

Eligible Expenses

These pages outline which items are approved expenses that can be paid from a health savings account (HSA) or flexible spending account (FSA). This list of items indicates whether a purchase is eligible, potentially eligible (under specific conditions) or ineligible.

This document is reviewed and updated periodically throughout the year. For the most up-to-date list visit learn-carefirst.hellofurther.com.

Definitions

- ✓ **Eligible:** Reimbursable medical expenses include services and supplies for members and their eligible dependents for the diagnosis, treatment or prevention of disease and medical care transportation. In general, deductions allowed for medical expenses on federal income tax, according to Internal Revenue Code Section 213(d), may be reimbursed through an HSA or FSA. Medical expenses reimbursed through an HSA or FSA cannot be deducted from federal income tax.
- ! **Potentially eligible:** For potentially eligible items, we require a letter of medical necessity from your health care provider.
- ✗ **Ineligible:** Products and services that are not FSA or HSA-eligible include general health and wellbeing products such as toiletries and cosmetics.

OTC: Over the counter. Items noted only with "OTC" are eligible without a prescription.

Capital expense: This is an improvement or special equipment added to a home or other asset that may be eligible for reimbursement if the primary purpose is medical care. Constructing a wheelchair access ramp for your home is an example of a capital expense.

Letter of medical necessity: A letter signed by your doctor or eligible licensed health care provider certifying that an item or service is medically necessary.

Valid prescription: A written order signed by your doctor or eligible licensed health care provider who can prescribe drugs to patients. The prescription should contain the date of issue, patient name and address, name and quantity of the prescribed drug, directions for use and the name and address of the prescriber.

The CARES Act of March 2020 expanded the benefits of HSAs and FSAs by removing the prescription requirement for several OTC drugs and medicines, and by adding feminine hygiene products to the list of expenses eligible for reimbursement. This means you can now use your HSA or FSA to reimburse yourself for several everyday items, or if you have a debit card associated with your account, you can use the card to pay for them directly.

Prior to the passage of the act, these items were only eligible for reimbursement with a prescription. Now that the prescription is no longer required, you can make these purchases using the pre-tax funds you've set aside.

Which OTC items are now eligible expenses?

If you have a health reimbursement arrangement (HRA) or a part of a voluntary employee beneficiary association (VEBA), check with your health plan as the eligible items may differ.

You can find a more complete list of eligible expenses [here](#), but some of the most common items that removed the prescription requirement include:

- Cold, cough, and flu medicine
- Tampons, pads, and liners
- Pain relievers and anti-inflammatory medications
- Allergy and sinus medicine
- Digestive aids and laxatives
- Baby rash ointments and creams
- Baby electrolytes
- Sleep aids
- Skin treatments for conditions such as eczema and psoriasis
- Acid controllers
- Acne medications

The expanded eligible expenses list is a permanent change and these newly added items are retroactively eligible beginning on January 1, 2020, meaning you can file for reimbursement for these items if you've purchased them since the beginning of 2020.

If you try to purchase these new items with a CareFirst debit card, and your card is declined, it is likely because the retailer has not yet finished updating their systems to mark these items as eligible. You can keep your receipt and file for reimbursement.

Item list

Please note: Changes to the IRS rules can affect eligible, potentially eligible, and/or ineligible expense categories. Please refer to the IRS website at [irs.gov](https://www.irs.gov) for updates.

If you have any questions about a product or service, please contact customer service at 866-758-6119, Monday through Friday from 8 a.m. to 9 p.m. EST and Saturday through Sunday 9 a.m. to 5 p.m. EST.

Item	Eligibility	Notes
Abdominal supports	✓ Eligible	
Abortion	✓ Eligible	
Acid controllers/antacids	✓ Eligible	
Acne treatment	✓ Eligible	
Acupuncture	✓ Eligible	
Air conditioner	! Potentially eligible	Capital expense
Air purifier	! Potentially eligible	Capital expense
Alcoholism treatment	✓ Eligible	
Allergy medicine	✓ Eligible	OTC
Analgesics (e.g., vaporizing rub)	✓ Eligible	OTC
Anti-arthritis	✓ Eligible	
Antibiotics	✓ Eligible	
Anti-diarrhea medicine	✓ Eligible	OTC
Anti-gas, antacid	✓ Eligible	OTC
Antihistamines	✓ Eligible	OTC

