Welcome

Sandia Total Health (STH) is administered by Blue Cross and Blue Shield of New Mexico (BCBSNM)
This guide will help you:

• Understand how Sandia Total Health works
• Get the most from your Blue Cross and Blue Shield of New Mexico (BCBSNM) wellness programs
• Navigate the online tools at bcbsnm.com
• Find a health care provider in BCBSNM’s Blue Preferred Network or PPO Network
• Learn how to enroll in programs to earn dollars toward your HRA

Glossary of Health Plan Terms

Understanding health insurance isn’t always easy. Here are some common terms that are helpful to understand.

Claim form: A form you may have to fill out and submit to your health insurance carrier for payment of benefits under that health care plan for non-contracted providers.

Coinsurance: A percentage of a covered charge that you are required to pay toward a service covered by your plan.

Deductible: A fixed amount of the eligible expenses you are required to pay before payment by your health plan begins.

HRA (Health Reimbursement Account): Funds from your employer that can be used toward your deductible and coinsurance.

Network: The group of doctors, hospitals, and other medical care professionals that a health care plan has contracted with to deliver medical services to its members.

Non-preferred (Out-of-Network) providers: A non-preferred provider does not have a preferred or PPO contract with Blue Cross and Blue Shield of New Mexico. For most benefits, after you’ve met the non-preferred provider deductible, you will pay a percentage of covered charges for services you receive from non-preferred providers. You may be balance-billed for the difference between the allowed and billed amounts.

Out-of-pocket limit: The maximum amount you have to pay for most or all expenses covered under your health care plan during a defined benefit period.

Provider Finder®: Provider Finder from Blue Cross and Blue Shield of New Mexico is an innovation for helping members select providers with meaningful quality ratings.

Questions regarding your benefits or claims?
BCBSNM has a dedicated customer representative, who can be reached at 505-962-7294.

You can make an appointment with the on-site representative by calling 505-962-7294 between 8 a.m. and 4 p.m. Monday - Thursday.
Understanding Sandia Total Health

Sandia Total Health has a Health Reimbursement Account established by your employer to help pay for your covered medical and prescription drug expenses and any qualified non-medical 213(d) services. Sandia also offers a Flexible Spending Account (FSA) you can use for health care expenses and any qualified non-medical 213(d) services (irs.gov/pub/irs-pdf/p502.pdf). You contribute pre-tax dollars to your FSA each year. The FSA and HRA are administered by ConnectYourCare (CYC). If you enroll in the FSA, your claims will be paid first from your FSA, and once your FSA is depleted, claims will be paid from your HRA. CYC will pay your medical providers directly.

The plan consists of two parts:

Health care coverage
- Comprehensive medical coverage with in- and out-of-network benefits
- Option of Blue Preferred Network in New Mexico
- Annual deductible and coinsurance provisions
- Out-of-pocket limit amount to protect you from the expense of possible catastrophic illness or injury

Health Reimbursement Account
- Sandia contributes money on your behalf to your HRA based on 1) your coverage level, 2) whether you and your covered spouse* have completed a Health Assessment, and 3) your participation in the Virgin Pulse Points program.**
- Funds from your HRA contribution can be used to pay for the deductible and coinsurance portion of your medical and prescription drug expenses and any qualified non-medical 213(d) services.
- Any unused amount in your HRA at the end of the plan year will be rolled over for use next year, up to the maximum listed in your Program Summary.

* "Spouse" includes same-gender spouses legally married in jurisdictions that recognize their marriages.
** Including completion of a Health Action Plan

The relationship between Blue Cross and Blue Shield of New Mexico and ConnectYourCare is that of independent contractors. ConnectYourCare is an independent company that is solely responsible for administration of the FSA associated with this plan. Please note that the FSA is a separate account established by the member in accordance with an agreement with an independent third-party bank.

Virgin Pulse is an independent company that administers the Well-Being Program. Virgin Pulse does not provide Blue Cross and Blue Shield of New Mexico products or services. Virgin Pulse is solely responsible for the products and services it offers.

Sandia Total Health Advantages
- You will pay the lowest deductible, coinsurance, and out-of-pocket limit if you choose a Blue Preferred Network Provider.
- You will pay less in coinsurance if you choose providers in the PPO network.
- Preventive care from doctors in the Blue Preferred Network or PPO network are covered at 100 percent and not subject to the deductible.
- The BlueCard® program gives you nationwide and worldwide access to providers who are contracted with Blue Cross and Blue Shield Plans.
- Online decision tools help increase your awareness and knowledge of health issues and help you keep track of your health care expenses.
How Sandia Total Health Works

1. Your HRA helps pay for your health care expenses and any qualified non-medical 213(d) services.
   - If you and your covered spouse* have completed your Health Assessment and/or participated in the Virgin Pulse Points program**, Sandia will contribute money to your account as follows: Up to $500 for employee only, up to $750 for employee + child(ren), up to $1,000 for employee + spouse*, and up to $1,250 for family.
   - If the employee and spouse* do not complete the health assessment, the account will receive $500 less.
   - Your HRA pays your eligible expenses as long as there are funds in it.
   - If you have an FSA, these funds will be used first to pay for any eligible expenses. Then your HRA pays any remaining expenses. CYC pays your medical provider directly.
   - All medical payments apply toward your annual deductible and out-of-pocket maximum.
   - Your annual deductible is the amount you need to pay before your medical plan begins to pay.

