alternative format, like large print, audio, or Braille, please call L.A. Care Member Services at **1-888-839-9909** (**TTY 711**) 24 hours a day, 7 days a week, including holidays.

Reminder: *if you receive a Medi-Cal renewal packet from the Los Angeles County Department of Public Social Services (DPSS), it is important to fill it out and send it back to DPSS before it is due to keep your Medi-Cal coverage.*

L.A. Care Medi-Cal

NONDISCRIMINATION NOTICE

Discrimination is against the law. L.A. Care Health Plan follows State and Federal civil rights laws. L.A. Care Health Plan does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

L.A. Care Health Plan provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
  - ✓ Qualified sign language interpreters
  - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- 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 L.A. Care Health Plan 24 hours a day, 7 days a week, including holidays, by calling **1-888-839-9909**. If you cannot hear or speak well, please call **TTY 711**. Upon request, this document can be made available to you in braille, large print, audio cassette, or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

L.A. Care Health Plan
Member Services Department
1055 West 7th Street, 10th Floor
Los Angeles, CA 90017

HOW TO FILE A CIVIL RIGHTS GRIEVANCE

If you believe that L.A. Care Health Plan has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with L.A. Care Health Plan Chief Compliance Officer. You can file a civil rights grievance by phone, in writing, in person, or electronically:

- **By phone**: Contact L.A. Care Health Plan Chief Compliance Officer, 24 hours a day, 7 days a week, including holidays, by calling **1-888-839-9909**. Or, if you cannot hear or speak well, please call **TTY 711**.
- **In writing**: Fill out a complaint form or write a letter and send it to:

  L.A. Care Health Plan
  Chief Compliance Officer
  1055 West 7th Street, 10th Floor
  Los Angeles, CA 90017

Email: **civilrightscoordinator@lacare.org**

- **In person**: Visit your doctor's office or L.A. Care Health Plan and say you want to file a civil rights grievance.
- **Electronically**: Visit L.A. Care Health Plan website at **www.lacare.org/members/member-support/file-grievance/grievance-form** or send an email to **civilrightscoordinator@lacare.org**.

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office for Civil Rights by phone, in writing, or electronically:

- **By phone**: Call **916-440-7370**. If you cannot speak or hear well, please call 711 (**Telecommunications Relay Service**).
- **In writing**: Fill out a complaint form or send a letter to:

  Deputy Director, Office of Civil Rights
  Department of Health Care Services
  Office of Civil Rights
  P.O. Box 997413, MS 0009
  Sacramento, CA 95899-7413

  Complaint forms are available at **http://www.dhcs.ca.gov/Pages/Language_Access.aspx**.

- Electronically: Send an email to **CivilRights@dhcs.ca.gov**.

OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- **By phone**: Call **1-800-368-1019**. If you cannot speak or hear well, please call **TTY/TDD 1-800-537-7697**.
- **In writing**: Fill out a complaint form or send a letter to:

  U.S. Department of Health and Human Services
  200 Independence Avenue, SW
  Room 509F, HHH Building
  Washington, D.C. 20201

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

- **Electronically**: Visit the Office for Civil Rights Complaint Portal at **https://ocrportal.hhs.gov/ocr/portal/lobby.jsf**.

Language Assistance

English

ATTENTION: If you need help in your language call **1-888-839-9909** (**TTY 711**). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call **1-888-839-9909** (**TTY 711**) . These services are free of charge.

Spanish

ATENCIÓN: si necesita ayuda en su idioma, llame al **1-888-839-9909** (**TTY 711**). También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al **1-888-839-9909** (**TTY 711**). Estos servicios son gratuitos.

Arabic

يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ **1-888-839-9909 (TTY 711)** تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة بريل والخط الكبير. اتصل بـ **1-888-839-9909 (TTY 711)** هذه الخدمات مجانية.