Item	Eligibility	Notes
Anti-inflammatory	✓ Eligible	OTC
Antiperspirant	✗ Ineligible	
Arch supports	✓ Eligible	
Artificial limbs	✓ Eligible	
Aspirin	✓ Eligible	OTC
Asthma treatments (e.g., inhaler, nebulizer)	✓ Eligible	
Athletic club membership	! Potentially eligible	
Automobile modifications	! Potentially eligible	Capital expense
Band-Aid/bandages	✓ Eligible	OTC
Bariatric surgery	✓ Eligible	
Behavioral modification programs	! Potentially eligible	
Birth control pills	! Potentially eligible	Valid prescription required
Birthing tubs	✗ Ineligible	
Blemish concealer	✗ Ineligible	
Blood pressure monitoring devices	✓ Eligible	
Body scans (e.g., MRI, CAT scan)	✓ Eligible	
Bottled water	✗ Ineligible	
Brace (e.g., knee, back, wrist)	✓ Eligible	
Braille books/magazines	✗ Ineligible	
Breast pumps and supplies for pump only	✓ Eligible	
Breast reconstructive surgery	! Potentially eligible	
Breast reduction surgery that is medically necessary	! Potentially eligible	
Burn treatments	✓ Eligible	OTC
Calamine lotion	✓ Eligible	OTC
ChapStick/lip balm	✗ Ineligible	
Childbirth/Lamaze classes (related to birth)	✓ Eligible	
Chiropractic treatments (e.g., adjustments)	✓ Eligible	
Chondroitin	✓ Eligible	OTC
Circumcision	✓ Eligible	
Cleaning service	✗ Ineligible	
Coinsurance amounts (health, dental or vision)	✓ Eligible	
Cold and flu medicine	✓ Eligible	OTC
Cold sore remedies	✓ Eligible	OTC
Cold/hot packs	✓ Eligible	OTC
Condoms	✓ Eligible	OTC
Contact lens solutions/cleaners	✓ Eligible	OTC
Contact lenses (corrective)	✓ Eligible	
Convalescent home (for medical treatment only)	✓ Eligible	
Copayments (health, dental or vision)	✓ Eligible	
Corn and callus removers (medicated)	✓ Eligible	Valid prescription required, OTC

Item	Eligibility	Notes
Corn and callus removers (non-medicated)	✓ Eligible	OTC
Cosmetic surgery	! Potentially eligible	For repair or reconstruction after accident or surgery, or for correction of birth defect
Cosmetic surgery and procedures	✗ Ineligible	
Cosmetics, hygiene products and similar items	✗ Ineligible	
Cotton balls (sterile)	✓ Eligible	OTC
COVID testing	✓ Eligible	OTC
Cough drops, cough suppressants	✓ Eligible	
C-PAP machine and supplies	✓ Eligible	
Crutches (purchase or rental)	✓ Eligible	
Dancing lessons	✗ Ineligible	
Decongestants	✓ Eligible	OTC
Deductibles (health, dental or vision)	✓ Eligible	
Dental floss	✗ Ineligible	
Dental procedures, non-cosmetic (e.g., X-rays, fillings, extractions, crowns, implants)	✓ Eligible	
Denture adhesive	✓ Eligible	OTC
Denture care cleaning products	✓ Eligible	OTC
Dentures	✓ Eligible	
Deodorant	✗ Ineligible	
Diabetic supplies (e.g., insulin, syringe, monitor, insulin pump)	✓ Eligible	OTC
Diaper rash treatment	✓ Eligible	OTC
Diapers or diaper service	✗ Ineligible	
Diet foods	✗ Ineligible	
Dietary supplements	! Potentially eligible	
Digestive aids	✓ Eligible	
DNA collection and storage	! Potentially eligible	
Drug addiction/substance abuse treatment	✓ Eligible	
Drugs imported from other countries	✗ Ineligible	
Dust masks	✗ Ineligible	
Dyslexia testing and instruction	! Potentially eligible	
Ear or body piercing	✗ Ineligible	
Ear plugs	! Potentially eligible	
Ear wax removal kits	✓ Eligible	OTC
Elastic wraps	✓ Eligible	OTC
Electrolysis or hair removal	✗ Ineligible	
Elevator	! Potentially eligible	Capital expense
Embryo, egg and sperm storage fees	✓ Eligible	
Ensure	✗ Ineligible	
Exercise equipment or programs	! Potentially eligible	