2. After your HRA funds are used up, you pay the rest of your deductible.

<table>
<thead>
<tr>
<th></th>
<th>Blue Preferred Network</th>
<th>In-Network (PPO)</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Deductible</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>(Blue Preferred Network and In-Network Deductibles DO Cross-Apply)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee</td>
<td>$500</td>
<td>$750</td>
<td>$2,000</td>
</tr>
<tr>
<td>Employee + Spouse* or Child(ren)</td>
<td>$1,000</td>
<td>$1,500</td>
<td>$4,000</td>
</tr>
<tr>
<td>Employee + Family</td>
<td>$1,500</td>
<td>$2,250</td>
<td>$6,000</td>
</tr>
</tbody>
</table>

3. After your deductible is met, you pay coinsurance.
   - Once you have met your deductible, you and the medical plan share expenses. This is called coinsurance. Your share is 10 percent of eligible expenses for the Blue Preferred Network, 20 percent of eligible expenses for in-network, and 40 percent of eligible expenses for out-of-network.
   - For your protection, there is a limit on how much you need to pay out of your own pocket. Once you reach the amounts shown below, you are covered at 100 percent of eligible expenses for the rest of the year.

<table>
<thead>
<tr>
<th>Out-of-Pocket Limit (Including Deductible—Blue Preferred Network and In-Network Out-of-Pocket Limits DO Cross-Apply)</th>
<th>Blue Preferred Network</th>
<th>In-Network (PPO)</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>$2,000</td>
<td>$2,750</td>
<td>$6,500</td>
</tr>
<tr>
<td>Employee + Spouse* or Child(ren)</td>
<td>$4,000</td>
<td>$5,500</td>
<td>$13,000</td>
</tr>
<tr>
<td>Employee + Family</td>
<td>$6,000</td>
<td>$8,250</td>
<td>$19,500</td>
</tr>
</tbody>
</table>

For more information, please refer to the Sandia Total Health program summary.

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* “Spouse” includes same-gender spouses legally married in jurisdictions that recognize their marriages.
** Including completion of a Health Action Plan
Blue Access for Members℠

Blue Access for Members (BAM℠), our member portal, offers you information on your health and health plan in one convenient location. To register for BAM, go to bcbsnm.com/sandia and select Register Now in the BAM log-in box. With your BCBSNM ID card handy, follow the on-screen registration instructions. Create a user name and password for instant and secure access to your personal information.

After logging in, from your personal home page you can:

- Check your claims, including payment status and amounts, and sort/print claim information
- Confirm who is covered under your plan
- Download and print various forms
- Locate a doctor or hospital in your plans’ network using Provider Finder
- Request a new or replacement ID card and print a temporary card
- Email Customer Service

Provider Finder

How to locate a BCBSNM Blue Preferred or PPO Network Provider

Insight for important health care decisions

Provider Finder from Blue Cross and Blue Shield of New Mexico is an innovation for helping members select providers with meaningful quality ratings.

Use Provider Finder either online or from a mobile device to:

- Find a network primary care physician, specialist or hospital.
- Filter search results by doctor, specialty, ZIP code, language and gender —even get directions from Google Maps™.
- Determine if a Blue Distinction® Center for Specialty Care is an option for treatment.
- View patient feedback or add a provider review.
- Check the quality, certifications and recognitions for doctors.
- Make an appointment to consult with a provider in select geographic areas.

Text** BCBSNMAPP to 33633 to get the app.

It’s easy and immediate—and available at bcbsnm.com/sandia, or a mobile phone Web browser—for members and non-members.

The BCBSNM App

Stay connected with BCBSNM and access important health benefit information wherever you are.

- Find an in-network doctor, hospital or urgent care facility
- Access your claims, coverage and deductible information
- View and email your member ID card
- Log in securely with your fingerprint
- Download and share your Explanation of Benefits*
- Get Push Notifications and access to Message Center*

* Currently only available on iPhone®. iPhone is a registered trademark of Apple Inc.

** Message and data rates may apply. Terms and conditions and privacy policy at bcbsil.com/mobile/text-messaging
Peace of Mind While Traveling

BlueCard PPO Has You Covered

Use BlueCard PPO When You’re Away from Home

Through the BlueCard PPO Program, Blue Cross and Blue Shield Plans work together to help ensure you receive reliable, affordable health care when you need it while traveling in the U.S. You have access to an established PPO network of doctors, hospitals and other health care providers throughout the country.

How BlueCard Works

1. Always carry your most current Blue Cross and Blue Shield of New Mexico ID card.
2. When you’re outside of your local BCBSNM service area and need health care, refer to your ID card and call BlueCard Access at 800-810-BLUE (2583) or visit the BlueCard Doctor and Hospital Finder at bcbs.com for information on the nearest PPO doctors and hospitals. In an emergency, go to the nearest hospital.
3. You are responsible for calling BCBSNM for precertification, when necessary. Refer to the precertification phone number on your ID card, which is different than the BlueCard Access number above.
4. When you arrive at the doctor’s office or hospital, present your ID card, and the office or hospital staff will verify your membership and coverage information.
5. After you receive medical attention, your claim will be routed to BCBSNM for processing by the provider. All doctors and hospitals are paid directly, so you won’t have any paperwork.
6. You should not have to pay up front for medical services, except for the usual out-of-pocket expenses (non-covered services, deductibles, copayments and/or coinsurance). BCBSNM will provide you with an Explanation of Benefits statement.

Get access to network providers when you’re on the go:

- Freedom of choice: You can choose your provider. To receive the maximum benefits allowed under your health care plan though, choose contracted network providers whenever possible.
- Coast-to-coast care: Get access no matter where in the U.S. you travel.
- No paperwork or claims to file: When visiting a PPO provider, all you need to do is show your ID card.
Because Your Health Counts

It’s Important to Know Where to Go When You Need Care

Sometimes it’s easy to know when you should go to an emergency room (ER), at other times, it’s less clear. You have choices for receiving in-network care that will work with your schedule and also give you access to the kind of care you need. Know when to use each for non-emergency treatment.

Your Doctor’s Office

Your own doctor may be the best place to go for non-emergency care, such as health exams, routine shots, colds, flu and minor injuries. Your doctor knows your health history, the medicine you take, your lifestyle, and can decide if you need tests or specialist care. Your doctor can also help you with care for a chronic health issue, such as asthma or diabetes.

