Wellcare Prime by Absolute Total Care (Medicare-Medicaid Plan) offered by Absolute Total Care, Inc.

Annual Notice of Changes for 2022

Introduction

You are currently enrolled as a member of Wellcare Prime. Next year, there will be some changes to the plan's benefits, coverage, and rules. This document tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call Wellcare Prime at 1-855-735-4398 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.absolutetotalcare.com .

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A. Disclaimers

This is not a complete list. The benefit information is a brief summary, not a complete description of benefits. For more information contact the plan or read the Wellcare Prime Member Handbook.

B. Reviewing your Medicare and Medicaid coverage for next year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. Refer to section G2 for more information.

If you leave our plan, you will still be in the Medicare and Healthy Connections Medicaid programs as long as you are eligible.

- If you leave our plan, you can choose to enroll in a different Medicare-Medicaid Plan, or you can go back to getting your Medicare and Healthy Connections Medicaid services separately.
- If you do not want to enroll in a different Medicare-Medicaid Plan, you will have a choice about how to get your Medicare benefits (go to page 11 to find out your options).

B1. Additional resources

- ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-735-4398 (TTY: 711) de 8 a.m. a 8 p.m., de lunes a viernes. Luego del horario de atención, los fines de semana y los días feriados federales, es posible que se le pida que deje un mensaje. Le devolveremos la llamada el próximo día hábil. La llamada es gratuita.
- You can get this document for free in other formats, such as large print, braille, or audio. Call 1-855-735-4398 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- To always get this document and other material in another language or format, now and in the future, please call Member Services. This is called a "standing request". We will document your choice. If you later want to change the language and/or format choice, please call Member Services. Find the Member Services phone number at the bottom of this page.

B2. Information about Wellcare Prime

- Wellcare Prime by Absolute Total Care (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and South Carolina Healthy Connections Medicaid to provide benefits of both programs to enrollees.
- Coverage under Wellcare Prime is qualifying health coverage called "minimum essential coverage." It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.
- Wellcare Prime by Absolute Total Care (Medicare-Medicaid Plan) is offered by Absolute Total Care, Inc. When this Annual Notice of Changes says "we," "us," or "our," it means Absolute Total Care, Inc. When it says "the plan" or "our plan," it means Wellcare Prime.

B3. Important things to do:

- Check if there are any changes to our benefits that may affect you.
 - Are there any changes that affect the services you use?
 - It is important to review benefit changes to make sure they will work for you next year.
 - Look in sections E1 and E2 for information about benefit changes for our plan.
- Check if there are any changes to our prescription drug coverage that may affect you.
 - Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section E2 for information about changes to our drug coverage.
- Check to find out if your providers and pharmacies will be in our network next year.
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section D for information about our *Provider and Pharmacy Directory*.
- Think about your overall costs in the plan.
 - o How do the total costs compare to other coverage options?
- Think about whether you are happy with our plan.

If you decide to stay with Wellcare Prime:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (refer to section G2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section G2, page 11 to learn more about your choices.

C. Changes to the plan's name

On January 1, 2022, our plan name will change from Absolute Total Care (Medicare-Medicaid Plan) to Wellcare Prime by Absolute Total Care (Medicare-Medicaid Plan).

New ID cards will be mailed out by January 1, 2022. If you have any questions or need assistance please call Member Services at 1-855-735-4398 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day

D. Changes to the network providers and pharmacies

Our provider and pharmacy networks have changed for 2022.

We strongly encourage you to **review our current** *Provider and Pharmacy Directory* to find out if your providers or pharmacy are still in our network. An updated *Provider and Pharmacy Directory* is located on our website listed at the bottom of the page. You may also call Member Services at the number at the bottom of the page for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, refer to Chapter 3 of your *Member Handbook*.

E. Changes to benefits for next year

E1. Changes to benefits for medical services

We are changing our coverage for certain medical services next year. The table below describes these changes.

If you have questions, please call Wellcare Prime at 1-855-735-4398 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.absolutetotalcare.com.

