



Preventive Health Guidelines

What is your plan for better health?

Make this year your best year for wellness. Your health plan may help pay for tests and routine wellness exams that find disease early and help you and your family stay well. Talk with your doctor about the care that is right for you.

Blue Cross and Blue Shield of Texas (BCBSTX) might not pay for all services and treatments in this guide. To learn more about what BCBSTX pays for, call the Customer Service number on the back of your ID card. You can also check **www.bcbstx.com/starkids** for more information.

The content in this guide is based in part on suggestions from these independent groups and state-specific requirements:

- American Academy of Family Physicians AAFP
- American Academy of Pediatrics AAP
- Advisory Committee on Immunization Practices ACIP
- American College of Obstetrics and Gynecology ACOG
- American Cancer Society ACS
- Centers for Disease Control and Prevention CDC
- Texas Health Steps Texas Health Steps Periodicity Schedule Texas Health and Human Services Commission, Centers for Medicare and Medicaid Services
- U.S. Preventive Services Task Force USPSTF

Use this guide to know when to set up visits with your doctor for you and your children. Ask your doctor which exams, tests and vaccines are right for you, when you should get them and how often. How you get certain diseases is not talked about in this guide.

Please see your BCBSTX STAR Kids Member Handbook to check on your plan benefits.

To learn more about your health plan, go to **www.bcbstx.com/starkids**. To learn more about vaccines, go to the Centers for Disease Control and Prevention at **www.cdc.gov/vaccines**.

Well Baby and Well Child/Texas Health Steps screenings

Well Baby/Texas Health Steps exam — birth to two years old*: Infants who leave the hospital less than two days (48 hours) after birth need to be seen by a doctor within two to four days after being born. You might talk to the doctor if you are a first-time parent, are having a high-risk pregnancy or want to learn about feeding, circumcision or Well Baby care. At the Well Baby exam, you may get advice on your child's safety, dental exams and care. At these exams, your baby may get the vaccines and screenings below, such as tuberculin and/or sickle cell anemia testing.

Age (in months)

| | | | | | | | | 78 | | ontinsj |
|--|---|----------------------------------|-----------------------|----------|--------|---------|---------------------|----|-------|---------|
| Screenings | Birth | 1 | 2 | 4 | 6 | 9 | 12 | 15 | 18 | 24 |
| Weight, length and head circumference (the length around the head) | | | | | At ead | h visit | · | | · | |
| Development and behavior | | | | | At eac | h visit | | | | |
| Mental and behavioral health | | | | | At eac | h visit | | | | |
| Hearing | | | | | At eac | h visit | | | | |
| Oral/dental health | Dental exams starting at 6 months old – fluoride varnish on the teeth when your doctor suggests; fluoride prescription based on your drinking water | | | | | | | | | |
| Hemoglobin or hematocrit (blood count) | | | | | | | at 12 | | | |
| Lead testing | | | | | | | at 12 | | | at 24 |
| Tuberculin (testing if needed) | | | | | | | at 12 and each year | | | ear |
| Autism | | | | | | | | | at 18 | at 24 |
| Newborn metabolic, sickle cell, and thyroid | (at | to 11 m t 3–5 da fter birt | iys | | | | | | | |
| Newborn blood, behavior assessment, bilirubin (if indicated), heart defects and immunizations | a | | t 3-5 da fter birt | ys th | | | | | | |

Texas Health Steps - Texas Health Steps Periodicity Schedule (07/2018) - Texas Health and Human Services Commission, Centers for Medicare and Medicaid Services; Texas Health Steps - Texas Health Steps Newborn Screening Module (06/2019) - Texas Health and Human Services Commission - Texas Department of State Health Services

Well Child/Texas Health Steps exam — ages two to 10 years old*: You may get advice about how to keep your child safe, how to prevent injuries, how to reduce the risks of getting skin cancer, good health, diet and physical activity and development. Annual dental referrals start at six months old. At these Well Child exams, your child may get the screenings below, such as tuberculin and/or body mass index (BMI) screening.

