

HEALTH PLAN GUIDEBOOK



Powered by people for a healthier you

ConnectiCare[®]

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We're with you every step of the way

At ConnectiCare, when we look at our customers, we see ourselves. Newly born and newly wed. Moms and dads. Newly hired and nearly retired. People who use their health plans to stay healthy and address the bumps and bruises that life can bring.

Inside you'll find information on the benefits and services that your ConnectiCare health plan provides. Those include:

- Using your plan to help you stay healthy
- Pharmacy benefits
- Ways to save on health care costs
- Answers to frequently asked questions
- And more...

Know that behind every plan is our commitment to deliver personal, caring service and support your relationships with your doctors and hospitals.

Did you know?

- ▶ Our award-winning* Member Services call center is right in Farmington.
- ▶ We're the only health plan serving Connecticut with centers where you can ask questions or get an issue resolved in person.
- ▶ We're part of EmblemHealth, one of the nation's largest non-profit health insurers.

*The Stevie Awards for Sales & Customer Service is an awards program produced by the Stevie Awards. Feb. 2019: ConnectiCare won bronze for Contact Center of the Year (up to 100 seats) – Financial Services Industries and silver for Customer Service Management Team of the Year.

Health plan ABCs

ConnectiCare offers a range of health plans. That's why it's important to read your benefit summary included in your health plan documents. Find those by signing into connecticare.com. Your benefit summary shows what your plan covers and what you may pay for medical care and prescription drugs.

Types of plans

Like other health plans, ConnectiCare and its parent company, EmblemHealth, negotiate the costs of services provided by doctors, hospitals, and other health care providers to our members. Together, those health care providers make up a **network**.

- HMO and EPO plans only cover services by in-network doctors and hospitals.
- POS plans cover some services by out-of-network doctors and hospitals, although you generally pay more for them.

Then, each ConnectiCare plan falls into one of three categories:

▶ CHOICE PLANS

let you visit a broad network of doctors and hospitals. In Connecticut, that's all 21 hospitals and thousands of primary care providers (PCPs) and specialists.

▶ FLEXPOS PLANS

give you the most flexibility, with the added coverage of a national network of doctors and hospitals plus coverage for both in-network and out-of-network medical services.

▶ PASSAGE PLANS

reinforce the important role of your PCP. That's the doctor or other health care professional you see for checkups and if you get sick. Passage plans limit your choice of PCPs to those who accept Passage plans. They refer you to specialists to help you get the right care at the right cost.

Find doctors in your plan's network

Go to connecticare.com and use the "Find a Doctor" tool. If you're ever in doubt, call Member Services at **1-800-251-7722 (TTY: 711)**.



**WE'VE GOT YOU
COVERED**



Wider regional coverage with EmblemHealth

Some ConnectiCare plans let you visit doctors in the EmblemHealth Prime Network with health professionals, facilities, and hospitals in 28 New York state counties — all five boroughs of New York City, plus Nassau, Suffolk, Orange, Rockland, and Westchester counties, and upstate areas that stretch north of Albany.

To see if your plan does, look on the back of your member identification (ID) card for the EmblemHealth logo.

Other things to know about ConnectiCare plans

Your benefit summary has information about what share of costs you pay and what ConnectiCare pays. Here are some tips for getting the most out of your plan.

Stay in-network

Using any of the thousands of doctors and many hospitals and pharmacies in our networks can save you money. If your plan lets you get care from an out-of-network doctor, you can do so, but you may pay more.

Take care of yourself

The best way to avoid health problems is to take care of yourself. Take advantage of annual checkups, vaccines, and screenings. Follow your doctor's directions and use your health plan benefits to get and stay healthy.

Visit a doctor 24/7 for one, low cost

Most ConnectiCare plans include doctor's visits by phone, video conference, or mobile app. Your employer or health plan representative will give you more information. Or go to connecticare.com and sign in.

Take advantage of tax savings with a health savings account (HSA)

Some ConnectiCare plans make you eligible to open and save money tax-free in an HSA. (Your employer will tell you if your plan does.) You can use your HSA funds to pay for qualified health care expenses, including prescriptions.

Keep your student healthy

Do you have a child studying or working outside Connecticut? He or she can receive certain types of care wherever they are, such as allergy shots, mental health services, and advanced radiology services. In most cases, you need to get preauthorization first. Call Member Services for help after your plan starts.

