Blue Cross Community Health Plans℠

HealthChoice Illinois
Illinois Department of Healthcare and Family Services

Health Benefits for Immigrant Seniors Resource Guide

Member Services: **1-877-860-2837** (TTY: **711**)

www.bcchpil.com

Effective January 2026

Blue Cross Community Health Plans is provided by Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association.

IL_BCCHP_ENR_WBHBIAS26 Approved 08212026 250885.0826

WHEN YOU NEED TO CONTACT MEMBER SERVICES

Our goal is to serve your health care needs through all of life's changes. If you have any questions, our team stands ready to help.

Call **1-877-860-2837** (TTY/TDD: **711**)

We are open 24 hours a day, seven days a week. The call is free.

Website **https://www.bcbsil.com/bcchp/hbia-hbis/hbia-hbis**

Write Blue Cross Community Health Plans
c/o Member Services
PO Box 3418
Scranton, PA 18505

If you have questions, please call Member Services toll-free at **1-877-860-2837** (TTY: **711**) or the 24/7 Nurseline at **1-888-343-2697**.

Important Phone Numbers

24/7 Nurseline 24-hour-a-day help line — **1-888-343-2697**, TTY/TDD: **711**

Member Services — **1-877-860-2837**, TTY/TDD: **711**

We are available 24 hours a day, seven days a week. The call is free.

A live agent can be reached from 8 a.m. to 5 p.m. Central time, Monday through Friday.

Self-service or a voicemail can be used 24/7, including weekends and holidays.

Website — **www.bcchpil.com**

Illinois Coalition for Immigrant and Refugee Rights Family Support Hotline	**1-855-435-7693**
Immigrant Family Resource Program Hotline	**1-855-437-7669**
Office of Welcoming Centers for Refugee and Immigrant Services	**1-312-793-7120**
Application for Benefits of Eligibility Customer Call Center	**1-800-843-6154** TTY: **1-866-324-5553**
Department on Aging – Senior Help Line	**1-800-252-8966**
Illinois Access To Justice	**1-888-708-6225**
Illinois Attorney General – Immigration Scams	
Chicago	**1-800-386-5438** TTY: **1-800-964-3013**
Springfield	**1-800-243-0618** TTY: **1-877-844-5461**
Carbondale	**1-800-243-0607** TTY: **1-877-675-9339**

Emergency Care — **911**

In an emergency, call **911** or go the nearest emergency department.
Emergency care is covered in all of the United States.

Table of Contents

Health Benefits for Immigrant Seniors 7
Immigration Resources 8
Legal Services 9
When You Need to Contact Member Services 9
Cost Sharing 10
Care Coordination 13
Where to Go for Care 14
- Doctor's Office 14
- Telehealth 14
- 24/7 Nurseline 15
- Mobile Crisis Response Hotline 15
- Urgent Care 15
- Emergency Room 15
- How to Avoid a Trip to the ER 15

Language Assistance 16
Non-Emergency Medical Transportation Services 17
Disclaimers 17

Health Benefits for Immigrant Seniors

Introduction

Thank you for being a member of Blue Cross Community Health Plans. We are here to provide quality health care for you and your family. Our goal is to serve your health needs through all of life's changes.

The Health Benefits for Immigrant Seniors Program offers medical coverage to eligible seniors regardless of immigration status. The state of Illinois developed this program as part of its vision to encourage positive outcomes, address the social determinants of health and foster the well-being of our members. Under this program, members receive a full benefit package. The program includes copays and prior authorization rules.

Managed Care

BCCHP℠ is a managed care health insurance program. When you enroll, you become a member in our plan. If you do not choose a plan, the Illinois Department of Healthcare and Family Services assigns you to one.

Eligibility

Health benefits for immigrant seniors are available for:

- Seniors age 65 years old or older.