Item	Eligibility	Notes
Expectorants	✓ Eligible	OTC
Eye drops (non-medicated)	✓ Eligible	OTC
Eye exams	✓ Eligible	
Eye surgery (laser or radial keratotomy)	✓ Eligible	
Eyeglasses – prescription sunglasses/safety glasses	✓ Eligible	
Eyeglasses – reading	✓ Eligible	
Face creams	✗ Ineligible	
Feminine anti-fungal/anti-itch	✓ Eligible	
Feminine hygiene products (e.g., tampons)	✓ Eligible	
Fertility treatments (e.g., artificial insemination, egg donor fees, in vitro)	✓ Eligible	
Fiber laxatives	✓ Eligible	OTC
First aid kits	✓ Eligible	OTC
Flu shots	✓ Eligible	
Fluoridation device	! Potentially eligible	
Fluoridation treatment at a dental office	✓ Eligible	
Fluoride rinses	✓ Eligible	OTC
Food thickeners	! Potentially eligible	
Funeral, cremation or burial expenses	✗ Ineligible	
Gambling addiction treatment	✓ Eligible	
Genetic testing	! Potentially eligible	
Glucosamine	✓ Eligible	OTC
Group therapy (for patient)	✓ Eligible	
Group therapy for family member	! Potentially eligible	
Guide dog/service animal (purchase, care, training)	! Potentially eligible	
Hair colorants	✗ Ineligible	
Hair growth/removal products	! Potentially eligible	
Hair transplants	✗ Ineligible	
Hand sanitizer – antibacterial	✓ Eligible	
Hand/skin lotion	✗ Ineligible	
Head lice treatment	✓ Eligible	
Hearing tests and aids	✓ Eligible	
Heating pad	✓ Eligible	OTC
Hemorrhoid treatments	✓ Eligible	OTC
Herbal treatment	! Potentially eligible	
Holistic or natural healers consult	! Potentially eligible	
Holistic remedies/medicines	! Potentially eligible	
Home health care	✓ Eligible	
Home improvements (e.g., exit ramps, widening doorways)	! Potentially eligible	Capital expense
Hormone replacement therapy (HRT)	! Potentially eligible	

Item	Eligibility	Notes
Hormone therapy	! Potentially eligible	
Household help	✗ Ineligible	
Household products/improvements to treat allergies	! Potentially eligible	
Illegal operations and treatments	✗ Ineligible	
Illegally obtained drugs	✗ Ineligible	
Immunizations	✓ Eligible	
Incontinence supplies	✓ Eligible	OTC
Individual counseling	✓ Eligible	Counseling must be performed to alleviate or prevent a physical or mental defect or illness
Insect bite/sting medicine	✓ Eligible	OTC
Insurance premiums	✗ Ineligible	<p>Certain health insurance premiums are eligible to be paid from an HSA.</p> <p>Qualified premiums include:</p> <ul style="list-style-type: none"> ■ COBRA health insurance ■ Insurance premiums after you reach age 65 (including Medicare Parts A, B, C and D, but not Medicare supplement plans) ■ Qualified long-term care insurance ■ Health insurance premiums while receiving unemployment compensation under state or federal law ■ Premiums for employer-sponsored retiree medical plans for account holders 65 and older
Lab tests	✓ Eligible	
Lactation consultant	! Potentially eligible	
Lactose intolerance pills	! Potentially eligible	
Late fees (e.g., late payment of bills for medical services)	✗ Ineligible	
Laxatives	✓ Eligible	OTC
Lead-based paint removal	! Potentially eligible	
Learning disability treatment	! Potentially eligible	
Lodging (away from home for outpatient care)	! Potentially eligible	Special rules may apply
Lodging while attending a medical conference	✗ Ineligible	
Makeup	✗ Ineligible	
Manual therapy	! Potentially eligible	
Marijuana or other controlled substances in violation of federal law	✗ Ineligible	
Marriage counseling	✗ Ineligible	
Massage therapy	! Potentially eligible	
Mastectomy-related special bras	✓ Eligible	