 $\Delta \sigma \rho$ (in years)

| | | | | | | | Age (II | i years) |
|-----------------------------------|---|-----|-------|---|---|---|--|---|
| 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| At each visit | | | | | | | | |
| Each year starting at 2 years old | | | | | | | | |
| At each visit | | | | | | | | |
| Each year | | | | | | | | |
| Each year | | | | | | | | |
| Each year | | | | | | | | |
| Each year | | | | | | | | |
| Each year starting at 3 years old | | | | | | | | |
| | | | I | Each yea | r | | | |
| | 2 | 2 3 | 2 3 4 | At Each ye At Each E Each ye | At each vis Each year startin At each vis Each yea Each yea Each yea Each yea Each yea | At each visit Each year starting at 2 y At each visit Each year Each year Each year Each year | At each visit Each year starting at 2 years old At each visit Each year Each year Each year Each year Each year starting at 3 years old | 2 3 4 5 6 7 8 9 At each visit Each year starting at 2 years old At each visit Each year Each year |

Sources: Texas Health Steps - Texas Health Steps Periodicity Schedule (07/2018) - Texas Health and Human Services Commission, Centers for Medicare and Medicaid Services

*This guide is for people enrolled in the BCBSTX plan. Some people might be at higher risk for health issues due to their family history, their race or ethnicity or other reasons. Talk to your doctor if you have concerns about your health.

******Height and weight are used to find BMI. BMI is used to see if a person has the right weight for height, or is under or over weight for height.

Well Child/Texas Health Steps exam — ages 11 to 20 years old*: The doctor might talk to you about health and wellness issues. These include: diet and physical activity, healthy weight, dental health, dentist referral each year, mental health, sexual behavior and screening for sexually transmitted infections or high-risk behaviors. You might also get counseling on: how to prevent injuries, how to reduce your risk of getting skin cancer, what special risks you might have for cancer (such as family history) and steps to reduce those risks, information on secondhand smoke, avoiding tobacco and misuse of alcohol and drugs.

At these exams, your child can get the screenings below, such as tuberculin and/or body mass index (BMI) screening.

| | | | | | | | Age (| in years) |
|--------------------------------|--|----|----|------|------|----|-------|-----------|
| Screenings | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| Height and weight** | | | | Each | year | | | |
| Body mass index (BMI %)** | Each year | | | | | | | |
| Development and behavior | Each year | | | | | | | |
| Mental and behavioral health | Each year | | | | | | | |
| Blood pressure | Each year | | | | | | | |
| Vision | Each year | | | | | | | |
| Hearing | Each year | | | | | | | |
| Oral/dental health | Each year | | | | | | | |
| Chlamydia | For sexually active women 24 years old and younger | | | | | | | |
| Tuberculin (testing if needed) | Each year | | | | | | | |
| | | | | | | | | |

 $\Delta \sigma \rho (in vears)$

Sources: Texas Health Steps - Texas Health Steps Periodicity Schedule (07/2018) - Texas Health and Human Services Commission, Centers for Medicare and Medicaid Services

Adult screenings — women*

Wellness exam: The doctor might talk with you about health and wellness issues. These include:

- Diet and physical activity for all women including those diagnosed with heart disease
- Family planning for ages 19 to 39
- Folic acid for women who are of the age to get pregnant
- Sexual behavior and screening for sexually transmitted infections

At this visit, you can get these screenings:

- Screening for HIV
- Screening for hepatitis B (HBV) if high risk

- Screening for hepatitis C (HCV) if high risk
- Intimate partner violence
- How to prevent injuries
- Counseling to reduce your risk of getting skin cancer, special risks you might have for cancer (such as family history) and steps you can take to reduce those risks
- Misuse of drugs and alcohol
- Secondhand smoke

- How to stop using tobacco
- Dental health
- Mental health
- Cervical cancer screening
- Breast cancer screening
- Pre-diabetics should be considered for Metformin therapy to prevent Type 2 diabetes

