



PERSONALIZED COVERAGE YOU CAN TRUST.

As a Midwestern, not-for-profit health insurance plan we've been putting the needs of our members at the forefront of everything we do for more than 40 years.

Take comfort in knowing Medica is on your side. We know you want affordability and options. We also know you want to choose your doctor. Medica plans are designed to let you personalize your coverage to meet your unique needs and preferences.

Take a look through our entire portfolio of Minnesota offerings — you'll discover that you can find your fit with Medica.





STEPS TO PERSONALIZING YOUR COVERAGE

1 Determine what's available where you live.

Not all products are available in all areas.

2 Choose your network.

Decide who and where your care comes from.

Choose your plan.

Decide if you want a copay, share or health savings account (HSA) compatible plan. A catastrophic plan may also be available for those who qualify.

Choose individual or family coverage.

Plans are available for individuals to age 65. Dependent coverage to age 26. You decide how to cover your family — whether that's individual coverage for each family member — or a shared family plan.

6 Calculate your monthly premium.

Visit medica.com/IndividualPlansMN to calculate your monthly premium.

WHERE YOU LIVE DETERMINES WHAT'S AVAILABLE TO YOU.





MEDICA® APPLAUSE®

Applause Network

Available in all Minnesota counties.



ALTRU PRIME BY MEDICASM

Altru Network

Available in Kittson, Marshall, Pennington, Polk, Red Lake and Roseau counties.



ENGAGE BY MEDICASM

Engage Network

Available in Blue Earth, Brown, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, Le Sueur, Martin, Mower, Nicollet, Olmsted, Redwood, Rice, Steele, Wabasha, Waseca, Watonwan and Winona counties.



NORTH MEMORIAL ACCLAIM BY MEDICASM

North Memorial Network

Available in Anoka, Hennepin, Ramsey, Sherburne and Wright counties.



RIDGEVIEW DISTINCT BY MEDICASM

Ridgeview Medical Center Network

Available in Carver, Hennepin, Le Sueur, McLeod, Scott, Sibley and Wright counties.

MEDICA®

CHOOSE YOUR NETWORK ->

This is who and where your care comes from. You have the option to choose a broad network that will give you access to a large number of providers. Or, you may be able to choose a localized care-system network that will provide you with significant cost savings.



Broad Provider Network Option

This network gives access to a large number of providers.

MEDICA® APPLAUSE®

Applause Network

AVAILABILITY

For individuals and families living throughout Minnesota.

CARE DETAILS

Provides access to most doctors and hospitals throughout Minnesota, as well as bordering states.

The network includes:

- 17,700+ Primary and specialty care doctors
- 100+ Online and convenience care clinics
- 270+ Hospitals

Including the following Minnesota health care systems, and other providers:

- Affiliated Community Medical Centers
- Allina Health
- Altru Health System
- Avera Health
- Entire Family Clinics
- Essentia Health
- CentraCare Health
- Children's Minnesota
- Gundersen Health System
- Hennepin Healthcare
- Integrity Health Network
- Lake Region Healthcare

- Lakewood Health System
- Mankato Clinic
- Mayo Clinic Health System*
- North Memorial Health Care
- Olmsted Medical Center
- PrairieCare Medical Group
- Ridgeview Medical Center
- Sanford Health System
- Scenic Rivers Health Services
- St. Luke's Health Care System
- Tri-County Health Care

Care System Provider Network Options

These networks are localized, but the benefits are significant.

ALTRU PRIME BY MEDICASM

Altru Network

AVAILABILITY

For individuals and families living in northwestern Minnesota – see page 4 for the complete county list.

CARE DETAILS

Provides access to Altru Health System doctors plus others in northwestern Minnesota and northeastern North Dakota.

The network includes:

- 3,000+ Primary and specialty care doctors
- 75+ Online and convenience care clinics
- 18+ Hospitals

Including the following health care systems, and other providers:

- Altru Health System
- Kittson Memorial Healthcare
- Lifecare Medical Center
- Riverview Health
- North Valley Health Center



^{*} Does not include the Mayo Clinic and Hospitals in Rochester.

ENGAGE BY MEDICASM

Engage Network

AVAILABILITY

For individuals and families living in southeastern Minnesota – see page 4 for the complete county list.