	2021 (this year)	2022 (next year)
Over-the-Counter (OTC)	You pay a \$0 copay	You pay a \$0 copay.
Items	As an extra benefit, our plan covers up to \$100 per calendar quarter for eligible over-the-counter (OTC) items available via mail. This OTC benefit is limited to	As an extra benefit, our plan covers up to \$100 per calendar quarter for eligible over-the-counter (OTC) items available via mail or at select CVS pharmacy retail stores.
	one order per benefit period. Any unused amount does not carry over to the next benefit period.	This OTC benefit is limited to one order per calendar quarter. Any unused amount cannot be carried over to the next benefit period.
	You can order up to nine of the same items per three calendar months unless otherwise noted in the catalog. There is no limit on the number of total items in your order.	You can order up to nine of the same items per three calendar months unless otherwise noted in the catalog. There is no limit on the number of total items in your order.
	This benefit can only be used to order OTC products for the member.	Multiples of single items may be limited, per order.
	Please contact the plan at the number at the bottom of the page for more information.	Please contact the plan at the number at the bottom of the page for more information.

E2. Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website listed at the bottom of the page. You may also call Member Services at the number at the bottom of the page for updated drug information or to ask us to mail you a *List of Covered Drugs*.

The List of Covered Drugs is also called the "Drug List."

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to find out if there will be any restrictions.

If you have questions, please call Wellcare Prime at 1-855-735-4398 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.absolutetotalcare.com.

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If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at the number at the bottom of the page to ask for a list of covered drugs that treat the same condition.
 - O This list can help your provider find a covered drug that might work for you.
- Work with your doctor (or other prescriber) and ask the plan to make an exception to cover the drug.
 - You can ask for an exception before next year and we will give you an answer within 72 hours after we get your request (or your prescriber's supporting statement).
 - To learn what you must do to ask for an exception, refer to Chapter 9 of the 2022 Member Handbook or call Member Services at the number at the bottom of the page.
 - o If you need help asking for an exception, you can contact Member Services or your care coordinator. Refer to Chapter 2 and Chapter 3 of the *Member Handbook* to learn more about how to contact your care coordinator.
- Ask the plan to cover a temporary supply of the drug.
 - In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - O This temporary supply will be for up 30 days of medication at a retail pharmacy and up to 31 days of a medication at a long-term care pharmacy for Part D drugs. This temporary supply will be for up to 90 days of a non-Part D drug that is covered by Healthy Connections Medicaid. (To learn more about when you can get a temporary supply and how to ask for one, refer to Chapter 5 of the *Member Handbook*.)
 - When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.
 - O If you have a current formulary exception that our plan approved in 2021, and you remain a member of Wellcare Prime for 2022, we may continue to cover this exception during 2022. You will receive a letter with approval dates if we decide to continue to cover your exception during 2022. However, if we decide not to continue to cover the exception during 2022, your doctor (or

other prescriber) must work with Wellcare Prime to request a new exception for the 2022 calendar year. To learn what you must do to ask for an exception, see Chapter 9, of the 2022 Member Handbook or call Member Services at 1-855-735-4398 (TTY: 711). For Member Services hours of operation, please see the bottom of this page.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2022. Read below for more information about your prescription drug coverage.

We moved some of the drugs on the Drug List to a lower or higher drug tier. To find out if your drugs will be in a different tier, look them up in the Drug List.

The table below shows your costs for drugs in each of our three drug tiers.

	2021 (this year)	2022 (next year)
Drugs in Tier 1	Your copay for a one-month	Your copay for a one-month
(Generic Drugs)	(30-day) supply is \$0 per prescription .	(30-day) supply is \$0 per prescription.
Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy		
Drugs in Tier 2	Your copay for a one-month	Your copay for a one-month
(Brand Name Drugs)	(30-day) supply is \$0 per prescription.	(30-day) supply is \$0 per prescription.
Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy		
Drugs in Tier 3	Your copay for a one-month	Your copay for a one-month
(Non-Medicare Prescription and Over-the-Counter Drugs)	(30-day) supply is \$0 per prescription .	(30-day) supply is \$0 per prescription .
Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy		

F. Administrative changes

Administrative changes may change how you get your services, items, or prescription drugs. Read below for more information about these changes.