| Screenings | 19 20 25 30 35 40 45 50 55 60 65 and older | | | | | | | | | | |
|-------------------------------|---|--|--|--|--|--|--|--|--|--|--|
| Height, weight | Each year or as your doctor suggests | | | | | | | | | | |
| Behavior | Screening for high risk behaviors such as drug or alcohol use is recommended for adults ages 18 or older | | | | | | | | | | |
| BMI and BMI Percentile | Each year or as your doctor suggests | | | | | | | | | | |
| Blood pressure | Each year or as your doctor suggests | | | | | | | | | | |
| Breast cancer: doctor exam | Doctor exam every one to three years | | | | | | | | | | |
| Chlamydia | Sexually active women ages 24 and younger | | | | | | | | | | |
| Cholesterol | Every five years starting at age 45 with more screenings as your doctor suggests or for women ages 20 to 45 if they are at increased risk for coronary heart disease | | | | | | | | | | |
| Diabetes | For adult diabetics, perform lipid profile test each year. If lipid values are low-risk, test can be performed every two years. Pre-diabetics should test yearly. Testing should also be done for diabetes or pre-diabetes in adults with no symptoms who have the following health risks: HIgh-risk ethnicity (African American, Latino, Native American, Asian American Pacific Islander); history of cardiovascular disease; high blood pressure; low HDL cholesterol or high triglyceride level; women with polycystic ovary syndrome; physical inactivity or other clinical conditions associated with insulin resistance such as severe obesity or acanthosis nigricans. | | | | | | | | | | |
| Hepatitis C | Most adults need to be screened only once | | | | | | | | | | |
| · | Most adults need to be screened only once | | | | | | | | | | |

Sources: U.S. Preventive Service Task Force (USPSTF); Centers for Disease Control and Prevention (CDC); Texas Health and Human Services Commission - Texas Department of State Health Services

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Age (in years)

Pregnant women*

Pregnant women should see the doctor or OB/GYN in the first three months of pregnancy for a first visit and to set up a prenatal care plan. At this visit your doctor will check your health and the health of your baby.

Based on your past health, your doctor might want you to have these tests, screenings or vaccines:

- Diabetes: during pregnancy
- Hematocrit/hemoglobin (blood count)
- Hepatitis B: at first prenatal visit
- Hepatitis C: during each pregnancy
- HIV
- **Preexposure prophlaxis (PrEP):** with effective antiretroviral therapy to those at high risk of HIV
- **Rubella immunity:** to find out which women need the rubella vaccine after giving birth
- Rh(D) blood type and antibody testing: if Rh(D) negative, repeat test at 26 to 28 weeks
- Syphilis
- Urinalysis: when your doctor wants it

The doctor might talk to you about what to eat and how to be active when pregnant as well as staying away from tobacco, drugs, alcohol and other substances. You can also discuss breastfeeding support, supplies and counseling.

Other tests and screenings:

Some tests given alone or with other tests can be used to check the baby for health concerns. These tests are done at certain times while you are pregnant. The best test to use and the best time to do it depends on many things. These include your age as well as your medical and family history. Talk to your doctor about what these tests can tell you about your baby, the risks of the tests and which tests might be best for you.

- Amniocentesis
- Chorionic villus sampling

- Special blood tests
- **Ultrasound tests:** including special tests (used with blood tests during the first three months for chromosomal abnormality risk) and routine two-dimensional tests to check on the baby

Medication:

If you are high risk for a condition called preeclampsia (a sudden increase in blood pressure after the 20th week of pregnancy), your doctor can recommend the use of low-dose aspirin as preventive medication.

Vaccines:

If you are pregnant in flu season (October to March) your doctor may want you to have the inactivated flu vaccine. You might need the tetanus, diphtheria, pertussis (Tdap) vaccine if you have not had it before. While other vaccines may be given in special cases, it is best to get the vaccines you need before you get pregnant. Women should always check with their doctor about their own needs.

You should NOT get these vaccines while you are pregnant:

- Measles, mumps, rubella (MMR)
- Varicella

Mental health:

If you are pregnant or recently had a baby, your doctor can provide treatment options or refer you to another provider if you are showing signs or symptoms of depression.

Postpartum followup:

All women should complete a comprehensive postpartum visit within 12 weeks after delivery.