Urgent/Immediate Care Clinic

These facilities can treat you for more serious health issues, such as when you need an X-ray or stitches. You will probably have a lower out-of-pocket cost than at a hospital ER and you may have a shorter wait.

Hospital Emergency Room

Any life-threatening or disabling health problem is a true emergency. You should go to the nearest hospital ER or call 911. When you use the ER for true emergencies, you help keep your out-of-pocket costs lower.

Need help deciding where to go for care?

Call the 24/7 Nurseline at 800-973-6329 for help identifying some options when you or a family member has a health problem or concern.

On hand 24 hours a day, seven days a week; bilingual nurses available.
Knowing where to go for care can make a big difference in cost and time.

Here’s how your options compare:

<table>
<thead>
<tr>
<th></th>
<th>Average Costs</th>
<th>Average Wait Times</th>
<th>Examples of Health Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Doctor’s Office</td>
<td>$</td>
<td>24 minutes</td>
<td>• Fever, colds and flu&lt;br&gt;• Sore throat&lt;br&gt;• Minor burns&lt;br&gt;• Stomach ache&lt;br&gt;• Ear or sinus pain&lt;br&gt;• Physicals&lt;br&gt;• Shots&lt;br&gt;• Minor allergic reactions</td>
</tr>
<tr>
<td>Urgent Care Clinic</td>
<td>$$$$$</td>
<td>11-20 minutes</td>
<td>• Migraines or headaches&lt;br&gt;• Abdominal pain&lt;br&gt;• Urinary tract infection&lt;br&gt;• Back pain&lt;br&gt;• Cuts that need stitches&lt;br&gt;• Sprains or strains&lt;br&gt;• Animal bites</td>
</tr>
<tr>
<td>Hospital Emergency Room</td>
<td>$$$$$$$</td>
<td>4 hours, 7 minutes</td>
<td>• Chest pain, stroke&lt;br&gt;• Head or neck injuries&lt;br&gt;• Fainting, dizziness, weakness&lt;br&gt;• Problem breathing&lt;br&gt;• Seizures&lt;br&gt;• Sudden or severe pain&lt;br&gt;• Uncontrolled bleeding&lt;br&gt;• Broken bones</td>
</tr>
</tbody>
</table>

†Relative costs described are for independently contracted network providers. Costs for out-of-network providers may be higher.

2. The closest urgent care center may not be in your network. Be sure to check Provider Finder to make sure the center you go to is in-network.
3. Message and data rates may apply. Read terms, conditions and privacy policy at bcbsnm.com/mobile/text-messaging.
4. 24/7 Nurseline is not a substitute for a doctor’s care. Talk to your doctor about any health questions or concerns.

The information provided is not intended as medical advice, nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional. Please check with your doctor for advice. Coverage may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card. This information is intended solely as a general guide to what services may be available. The actual availability of services may vary greatly from location to location. The information is not intended to be medical advice. If you have questions about any health concern, you should discuss them with your health care provider.

Urgent Care or Freestanding Emergency Room

Urgent care centers and freestanding ERs can be hard to tell apart. Freestanding ERs often look a lot like urgent care centers but costs are higher. A visit to a freestanding ER often results in surprise medical bills that can be four to five times the rate charged by urgent care centers for the same services. Here are some ways to know if you are at a freestanding ER.

Freestanding ERs:
- Look like urgent care centers, but have EMERGENCY in the facility name.
- Are separate from a hospital but are equipped and work the same as an ER.
- Are staffed by board-certified ER physicians and are subject to the same ER copay.
- Find urgent care centers near you by texting URGENTNM to 33633 and then type in your ZIP code.

Need help finding a network provider?

Use Provider Finder at bcbsnm.com or call the Customer Service number on the back of your member ID card. If you need emergency care, call 911 or seek help from any doctor or hospital right away.
24/7 Nurseline

Nurses available anytime you need them

Health happens – good or bad, 24 hours a day, seven days a week. That is why we have registered nurses waiting to talk to you whenever you call our 24/7 Nurseline.

Our nurses can answer your health questions and try to help you decide whether you should go to the emergency room or urgent care center or make an appointment with your doctor. You can also call the 24/7 Nurseline whenever you or your covered family members need answers to health questions about:

- Asthma
- Back pain
- Diabetes
- Dizziness or severe headaches
- High fever
- A baby’s nonstop crying
- Cuts or burns
- Sore throat
- And much more

Plus, when you call, you can access an audio library of more than 1,000 health topics – from allergies to surgeries – with more than 500 topics available in Spanish.

Call the 24/7 Nurseline with any health questions.

Toll-free: 800-973-6329

Hours of Operation: Anytime
Telehealth
Powered by MDLIVE®
On-demand health care at your fingertips

Care When and Where You Need It

Getting sick is never convenient and finding time to get to the doctor can be hard. MDLIVE’s telehealth program provides you and your covered dependents access to care for non-emergency medical and behavioral health needs. Whether you’re in the city, a rural area or you’re on a weekend camping trip, access to a board-certified MDLIVE doctor is available 24 hours a day/seven days a week. You can speak to a doctor immediately or schedule an appointment based on your availability. Telehealth can also be a better alternative than going to the emergency room or urgent care.*

MDLIVE doctors can help treat the following conditions and more:

**General Health**
- Allergies
- Asthma
- Joint aches
- Sinus infections

**Pediatric Care**
- Cold/flu
- Ear infections
- Pink eye

**Behavioral Health**
- Online counseling
- Child behavior/learning issues
- Stress management

VISIT THE WEBSITE MDLIVE.COM/SANDIA
Get connected today!

To register, you’ll need to provide your first and last name, date of birth and Blue Cross and Blue Shield of New Mexico member ID number.