Did you know?

- ▶ All ConnectiCare plans include emergency and urgent care coverage anywhere in the world.*

*Some limitations apply. Your membership agreement has the details. Find it on connecticare.com.

Your pharmacy benefits

Many people take medicines to stay healthy. Or, sometimes you need to fill a prescription because you are sick or hurt. You can use your ConnectiCare member ID card to fill prescriptions at participating retail pharmacies around the United States, including most major chains. Find pharmacies at [express-scripts.com](https://www.express-scripts.com). Express Scripts is the company that manages our pharmacy benefit program.

With Express Scripts, you also get:

- Free home delivery and 90-day supplies of medicines you take regularly
- A pharmacist available by phone 24 hours a day, 7 days a week at 1-877-866-5798
- “Price a Drug” tool – on the Express Scripts website and mobile app – to find out what prescriptions may cost you.

Did you know?

- ▶ The Express Scripts mobile app lets you look up the price of a drug, order prescriptions, arrange for home delivery, and set reminders to take your medicines. You can also use it to order refills from Express Scripts.

When your doctor prescribes a new medicine, ask a few questions:

- 1** Can we look up what this drug may cost me?
- 2** Is there a less expensive drug that may work the same?
- 3** Are there possible side effects?





JUST FOR CONNECTICARE MEMBERS

Extras that don't cost extra

ConnectiCare members get exclusive discounts on eyeglasses and contacts, gym memberships and health-and-wellness services, like acupuncture and massage. They also can buy pet insurance and get discounts on everyday items, like groceries, as well as major purchases, like cars and vacations. Find them all – and how to take advantage of them – at connecticare.com/discountprograms.

Stay on top of your plan with connecticare.com

Our member website makes it easy for you to find what you need, when you need it. Set up an account as soon as your plan begins. Then you'll be able to use tools to help you:

Get the most out of your plan

- View all your health plan benefits
- Track your spending and claims
- Get a copy of your member ID card

Manage your money

- Estimate the costs for hundreds of tests and treatments
- Track what you've spent (and ConnectiCare has paid) for medical and pharmacy services
- Check your health savings account (HSA) balance and pay doctors' bills (if you set up an HSA through your ConnectiCare medical plan)



Find a doctor

- Select the name of your primary care provider (PCP)
- Locate an in-network doctor, walk-in clinic, or urgent care center nearby
- Have a virtual doctor visit 24/7/365 with telemedicine

We'll stay in touch

When you register on connecticare.com, you'll be able to set up or change your preferences for how we get in touch with you with important information. We'll email you our monthly member newsletter with information to help you stay healthy and get the most out of your ConnectiCare plan. We'll also let you know about classes, seminars, or special events in ConnectiCare centers.

Connected care for a healthier you

ConnectiCare works with health care professionals and facilities to help see that you get the care you need, when you need it, at an affordable cost.

Doctors, hospitals, and other health care providers must meet strict standards to be credentialed to care for our members, then continue to meet evaluation and re-credentialing standards in their areas of expertise.

Our staff—nurses, pharmacists, social workers, and health navigators—may at times be in contact with your doctors to see that you are getting the care you need. We may also send you a reminder if it looks like you're overdue for important screenings, vaccines, or doctor's visits.

You may also hear from partners we rely on to help our members in situations like:

You take medicines for a chronic health condition.

Express Scripts, which manages your pharmacy benefits, helps see that members are taking medicines safely and as directed.

You have a chronic illness.

Aspire Health is our valued partner in palliative care for members and their families to help cope with managing their treatment and the stress of being sick.

We want to know that you're doing alright.