To qualify for these services you must:

- Be a resident of the state of Illinois
- Be a lawful permanent resident for less than five years (also known as having a green card), or
- Be an undocumented immigrant (including individuals in a Temporary Protected Status)
- Meet Medicaid financial eligibility criteria

For full eligibility requirements, visit **www.bcchpil.com**

Public Charge

Enrollment in this program is not counted in the public charge test. This means it will not affect your immigration application or status. For more information about public charge, please visit:

- Keep Your Benefits: **https://keepyourbenefits.org/en/il/public-charge**
- Protecting Immigrant Families – Illinois (PIF-IL): **https://protectingimmigrantfamiliesillinois.org**

If you are worried about how this program may change your immigration status, you may also contact Protecting Immigrant Families. You can email them at: **pifillinois@povertylaw.org**.

Immigration Resources

We are committed to promoting the health and wellness of our members and communities. We can help connect members to nearby community resources.

The Illinois Welcoming Center (IWC) is a service center for immigrants and refugees. Their goal is to help you get the state and federal services you need. To find an IWC near you, call **1-312-793-7120**.

The Illinois Coalition for Immigrant and Refugee Rights (ICIRR) partners with nonprofit organizations across Illinois. These organizations can help with:

- Public benefits
- Food pantries
- Housing and utilities
- Financial and emergency assistance

For a full list of resources, visit: **https://www.icirr.org/resources**. You can also call ICIRR's Family Support Hotline. They can be reached at **1-855-435-7693**. Help is available in multiple languages.

You can also contact the Immigrant Family Resource Program (IFRP). The IFRP offers outreach, case management and interpretation/translation services. You can call the IFRP Hotline at **1-855-437-7669**.

If you have questions, please call Member Services toll-free at **1-877-860-2837** (TTY: **711**) or the 24/7 Nurseline at **1-888-343-2697**.

Legal Services

Illinois Access to Justice offers a network of legal services. They can help with criminal, civil, administrative and immigration matters. To find a legal service provider in your area, visit their website at **https://ilaccesstojustice.com**. You can also call their hotline at **1-888-708-6225**.

The Illinois Coalition for Immigrant and Refugee Rights offers a full list of legal providers across the state. To access their Legal Services Directory, visit **https://www.icirr.org/copy-of-immigrant-community-resources**. You can also call their Family Support Line at **1-855-435-7693**.

Beware of immigration scams. Make sure you are speaking to a legal provider. Notaries public, travel agents, or insurance agents may not advise you on legal or immigration matters.

If you have been a victim of an immigration scam, please report it. You can call the Illinois Attorney General at:

Chicago:
1-800-386-5438
TTY: **1-800-964-3013**

Springfield:
1-800-243-0618
TTY: **1-877-844-5461**

Carbondale:
1-800-243-0607
TTY: **1-877-675-9339**

When You Need to Contact Member Services

Our Member Services Department is ready to help you get the most from your health plan. You can call Member Services at **1-877-860-2837** (TTY/TDD: **711**). We are available 24 hours a day, seven (7) days a week. The call is toll-free. A live agent can be reached from 8 a.m. to 5 p.m. Central time, Monday through Friday. Self-service or voicemail can be used 24/7, including weekends and holidays.

Our staff is trained to help you understand everything about your health plan. We can give you details about your medical, dental and vision benefits. We can also answer questions about:

- Getting your medications/prescriptions
- What are covered/non-covered services
- Choosing/changing your primary care provider (PCP)
- Needing help in other languages
- Needing a ride to a doctor's appointment or pharmacy
- Renewing your Medicaid benefits
- Filing a grievance or an appeal
- Your rights and responsibilities

Cost Sharing

Your specific plan includes copayments. Copayments are what you pay out of your own pocket for a covered health care service. For example, if a doctor's office visit costs $200, the patient may be asked to pay $25 before the visit. This is a copayment.

How Does a Copay work?