Item	Eligibility	Notes
Maternity clothes	✘ Ineligible	
Meals	✘ Ineligible	
Medical conference admission and transportation	! Potentially eligible	Excludes meals and lodging
Medical grade face mask	✓ Eligible	
Medical newsletter	✘ Ineligible	
Medical records charges	✓ Eligible	
Medicated lip balm/cream	✓ Eligible	OTC
Menstrual pain relievers	✓ Eligible	OTC
Mentally handicapped residential or group home	! Potentially eligible	
Missed appointment fees	✘ Ineligible	
Moisturizers	✘ Ineligible	
Mouthwash	✘ Ineligible	
Nasal sprays/strips for snoring	! Potentially eligible	OTC
New parent/newborn child care classes	✘ Ineligible	
Nicotine patches, gum, lozenges	✓ Eligible	OTC
Non-prescription eyeglasses, sunglasses, safety glasses or contacts	✘ Ineligible	
Nutritional consultation	! Potentially eligible	
Nutritional counseling	! Potentially eligible	
Nutritional List	! Potentially eligible	
Occlusal guards to prevent teeth grinding	✓ Eligible	
Orajel pain relief	✓ Eligible	OTC
Orajel toothpaste	✘ Ineligible	
Oral surgery	✓ Eligible	
Oral wound treatments (cold sores)	✓ Eligible	OTC
Organ transplant (including donor's expenses)	✓ Eligible	
Orthodontics	✓ Eligible	
Orthopedic inserts	✓ Eligible	OTC
Orthopedic shoes	! Potentially eligible	
Oxygen and oxygen equipment	✓ Eligible	
Oxygen equipment	✓ Eligible	OTC
Pain relievers	✓ Eligible	OTC
Patient responsibilities	✓ Eligible	Patient responsibilities under the medical, dental or vision plan solely because of the plan's deductible, copay (coinsurance), reasonable and customary charge limit or benefit limit
Personal trainer fees	! Potentially eligible	
Petroleum jelly	! Potentially eligible	
Physical exams (routine, medical, well-child)	✓ Eligible	
Physical therapy	✓ Eligible	

Item	Eligibility	Notes
Pregnancy test kits	✓ Eligible	OTC
Prenatal vitamins	✓ Eligible	OTC
Prenatal/postnatal exams	✓ Eligible	
Prepayments	✗ Ineligible	
Prescription drugs	✓ Eligible	Prescription drugs imported from other countries are not covered
Prescription drug discount program fees	✗ Ineligible	
Prescription drugs and medicines imported from other countries	✗ Ineligible	
Prescription drugs that also have a cosmetic purpose (e.g., Retin-A, Rogaine, Botox, Propecia)	! Potentially eligible	
Preventive care screenings (e.g., mammogram, colonoscopy)	✓ Eligible	
Probiotics	! Potentially eligible	
Prosthesis	✓ Eligible	
Psoriasis treatment	✓ Eligible	OTC
Psychiatric care	✓ Eligible	
Reading glasses	✓ Eligible	OTC
Respiratory treatments	✓ Eligible	OTC
Rubbing alcohol	✓ Eligible	OTC
Sanitizing Wipes	✓ Eligible	OTC, must have 60% or more alcohol
Shampoo	✗ Ineligible	
Shaving cream	✗ Ineligible	
Shipping and handling fees for eligible expenses	✓ Eligible	
Skin irritation treatment	✓ Eligible	
Sleep aids and sedatives	✓ Eligible	
Sleep study	✓ Eligible	
Smoking cessation medications/programs	✓ Eligible	
Special education costs for dependents with disabilities	! Potentially eligible	
Special foods/beverages	✗ Ineligible	
Speech therapy	✓ Eligible	
Sports training and activities	✗ Ineligible	
St. John's wort	! Potentially eligible	
Stem cell harvesting and/or storage	! Potentially eligible	
Stomach remedies	✓ Eligible	OTC
Sunburn treatments	✓ Eligible	OTC
Sunscreen	✓ Eligible	Must be broad spectrum and at least SPF 15, OTC
Support stockings (e.g., Jobst stockings)	! Potentially eligible	
Surrogate expenses	✗ Ineligible	
Swimming lessons	✗ Ineligible	

Item	Eligibility	Notes
Swimming pool and maintenance	✘ Ineligible	
Tanning salons and equipment	✘ Ineligible	
Taxes paid for eligible expenses	✔ Eligible	
Teeth whitening	✘ Ineligible	
Telephone/television equipment for hearing impaired persons	! Potentially eligible	
Thermometers	✔ Eligible	OTC
Throat lozenges/cough drops	✔ Eligible	OTC
Transportation costs of disabled individual commuting to and from work	✘ Ineligible	
Transportation expenses relative to health care	✔ Eligible	Corresponding medical documentation requested
Travel for general health improvement	✘ Ineligible	
Tubal ligation/tubal ligation reversal	✔ Eligible	
Umbilical cord freezing and storing	! Potentially eligible	
Vaccinations	✔ Eligible	
Varicose veins treatment	✔ Eligible	
Vasectomy/vasectomy reversal	✔ Eligible	
Veneers	✘ Ineligible	
Vitamins and minerals	! Potentially eligible	
Walkers/canes (purchase or rental)	✔ Eligible	
Wart remover products	✔ Eligible	OTC
Weight loss program, medications and treatments	! Potentially eligible	Must be prescribed by a physician for a specific medical condition, excludes food
Wheelchair (purchase or rental)	✔ Eligible	
Wigs	! Potentially eligible	
Wrist/joint supports	✔ Eligible	OTC
X-rays	✔ Eligible	
Yeast infection medication	✔ Eligible	OTC