**Connect**
Computer, smartphone, tablet or telephone

**Interact**
Real-time consultation with board-certified doctor

**Diagnose**
ePrescribe medications sent to select pharmacy of your choice (when appropriate)

**Website:**
- Visit the website MDLIVE.com/sandia
- Choose an MDLIVE doctor
- Chat live with the doctor online

**Mobile app:**
- Download the app from the Apple App Store™, Google Play™ Store or Windows® Store
- Open the app and choose an MDLIVE doctor
- Chat with the doctor from your mobile device

**Telephone:**
- Call MDLIVE (888-858-5074)
- Speak with a health service specialist
- Speak with an MDLIVE doctor

* In the event of an emergency, this service should not take place of an emergency room or urgent care facility. Proper diagnosis should come from your doctor and medical advice is between you and your doctor.

** Internet/Wifi connection needed for computer access. Data charges may apply when using your tablet or smartphone. Check your phone carrier’s plan for details. Video consultation is available Monday through Sunday from 7 a.m. – 9 p.m.

App Store is a service mark of Apple Inc.
Google Play Store is a trademark of Google Inc. (“Google”).
Windows is a registered mark of Microsoft®
Well onTarget® can give you the support you need to make healthy choices — while rewarding you for your hard work.

**Member Wellness Portal**

The heart of Well onTarget is the member portal, available at wellontarget.com. It uses the latest technology to offer you an enhanced online experience. This engaging portal links you to a suite of inviting programs and tools.

- **Health Assessment (HA)**: The HA poses questions to learn more about you. After you take the HA, you will get a personal wellness report. This confidential report offers you tips for living your healthiest life. Your answers will help tailor the Well onTarget portal with the programs that may help you reach your goals. You can share this report with your health care provider.

- **Self-Management Programs**: These programs let you work at your own pace to reach your health goals. Learn more about nutrition, fitness, losing weight, quitting smoking, managing stress and more. Track your progress as you make your way through each lesson. Reach your milestones and earn Blue PointsSM.1

Start experiencing the wellness portal today. Go to wellontarget.com.

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1 Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at wellontarget.com for further information.

2 Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.
Make Your Fitness Program Membership Work for You!

The Fitness Program gives you flexible options to help you live a healthy lifestyle.

Since you are a BCBSNM member, the Fitness Program is available exclusively to you and your covered dependents (age 16 and older).* The program gives you access to a nationwide network of fitness locations. Choose one location close to home and one near work, or visit locations while traveling.

Other program perks include:

- **Flexible Gym Network:** A choice of gym networks to fit your budget and preferences.**

<table>
<thead>
<tr>
<th>Options</th>
<th>Base</th>
<th>Core</th>
<th>Power</th>
<th>Elite</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Fee</td>
<td>$19</td>
<td>$29</td>
<td>$39</td>
<td>$99</td>
</tr>
<tr>
<td>Gym Facility Network Size†</td>
<td>3,000</td>
<td>7,500</td>
<td>12,000</td>
<td>12,400</td>
</tr>
</tbody>
</table>

$19 Initiation Fee

- **Studio Class Network:** Boutique-style classes and specialty gyms with pay-as-you-go option and 30% off every 10th class.

- **Family Friendly:** Expands gym network access to your covered dependents at a bundled price discount.

- **Convenient Payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.

Features

- **Mobile App:** Allows members to access location search, studio class registration, location check-in and activity history.

- **Real-time Data:** Provided to the mobile app and Well onTarget portals.

- **Complementary and Alternative Medicine (CAM) Discounts Through the Whole Health Living Choices Program:** Save money through a nationwide network of 40,000 health and well-being providers, such as acupuncturists, massage therapists and personal trainers. To take advantage of these discounts, register at whlchoices.com.

- **Blue Points℠:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits. You can redeem points for apparel, books, electronics, health and personal care items, music and sporting goods.***

- **Web Resources:** You can go online to find fitness locations and track your visits.

Are You Ready for Fitness?

It's easy to sign up:

1. Go to [bcbsnm.com](http://bcbsnm.com) and log in to Blue Access for Members℠.
2. Under “Quick Links,” choose “Fitness Program.” On this page, you can enroll, search for nearby fitness locations and learn more about the program.
3. Click “Enroll Now.” Then search and select the fitness location that is best for you. Remember, you can visit any participating fitness location in your plan after you sign up.
4. Verify your personal information and method of payment. Print or download your Fitness Program membership ID card. You may also request to receive the ID card in the mail.
5. Visit a fitness location today!

Prefer to sign up by phone or have questions about the Fitness Program? Just call the toll-free number 888-762-BLUE (2583) Monday through Friday, between 7 a.m. and 7 p.m., CT (6 a.m. and 6 p.m., MT).

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*Individuals must be 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can login and join through the primary member’s account as an “additional member.”

**Taxes may apply. Individuals must be at least 18 years old to purchase a membership.

***Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

The Fitness Program is provided by Tivity Health℠, an independent contractor that administers the Prime Network of fitness locations. The Prime Network is made up of independently owned and operated fitness locations.
## Adult Wellness Guidelines
### Making Preventive Care a Priority