CARE DETAILS

Provides access to Mayo Clinic Health System doctors plus others in southern Minnesota and western Wisconsin.

The network includes:

- 12,000+ Primary and specialty care doctors
- 60+ Online and convenience care clinics
- 28+ Hospitals

Including the following health care systems, and other providers:

- Mayo Clinic Health System
- Northfield Hospital
- Owatonna Hospital
- St. Elizabeth Medical Center
- United Memorial Hospital
- Winona Health Services
- Winneshiek Medical Center

NORTH MEMORIAL ACCLAIM BY MEDICASM

North Memorial Network

AVAILABILITY

For individuals and families living in Twin Cities west metro – see page 4 for the complete county list.

CARE DETAILS

Provides access to North Memorial Health Care System doctors plus others throughout the Twin Cities metro.

The network includes:

- 5,600+ Primary and specialty care doctors
- 80+ Online and convenience care clinics
- 3+ Hospitals

Including the following health care systems, and other providers:

- North Memorial Health Care
- Northwest Family Physicians
- Stellis Health

RIDGEVIEW DISTINCT BY MEDICASM

Ridgeview Medical Center Network

AVAILABILITY

For individuals and families living in Twin Cities southwest metro – see page 4 for the complete county list.

CARE DETAILS

Provides access to Ridgeview doctors plus others throughout the southwest Twin Cities metro.

The network includes:

- 3,000+ Primary and specialty care doctors
- 80+ Online and convenience care clinics
- 6+ Hospitals

Including the following health care systems, and other providers:

- Abbott Northwestern (hospital only)
- Children's Minnesota
- Hennepin County Medical Center (hospital only)
- Ridgeview Belle Plaine
- Ridgeview Delano
- Ridgeview Health Care System
- Ridgeview Le Sueur Medical Center
- Ridgeview Sibley Medical Center

online search tool at **medica.com/IndividualPlansMN**. Unless it's an emergency, there is no coverage if you visit a provider who's not in the network. This means you'll be responsible for the full cost of any care.

CHOOSE YOUR PLAN.

Medica believes it's important for you to have a plan that fits you. So we offer different types of plans and coverage levels to meet your individual needs and preferences.

Copay & Share Plans Comparison

For Individuals & Families

	COPAY PLANS			
PLAN BENEFITS	GOLD COPAY All Networks	SILVER COPAY All Networks	BRONZE COPAY Applause Network Altru Network Engage Network North Memorial Network	
Deductible	Individual plan: \$900	Individual plan: \$3,900	Individual plan: \$7,000	
	Family plan: \$900 per family member or \$2,700 for the entire family	Family plan: \$3,900 per family member or \$11,700 for the entire family	Family plan: \$7,000 per family member or \$14,000 for the entire family	
Out-of-pocket maximum	Individual plan: \$8,000	Individual plan: \$8,100	Individual plan: \$8,1500	
	Family plan: \$6,500 per family member or \$16,000 for the entire family	Family plan: \$8,100 per family member or \$16,200 for the entire family	Family plan: \$8,150 per family member or \$16,300 for the entire family	
OFFICE VISITS				
Preventive care	You pay nothing – 100% coverage	You pay nothing – 100% coverage	You pay nothing – 100% coverage	
Primary and urgent care	\$30 copay	\$30 copay	\$80 copay	
Online care	\$20 copay	\$20 copay	\$20 copay	
Convenience or retail care	\$20 copay	\$20 copay	\$20 copay	
Specialty care	\$60 copay	\$60 copay	\$150 copay	
PRESCRIPTION DRUGS (MEDICA DRU	IG LIST)			
Generic	\$15 copay	\$20 copay	\$30 copay	
Preferred brand	\$70 copay	\$120 copay	\$160 copay	
Non-preferred brand	50% coinsurance after deductible	60% coinsurance after deductible	70% coinsurance after deductible	
Insulin	\$25 copay	\$25 copay	\$25 copay	
MEDICAL SERVICES				
Lab, X-rays and imaging services	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
Emergency room services	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
Emergency medical transportation (e.g. Ambulance)	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
Hospital services (Facility & physicians services)	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
Maternity (Delivery & inpatient services)	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
Home health care, rehabilitation services, habilitation services and skilled nursing care	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
Other eligible health care services	30% coinsurance after deductible	40% coinsurance after deductible	50% coinsurance after deductible	
skilled nursing care				

¹ Primary, urgent, convenience, online and specialty care copay subject to combined three visit maximum per person per calendar year. After third visit, you pay 50% coinsurance after deductible.