Adult screenings — men*

The doctor might talk with you about health and wellness issues. These include:

- Diet and physical activity for all men including those diagnosed with heart desease
- Family planning for ages 19 to 39
- How to prevent injuries
- Misuse of drugs and alcohol
- How to stop using tobacco
- Secondhand smoke
- Sexual behavior and screening for sexually transmitted infections

At this visit, you may get these screenings:

- Screening for HIV
- Preexposure prophylaxis (PrEP) with effective antiretroviral therapy to those at high risk of HIV
- Screening for hepatitis B (HBV) if high risk
- Screening for hepatitis C (HCV) if high risk
- Counseling to reduce your risk of getting skin cancer, special risks you might have for cancer (such as family history) and steps you can take to reduce those risks
- Dental health
- Mental health
- Pre-diabetics should be considered for Metformin therapy to prevent Type 2 diabetes

| Screenings | 19 20 25 30 35 40 45 50 55 60 65 and older | | | | | | | | | |
|---------------------------|--|--|--|--|--|--|--|--|--|--|
| Height, weight | Each year or as your doctor suggests | | | | | | | | | |
| BMI and BMI Percentile | Each year or as your doctor suggests | | | | | | | | | |
| Blood pressure | Each year or as your doctor suggests | | | | | | | | | |
| Cholesterol | Every five years starting at age 20 with more screenings as your doctor suggests | | | | | | | | | |
| Diabetes | For adult diabetics, perform lipid profile test each year. If low-risk, perform lipid profile every two years. Pre-diabetics should test yearly. Testing should also be done for diabetes or pre-diabetes in adults with no symptoms who have the following health risks: High-risk ethnicity (African American, Latino, Native American, Asian American Pacific Islander); history of cardiovascular disease; high blood pressure; low HDL cholesterol or high triglyceride level; physical inactivity or other clinical conditions associated with insulin resistance such as severe obesity or acanthosis nigricans. | | | | | | | | | |
| Hepatitis C | Most adults need screening only once | | | | | | | | | |

Sources: U.S. Preventive Service Task Force (USPSTF); Centers for Disease Control and Prevention (CDC); Texas Health and Human Services Commission - Texas Department of State Health Services

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Age (in years)

Suggested vaccine schedule*

✓ Shows when vaccines are suggested

| Vaccine | Birth | 1 to 2 months | 2 months | 4 months | 6 months | 6 to 18 months | 12 to 15 months | 16 to 18 months | 19 to 23 months |
|--|----------|------------------|--|---|----------------------------------|-------------------|--------------------|--------------------|--------------------|
| Hepatitis B | v | ~ | | | | ~ | | | |
| Rotavirus (RV) | | | | Two-dose ee-dose se | | | | | |
| Diphtheria, tetanus, pertussis (DTaP) | | | ~ | ~ | ~ | | | ~ | |
| Haemophilus influenza type b (Hib) | | | ✓ Three-dose or four-dose series | | | | | | |
| Inactivated Polio Virus (IPV) | | | ~ | ~ | | ~ | | | |
| Influenza (flu) | | | | Suggested each year from 6 months to 2 years old | | | | | |
| Measles, mumps, rubella (MMR) | | | | | | | ~ | | |
| Varicella (chicken pox) | | | | | | | ~ | | |
| Hepatitis A | | | | | | | ד 🗸 | wo-dose s | eries |
| Meningococcal | | | Your doctor may suggest from 2-23 months old based on where you have traveled | | | | | | |
| Pneumococcal polysaccharide (PPSV23) | | | Your doct dose in betwe | tor may sug special cor een 2-18 yea | ggest one Iditions ars old | | | | |
| Pneumococcal 13-valent conjugate (PCV13) | | | ~ | ~ | ~ | | ✔ One dose | | |
| COVID-19 | | - | ✔ Ages 12 | + (or young | er as recon | nmended b | y the CDC) | | - |

Source: Centers for Disease Control and Prevention (CDC), Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 02/2021