Armenian

ՈՒՇԱԴՐՈՒԹՅՈՒՆ: Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք **1-888-839-9909** (**TTY 711**): Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ՝ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Զանգահարեք **1-888-839-99099** (**TTY 711**): Այդ ծառայություններն անվճար են:

Cambodian

ចំណាំ៖ បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក សូម ទូរស័ព្ទទៅលេខ **1-888-839-9909** (**TTY 711**) ។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរផុស សម្រាប់ជនពិការភ្នែក ឬ ឯកសារសរសេរជាអក្សរពុម្ពធំ ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទមកលេខ **1-888-839-9909** (**TTY 711**)) ។ សេវាកម្មទាំងនេះមិនគិតថ្លៃឡើយ។

Chinese

请注意：如果您需要以您的母语提供帮助，请致电 **1-888-839-9909** (**TTY 711**)。另外还提供针对残疾人士的帮助和服务，例如文盲和需要较大字体阅读，也是方便取用的。请致电 **1-888-839-9909** (**TTY 711**)。这些服务都是免费的。

Farsi

توجه: اگر می‌خواهید به زبان خود کمک دریافت کنید، با **1-888-839-9909 (TTY 711)** تماس بگیرید. کمک‌ها و خدمات مخصوص افراد دارای معلولیت، مانند نسخه‌های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با **1-888-839-99099 (TTY 711)** تماس بگیرید. این خدمات رایگان ارائه می‌شوند.

Hindi

ध्यान दें: अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो **1-888-839-9909** (**TTY 711**) पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। **1-888-839-9909** (**TTY 711**) पर कॉल करें। ये सेवाएं नि:शुल्क हैं।

Hmong

CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau **1-888-839-9909** (**TTY 711**). Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau **1-888-839-9909** (**TTY 711**). Cov kev pab cuam no yog pab dawb xwb.

Japanese

注意日本語での対応が必要な場合は **1-877-287-6290** (**TTY 711**) へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のためのサービスも用意しています。**1-877-287-6290** (**TTY 711**) へお電話ください。これらのサービスは無料で提供しています。

Korean

유의사항: 귀하의 언어로 도움을 받고 싶으시면 **1-877-287-6290** (**TTY 711**) 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. **1-877-287-6290** (**TTY 711**) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

Laotian

ປະກາດ: ຖ້າທ່ານຕອ້ງການຄວາມຊວ່ຍເຫອຼືໃນພາສາຂອງທ່ານໃຫໂ້ທຫາເບ ໄ**1-877-287-6290** (**TTY 711**). ຍງັມຄີວາມຊວ່ຍເຫອຼືແລະການບລໍກິານສຳລບັຄນົພກິານ ເຊນັເອກະສານທເີ່ປັນ ອກັສອນນນູແລະມໂຕພມິໃຫຍ ໃຫໂ້ທຫາເບ ໄ**1-877-287-6290** (**TTY 711**). ການບລໍກິານເຫຼົ່ນບີ້ ່ຕອ້ງເສຍຄາ່ໃຊຈ້າ່ຍໃດໆ.

Mien

LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux **1-888-839-9909** (**TTY 711**). Liouh lorx jauvlouc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hluo mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx **1-888-839-9909** (**TTY 711**). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.

Panjabi

ਧਿਆਨ ਦਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਚਿ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ **1-888-839-9909** (**TTY 711**). ਅਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਵਿੇ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਚਿ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ| ਕਾਲ ਕਰੋ **1-888-839-9909** (**TTY 711**). ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ|

Russian

ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру **1-888-839-9909** (**TTY 711**). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру **1-888-839-9909** (**TTY 711**). Такие услуги предоставляются бесплатно.

Tagalog

ATENSIYON: Kung kailangan mo ng tulong sa iyong wika, tumawag sa **1-888-839-9909** (**TTY 711**). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan,tulad ng mga dokumento sa braille at malaking print. Tumawag sa **1-888-839-9909** (**TTY 711**)**.** Libre ang mga serbisyong ito.

Thai

โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปทีหมายเลข **1-888-839-9909** (**TTY 711**) นอกจากนี ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลทีมีความพิการ เช่น เอกสารต่าง ๆ ทีเป็นอักษรเบรลล์และเอกสารทีพิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปทีหมายเลข **1-888-839-9909** (**TTY 711**) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี

Ukrainian

УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер **1-888-839-9909** (**TTY 711**). Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер **1-888-839-9909** (**TTY 711**). Ці послуги безкоштовні.

Vietnamese

CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số **1-888-839-9909** (**TTY 711**). Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi Braille và chữ khổ lớn (chữ hoa). Vui lòng gọi số **1-888-839-9909** (**TTY 711**). Các dịch vụ này đều miễn phí.

L.A. Care Medi-Cal

1.888.839.9909 | TTY 711 lacare.org

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