	SHARE PLANS	
BRONZE COPAY (FIRST 3) North Memorial Network Ridgeview Network	SILVER SHARE All Networks	BRONZE SHARE PLUS All Networks
Individual plan: \$6,850	Individual plan: \$1,000	Individual plan: \$1,600
Family plan: \$6,850 per family member of \$13,700 for the entire family	Family plan: \$1,000 per family member or \$3,000 for the entire family	Family plan: \$1,600 per family member of \$4,800 for the entire family
Individual plan: \$ 8,150	Individual plan: \$8,150	Individual plan: \$ 8,150
Family plan: \$8,150 per family member of \$16,300 for the whole family	Family plan: \$8,150 per family member or \$16,300 for the entire family,	Family plan: \$8,150 per family member of \$16,300 for the whole family
You pay nothing – 100% coverage	You pay nothing - 100% coverage	You pay nothing - 100% coverage
\$60 copay for the first 31 visits	50% coinsurance after deductible	50% coinsurance after deductible
\$20 copay for the first 31 visits	50% coinsurance after deductible	50% coinsurance after deductible
\$20 copay for the first 31 visits	50% coinsurance after deductible	50% coinsurance after deductible
\$60 copay for the first 31 visits	50% coinsurance after deductible	50% coinsurance after deductible
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HSA-Compatible & Catastrophic Plans Comparison

For Individuals & Families

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	HSA-COMPATIBLE PLANS		
PLAN BENEFITS	SILVER HSA All Networks	BRONZE HSA All Networks	
Deductible	Individual plan: \$2,500	Individual plan: \$6,200	
	Family plan: \$2,500 shared family	Family plan: \$6,200 per family member or \$12,400 for the entire family	
Out-of-pocket maximum	Individual plan: \$6,900	Individual plan: \$6,750	
	Family plan: \$6,500 per family member or \$13,800 for the entire family	Family plan: \$6,750 per family member or \$13,500 for the entire family	
OFFICE VISITS			
Preventive care	You pay nothing – 100% coverage	You pay nothing – 100% coverage	
Primary and urgent care	40% coinsurance after deductible	20% coinsurance after deductible	
Online care	40% coinsurance after deductible	20% coinsurance after deductible	
Convenience or retail care	40% coinsurance after deductible	20% coinsurance after deductible	
Specialty care	40% coinsurance after deductible	20% coinsurance after deductible	
PRESCRIPTION DRUGS (MEDICA DRUG LIST)			
Generic	40% coinsurance after deductible	20% coinsurance after deductible	
Preferred brand	40% coinsurance after deductible	20% coinsurance after deductible	
Non-preferred brand	40% coinsurance after deductible	20% coinsurance after deductible	
Insulin	\$25 copay	\$25 copay	
MEDICAL SERVICES			
Lab, X-rays and imaging services	40% coinsurance after deductible	20% coinsurance after deductible	
Emergency room services	40% coinsurance after deductible	20% coinsurance after deductible	
Emergency medical transportation (e.g. Ambulance)	40% coinsurance after deductible	20% coinsurance after deductible	
Hospital services (Facility & physicians services)	40% coinsurance after deductible	20% coinsurance after deductible	
Maternity (Delivery & inpatient services)	40% coinsurance after deductible	20% coinsurance after deductible	
Home health care, rehabilitation services, habilitation services and skilled nursing care	40% coinsurance after deductible	20% coinsurance after deductible	
Other eligible health care services	40% coinsurance after deductible	20% coinsurance after deductible	

² For individuals under 30 or with a hardship exemption based on insurance being unaffordable.

³ Primary, online and convenience care copay subject to combined three visit maximum per person per calendar year. After third visit, you pay 0% coinsurance after deductible.