Suggested vaccine schedule*

✓ Shows when vaccines are suggested

| Vaccine | 4 to 6 years | 11 to 12 years | 13 to 18 years | 19 to 60 years | 60 to 64 years | 65+ years | | | |
|---|--|--|--|--|---|-----------|--|--|--|
| Diphtheria, tetanus, pertussis (DTaP) | ~ | | | | | | | | |
| Tetanus, diphtheria, pertussis (Td/Tdap) | | 🖌 Tdap | | ✓ Td booster every 10 years after the initial Tdap vaccine | | | | | |
| Inactivated Polio Virus (IPV) | ~ | | | | | | | | |
| Influenza (flu) | | | Suggester | ed each year | | | | | |
| Measles, mumps, rubella (MMR) | ~ | | | | oses of MMR on indication 957 or later) | | | | |
| Varicella (chicken pox) | ~ | | | ✓ 2 doses (if born in 1980 or later) depending on indication | | | | | |
| Human papillomavirus (HPV) | | ✓ 2-3 dose series ages 11-12 (can start at age 9) | | | | | | | |
| Meniningitis B | | | ✓ Suggested from 16-18 years old | | | | | | |
| Meningococcal (Serogroup A, C, W, Y) | | ~ | 16 years | | | | | | |
| Pneumococcal polysaccharide (PPSV23) | 2-64 years old depending on indication, all adults 65 years and older and adults 19-64 years who smoke | | | | | | | | |
| Zoster | ✓ 2 doses for ages 50+ | | | | | | | | |
| Pneumococcal 13-valent conjugate (PCV13) | All adults 65 years and older, those 2-64 years old depending on indication and adults ages 19-64 who smoke | | | | | | | | |

Sources: Centers for Disease Control and Prevention (CDC), Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 02/2020; CDC, Recommended Adult Immunization Schedule for ages 19 years or older, United States, 02/2021

Hepatitis B - You can get an extra dose (four-dose series) at four months old if the combination vaccine is used after the birth dose.

Rotavirus (RV) - Get a two-dose or three-dose series (depends on brand of vaccine used).

Tdap (teens) - If you are 13 to 18 years of age and have not had this vaccine before, talk to your doctor about a catch-up vaccine.

Tdap (adults) - If you are 19 years of age or older and have not gotten a dose of Tdap before, you should get a single dose.

Haemophilus influenza type b (Hib) - Get a three-dose or four-dose series (depends on brand of vaccine used).

Influenza (flu) - Refer to **www.cdc.gov/flu** to learn more about this vaccine. (Note: Children six months to eight years old having the vaccine for the first time should have two doses separated by four weeks.)

Measles, mumps, rubella (MMR) and varicella (chicken pox) - If you were born after 1957, you should have records of one or more doses of MMR vaccine unless you have a medical reason not to have the vaccine or laboratory records of immunity to these three diseases. **Human papillomavirus (HPV) -** This vaccine is for girls (HPV2, HPV4, or 9vHPV) and boys (HPV4 or 9vHPV) 11 to 12 years old, but it can be given as early as nine years old. This vaccine can be given up to age 26. Administer second dose one to two months after first dose; administer third dose 24 weeks after the first dose and 16 weeks after the second dose.

Meningococcal (A,C, W, Y) - Two doses of this routine vaccine are given (excludes Meningococcal B). Administer the first dose at 11 or 12 years old and the next dose at 16 years old.

Meningococcal B - Teens should also get a MenB vaccine, preferably at 16-18 years old.

Pneumococcal Conjugate (PCV13) - Children two through 15 months of age should get a series of four doses.

Pneumococcal polysaccharide (PPSV23) - All adults 65 years or older and ages two through 64 with certain medical conditions, as well as adults ages 19 through 64 who smoke.

To get auxiliary aids and services, or to get written or oral interpretation to understand the information given to you, including materials in alternative formats such as large print, Braille or other languages, please call the Blue Cross and Blue Shield of Texas Customer Advocate Department on the back of your Member ID card.

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, sexual orientation, health status or disability.

To receive language or communication assistance free of charge, please call us at 1-855-710-6984.

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: 1-855-664-7270 (voicemail) TTY/TDD: 1-855-661-6965 Fax: 1-855-661-6960

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: 1-800-368-1019 TTY/TDD: 1-800-537-7697 Complaint Portal: https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf Complaint Forms: https://www.hhs.gov/sites/default/files/ ocr-cr-complaint-form-package.pdf

Para solicitar ayuda y servicios auxiliares o servicios de interpretación oral o escrita para entender la información que se le brinda, incluidos los documentos en formatos alternativos como los impresos en letra grande, Braille u otros idiomas, llame al departamento de especialistas en Servicio al Cliente de Blue Cross and Blue Shield of Texas al número en su tarjeta de asegurado.

Tener cobertura médica es importante para todos.

Ofrecemos comunicación y servicios gratuitos para cualquier persona con impedimentos o que requiera asistencia lingüística. No discriminamos por motivos de raza, color, país de origen, sexo, identidad de género, edad, orientación sexual, estado de salud o discapacidad.