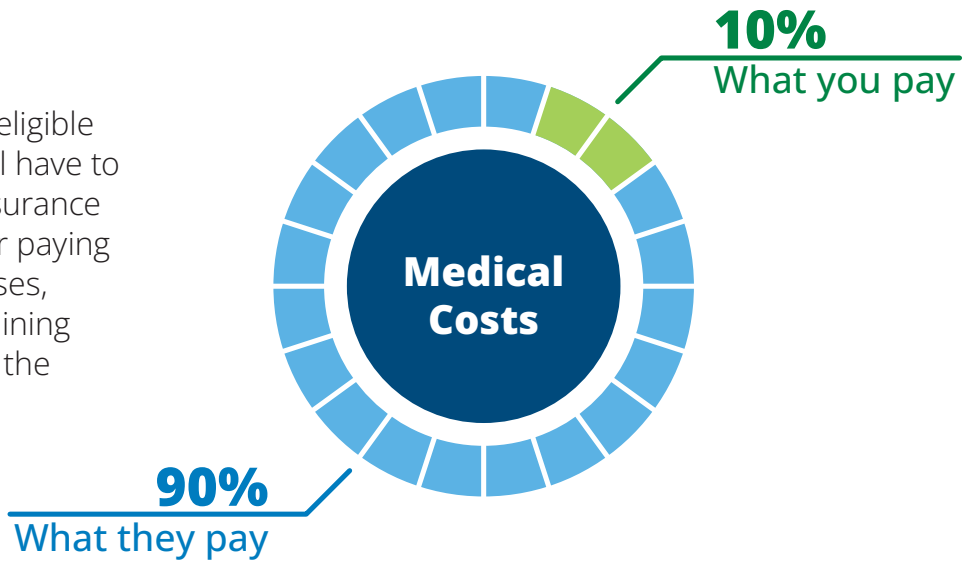
If a doctor's office visit costs **$200**, the patient may be asked to pay **$25** before the visit. This is a copayment.

You pay

$25 copay	$175 remaining medical bill

Insurance company would pay the rest

Coinsurance is the portion of eligible medical expenses that you will have to pay. For example, if your coinsurance is 10%, you are responsible for paying 10% of eligible medical expenses, and the plan will pay the remaining 90%. The amount can vary by the type of covered health care service.



If you have questions, please call Member Services toll-free at **1-877-860-2837** (TTY: **711**) or the 24/7 Nurseline at **1-888-343-2697**.

You will be asked to pay the copayment amount directly to your health care provider when you receive services. Copayments can only be charged for the following services:

- Non-emergency inpatient hospitalizations: Up to $250 copay
- Non-emergency hospital or ambulatory surgical treatment center outpatient services: Up to 10% of the Medicaid payment. The amount you can be charged will vary depending on the service. Your provider can tell you the amount you will be charged before services are provided.

Explanation of Benefits

After a medical visit, you will receive an explanation of benefits (EOB). This is not a bill. An EOB shows:

- The total cost of the visit
- What BCCHP paid
- How much you owe to your provider

If you have questions about an EOB, call Member Services at **1-877-860-2837** (TTY/TDD: **711**).

Blue Cross Community Health Plans℠

SUBSCRIBER INFORMATION
GROUP NAME
Member ID#: <XXXXXXXXX> Group #: <XXXXXXXXX>
Customer Advocates are here to help! **877-860-2837**

CLAIM DETAIL <X>
PATIENT: <MEMBER FULL NAME>
PROVIDER: <PROVIDER FULL NAME>
CLAIM # <XXXXXXXXXXXX> **DATE PROCESSED:** <MM/DD/YYYY>

Amount Billed	$<##.##>
Discounts and Reductions	$<##.##>
Health Plan Responsibility	$<##.##>
Paid from your HCA Account	$<##.##>
You may owe your health care provider for these services	**$<##.##>**

			YOUR BENEFITS APPLIED			YOUR RESPONSIBILITY				
Service Description	Service Dates	Amount Billed	Discounts and Reductions	Amount Covered (Allowed)	Health Plan Responsibility	Deductible Amount	Copay Amount	Coinsurance	Amount Not Covered	**Your Total Costs**
<Service Description>	<MM/DD/YYYY>	<##.##>	<##.##>	<##.##>	<##.##>	<##.##>		<##.##>		<##.##>
<Service Description>	<MM/DD/YYYY>	<##.##>	<##.##>	<##.##>	<##.##>			<##.##>		<##.##>
<Service Description>	<MM/DD/YYYY>	<##.##>	<##.##>	<##.##>	<##.##>			<##.##>		<##.##>
<Service Description>	<MM/DD/YYYY>	<##.##>							<##.##>	<##.##>
<Service Description>	<MM/DD/YYYY>	<##.##>	<##.##>	<##.##>	<##.##>			<##.##>		<##.##>
<Service Description>	<MM/DD/YYYY>	<##.##>	<##.##>	<##.##>	<##.##>		<##.##>	<##.##>		<##.##>
<Service Description>	<MM/DD/YYYY>	<##.##>	<##.##>	<##.##>	<##.##>		<##.##>	<##.##>		<##.##>
CLAIM TOTALS		$<##.##>	$<##.##>	$<##.##>	$<##.##>	$<##.##>	$<##.##>	$<##.##>	$<##.##>	$<##.##>