It is the members' responsibility to ensure eligibility requirements as well as if they are eligible for the expenses submitted.

Further is an independent provider of administrative services for CareFirst BlueCross BlueShield consumer-directed health care plans. HealthEquity, Inc., the owner of the Further business, is an IRS-approved, non-bank trustee providing HSA custodial services on behalf of CareFirst BlueCross BlueShield to its members. HealthEquity Inc., on its own or through the Further business, does not sell Blue Cross and/or Blue Shield products and is solely responsible for the services it provides.

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Notice of Nondiscrimination and Availability of Language Assistance Services

(UPDATED 8/5/19)

CareFirst BlueCross BlueShield, CareFirst BlueChoice, Inc., CareFirst Diversified Benefits and all of their corporate affiliates (CareFirst) comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex. CareFirst does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

CareFirst:

- Provides free aid and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please call 855-258-6518.

If you believe CareFirst has failed to provide these services, or discriminated in another way, on the basis of race, color, national origin, age, disability or sex, you can file a grievance with our CareFirst Civil Rights Coordinator by mail, fax or email. If you need help filing a grievance, our CareFirst Civil Rights Coordinator is available to help you.

To file a grievance regarding a violation of federal civil rights, please contact the Civil Rights Coordinator as indicated below. Please do not send payments, claims issues, or other documentation to this office.

Civil Rights Coordinator, Corporate Office of Civil Rights

Mailing Address P.O. Box 8894
 Baltimore, Maryland 21224

Email Address civilrightscoordinator@carefirst.com

Telephone Number 410-528-7820

Fax Number 410-505-2011

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
800-368-1019, 800-537-7697 (TDD)

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

Foreign Language Assistance

Attention (English): This notice contains information about your insurance coverage. It may contain key dates and you may need to take action by certain deadlines. You have the right to get this information and assistance in your language at no cost. Members should call the phone number on the back of their member identification card. All others may call 855-258-6518 and wait through the dialogue until prompted to push 0. When an agent answers, state the language you need and you will be connected to an interpreter.

አማርኛ (Amharic) ማሳሰቢያ፡- ይህ ማስታወቂያ ስለ መድን ሽፋንዎ መረጃ ይዟል። ከተወሰኑ ቀን-ገደቦች በፊት ሊፈጽሟቸው የሚገቡ ነገሮች ሊኖሩ ስለሚችሉ እነዚህን ወሳኝ ቀናት ሊይዝ ይችላሉ። ይኸን መረጃ የማግኘት እና ያለምንም ክፍያ በቋንቋዎ አገዛ የማግኘት መብት አለዎት። አባል ከሆኑ ከመታወቂያ ካርድዎ በስተጀርባ ላይ ወደተጠቀሰው የስልክ ቁጥር መደወል ይችላሉ። አባል ካልሆኑ ደግሞ ወደ ስልክ ቁጥር 855-258-6518 ደውለው 0ን እንዲጫኑ እስኪነገርዎ ድረስ ንግግሩን መጠበቅ አለብዎ። አንድ ወኪል መልስ ሲሰጥዎ፣ የሚፈልጉትን ቋንቋ ያሳውቁ፣ ከዚያም ከተርጓሚ ጋር ይገናኛሉ።

Èdè Yorùbá (Yoruba) Ìtètíléko: Àkíyèsí yìí ní iwífún nípa isẹ adójútòfò rẹ. Ó le ní àwọn déèti pàtó o sì le ní láti gbé igbésé ní àwọn ojò gbèdèké kan. O ni ètò láti gba iwífún yìí àti irànlówó ní èdè rẹ lófèé. Àwọn omọ-egbé gbòdò pe nóm̀bà fòdùn tò wà lèyìn kààdì idánimò wòn. Àwọn mírán le pe 855-258-6518 kí o sì dúró nípasè ijíròrò tí tí a ó fí sọ fún ọ láti tẹ 0. Nígbatí așojú kan bá dáhùn, sọ èdè tí o fẹ a ó sì sọ ọ pò mò ògbufò kan.