CATASTROPHIC PLAN

CATASTROPHIC²

ıll Networks

Individual plan: \$8,150

Family plan: \$8,150 per family member or

\$16,300 for the entire family

Individual plan: \$8,150

Family plan: \$8,150 per family member or

\$16,300 for the entire family

You pay nothing – 100% coverage

\$30 copay for the first 33 visits

\$20 copay for the first 33 visits

\$20 copay for the first 33 visits

0% coinsurance after deductible

0% coinsurance after deductible

0% coinsurance after deductible

0% coinsurance after deductible

\$25 maximum

0% coinsurance after deductible



PRESCRIPTION DRUG COVERAGE

Our plans include a range of convenient services and options for filling and managing your prescriptions. Here are some features to keep in mind:

Medica Drug List. To help keep your share of the costs at their lowest, our plans cover drugs on the Medica Drug List. The list includes drugs that provide the most value and have proven safety and effectiveness. Your cost will vary depending on which tier your drug belongs to.

Network Pharmacy. For your plan to cover a drug on the drug list, you need to visit a network pharmacy. Our pharmacy network includes more than 68,000 pharmacies nationwide including most major chains and thousands of independent pharmacies.

90-Day Refill Option. You can get a 90-day supply of a drug that you take regularly. Pick it up at a network pharmacy — or have it sent through the mail, with no shipping or handling fees.

Search the Drug List or Find a Pharmacy

To see what drugs are covered or to find a network pharmacy, use the online search tool at **medica.com/IndividualPlansMN**.

EXTRAS TO MAKE YOUR PLAN EVEN BETTER

A great plan is only one piece of the puzzle when it comes to maintaining your health. So we provide you with the extra resources you need to stay healthy each and every day.





Nationwide Travel Network

You can take your coverage with you when you travel within the United States and enjoy access to your network benefits. Whether it's a quick trip or an extended stay, you're covered when traveling outside your plan's service area and use a Travel Program provider for your care.



Personal Support Services

Specially trained Personal Health Advocates can help you tackle health-related questions — from finding the right doctor to resolving claims questions. They can even help you make an appointment with a hard-to-reach doctor. This service is confidential — and provided at no additional cost.



Healthy Pregnancy Support

Tap into personalized guidance, support and coaching for your entire parenthood journey with the Ovia Health app. It gives you ondemand support and clinically backed guidance to help you achieve your health goals, whether that's tracking your period, getting pregnant or navigating pregnancy, postpartum and parental wellness.





24/7 NurseLine

Nurse line services provide you with a place to turn 24/7 for trusted advice and information when you need it most. Highly-trained nurses are available to help answer your questions about symptoms, medications and health conditions, and offer self-care tips for non-urgent concerns. This service is provided at no additional cost.



Online Care Available 24/7

Get quick, convenient treatment online for everyday medical conditions. Often, in 30 minutes or less, you can get a diagnosis, treatment plan and prescription, if needed. Plus, if they can't treat you, there's no charge.



Healthy Living with Medica

You'll have access to online programs to motivate and support you in making healthy changes. Get fit, eat healthier, manage stress and find direction for your life. Guided programs feature tools like workout videos and healthy recipes. Participate on your desktop or through our ActiveHealth® app. Plus, when you participate via the app, you earn hearts that can be entered into reward drawings. This service is provided at no additional cost.



Complex Specialty Care Program

Receive care for transplants, certain rare cancers and other complex specialty care at Mayo Clinic. For transplants, an allowance for transportation, lodging and living expenses also included. Before you use the program, you need a referral from your network doctor and approval from Medica.



READY TO ENROLL?

CHECKLIST

Gather this information for each person applying before you start your application:

- Date of birth
- Current insurance information
- Social Security number
- Payment information
- Tobacco use information

There are two enrollment periods when you can buy a plan:

Open Enrollment Period

The period each year anyone can enroll in a plan. For coverage that starts in 2020, this period is November 1 through December 15, 2019.

Special Enrollment Period

A 60-day period outside of the Open Enrollment Period when you can enroll in a plan. You only qualify if you experience certain life events like getting married, losing coverage, moving, having a baby, or adopting a child.