this claim ME> on <MM

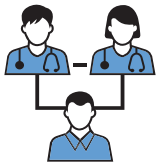
Blue Access for Members℠ (BAM℠)

Access Your HealthCare 24/7 From Wherever You May Be

It is easier than ever to stay connected using your secure online portal – Blue Access for Members (BAM). With BAM, you can manage your health coverage and find info about your services. And now, you can access your personal BAM account with your smartphone. Just use the BCBSIL mobile app!

If you have not already signed up for BAM, you can access online or through our mobile app:

https://mybam.bcbsil.com



Login on your desktop or tablet

BCBSIL App

Download the mobile app. Use your phone's app store by searching BCBSIL or text* **BCBSILAPP** to **33633**

Just some of what BAM offers:

- Request, print or order an ID card
- Find doctors, specialists and hospitals using the Provider Finder®
- Change your PCP
- View your prior authorization and claims information

*Message and data rates may apply.

If you have questions, please call Member Services toll-free at **1-877-860-2837** (TTY: **711**) or the 24/7 Nurseline at **1-888-343-2697**.

Care Coordination

A care coordinator is your main contact person who works with you and your care team to help manage your health care. You can work with a care coordinator on your health-related needs.

Your Care Plan Team

Your care plan team may include many different people (with your permission) including:

- You
- Your family
- Your doctor (PCP)
- Behavioral health provider
- Pharmacist
- Community partners such as church members
- Your care coordinator
- Others you want to include in your care team

Team members are there to help you get the services you need. They will help you make decisions about your care and work with you to reach your health care goals. Your care coordinator will help lead the team to make sure all your needs are met.

Where to Go for Care

If you are not having an emergency, knowing where to go for medical or behavioral health care may save you a lot of time. You have choices on where you get your medical or behavioral health care.

Doctor's Office

Your doctor's office is the best place to go for non-emergency care. Your doctor knows your health history, the medicine(s) you take and can help decide if you need to see a behavioral health provider. You should go to your doctor's office when you:

- Need a checkup or physical
- Have ear or sinus pain
- Are feeling sad or lonely
- Need medication refills or changes
- Get shots
- Have a sore throat
- Have a stomachache

When you go to see your doctor, take your member ID card with you. You will need to show it when you get services. For your doctor's visit, you should:

- Bring a list of your health concerns.
- Take a list of medicines you are taking and any other medical information.
- Keep your doctor up to date about your health.
- Ask for an interpreter if you need one.

Telehealth

BCCHP has made it easier to see your provider by offering telehealth options. You can get the care you need, even virtually. To learn more, call Member Services at **1-877-860-2837**. You can also find providers at **www.bcchpil.com** under the Virtual Care tab, or ask your doctor if they provide telehealth services. Each doctor, if offered, has different ways of providing telehealth services. If you need help making an appointment, please contact Members Services.

Your doctor should never ask you for immigration status or financial information. You do not need to provide this information. If you have concerns, call Member Services at **1-877-860-2837** (TTY/TDD: **711**).

If you have questions, please call Member Services toll-free at **1-877-860-2837** (TTY: **711**) or the 24/7 Nurseline at **1-888-343-2697**.

24/7 Nurseline

If you have health questions or need help deciding where to go for care, you can call the 24/7 Nurseline at **1-888-343-2697** (TTY: **711**).