Tiếng Việt (Vietnamese) Chú ý: Thông báo này chứa thông tin về phạm vi bảo hiểm của quý vị. Thông báo có thể chứa những ngày quan trọng và quý vị cần hành động trước một số thời hạn nhất định. Quý vị có quyền nhận được thông tin này và hỗ trợ bằng ngôn ngữ của quý vị hoàn toàn miễn phí. Các thành viên nên gọi số điện thoại ở mặt sau của thẻ nhận dạng. Tất cả những người khác có thể gọi số 855-258-6518 và chờ hết cuộc đối thoại cho đến khi được nhắc nhấn phím 0. Khi một tổng đài viên trả lời, hãy nêu rõ ngôn ngữ quý vị cần và quý vị sẽ được kết nối với một thông dịch viên.

Tagalog (Tagalog) Atensyon: Ang abisong ito ay naglalaman ng impormasyon tungkol sa nasasaklawan ng iyong insurance. Maaari itong maglaman ng mga pinakamahalagang petsa at maaaring kailangan mong gumawa ng aksyon ayon sa ilang deadline. May karapatan ka na makuha ang impormasyong ito at tulong sa iyong sariling wika nang walang gastos. Dapat tawagan ng mga Miyembro ang numero ng telepono na nasa likuran ng kanilang identification card. Ang lahat ng iba ay maaaring tumawag sa 855-258-6518 at maghintay hanggang sa dulo ng diyalogo hanggang sa diktahan na pindutin ang 0. Kapag sumagot ang ahente, sabihin ang wika na kailangan mo at ikokonekta ka sa isang interpreter.

Español (Spanish) Atención: Este aviso contiene información sobre su cobertura de seguro. Es posible que incluya fechas clave y que usted tenga que realizar alguna acción antes de ciertas fechas límite. Usted tiene derecho a obtener esta información y asistencia en su idioma sin ningún costo. Los asegurados deben llamar al número de teléfono que se encuentra al reverso de su tarjeta de identificación. Todos los demás pueden llamar al 855-258-6518 y esperar la grabación hasta que se les indique que deben presionar 0. Cuando un agente de seguros responda, indique el idioma que necesita y se le comunicará con un intérprete.

Русский (Russian) Внимание! Настоящее уведомление содержит информацию о вашем страховом обеспечении. В нем могут указываться важные даты, и от вас может потребоваться выполнить некоторые действия до определенного срока. Вы имеете право бесплатно получить настоящие сведения и сопутствующую помощь на удобном вам языке. Участникам следует обращаться по номеру телефона, указанному на тыльной стороне идентификационной карты. Все прочие абоненты могут звонить по номеру 855-258-6518 и ожидать, пока в голосовом меню не будет предложено нажать цифру «0». При ответе агента укажите желаемый язык общения, и вас свяжут с переводчиком.

हिन्दी (Hindi) ध्यान दें: इस सूचना में आपकी बीमा कवरेज के बारे में जानकारी दी गई है। हो सकता है कि इसमें मुख्य तिथियों का उल्लेख हो और आपके लिए किसी नियत समय-सीमा के भीतर काम करना ज़रूरी हो। आपको यह जानकारी और संबंधित सहायता अपनी भाषा में निःशुल्क पाने का अधिकार है। सदस्यों को अपने पहचान पत्र के पीछे दिए गए फ़ोन नंबर पर कॉल करना चाहिए। अन्य सभी लोग 855-258-6518 पर कॉल कर सकते हैं और जब तक 0 दबाने के लिए न कहा जाए, तब तक संवाद की प्रतीक्षा करें। जब कोई एजेंट उत्तर दे तो उसे अपनी भाषा बताएँ और आपको व्याख्याकार से कनेक्ट कर दिया जाएगा।