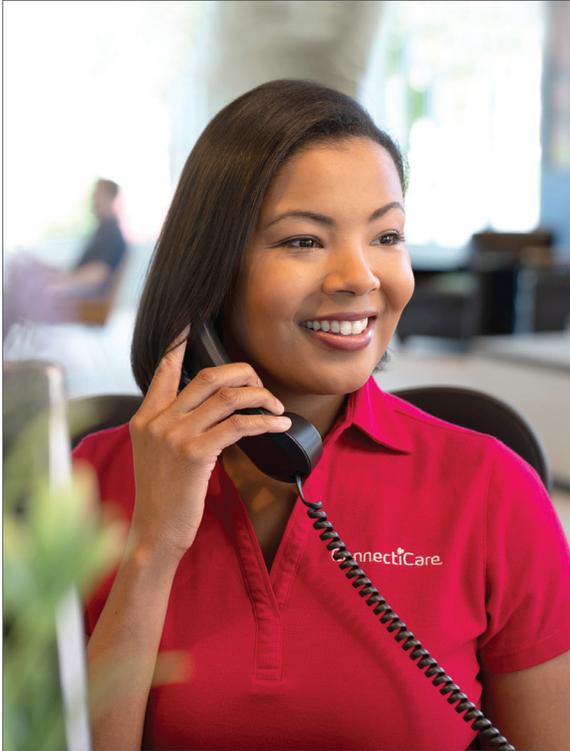
Cityblock Health has community health partners, doctors, and nurses who help clear paths for our members in getting doctor appointments, needed prescription drugs, transportation help, and more.

You're getting out of the hospital.

CareCentrix helps see that our members get the right follow-up care in another facility or at home.

You're being treated for a mental health condition.

Optum is the company that helps our members get treatment for conditions like depression, anxiety, dementia, or substance abuse disorder.



Call us if you need any help!

Some of the ways we help our members are:

- Talking to you about how to manage health conditions
- Connecting you to social services in your community
- Helping get you enrolled in other services that may help you, such as palliative care or home delivery of your medicines
- With your permission, having phone calls with family members or caregivers you want us to talk to

We're here to support you. Call us at **1-800-390-3522 (TTY: 711)**, Monday through Friday, 8 a.m. to 4 p.m.

Members can also make appointments to meet in person at the ConnectiCare center in Manchester with a nurse, social worker, or certified diabetes educator. Go to visitconnecticare.com to make an appointment.

If you don't want the extra help mentioned above, you can also call us and let us know.

FAQs (and answers)

I met my deductible, but I'm still paying for services or drugs. Why?

Check your benefit summary (sign into connecticare.com to get a copy). Your plan may have copayments or coinsurance that you pay even if you've met your deductible. See what "coinsurance" and "copayment" mean on the next page.

What do I do if I get married, divorced, have a child, or adopt a child?

Contact your human resources or benefits department as soon as possible. You have a limited time to make a change to your plan.

My doctor's office (or pharmacist) told me that ConnectiCare requires "preauthorization" for a service or a prescription drug. What is that?

We review doctors' requests for certain services and drugs before we will cover them. This is called "preauthorization," or "prior approval," or "prior authorization." It's a step we – like most health plans – take to be sure that a service or drug is medically necessary. We will notify you if we deny the doctor's request and include information on how you can appeal our decision. If you have any questions, please call us.

Why does ConnectiCare ask for the name of my primary care physician (or provider)?

We ask because we remind primary care providers (PCPs) to encourage members who are their patients to get important preventive care. That includes checkups, vaccines, and screenings for diabetes, cancer, and other health conditions.

How do I find out what ConnectiCare paid my doctor for a visit or test?

You can use our website, connecticare.com, to look up the claims your doctors send to us, what we paid, and what you owe. Just sign in to look up claim statements. These are also called "explanations of benefits," or EOBs. Want to be notified when we've processed a claim? Just sign into our website, go to your communication preferences, and choose electronic delivery of claim statements.

My spouse/child is on my health plan. Why can't I see his/her medical or pharmacy claims?

This is to protect our members' privacy and security. Members who are age 18 and older can sign into our website and grant you permission to view claims, if they choose.

How do I find doctors and hospitals that I can visit?

Go to connecticare.com and use "Find a Doctor" to find doctors, hospitals, urgent care centers, and other health care professionals and facilities that are in your plan's network. If in doubt, you can call us or ask the doctor's office to confirm that it is in-network for your plan.

Terms to know

Health insurance has its own language. We try to explain terms when we use them in talking with or writing to our members. Here are a few you'll see or hear often.