<table>
<thead>
<tr>
<th>Screenings</th>
<th>Adults age 50-75 for colorectal cancer using:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight</td>
<td>Every visit or at least annually</td>
</tr>
<tr>
<td>BMI</td>
<td>Every visit or at least annually</td>
</tr>
<tr>
<td>Blood Pressure (BP)</td>
<td>Every visit or at least annually</td>
</tr>
<tr>
<td>Colon Cancer Screening</td>
<td>Guaiac Fecal Occult Blood Test (gFOBT) annually or; Fecal Immunochemical Testing (FIT) annually or; Fecal Immunochemical Testing (FIT)-DNA every 1-3 years or; Flexible sigmoidoscopy every 5 years or; Flexible sigmoidoscopy every 10 years with FIT annually or; Colonoscopy every 10 years or; CT Colonography every 5 years**</td>
</tr>
<tr>
<td>Diabetes Screening</td>
<td>Those with high blood pressure should be screened. Those who are overweight or have cardiovascular risk factors should be screened. All others should be screened starting at age 45.**</td>
</tr>
<tr>
<td>Hepatitis C (HCV) Screening</td>
<td>Once for adults born between 1945 and 1965 and persons at high risk for infection</td>
</tr>
<tr>
<td>HIV Screening</td>
<td>Adults ages 18 to 65, older adults at increased risk and all pregnant women should be screened</td>
</tr>
<tr>
<td>Immunizations (Vaccines)</td>
<td></td>
</tr>
<tr>
<td>Tetanus Diphtheria Pertussis (Td/Tdap)</td>
<td>Get Tdap vaccine once, then a Td booster every 10 years</td>
</tr>
<tr>
<td>Influenza (Flu)</td>
<td>Yearly</td>
</tr>
<tr>
<td>Human Papillomavirus (HPV)</td>
<td>3 doses for women ages 18 to 26 if not already given 3 doses for men ages 18 to 21 if not already given**</td>
</tr>
<tr>
<td>Herpes Zoster (Shingles)</td>
<td>Two doses of RZV starting at age 50, or one dose of ZVL at age 60 or over. Discuss your options with your health care provider.*</td>
</tr>
<tr>
<td>Varicella (Chicken Pox)</td>
<td>2 doses if no evidence of immunity</td>
</tr>
<tr>
<td>Pneumococcal (Pneumonia)</td>
<td>Ages 65 and over, one dose of PCV 13 and one dose of PCV 23 at least one year after PCV 13**</td>
</tr>
<tr>
<td>Measles, Mumps, Rubella (MMR)</td>
<td>1 or 2 doses for adults born in 1957 or later who have no evidence of immunity</td>
</tr>
</tbody>
</table>

**A health care provider could be a doctor, primary care provider, physician assistant, nurse practitioner or other health care professional.**

**Recommendations may vary. Discuss the start and frequency of screenings with your health care provider, especially if you are at increased risk.**

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## Adult Health – for ages 18 and over

Preventive care is very important for adults. By making some good basic health choices, women and men can boost their own health and well-being. Some of these positive choices include:

- Eat a healthy diet
- Get regular exercise
- Don’t use tobacco
- Limit alcohol use
- Strive for a healthy weight

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**Adult Health – for ages 18 and over**

Preventive care is very important for adults. By making some good basic health choices, women and men can boost their own health and well-being. Some of these positive choices include:

- Eat a healthy diet
- Get regular exercise
- Don’t use tobacco
- Limit alcohol use
- Strive for a healthy weight
**Women’s Health**

Women have their own unique health care needs. To stay well, women should make regular screenings a priority. In addition to the services listed in the Adult Health section, women should also discuss the recommendations listed on the chart to the right with their health care provider.

**Men’s Health**

Men are encouraged to get care as needed and make smart choices. That includes following a healthy lifestyle and getting recommended preventive care services. If men follow a game plan for better overall health, they’ll be more likely to win at wellness.

In addition to the services listed in the Adult Health section, men should also discuss the recommendations shown in the chart to the right with their health care provider.

Learn more! Additional sources of health information include:

- ahrq.gov/patients-consumers/prevention/index.html
- cancer.org/healthy/index
- cdc.gov/healthyliving/

### Women’s Recommendations

<table>
<thead>
<tr>
<th>Service</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mammogram</strong></td>
<td>At least every 2 years for women ages 50 to 74</td>
</tr>
<tr>
<td></td>
<td>Ages 40 to 49 should discuss the risks and benefits of screening with their health care provider.</td>
</tr>
<tr>
<td><strong>Cholesterol</strong></td>
<td>Women age 45 and older. Women age 20-45 should be screened if they are at increased risk for coronary heart disease. Talk with your health care provider about the starting and frequency of screening that is best for you.</td>
</tr>
<tr>
<td><strong>Cervical Cancer Screening</strong></td>
<td>Women ages 21 to 65: Pap test every 3 years</td>
</tr>
<tr>
<td></td>
<td>Another option for ages 30 to 65: Pap test with HPV test every 5 years</td>
</tr>
<tr>
<td></td>
<td>Women who have had a hysterectomy or are over age 65 may not need a Pap test*</td>
</tr>
<tr>
<td><strong>Osteoporosis Screening</strong></td>
<td>Beginning at age 65, at age 60 if risk factors are present or postmenopausal women younger than 65 years who are at increased risk of osteoporosis*</td>
</tr>
<tr>
<td><strong>Low-dose Aspirin Use</strong></td>
<td>Ages 50-59 talk with your health care provider about low-dose aspirin use for the prevention of cardiovascular disease and colorectal cancer.</td>
</tr>
</tbody>
</table>

### Men’s Recommendations

<table>
<thead>
<tr>
<th>Service</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cholesterol</strong></td>
<td>Men age 35 and older should be screened. Men age 20-35 should be screened if they are at increased risk for coronary heart disease. Talk with your health care provider about the starting and frequency of screening that is best for you.</td>
</tr>
<tr>
<td><strong>Prostate Cancer Screening</strong></td>
<td>Discuss the benefits and risks of screening with your health care provider.</td>
</tr>
<tr>
<td><strong>Abdominal Aortic Aneurysm</strong></td>
<td>Have an ultrasound once between ages 65 to 75 if you have ever smoked.</td>
</tr>
<tr>
<td><strong>Low-dose Aspirin Use</strong></td>
<td>Ages 50-59 talk with your health care provider about low-dose aspirin use for the prevention of cardiovascular disease and colorectal cancer.</td>
</tr>
</tbody>
</table>

You probably don’t hesitate to ask your health care provider about nutrition and exercise, losing weight and stopping smoking. Other topics for discussion may include:

- Dental health
- Problems with drugs or alcohol
- Sexual behavior and sexually transmitted diseases
- Feelings of depression
- Domestic violence
- Accident/injury prevention
- Preventing falls, especially for ages 65 and over

* Recommendations may vary. Discuss screening options with your health care provider, especially if you are at increased risk.