Bàsòò-wùdù (Bassa) Tò Dùù Cáo! Bǎ nìà kè bá nyò bě kè m̄ gbo kpá bó nì fùà-fúá-tiǐn nyεε jè dyí. Bǎ nìà kè bédé wé jéé bě b́é m̄ kè dε wa ḿ m̄ kè nyuεε nyu hwè b́é wé b́éa kè zi. Ǿ m̀ò nì kpé b́é m̄ kè bǎ nìà kè kè gbo-kpá-kpá m̄ ḿεε dyé dé nì bídí-wùdù mú b́é m̄ kè se wídí d̀ò péè. Kpooò nyò b́é m̄ dá fúùn-nòbà nìà dé waa I.D. káàè dεín nyε. Nyò t̀òò séín m̄ dá nòbà nìà kè: 855-258-6518, kè m̄ m̄ f̀ò tee b́é wa ḱε m̄ gbo ćé b́é m̄ kè nòbà m̀ò 0 ḱε dyi pàd̀àn hwè. Ǿ j̀ú kè nyò d̀ò dyi m̄ g̀ǎ j̀ùǐn, po wuqu m̄ ḿ poε dyie, kè nyò d̀ò mu bó nìin b́é Ǿ kè nì wuquò mú zà.

বাংলা (Bengali) লক্ষ্য করুন: এই নোটিশে আপনার বিমা কভারেজ সম্পর্কে তথ্য রয়েছে। এর মধ্যে গুরুত্বপূর্ণ তারিখ থাকতে পারে এবং নির্দিষ্ট তারিখের মধ্যে আপনাকে পদক্ষেপ নিতে হতে পারে। বিনা খরচে নিজের ভাষায় এই তথ্য পাওয়ার এবং সহায়তা পাওয়ার অধিকার আপনার আছে। সদস্যদেরকে তাদের পরিচয়পত্রের পিছনে থাকা নম্বরে কল করতে হবে। অন্যেরা 855-258-6518 নম্বরে কল করে 0 টিপতে না বলা পর্যন্ত অপেক্ষা করতে পারেন। যখন কোনো এজেন্ট উত্তর দেবেন তখন আপনার নিজের ভাষার নাম বলুন এবং আপনাকে দোভাষীর সঙ্গে সংযুক্ত করা হবে।

اردو (Urdu) توجہ: یہ نوٹس آپ کے انشورینس کوریج سے متعلق معلومات پر مشتمل ہے۔ اس میں کلیدی تاریخیں ہو سکتی ہیں اور ممکن ہے کہ آپ کو مخصوص آخری تاریخوں تک کارروائی کرنے کی ضرورت پڑے۔ آپ کے پاس یہ معلومات حاصل کرنے اور بغیر خرچہ کیے اپنی زبان میں مدد حاصل کرنے کا حق ہے۔ ممبران کو اپنے شناختی کارڈ کی پشت پر موجود فون نمبر پر کال کرنی چاہیے۔ سبھی دیگر لوگ 855-258-6518 پر کال کر سکتے ہیں اور 0 دبانے کو کہے جانے تک انتظار کریں۔ ایجنٹ کے جواب دینے پر اپنی مطلوبہ زبان بتائیں اور مترجم سے مربوط ہو جائیں گے۔

فارسی (Farsi) توجه: این اعلامیه حاوی اطلاعاتی درباره پوشش بیمه شما است. ممکن است حاوی تاریخ های مهمی باشد و لازم است تا تاریخ مقرر شده خاصی اقدام کنید. شما از این حق برخوردار هستید تا این اطلاعات و راهنمایی را به صورت رایگان به زبان خودتان دریافت کنید. اعضا باید با شماره درج شده در پشت کارت شناسایی شان تماس بگیرند. سایر افراد می توانند با شماره 855-258-6518 تماس بگیرند و منتظر بمانند تا از آنها خواسته شود عدد 0 را فشار دهند. بعد از پاسخگویی توسط یکی از اپراتورها، زبان مورد نیاز را تنظیم کنید تا به مترجم مربوطه وصل شوید.

اللغة العربية (Arabic) تنبيه: يحتوي هذا الإخطار على معلومات بشأن تغطيتك التأمينية، وقد يحتوي على تواريخ مهمة، وقد تحتاج إلى اتخاذ إجراءات بحلول مواعيد نهائية محددة. يحق لك الحصول على هذه المساعدة والمعلومات بلغتك بدون تحمل أي تكلفة. ينبغي على الأعضاء الاتصال على رقم الهاتف المذكور في ظهر بطاقة تعريف الهوية الخاصة بهم. يمكن للأخريين الاتصال على الرقم 855-258-6518 والانتظار خلال المحادثة حتى يطلب منهم الضغط على رقم 0. عند إجابة أحد الوكلاء، اذكر اللغة التي تحتاج إلى التواصل بها وسيتم توصيلك بأحد المترجمين الفوريين.