Mobile Crisis Response Hotline

If you have a behavioral health crisis, you can call the Mobile Crisis Response Hotline at **1-800-345-9049** (TTY/TDD: **711**). This service is available 24 hours a day, seven days a week.

Urgent Care

If your doctor's office is closed and you need urgent medical care, you can visit an urgent care clinic. Examples of when you should go to an urgent care clinic are when you have:

- Back pain
- Burning with urination
- Asthma with constant wheezing not resolved with your inhaler
- Minor fractures
- Cuts that need stitches
- Flu or cold-like symptoms

Emergency Room

If you are having an emergency, go to the emergency room (ER) or call **911**. Examples of emergency health issues are:

- Stroke (sudden weakness on one side, slurring of speech, trouble swallowing, blurred vision)
- Shortness of breath or severe trouble breathing
- Severe vomiting or diarrhea
- Drug or alcohol overdose
- Severe injuries, broken bones
- Heavy bleeding
- Chest pain
- Having thoughts of harming yourself or others

How to Avoid a Trip to the ER

- See your doctor regularly. This is important if you have a long-term health problem such as diabetes or asthma, or if you have ongoing behavioral health needs.
- Take your medicines as prescribed by your doctor.

Language Assistance

Interpreter Services

You can get this document in Spanish, or speak with someone about this information in other languages for free. Call **1-877-860-2837** (TTY/TDD: **711**). The call is free.

Usted puede obtener este documento en español o hablar con alguien, de forma gratuita, acerca de esta información en otros idiomas. Llame al **1-877-860-2837** (TTY/TDD: **711**). La llamada es gratuita.

Other Formats

You can also call Member Services, toll-free, to request this information in alternate formats such as Braille, large print and other forms.

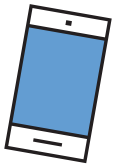
Hearing and Vision Impairment

For our members with hearing problems, we offer TTY/TDD service free of charge. The line is open 24 hours a day/seven days a week at **711**.

Non-Emergency Medical Transportation Services

BCCHP works with MTM Health to provide transport services. You can get a ride to a provider's appointment, pharmacy (following your appointment) or a BCCHP event. You can also get a ride to a Blue Door Neighborhood Center.

To Schedule a Ride



MTM Link App

Search 'MTM Link Member' in your app store and use for all your ride needs.

Call MTM Health

1-877-831-3148

24 hours a day, seven days a week.

Confirm Your Ride

1-877-831-3148

Call or check your mobile app three days prior.

The day of your appointment:

- Be ready for your ride one hour beforehand.
- When your driver comes, they will honk, knock, ring the bell or call you. They must wait five minutes for you. After five minutes, they can leave and report a no-show.
- Drivers can transport multiple members on the same ride. This should not add any more than 45 minutes to your travel time.

Disclaimers

MTM Health is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide non-emergency transportation for members with coverage through BCBSIL.

BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Non-Discrimination Notice

Health Care Coverage Is Important For Everyone

We do not discriminate on the basis of race, color, national origin (including limited English knowledge and first language), age, disability, or sex (as understood in the applicable regulation). We provide people with disabilities with reasonable modifications and free communication aids to allow for effective communication with us. We also provide free language assistance services to people whose first language is not English.

To receive reasonable modifications, communication aids or language assistance free of charge, please call us at **1-877-860-2837**.

If you believe we have failed to provide a service, or think we have discriminated in another way, you can file a grievance with:

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

Phone: **1-855-664-7270** (voicemail)
TTY/TDD: **1-855-661-6965**
Fax: **1-855-661-6960**
Email: civilrightscoordinator@bcbsil.com

You can file a grievance by mail, fax or email. If you need help filing a grievance, please call the toll-free phone number listed on the back of your ID card (TTY: 711).

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

US Dept of Health & Human Services
200 Independence Avenue SW
Room 509F, HHH Building
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/civil-rights/filing-a-complaint/index.html

This notice is available on our website at
https://www.bcbsil.com/bcchp/legal-and-privacy/non-discrimination-notice

ATTENTION: If you speak another language, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call **1-877-860-2837** (TTY: **711**) or speak to your provider.