The recommendations provided in the table are based on information from organizations such as the Advisory Committee on Immunization Practices, the American Academy of Family Physicians, the American Cancer Society and the United States Preventive Services Task Force. The recommendations are not intended as medical advice nor meant to be a substitute for the individual medical judgment of a health care provider. Please check with your health care provider for individualized advice on the recommendations provided.

Coverage for preventive care services at no cost share may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card.
Good health is a gift anyone would wish for a child, but it doesn’t happen without your help.

Some things you can do to help keep your child well:

• Introduce good nutrition at an early age and be a good role model
• Encourage lots of play and physical activity
• Keep up with recommended vaccinations
• Blue Cross and Blue Shield of New Mexico wants your child to be well.

**Children’s Wellness Guidelines**

**Laying the Groundwork for a Healthy Tomorrow**

**Children’s Health**

Put your child on the path to wellness right away by scheduling regular office visits with a doctor. The doctor will watch your child’s growth and progress and should talk with you about eating and sleeping habits, safety and behavior issues.

According to the Bright Futures recommendations from the American Academy of Pediatrics, the doctor should:

Help protect your child from sickness. Make sure they get the recommended vaccinations shown in the charts. If your child has missed vaccinations, ask your doctor how to catch up.

*Learn more! An additional source of health information is available at healthychildren.org*

Please note: These recommendations are for healthy children who don’t have any special health risks.
Be sure your child is up-to-date on immunizations and health screenings.

**Routine Children's Immunization Schedule**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Birth</th>
<th>1 month</th>
<th>2 months</th>
<th>4 months</th>
<th>6 months</th>
<th>12 months</th>
<th>15 months</th>
<th>18 months</th>
<th>1½-3 years</th>
<th>4 - 6 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B (HepB)</td>
<td></td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotavirus (RV)</td>
<td></td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diphtheria Tetanus and Pertussis (DTaP)</td>
<td></td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Haemophilus Influenzae Type B (Hib)</td>
<td></td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumococcal Conjugate (PCV)</td>
<td></td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inactivated Polio Vaccine (IPV)</td>
<td></td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Influenza (Flu)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Recommended yearly starting at age 6 months with 2 doses given the first year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles, Mumps and Rubella (MMR)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varicella (Chicken pox)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis A (HepA)</td>
<td></td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td>First dose: 12-23 months Second dose: 6-18 months later</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Tweens and Teenagers**

As your children grow into teens, they should continue yearly doctor visits for exams and scheduled immunizations. These visits give the doctor a chance to:

- Discuss the importance of good eating habits and regular physical activity
- Talk about avoiding alcohol, smoking and drugs
- Screen for sexual activity and sexually transmitted diseases as appropriate. Screen for HIV between the ages of 16 and 18.

**Recommended Immunizations for ages 7 to 18**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>7 - 10 years</th>
<th>11 - 12 years</th>
<th>13 - 15 years</th>
<th>16 years</th>
<th>17 - 18 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tetanus Diphtheria Pertussis (Tdap)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Papillomavirus (HPV) - females and males</td>
<td>● 3 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meningococcal (MCV)</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Influenza (Flu)</td>
<td>●</td>
<td></td>
<td></td>
<td>Yearly</td>
<td></td>
</tr>
</tbody>
</table>

**Range of recommended ages**

**These recommendations come from the Centers for Disease Control and Prevention and the American Academy of Pediatrics. The recommendations are not intended as medical advice nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional. Please check with your doctor for individual advice on the recommendations provided. Coverage for preventive services may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card.**
Blue365®
A Discount Program for You

Blue365 is just one more advantage you have by being a Blue Cross and Blue Shield of New Mexico member. With this program, you may save money on health and wellness products and services from top retailers that are not covered by insurance. There are no claims to file and no referrals or preauthorizations.

Once you sign up for Blue365 at blue365deals.com/bcbsnm, weekly “Featured Deals” will be emailed to you. These deals offer special savings for a short period of time.

Below are some of the ongoing deals offered through Blue365.

**EyeMed | Davis Vision**
You can save on eye exams, eyeglasses, contact lenses and accessories. You have access to national and regional retail stores and local eye doctors. You may also get possible savings on laser vision correction.

**TruHearing® | Beltone™ | American Hearing Benefits**
You could get savings on hearing tests, evaluations and hearing aids. Discounts may also be available for your immediate family members.

**Dental Solutions℠**
You could get dental savings with Dental Solutions. You may receive a dental discount card that provides access to discounts of up to 50% at more than 70,000 dentists and more than 254,000 locations.*

**Jenny Craig® | Profile by Sanford | Nutrisystem®**
Help reach your weight loss goals with savings from leading programs. You may save on healthy meals, membership fees (where applicable), nutritional products and services.
See all the Blue365 deals and learn more at blue365deals.com/bcbsnm.

The relationship between these vendors and Blue Cross and Blue Shield of New Mexico is that of independent contractors. BCBSNM makes no endorsement, representations or warranties regarding any products or services offered by the above-mentioned vendors.

* Dental Solutions requires a $9.95 signup and $6 monthly fee.

Blue365 is a discount program only for BCBSNM members. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. You should check your benefit booklet or call the customer service number on the back of your ID card for specific benefit facts. Use of Blue365 does not change monthly payments, nor do costs of the services or products count toward any maximums and/or plan deductibles. Discounts are given only through vendors that take part in this program and may be subject to change. BCBSNM does not guarantee or make any claims or recommendations about the program’s services or products. Members should consult their doctor before using these services and products. BCBSNM reserves the right to stop or change this program at any time without notice.