- ▶ **Benefit summary**
Lists some medical services covered by your plan and how much you'll pay toward them.
- ▶ **Claim summary**
Explanation of the services you received, how much the doctor billed ConnectiCare, what ConnectiCare paid, and how much you are responsible for paying. A claim summary is also called an "explanation of benefits", or EOB for short.
- ▶ **Coinsurance**
Sharing of health care costs between you and ConnectiCare. Coinsurance will be listed in your benefit summary as a percentage of a doctor's or drug's cost you pay *after* your deductible (if your plan has a deductible).
- ▶ **Copayment (or copay)**
The fixed amount that you pay for a health care service or prescription drug. Your benefit summary lists copayments.
- ▶ **Covered services**
Health plans like ConnectiCare, define what medical services they will pay for. But, you may still pay some or all of the cost of a "covered service" if your plan has a deductible, copayment, or coinsurance.
- ▶ **Deductible**
A specific dollar amount that you have to pay for covered services in each plan year before ConnectiCare starts to pay.
- ▶ **High-deductible health plan**
A type of health plan that requires you to pay a higher dollar amount for services your plan covers. It's often shortened to "HDHP." High-deductible health plans that meet certain federal requirements let you open and save money tax free in a health savings account (HSA) to help pay for qualified medical expenses.
- ▶ **In-network**
Doctors, hospitals, and other health care providers who have contracts with ConnectiCare agree to accept our negotiated rate for services. Some plans limit you to using in-network providers in order for us to pay any costs.
- ▶ **Out-of-pocket maximum**
This is the most you'll have to pay in deductibles, copayments, or coinsurance toward covered medical costs in any plan year.

Here for you, one-on-one at ConnectiCare centers

Sometimes it helps to talk to someone about health insurance in person. Ask some questions. Get the information you need. You can get one-on-one help at a ConnectiCare center with things like:

- How to save money on prescriptions
- Where to go for care when you're sick or hurt
- Estimating what a test is going to cost you
- Understanding your claim summary

We do all this and more at our nearby ConnectiCare centers. To find locations, hours, and event schedules, or to make an appointment, go to visitconnecticare.com.

Our Manchester and Waterbury centers also host events like:

- Fitness classes
- Talks by medical experts
- Health insurance seminars
- And more!

Stop by. We'd love to meet you.



Important contact information

FOR QUESTIONS ABOUT OR HELP WITH:	CALL OR VISIT:
<p>Benefits, claims, coverage, referrals, prescriptions, or general information</p>	<p>1-800-251-7722 (TTY: 711) Monday – Friday, 8 a.m. to 8 p.m. Saturday, 9 a.m. to 2 p.m.</p>
<p>Mental health, alcohol, and substance abuse services</p>	<p>1-888-946-4658 Call anytime, 24 hours a day</p>
<p>Chronic health conditions, help quitting smoking, how to find community resources</p>	<p>1-800-390-3522 (TTY: 711) Reach a ConnectiCare care manager Monday – Friday, 8 a.m. to 4 p.m.</p>
<p>Prescription drug benefits, where to fill prescriptions, how to order home delivery</p>	<p>1-800-282-2881 Contact Express Scripts 24 hours a day express-scripts.com</p>
<p>ConnectiCare centers around Connecticut</p>	<p>To find locations, hours, and event schedules, or to make an appointment, go to visitconnecticare.com or call 1-877-523-6837.</p>

Follow us:



How we protect your personal information

Protecting the privacy and confidentiality of your personal information is a responsibility that ConnectiCare takes very seriously. Find our Privacy Notice in your plan documents or on our website. You can also call Member Services to ask for a copy.

Collecting, using, and sharing your personal information to administer your plan

ConnectiCare collects, uses, and shares personal information about you in order to administer your benefit plan and to provide services to you such as paying claims and providing health education programs. ConnectiCare may also share your personal information with health care providers to facilitate your treatment, and with other third parties who help us administer your benefit plan. These parties are required to keep your personal information confidential and are prohibited from using this personal information for anything other than administering your health plan. ConnectiCare does not otherwise disclose personal information about you except with your written authorization or as permitted or required by law.

Safeguarding your personal information

ConnectiCare maintains security standards and processes, including physical, electronic, and procedural safeguards, to protect your personal information. We train our employees about our privacy and security policies and practices, and we limit access to your personal information to authorized persons who need it to provide services and benefits to you.

SAFEGUARD YOUR PERSONAL INFORMATION



Protect your privacy

Beware of anyone who calls and asks you for personal information such as your Social Security, ConnectiCare member, credit or debit card, or bank account numbers. When in doubt about a caller, hang up!

Member rights and responsibilities

Knowing your rights and responsibilities is important. Rely on your Membership Agreement/Certificate of Coverage for complete plan information.