	2021 (this year)	2022 (next year)
Service Area Change	The service area for this plan includes Abbeville, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Union, and Williamsburg counties in South Carolina. You must live in one of these areas to join the plan.	The service area for this plan includes Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg and York counties in South Carolina. You must live in one of these areas to join the plan.

G. How to choose a plan

G1. How to stay in our plan

We hope to keep you as a member next year.

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You do not have to do anything to stay in your health plan. If you do not sign up for a different Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2022.

G2. How to change plans

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another Medicare-Medicaid Plan, or moving to Original Medicare.

These are the four ways people usually end membership in our plan:

1. You can change to:	Here is what to do:
	Call South Carolina Healthy Connections Choices at 1-877-552-4642, Monday through Friday from 8 a.m. to 6 p.m. TTY users should call 1-877-552-4670. Tell them you want to leave Wellcare Prime and join a different Medicare-Medicaid Plan. If you are not sure what plan you want to join, they can tell you about other plans in your area. Your coverage with Wellcare Prime will end on the last day of the month that we get your request.

2. You can change to:

A Medicare health plan, such as a Medicare Advantage Plan or a Program of All-inclusive Care for the Elderly (PACE)

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

Call the State Health Insurance
 Assistance Program (SHIP) at 1-800 868-9095. TTY users should call 711.
 In South Carolina, the SHIP is called
 the Insurance Counseling Assistance
 and Referrals for Elders (I-CARE)
 program.

You will automatically be disenrolled from Wellcare Prime when your new plan's coverage begins.

3. You can change to:

Original Medicare with a separate Medicare prescription drug plan

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

Call the State Health Insurance
 Assistance Program (SHIP) at 1-800 868-9095. TTY users should call 711.
 In South Carolina, the SHIP is called
 the Insurance Counseling Assistance
 and Referrals for Elders (I-CARE)
 program.

You will automatically be disenrolled from Wellcare Prime when your Original Medicare and prescription drug plan coverage begins.

4. You can change to:

Original Medicare without a separate Medicare prescription drug plan

NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.

You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call Insurance Counseling Assistance and Referrals for Elders (I-CARE) at 1-800-868-9095. TTY users should call 711.

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

Call the State Health Insurance
 Assistance Program (SHIP) at 1-800 868-9095. TTY users should call 711.
 In South Carolina, the SHIP is called
 the Insurance Counseling Assistance
 and Referrals for Elders (I-CARE)
 program.

You will automatically be disenrolled from Wellcare Prime when your Original Medicare coverage begins.

H. How to get help

H1. Getting help from Wellcare Prime

Questions? We're here to help. Please call Member Services at the number at the bottom of the page. We are available for phone calls from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day.

Your 2022 Member Handbook

The 2022 Member Handbook is the legal, detailed description of your plan benefits. It has details about next year's benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The 2022 Member Handbook will be available by October 15. An up-to-date copy of the 2022 Member Handbook is available on our website listed at the bottom of the page. You may also call Member Services at the number at the bottom of the page to ask us to mail you a 2022 Member Handbook.

Our website

You can also visit our website listed at the bottom of the page. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).

H2. Getting help from the state enrollment broker, South Carolina Healthy Connections Choices

The enrollment broker helps people choose between the different Medicare-Medicaid Plans, enroll, change plans, or disenroll. The enrollment broker is called South Carolina Healthy Connections Choices, and it is not connected with any insurance company or health plan. You can call South Carolina Healthy Connections Choices at 1-877-552-4642, Monday through Friday from 8 a.m. to 6 p.m. TTY users should call 1-877-552-4670.

H3. Getting help from the Healthy Connections Prime Advocate

The Healthy Connections Prime Advocate is an ombudsman program that helps people enrolled in Healthy Connections Prime with service or billing problems. The Healthy Connections Prime Advocate can help you if you are having a problem with Wellcare Prime. The ombudsman's services are free.

- The Healthy Connections Prime Advocate is an ombudsman program that works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- The Healthy Connections Prime Advocate makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- The Healthy Connections Prime Advocate is not connected with us or with any insurance company or health plan. The phone number for the Healthy Connections Prime Advocate is 1-844-477-4632. TTY users should call 711.