Español Spanish	ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al **1-877-860-2837** (TTY: **711**) o hable con su proveedor.
العربية Arabic	تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم **1-877-860-2837** (TTY: **711**) أو تحدث إلى مقدم الخدمة الخاص بك.

中文 Chinese	注意：如果您说中文，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 **1-877-860-2837** (TTY: **711**) 或咨询您的服务提供商。
Français French	ATTENTION: Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le **1-877-860-2837** (TTY: **711**) ou parlez à votre fournisseur.
Deutsch German	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie **1-877-860-2837** (TTY: **711**) an oder sprechen Sie mit Ihrem Provider.
ગુજરાતી Gujarati	ધ્યાન આપો: જો તમે બીજી ભાષા બોલો છો, તો તમારા માટે મફત ભાષા સહાય સેવાઓ ઉપલબ્ધ છે. સુલભ ફોર્મેટમાં માહિતી પ્રદાન કરવા માટે યોગ્ય સહાયક મદદ અને સેવાઓ પણ વિના મૂલ્યે ઉપલબ્ધ છે. **1-877-860-2837** (TTY: **711**) પર કૉલ કરો અથવા તમારા પ્રદાતા સાથે વાત કરો.
हिंदी Hindi	ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। **1-877-860-2837** (TTY: **711**) पर कॉल करें या अपने प्रदाता से बात करें।
Italiano Italian	ATTENZIONE: Se parli italiano, puoi usufruire gratuitamente di servizi di assistenza linguistica. Sono inoltre disponibili, senza costi, strumenti e servizi ausiliari per ricevere informazioni in formati accessibili. Chiama il numero **1-877-860-2837** (TTY: **711**) o rivolgiti a un assistente.
한국어 Korean	주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. **1-877-860-2837** (TTY: **711**)번으로 전화하거나 서비스 제공업체에 문의하십시오.
فارسي Farsi	توجه: اگر فارسی صحبت می‌کنید، خدمات پشتیبانی زبانی رایگان در دسترس شما قرار دارد. همچنین کمک‌ها و تماس خدمات پشتیبانی مناسب برای ارائه اطلاعات در قالب‌های قابل دسترس، به‌طور رایگان موجود می‌باشند. با **1-877-860-2837** (TTY: **711**) تماس بگیرید یا با ارائه‌دهنده خود صحبت کنید.
Polski Polish	UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer **1-877-860-2837** (TTY: **711**) lub porozmawiaj ze swoim dostawcą.
РУССКИЙ Russian	ВНИМАНИЕ: Если вы говорите по-русски, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону **1-877-860-2837** (TTY: **711**) или обратитесь к своему поставщику услуг.
Tagalog Tagalog	PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa **1-877-860-2837** (TTY: **711**) o makipag-usap sa iyong provider.
اردو Urdu	توجہ دیں: اگر آپ اردو بولتے ہیں، تو آپ کے لیے مفت زبان کی مدد کی خدمات دستیاب ہیں۔ قابل رسائی فارمیٹس میں معلومات فراہم کرنے کے لیے مناسب معاونامداد اور خدمات بھی مفت دستیاب ہیں۔ **1-877-860-2837** (TTY: **711**) پر کال کریں یا اپنے فراہم کنندہ سے بات کریں۔
Ελληνικά Greek	ΠΡΟΣΟΧΗ: Εάν μιλάτε ελληνικά, υπάρχουν διαθέσιμες δωρεάν υπηρεσίες υποστήριξης στη συγκεκριμένη γλώσσα. Διατίθενται δωρεάν κατάλληλα βοηθήματα και υπηρεσίες για παροχή πληροφοριών σε προσβάσιμες μορφές. Καλέστε το **1-877-860-2837** (TTY: **711**) ή απευθυνθείτε στον πάροχό σας.
Tiếng Việt Vietnamese	LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ và dịch vụ phụ trợ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số **1-877-860-2837** (TTY: **711**) hoặc trao đổi với người cung cấp dịch vụ của bạn.

Health Benefits for Immigrant Seniors Resource Guide

Member Services: **1-877-860-2837** (TTY: **711**)

www.bcchpil.com