THERE ARE FOUR EASY WAYS TO SIGN UP:



Visit **medica.com/IndividualPlansMN.** Then, follow these steps to apply:

- 1 Create an account

 After you create an account, you'll need to provide some basic demographic information.
- Pick your plan

 Next, you'll see all the health insurance plans available in your area.
- 3 Enroll in your plan
 Select your preferred plan and follow the steps
 to enroll.

Working with a sales consultant or agent to complete your application?

Make sure you include their agent (NPN) number on your application.



Call **1-855-297-9222 (TTY:711)** to apply for a health insurance plan and enroll over the phone. A Medica Sales Consultant can help you shop, compare plans and enroll in coverage.



Visit us at our office location:

Minnetonka, Minnesota Corporate Office 401 Carlson Parkway Minnetonka. MN 55305

A Medica Sales Consultant can help you shop, compare plans and enroll in coverage.



If you work with a licensed agent, they're your best resource to help you make your plan selection and enroll in coverage.

WHAT TO EXPECT AFTER ENROLLMENT

?

What's next after you enroll in Medica coverage online, with your agent, over the phone or in-person? Here's a quick summary of the materials you'll receive from us so you can start using your plan.



What Medica is doing:



Reviewing your application and setting up your policy.

We'll contact you if we need more information.



Creating your ID card. You'll receive your card 7-10 days after we process your first month's premium payment.



Building your Welcome Kit. You'll receive your kit 7-10 days after we process your first month's premium payment. It includes information to help you get the most from your plan.

What you can do:



Pay your first month's premium. To activate your coverage, you must make your payment. You have two options:

- » Pay online. Visit medica.com/FirstPayment to pay electronically with your bank account or credit card.
- » Mail your payment. We'll send you a *pending payment letter* with instructions on how to send in your payment.



Register for your secure member site. After you receive your ID card, visit **medica.com/IndividualLogin** to register. Your site is your one-stop resource for the information you need to manage your health plan benefits and help improve your health.

- » View your ID card.
- » See what's covered by your plan, including important plan documents.
- » Track your plan balances, such as your deductible and out-of-pocket maximum.
- » Track your claims and explanation of benefits (EOB).
- » Look up prices for prescriptions.
- » Wellness tools and support.
- » Check to see if a doctor or other health care provider is in your plan's network.
- » Pay your monthly premium.



OTHER IMPORTANT INFORMATION

Eligibility and Requirements

To qualify for a Medica plan, you must be a resident of Minnesota, and not eligible for or enrolled in Medicare. You also must live within your selected network's service area to enroll in and remain in the plan.

Understanding Benefits and Coverage Details

This brochure is a brief overview of the plans. For complete benefit details, limitations, and exclusions please see a Medica Individual and Family insurance policy. This can be found by visiting **medica.com/IndividualPlansMN** or request a paper copy by calling **1-855-297-9222 (TTY: 711)**.

Prior Approvals and Excluded Services

Some services and procedures require prior approval from Medica before they are covered. Services not covered include, but are not limited to, custodial care, adult eyewear, most dental services, cosmetic services, refractive eye surgery, those received while on military duty and services that are investigational or not medically necessary. For a complete list see a Medica Individual and Family insurance policy available on **medica.com/IndividualPlansMN** or call **1-855-297-9222 (TTY: 711)**.

Pediatric Dental is Not Covered

These policies do not include pediatric dental services. Pediatric dental is an essential health benefit that can be purchased as a standalone product through MNsure. For more information visit **mnsure.org**.

Member Complex Case Management

We have services and programs designed to help members with certain health conditions manage their overall care and treatment. Find more information about the programs and services available by visiting **medica.com**.

Health Savings Account

The Silver HSA and Bronze HSA plan can be paired with a health savings account (HSA) - which is a special savings account for IRS-approved medical expenses. Generally, CSR plans cannot be paired with an HSA. Learn more about the benefits of an HSA or how to open an account by visiting **medica.com/hsa**.

Deductible and Out-Of-Pocket Maximum Details

The deductible and out-of-pocket maximum are subject to a "cost of living" increase on a yearly basis. This increase is tied to the Consumer Price Index and/or may result from adjustments needed to keep plans within the range for a given metal level; metal levels (e.g., Gold, Silver, Bronze) must always be in compliance with the Affordable Care Act (ACA) for Qualified Health Plans (QHPs).