**Fitbit**
You can customize your workout routine with Fitbit’s family of trackers and smartwatches that can be employed seamlessly with your lifestyle, your budget and your goals. You’ll get a 20% discount on Fitbit devices plus free shipping.

**Reebok | SKECHERS**
Reebok, a trusted brand for more than 100 years, makes top athletic equipment for all people, from professional athletes to kids playing soccer. Get 20% off select models. SKECHERS, an award-winning leader in the footwear industry, offers exclusive pricing on select men’s and women’s styles. You can get 30% off plus free shipping for your online orders.

**InVite Health**
InVite Health offers quality vitamins and supplements, educational resources and a team of healthcare experts for guidance to select the correct product at the best value. Get 50% off the retail price of non-genetically modified microorganism (non-GMO) vitamins and supplements and a free Midnight Bright Black Coconut Charcoal Tooth Polish with a $25 purchase.

**Livekick**
Livekick is the future of private fitness. Choose from training or yoga over live video with a private coach. Get fit and feel healthier with action-packed 30-minute sessions that you can do from home, your gym or your hotel while traveling. Get a free two-week trial and 20% off a monthly plan on any Live Online Personal Training.

**eMindful**
Get a 25% discount on any of eMindful’s live streaming or recorded premium courses. Apply mindfulness to your life including stress reduction, mindful eating, chronic pain management, yoga, Qigong movements and more.
Digital Self-Management Programs May Help You Develop a Healthier Lifestyle

With Well onTarget’s Digital Self-Management programs, you’ll get tips and techniques, and the resources you’ll need to help support your wellness goals.

Additional Programs/Health Action Plan

Sandia employees and spouses* can earn wellness points when they enroll and participate in any of the digital self-management programs listed below. BCBSNM will send a file each month to Sandia identifying who enrolled and this information will be sent from Sandia to their wellness vendor.

Take Action to Improve Your Health: BCBSNM invites members to take an active role in improving their health with free, customized programs designed to help members succeed in creating a healthier lifestyle.

For more information visit bcbsnm.com/sandia.

Our Digital Self-management programs consist of:

1. Interactive courses with learning activities and content that focuses on behavioral changes to reinforce healthier habits.
2. Educational courses that inform about symptoms, treatment options and lifestyle changes.

These two learning methods allow you to study on your own time and may help you get to the next level of wellness.

Earn Blue Points™

You can earn 1,000 Blue Points once per quarter when you complete a digital self-management program. You may redeem points in our expanded online shopping mall for merchandise.**

Easy to Learn

Interactive and educational courses are developed in an easy-to-learn format. Course content addresses topics that are preventive in nature and based on recommendations from the Centers for Disease Control and Prevention; Academy of Nutrition and Dietetics; National Heart, Lung and Blood Institute’s Obesity Education Initiative and Physical Activity Guidelines put forth by the U.S. Department of Health and Human Services. A certificate of completion is available upon successful completion of any course.

Easy to Access

The courses are easy to access through the Well onTarget Member Wellness Portal at wellontarget.com. You can also use the Well onTarget mobile app, AlwaysOn,*** to register for the Digital Self-Management programs.

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* “Spouse” includes same-gender spouses legally married in jurisdictions that recognize their marriages.
** Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.
*** AlwaysOn is provided by OnLife Health, an independent company that offers Wellness Management Solutions. OnLife is solely responsible for the programs, products and services that it provides.
Courses Offered

Some courses are interactive and you can create daily habits to track as part of the program. Midpoint and final assessments to check the effectiveness of the daily habits may help you progress toward your goals.

Other courses are educational, with information about symptoms, causes, available treatment options and lifestyle changes. Each day you’ll find an additional resource such as a video, article, podcast or links to external communities and resources.

Interactive Courses

- Managing Your Stress
- Quitting Tobacco Use
- Achieving Your Healthy Weight
- Maintaining Your Healthy Weight
- Improving Your Nutrition
- Enhancing Your Physical Activity
- Improving Your Blood Pressure
- Improving Your Oral Health
- Improving Your Sleep Health
- Managing Your Diabetes
- Improving Your Cholesterol
- Staying Tobacco Free

Educational Courses

- Managing Your Metabolic Syndrome
- Reducing Your Risk: Preventive Health
- Diabetes Prevention
- Managing Your Asthma
- Managing Your Chronic Obstructive Pulmonary Disease
- Managing Your Congestive Heart Failure
- Managing Your Coronary Artery Disease (CAD)
- Nurturing Your Healthy Pregnancy (Five Programs: Pre-pregnancy, First Trimester, Second Trimester, Third Trimester, Post Pregnancy)
Dear Member,

The purpose of this communication is to provide you with additional information about certain types of assistance and other rights that are available to you; however, this communication is not part of your Policy/Coverage Documents.

**Health care coverage is important for everyone.**

We provide free communication aids and services for anyone with a disability or who needs language assistance. We do not discriminate on the basis of race, color, national origin, sex, gender identity, age or disability.

To receive language or communication assistance free of charge, please call us at 855-710-6984.

If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.

Office of Civil Rights Coordinator
300 E. Randolph St.
35th Floor
Chicago, Illinois 60601

Phone: 855-664-7270 (voicemail)
TTY/TDD: 855-661-6965
Fax: 855-661-6960
Email: CivilRightsCoordinator@hcsc.net

You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:

U.S. Dept. of Health & Human Services
200 Independence Avenue SW
Room 509F, HHH Building 1019
Washington, DC 20201

Phone: 800-368-1019
TTY/TDD: 800-537-7697
Complaint Portal: [https://ocrportal.hhs.gov/ocr/portal/lobby.jsf](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf)
If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To speak to an interpreter, call the customer service number on the back of your member card. If you are not a member, or don’t have a card, call 855-710-6984.

