

**English:** ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-855-475-3163** (TTY: 711), 8 a.m. - 8 p.m., Monday – Friday. The call is free.

**Spanish:** ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-475-3163 (TTY: 711), de 8 a.m. a 8 p.m., de lunes a viernes. La llamada es gratuita.

**Chinese Mandarin:** 注意：如果您使用中文，可以免费获得语言协助服务。请于周一至周五早 8 点至晚 8 点之间致电 1-855-475-3163 (TTY 专线：711)。该电话免费。

**Chinese Cantonese:** 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請撥打 1-855-475-3163 (TTY: 711)，上午8點至晚上8點，週一至週五。此為免付費電話。

**Tagalog:** ATENSYON: Kung nagsasalita ka ng Tagalog, magagamit mo ang libreng mga serbisyo sa tulong sa wika na available sa iyo. Tawagan ang 1-855-475-3163 (TTY: 711), 8 a.m. - 8 p.m., Lunes – Biyernes. Libre ang tawag.

**French:** ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-475-3163 (Téléscripteur : 711) de 8 h à 20 h, du lundi au vendredi. L'appel est gratuit.

**Vietnamese:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-475-3163 (TTY: 711), 8 giờ sáng - 8 giờ tối, từ Thứ 2 đến Thứ 6. Miễn phí cuộc gọi.

**German:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachunterstützungsdienste zur Verfügung. Rufen Sie an unter 1-855-475-3163 (TTY: 711), 08:00 - 20:00, Montag – Freitag Der Anruf ist kostenlos.

**Korean:** 알려 드립니다: 한국어를 구사하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 전화 1-855-475-3163(TTY: 711), 오전 8시~오후 8시, 월요일~금요일.> 전화 요금은 무료입니다.

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните по телефону 1-855-475-3163 (телетайп: 711) с 8:00 утра до 8:00 вечера с понедельника по пятницу. Звонок бесплатный.

**Arabic:** تنبيه: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية متاحة لك مجاناً. اتصل على رقم الهاتف 1-855-475-3163 (هاتف نصّي: 117 أو)، من 8 صباحاً حتى 8 مساءً، من الإثنين إلى الجمعة. هذه المكالمات مجانية.

**Italian:** Se parli Italiano, sono disponibili, gratuitamente, servizi di assistenza nella tua lingua. Contatta il Servizio Clienti al numero 1-855-475-3163 TTY (telescrivente) 711). Servizio disponibile dalle 8.00 alle 20.00, dal lunedì al venerdì. La chiamata è gratuita

**Portuguese:** ATENÇÃO: Caso seja falante de português, disponibilizamos serviços linguísticos gratuitos para você. Ligue para 1-855-475-3163 (TTY: 711), das 8h às 20h, de segunda a sexta-feira. A ligação é gratuita.

**French Creole:** ATANSYON: Si ou pale anglè, sèvis asistans lengwistik yo gratis, yo disponib pou ou. Rele 1-855-475-3163 (TTY: 711), 8 a.m. - 8 p.m., Lendi - Vandredi. Apèl la gratis.

**Polish:** UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń 1-855-475-3163 (TTY: 711), od 8 rano do 8 wieczorem, od poniedziałku do piątku. Rozmowa jest bezpłatna.

**Hindi:** ध्यान दें: यदि आप अंग्रेजी भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं निःशुल्क उपलब्ध हैं। कॉल करें 1-855-475-3163 (TTY: 711), 8 a.m. - 8 p.m., सोमवार - शुक्रवार। यह कॉल निःशुल्क है।

**Japanese:** ご注意：英語をお話しされるのであれば、言語支援サービスが無料でご利用になれます。電話番号：1-855-475-3163 (TTY: 711) にお問い合わせください。月～金曜日、午前8時～午後8時にご利用いただけます。電話はフリーダイヤルです。

CareSource complies with applicable state and federal civil rights laws. We do not discriminate, exclude people, or treat them differently because of age, gender, gender identity, color, race, disability, national origin, ethnicity, marital status, sexual preference, sexual orientation, religious affiliation, health status, or public assistance status. CareSource offers free aids and services to people with disabilities or those whose primary language is not English. We can get sign language interpreters or interpreters in other languages so they can communicate effectively with us or their providers. Printed materials are also available in large print, braille or audio at no charge. Please call Member Services at the number on your CareSource ID card if you need any of these services. If you believe we have not provided these services to you or discriminated in another way, you may file a grievance.

Mail: CareSource  
Attn: Civil Rights Coordinator  
P.O. Box 1947  
Dayton, Ohio 45401

Email: [CivilRightsCoordinator@CareSource.com](mailto:CivilRightsCoordinator@CareSource.com)  
Phone: 1-844-539-1732  
Fax: 1-844-417-6254

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

Mail: U.S. Dept of Health and Human Services  
200 Independence Ave, SW Room 509F HHH Building  
Washington, D.C. 20201

Online: [ocrportal.hhs.gov/ocr/portal/lobby.jsf](http://ocrportal.hhs.gov/ocr/portal/lobby.jsf)

Phone: 1-800-368-1019 (TTY: 1-800-537-7697)

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



CareSource® MyCare Ohio (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Ohio Medicaid to provide benefits of both programs to enrollees.

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