As a ConnectiCare member, you have a right to:

- Receive information about us, our services, our participating providers and practitioners, and member's rights and responsibilities
- Be treated with respect and recognition of your dignity and right to privacy
- Participate with practitioners in decision-making regarding your health care
- A candid discussion of appropriate or medically-necessary treatment options for your condition, regardless of cost or benefit coverage
- Refuse treatment and to receive information regarding the consequences of such action
- Voice complaints or appeals/grievances about us, the care you are provided, or the care the organization provides
- Make recommendations regarding our Member's Rights and Responsibilities policies

As a ConnectiCare member, you have the following responsibilities:

- Select a primary care provider (PCP)
- Provide, to the extent possible, information providers, practitioners, and organizations need to render care and information they need to provide coverage
- Follow the plans and instructions for care that you have agreed to with practitioners
- Keep scheduled appointments or give sufficient advance notice of cancellation
- Pay applicable copayments, deductibles, or coinsurance
- Read the Membership Agreement/Certificate of Coverage describing your plan's benefits and rules
- Follow the rules of the plan as outlined in your Membership Agreement/Certificate of Coverage
- Understand your health problems and participate in developing mutually-agreed upon treatment goals to the degree possible
- Be considerate of our providers and their staff and property, and respect the rights of other patients
- Be considerate of our employees by treating them with respect and dignity

As a ConnectiCare member, you have the right to the following disclosure of information:

- The names, business addresses, and official positions of board members, officers, controlling persons, owners, or partners of ConnectiCare
- A copy of your Membership Agreement detailing your plan benefits
- Information relating to consumer complaints (compiled pursuant to applicable state laws)
- Procedures for protecting the confidentiality of medical records and other enrollee information
- Drug lists used by us and the inclusion/exclusion of individual drugs
- A written description of our quality assurance program and related policies and procedures
- A description of the procedures followed in making decisions about experimental or investigational drugs, medical devices, or treatments in clinical trials
- Individual health practitioner affiliations with participating hospitals
- Upon written request, specific written clinical review criteria/information relating to a particular condition or disease, which we might consider in our utilization review process
- Other information as required by state or federal law

We are here for concerns you may have

When a claim from a practitioner or provider isn't covered by ConnectiCare, you'll receive a claim denial from us, along with an explanation. We'll also tell you if you're responsible for the bill.

If you disagree, contact Member Services at **1-800-251-7722**, or you can email us through our secure messaging online at connecticare.com. If you're still not happy, send us a written statement telling us why you disagree. Include your name and phone number and mail it to: Member Appeals, P.O. Box 4061, Farmington, CT 06034-4061. We'll carefully review your information. We'll talk to any doctors and case managers involved, and we'll make a decision based on their input as well as yours.

Eligibility requirements – Connecticut

Subject to your employer's rules, here is a brief summary of who is eligible for membership under plans issued in Connecticut.

Employees

- If enrolling in an HMO plan, you must live or work in the service area.
- If enrolling in a POS or FlexPOS plan, you do not have to live or work in the service area.

Spouses

- The spouse of an employee is also eligible for coverage if the employee and spouse are in a legally valid, existing marriage and the spouse resides with the employee, or in the service area.
- A partner under a legally valid civil union recognized by the State of Connecticut who resides with the employee, or in the service area.

Children

Children under age 26 are eligible if they meet one of the conditions/criteria below. Some plans may end dependent child eligibility if a child age 26 has his/her own employer-sponsored coverage.

- Natural children
- Adopted children who are legally adopted by the employee and meet the requirements for natural children once the adoption is final. Before the adoption is final, the children are eligible for coverage when you become legally responsible for at least partial support.
- Stepchildren who are natural or adopted children of your spouse, or for whom your spouse is appointed legal guardian
- Children for whom the employee or spouse are appointed legal guardians

Coverage for dependent children will end on the policy anniversary date that is on or after the date the child turns age 26.

For example, if a dependent turns age 26 in July and the parent's policy renews on January 1st, the dependent child is covered until the policy renewal date and the coverage will be terminated on December 31st.

Coverage for handicapped children may be extended beyond the age when it would normally end if the handicapped children meet the following conditions:

- Reside in the service area or with the employee;
- Are unable to support themselves by working because of a mental or physical handicap as certified by the children's physician;
- Are chiefly dependent on the employee or spouse for support and maintenance due to the mental or physical handicap; and
- Have become and continuously remained handicapped while they would have been eligible for dependent children coverage if they were not disabled.