<table>
<thead>
<tr>
<th>Arabic</th>
<th>إن كان لديك أو لدى شخص تساعدته أسئلة، فتُلبِّق الحق في الحصول على المساعدة والمعلومات الصناعية باللغة من دون أي تكلفة. لحدث إلى مترجم مجانًا، اتصل +22 855-710-6984.</th>
</tr>
</thead>
<tbody>
<tr>
<td>繁體中文</td>
<td>如果您，或您正在協助的對象，對此有疑問，您有權利免費以您的母語獲得幫助和訊息。洽詢一位翻譯員，請致電印在您的會員卡背面的客戶服務電話號碼。如果您不是會員，或沒有會員卡，請致電 855-710-6984。</td>
</tr>
<tr>
<td>Français</td>
<td>Si vous, ou quelqu'un que vous êtes en train d'aider, avez des questions, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, composez le numéro du service client indiqué au verso de votre carte de membre. Si vous n'êtes pas membre ou si vous n'avez pas de carte, appelez le 855-710-6984.</td>
</tr>
<tr>
<td>Deutsch</td>
<td>Falls Sie oder jemand, dem Sie helfen, Fragen haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Kundenservicekurznummer auf der Rückseite Ihrer Mitgliedschaftskarte an. Falls Sie kein Mitglied sind oder keine Mitgliedskarte besitzen, rufen Sie bitte 855-710-6984 an.</td>
</tr>
<tr>
<td>हिंदी</td>
<td>यदि आपके, या आप जिसकी सहायता कर रहे हैं उनके, प्रश्न हैं, तो आपको अपनी भाषा में शुल्क कराया जाता या अनाजपरीक्षण करने का अधिकार है। किसी अवसर पर से बात करने के लिए, अपने सदस्य कार्ड के पीछे दिए गए बायक सेवा नंबर पर कॉल करें। यदि आप सदस्य नहीं हैं, या आपके पास कार्ड नहीं है, तो 855-710-6984 पर कॉल करें।</td>
</tr>
<tr>
<td>Italiano</td>
<td>Se tu o qualcuno che stai aiutando avete domande, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare il servizio clienti al numero riportato sul lato posteriore della tua tessera di soccorso. Se non sei socio o non possiedi una tessera, puoi chiamare il numero 855-710-6984.</td>
</tr>
<tr>
<td>Japanese</td>
<td>ご本人様、またはお客様の身の回りのどちらかがご質問がございましたら、ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳とお話される場合、メンバーカードの裏のカスタマーサービス番号までお電話ください。メンバーでない場合またはカードを持ちていない場合は 855-710-6984 までお電話ください。</td>
</tr>
<tr>
<td>한국어</td>
<td>만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하의 뜻에 의한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 회원 카드 뒷면에 있는 고객 서비스 번호로 전화하십시오. 회원이 아니거나 카드가 없으시면 855-710-6984로 전화주시십시오.</td>
</tr>
<tr>
<td>Diné</td>
<td>T’áá ni, éédoodoo la’dá bítá anáníl’oó’i’igíí, na’idíldidgo, ts’í’áá béed na ahóót’i’í’ t’áá níík’è díoolwol. A’á halné’i bích’i’hadeedzhíh ní芝míngzo éít kweé’dá’í’íníhshí áka anídaawo’i’ígíí bích’i’hídiílínhí, béed nééhózhíini bine’déé’ bítáá. K’ójí atah naalissoo ná hadít’éégíó éédoodoo béed nééhózhíini ádání ngíi hídiílínhí 855-710-6984.</td>
</tr>
<tr>
<td>فارسی</td>
<td>اگر شما با کسی که شما به یا کسی که شما به او کمک می‌کنید، حق این دارد که به جای لغو کردن درخواست خودش، حق او را در این مورد کمک کنید. اطلاعات درخواست شما در شرکت عمومی شما در آن لحظه جمع دارد. در صورتی که این کار را نیستید، شما باید به شرکت عمومیش نشان دادید. شما باید به شرکت عمومیش نشان دادید. شما باید به شرکت عمومیش نشان دادید. 855-710-6984</td>
</tr>
<tr>
<td>Русский</td>
<td>Если у вас или у человека, которому вы помогаете, возникли вопросы, вы имеете право на бесплатную помощь и информацию, предложенную на вашем языке. Чтобы поговорить с переводчиком, позвоните в отдел обслуживания клиентов по телефону, указанному в обратной стороне вашей карточки участника. Если вы не являетесь участником или у вас нет карточки, позвоните по телефону 855-710-6984.</td>
</tr>
<tr>
<td>Español</td>
<td>Si usted o alguien a quien usted está ayudando tiene preguntas, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete comuníquese con el número del Servicio al Cliente que figura en el reverso de su tarjeta de miembro. Si usted no es miembro o no posee una tarjeta, llame al 855-710-6984.</td>
</tr>
<tr>
<td>Tagalog</td>
<td>Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuhuna ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagsaliran-wika, tumawag sa numero ng serbisyo para sa kustomer sa likod ng iyong kard sa miyembro. Kung ikaw ay hindi isang miyembro, o kaya ay walang kard, tumawag sa 855-710-6984.</td>
</tr>
<tr>
<td>Thái</td>
<td>Nếu quý vị hoặc người mà quý vị giúp đỡ có bất kỳ câu hỏi nào, quý vị có quyền được hỗ trợ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với thông dịch viên, gọi số dịch vụ khách hàng nằm ở phía sau thẻ viên của quý vị. Nếu quý vị không phải là hội viên hoặc không có thẻ, gọi số 855-710-6984.</td>
</tr>
</tbody>
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