H4. Getting help from the State Health Insurance Assistance Program (SHIP)

You can also call the State Health Insurance Assistance Program (SHIP). In South Carolina, the SHIP is called the Insurance Counseling Assistance and Referrals for Elders (I-CARE) program. I-CARE counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. I-CARE is not connected with any insurance company or health plan. The I-CARE phone number is 1-800-868-9095. TTY users should call 711.

H5. Getting help from Medicare

To get information directly from Medicare, you can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you have questions, please call Wellcare Prime at 1-855-735-4398 (TTY: 711) from 8 a.m. to 8 p.m., Monday through Friday. After hours, on weekends and on federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. **For more information**, visit mmp.absolutetotalcare.com.

Medicare's Website

You can visit the Medicare website (<u>www.medicare.gov</u>). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans.

You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to www.medicare.gov and click on "Find plans.")

Medicare & You 2022

You can read the *Medicare* & *You* 2022 handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

H6. Getting help from Healthy Connections Medicaid

The phone number for Healthy Connections Medicaid is 1-888-549-0820. This call is free. TTY users should call 1-888-842-3620.

H7. Getting help from your Quality Improvement Organization (QIO)

The QIO is a group of doctors and other healthcare professionals who help improve the quality of care for people with Medicare. In South Carolina, the QIO is a company called KEPRO. KEPRO is not connected with our plan. You can call KEPRO at 1-888-317-0751 (TTY: 1-855-843-4776). For more information, see Chapter 2 of your *Member Handbook*

Language Services

ATTENTION: If you do not speak English, language assistance services are available to you, free of charge. Call 1-855-735-4398 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-735-4398 (TTY: 711).

ملحوظة: إذا كنت لا تجيد التحدث باللغة الإنجليزية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 4398-735-735-1 (رقم هاتف الصم والبكم: 711).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-735-4398 (TTY: 711).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-735-4398 (ТТҮ: 711).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-735-4398 (TTY: 711).

ATENÇÃO: Se você fala português do Brasil, os serviços de assistência em sua lingua estão disponíveis para você de forma gratuita. Chame 1-855-735-4398 (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 電 1-855-735-4398 (TTY: 711)。

RUAHSAKNAK: Mirang ttong hmang nan um silen, Mirang ttong thawn pehpar aw in a lak in bawm nak a um. Himi ah in contact thei asi: 1-855-735-4398 (TTY: 711).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-855-735-4398 (TTY: 711) पर कॉल करें।

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-735-4398 (TTY: 711) 번으로 전화해 주십시오.

THEIHTERNAK: Mirang holh a thiammi na si ahcun, holh lei kongkau bawmchanh khawhnak a lak in nangmah caah a um. Hika hin au hna 1-855-735-4398 (TTY-711).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-735-4398 (ATS : 711).

ဟ်သူဉ်ဟ်သးဘဉ်တက္၊ – ဖဲနမ္ါတကတိၤအဲးကလံးအကျို်ဘဉ်နှဉ်,ကျိုာ်အတါဆီဉ်ထွဲမ႑စၫၤအတါဖံးတါမၤတဖဉ်အိဉ်ဝဲနော်လၢနဂ်ိါလၢတလိဉ် ဟူဉ်အပူးဘဉ်နှဉ်လီး က်ီးဘဉ် 1-855-735-4398 (TTY: 711) တက္ခါ.

ማሳሰቢያ፦ አማርኛ የሚናንሩ ከሆነ የቋንቋ እንዛ አንልግሎቶች ያለ ምንም ክፍያ ለእርስዎ ሊሰጡ ይቸላሉ። ወደ 1-855-735-4398 (TTY: 711) ይደውሉ።

သတိပြုရန်။ သင် မြန်မာစကားပြောပါက အခမဲ့ ဘာသာပြန် ဝန်ဆောင်မှုကို ရရှိနိုင်သည်။ 1-855-735-4398 (TTY: 711) ကိုခေါ် ပါ။