Note: For children covered by Qualified Medical Child Support Orders (QMCSOs), there is no requirement that the child must live in the service area. If a court of law has given you a QMCSO ordering you to provide health insurance for your child, let your employer know. If your employer decides to enroll your child in the plan, we'll follow the decision. If your child receives care outside the service area and is in an HMO plan, however, benefits will be considered out-of-network.

Eligibility requirements – Massachusetts

Subject to your employer's rules, here is a brief summary of who is eligible for membership under plans issued in Massachusetts.

Employees

- If enrolling in an HMO plan, you must live or work in the service area.
- If enrolling in a POS plan, you do not have to live or work in the service area.

Spouses

- The spouse of an employee is also eligible for coverage if the employee and spouse are in a legally valid, existing marriage and the spouse resides with the employee or in the service area.

Children

Children under age 26 are eligible if they meet one of the conditions/criteria below. Some plans may end dependent child eligibility if a child age 26 has his/her own employer-sponsored coverage.

- Natural children
- Adopted children who are legally adopted by the employee and meet the requirements for natural children once the adoption is final. Before the adoption is final, the children are eligible for coverage when you become legally responsible for at least partial support.
- Stepchildren who are natural or adopted children of your spouse, or for whom your spouse is appointed legal guardian
- Children for whom the employee or spouse are appointed legal guardians

Coverage for children enrolled in Massachusetts Group Plans will end on the last day of the month in which the child turns age 26.

Coverage for handicapped children may be extended if the children:

- Reside in the service area or with the employee;
- Are unable to support themselves by working because of a mental or physical handicap as certified by the children's physician;
- Are chiefly dependent on the employee or spouse for support and maintenance due to the mental or physical handicap; and
- Have become and continuously remained handicapped while they would have been eligible for dependent children coverage if they were not disabled.

Grandchildren

Your eligible dependent children's natural children may be covered, as long as your dependent children continue to be covered as eligible dependents under your plan.

Note: For children covered by Qualified Medical Child Support Orders (QMCSOs), there is no requirement that the child must live in the service area. If a court of law has given you a QMCSO ordering you to provide health insurance for your child, let your employer know. If your employer decides to enroll your child in the plan, we'll follow the decision. If your child receives care outside the service area and is in an HMO plan, however, benefits will be considered out-of-network.

Language & non-discrimination notice

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

ConnectiCare:

- Provides free aids and services to people with disabilities to communicate effectively with us, including qualified interpreters and information in alternate formats.
- Provides free language services to people whose primary language is not English, including translated documents and oral interpretation.

If you need these services, contact The Committee for Civil Rights.

If you believe that ConnectiCare 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: The Committee for Civil Rights, ConnectiCare, 175 Scott Swamp Road, Farmington, CT 06032, Phone: 1-800-251-7722, and TTY: 711. You can file a grievance in person or by mail. If you need help filing a grievance, The Committee for Civil Rights is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).

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

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-251-7722 (TTY: 711).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-251-7722 (TTY: 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-251-7722 (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-800-251-7722 (TTY: 711)。

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-251-7722 (TTY: 711).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-251-7722 (ATS: 711).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-251-7722 (TTY: 711).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-251-7722 (телетайп: 711).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-251-7722 (TTY: 711).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-251-7722 (رقم هاتف الصم والبكم: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-251-7722 (TTY: 711)번으로 전화해 주십시오.

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-800-251-7722 (TTY: 711).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-251-7722 (TTY: 711) पर कॉल करें।

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-251-7722 (TTY: 711).

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-800-251-7722 (TTY: 711).

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសាដោយមិនគិតលុយគឺអាចមានសំរាប់អ្នក។ ចូរទូរស័ព្ទ 1-800-251-7722 (TTY: 711)។

सुचना: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-251-7722 (TTY: 711).



Coverage is provided by and services are administered as follows: In Connecticut: Group HMO and POS coverage, and Individual HMO coverage is underwritten by ConnectiCare, Inc.; Group coverage for coinsurance plans and Individual POS coverage is underwritten by ConnectiCare Insurance Company, Inc. In Massachusetts: Group HMO and POS coverage is underwritten by ConnectiCare of Massachusetts, Inc. FlexPOS, PPO coverage, ASO/Self-funded services, and Dental products are administered or underwritten by ConnectiCare Insurance Company, Inc.

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