中文繁体 (Traditional Chinese) 注意：本聲明包含關於您的保險給付相關資訊。本聲明可能包含重要日期及您在特定期限之前需要採取的行動。您有權利免費獲得這份資訊，以及透過您的母語提供的協助服務。會員請撥打印在身分識別卡背面的電話號碼。其他所有人士可撥打電話 855-258-6518，並等候直到對話提示按下按鍵 0。當接線生回答時，請說出您需要使用的語言，這樣您就能與口譯人員連線。

Igbo (Igbo) Nrubama: Okwa a nwere ozi gbasara mkpuchi nchekwa onwe gi. O nwere ike inwe ubochi ndi di mkpa, i nwere ike ime ihe tupu ufodu ubochi njedebe. I nwere ikike inweta ozi na enyemaka a n'asusu gi na akwughi ugwo o bula. Ndi otu kwesiri ikpo akara ekwentu di n'azu nke kaadi njirimara ha. Ndi ozo niile nwere ike ikpo 855-258-6518 wee chere ububo ahu ruo mgbe amanyere ipi 0. Mgbe onye nnochite anya zara, kwuo asusu i choro, a ga-ejiko gi na onye okowa okwu.

Deutsch (German) Achtung: Diese Mitteilung enthält Informationen über Ihren Versicherungsschutz. Sie kann wichtige Termine beinhalten, und Sie müssen gegebenenfalls innerhalb bestimmter Fristen reagieren. Sie haben das Recht, diese Informationen und weitere Unterstützung kostenlos in Ihrer Sprache zu erhalten. Als Mitglied verwenden Sie bitte die auf der Rückseite Ihrer Karte angegebene Telefonnummer. Alle anderen Personen rufen bitte die Nummer 855-258-6518 an und warten auf die Aufforderung, die Taste 0 zu drücken. Geben Sie dem Mitarbeiter die gewünschte Sprache an, damit er Sie mit einem Dolmetscher verbinden kann.

Français (French) Attention: cet avis contient des informations sur votre couverture d'assurance. Des dates importantes peuvent y figurer et il se peut que vous deviez entreprendre des démarches avant certaines échéances. Vous avez le droit d'obtenir gratuitement ces informations et de l'aide dans votre langue. Les membres doivent appeler le numéro de téléphone figurant à l'arrière de leur carte d'identification. Tous les autres peuvent appeler le 855-258-6518 et, après avoir écouté le message, appuyer sur le 0 lorsqu'ils seront invités à le faire. Lorsqu'un(e) employé(e) répondra, indiquez la langue que vous souhaitez et vous serez mis(e) en relation avec un interprète.

한국어(Korean) 주의: 이 통지서에는 보험 커버리지에 대한 정보가 포함되어 있습니다. 주요 날짜 및 조치를 취해야 하는 특정 기한이 포함될 수 있습니다. 귀하에게는 사용 언어로 해당 정보와 지원을 받을 권리가 있습니다. 회원이신 경우 ID 카드의 뒷면에 있는 전화번호로 연락해 주십시오. 회원이 아닌 경우 855-258-6518 번으로 전화하여 0을 누르라는 메시지가 들릴 때까지 기다리십시오. 연결된 상담원에게 필요한 언어를 말씀하시면 통역 서비스에 연결해 드립니다.

Diné Bizaad (Navajo) Ge': Díí bee íł hane'ígíí bii' dahóló bee éédahózin béeso ách'ááh naanil ník'ist'í'ígíí bá. Bii' dahólóq doo íiyisíí yoolkáálígíí dóo t'áadoo le'é ádadoolyíí'ígíí da yókeedgo t'áa doo bee e'e'aaahí ájiil'ííh. Bee ná ahóót'í' díí bee íł hane' dóo níká'ádoowoł t'áa nínizaad bee t'áa jiik'é. Atah danilínígíí béesh bee hane'é bee wólta'ígíí nitł'izgo bee nee hódolzinígíí bikéédéé' bikáá' bich'í' hodoonihjí'. Aadóo náánałta' éí kójjí' dahóoolnih 855-258-6518 dóo yii diiłts'ííł yałtí'ígíí t'áa níléjį́ áádóo éí bikéé'dóo naasbaąs bił adidiilchil. Áká'anidaalwó'ígíí neidiitáągo, saad bee yániłt'í'ígíí yii diikił dóo ata' halne'é lá níká'ádoowoł.