MNsure and Cost Share Reduction Plans

You may be able to receive help paying your health insurance premium or qualify for plans with reduced deductibles and copays. Plans with reduced deductibles and copays are called Cost Share Reduction plans. You can get this assistance if you get health insurance through MNsure, your income is below a certain level, and you choose a health plan from the Silver plan category. Reduced cost sharing is not available with a Catastrophic plan. If you're a member of a federally recognized tribe, you may qualify for additional cost-sharing benefits. To see if you're eligible, please visit **mnsure.org**.

Receiving Care Outside Your Network

Unless it's an emergency, there is no coverage if you visit a provider that is not in your network. This means you'll be responsible for the full cost of any care or supplies. Please see a policy on **medica.com/IndividualPlansMN** for details.

Medica Privacy Notice

Medica takes its responsibility of protecting your personal information seriously. Where possible, Medica de-identifies or encrypts personal information. We use and disclose personal information only to the extent necessary to conduct treatment, payment and health care operations, or to comply with legal, regulatory or accreditation requirements. Medica's full Privacy Notice is available upon request by calling 1-855-297-9222 (TTY: 711) or by going to medica.com/Privacy.

Discrimination is Against the Law

Medica complies with applicable Federal civil rights laws and will not discriminate against any person on the basis of race, color, national origin, age, disability or sex. Medica:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: TTY communication and written information in other formats (large print, audio, other formats).
- Provides free language services to people whose primary language is not English, such as: Qualified interpreters and information written in other languages.

If you need these services, call the number included in this document or on the back of your Medica ID card. If you believe that Medica has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: Civil Rights Coordinator, Mail Route CP250, PO Box 9310, Minneapolis, MN 55443-9310, 952-992-3422 (phone/fax), TTY 711, civilrightscoordinator@medica.com.

You can file a grievance in person or by mail, fax, or email. You may also contact the Civil Rights Coordinator if you need assistance with filing a complaint.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201, 800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

If you want free help translating this document, call 1-800-952-3455.

Si desea recibir asistencia gratuita para la traducción de este documento, llame al 1-800-952-3455.

Yog koj xav tau kev pab dawb txhais daim ntawv no, hu rau 1-800-952-3455.

如果您需要我們免費幫您翻譯此文件,請致電 1-800-952-3455。

Nếu quý vị muốn giúp dịch tài liệu này miễn phí, gọi 1-800-952-3455.

Sanadnikun kaffaltiimaleeakkaisiniifhiikamuyoobarbaaddan 1-800-952-3455 tiinbilbilaa.

إذا كنت ترغب في مساعدة مجانية لترجمة هذا المستند. فاتصل على الرقم3455-952-1800.

Если вы хотите получить бесплатную помощь в переводе этого документа, позвоните по телефону 1-800-952-3455.

້ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອຟຣີໃນການແປເອກະສານນີ້, ໃຫ້ໂທຫາ 1-800-952-3455. 이 문서를 번역하는 데 무료로 도움을 받고 싶으시면 1-800-952-3455로 전화하십시오.

Si vous désirez obtenir gratuitement de l'aide pour traduire ce document, appelez le 1 800 952 3455.

နမ့်္ဂလိဉ်ဘဉ်တ်မြေးစားကလီလ၊တာ်ကွဲးကျိဉ်ထံလံဉ်အံးအယိႇကိုး 1-800-952-3455.

Kung nais mo ng libreng tulong sa pagsasalin ng dokumentong ito, tumawag sa 1-800-952-3455.

ይህን ሰነድ ለመተርጎም ነጻ እርዳታ ከፈለጉ በ 1-800-952-3455 ይደውሉ።

Ako želite besplatnu pomoć za prijevod ovog dokumenta, nazovite 1-800-952-3455.

T'áá jiik'é díí naaltsoos t'áá nizaadk'ehjí bee shí ká'adoowoł ninízingo kojí' hodíílnih, 1-800-952-3455.

Wenn Sie kostenlose Hilfe zur Übersetzung dieses Dokuments wünschen, rufen Sie 1-800-952-3455 an.

- COMIFB-0517-K -

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