Para recibir asistencia lingüística o comunicativa de manera gratuita, llámenos al 1-855-710-6984.

Si cree que no hemos proporcionado un servicio, o si cree que ha sido discriminado de cualquier otra manera, comuníquese con nosotros para presentar una inconformidad.

Office of Civil Rights Coordinator 300 E. Randolph St., 35th Floor Chicago, Illinois 60601 Teléfono: 1-855-664-7270 (correo de voz) TTY/TDD: 1-855-661-6965 Fax: 81-55-661-6960

Tiene el derecho de presentar una queja por derechos civiles en la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de EE. UU. (U.S. Department of Health and Human Services, Office for Civil Rights) por estos medios:

U.S. Dept. of Health & Human Services 200 Independence Avenue SW Room 509F, HHH Building 1019 Washington, DC 20201 Teléfono: 1-800-368-1019 TTY/TDD: 1-800-537-7697 Portal de quejas: https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf Formulario de quejas: https://www.hhs.gov/sites/default/files/ocr/ civilrights/resources/factsheets/spanish/ cmpltfrmspanish.pdf 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 talk to an interpreter, call 855-710-6984.

| Español Spanish | 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, llame al 855-710-6984. |
|--------------------------|--|
| العربية Arabic | إن كان لديك أو لدى شخص تساعده أسئلة، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون اية تكلفة. للتحدث مع مترجم فوري، اتصل على الرقم 6984-710-855. |
| 繁體中文 Chinese | 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, 請撥電話 號碼 855-710-6984。 |
| Français French | 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, appelez 855-710-6984. |
| Deutsch German | 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 Nummer 855-710-6984 an. |
| ગુજરાતી Gujarati | જો તમને અથવા તમે મદદ કરી રહ્યા હોય એવી કોઈ બીજી વ્યક્તિને એસ.બી.એમ. કાયેક્રમ બાબતે પ્રશ્નો હોય, તો તમને વિના ખર્ચે, તમારી ભાષામાં મદદ અને માહિતી મેળવવાનો હક્ક છે. દુભાષિયા સાથે વાત કરવા માટે આ નંબર 855-710-6984 પર કૉલ કરો. |
| हिंदी Hindi | र्यादे आपके, या आप जिसकी सहायता कर रहे हैं उसके, प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क सहायता और जानकारी प्राप्त करने का अधिकार है। किसी अनुवादक से बात करने के लिए 855-710-6984 पर कॉल करें ।. |
| Italiano Italian | 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 numero 855-710-6984. |
| 한국어 Korean | 만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하는 무료로 그러한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 통역사가 필요하시면 855-710-6984 로 전화하십시오. |
| Diné Navajo | T'áá ni, éí doodago ła'da bíká anánílwo'ígíí, na'ídíłkidgo, ts'ídá bee ná ahóóti'i' t'áá níík'e níká a'doolwoł dóó bína'ídíłkidígíí bee nił h odoonih. Ata'dahalne'ígíí bich'i' hodíílnih kwe'é 855-710-6984. |
| فارسی Persian | اگر شما، یا کسی که شما به او کمک می کنید، سؤالی داشته باشید، حق این را دارید که به زبان خود، به طور رایگان کمک و اطلاعات دریافت نمایید. جهت گفتگو با یک مترجم شفاهی، با شماره 6984-710-855 تماس حاصل نمایید. |
| Polski Polish | Jeśli Ty lub osoba, której pomagasz, macie jakiekolwiek pytania, macie prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 855-710-6984. |
| Русский Russian | Если у вас или человека, которому вы помогаете, возникли вопросы, у вас есть право на бесплатную помощь и информацию, предоставленную на вашем языке. Чтобы связаться с переводчиком, позвоните по телефону 855-710-6984. |
| Tagalog Tagalog | Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuha ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagasalin-wika, tumawag sa 855-710-6984. |
| اردو Urdu | اگر آپ کو، یا کسی ایسے فرد کو جس کی آپ مدد کررہے ہیں، کوئی سوال درپیش ہے تو، آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، 6984-710-855 پر کال کریں۔ |
| Tiếng Việt Vietnamese | Nều quý vị, hoặc người mà quý vị giúp đỡ, có câu hỏi, thì quý vị có quyền được giúp đỡ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi 855-710-6984. |
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