Customer Information

Exceptional value

Convenience

Coordinated care



Our mission

Advocate Health has a vision for health care: To provide patients with better health care than they can get anywhere else.

Our Pharmacy mission is closely related: To help our patients with complex, chronic diseases by providing them with the full range of pharmacy services in the quickest manner, at the lowest possible cost.

How to contact us

We can be reached by phone Monday through Friday from 8 a.m. to 6 p.m. and Saturdays 9 a.m. to 1 p.m. Calling us directly toll-free 877-409-0148 is the best way to reach our pharmacy team during business hours. Use this number to contact us with any questions. Your questions may relate to: order status, delays, our ability to serve your insurance or location, claims-related issues, opting-out of our services, and information about your financial responsibilities, copays, deductibles, co-insurance or medication cash-pricing.

We have phone service for questions outside of business hours. You may call our toll-free number anytime if you need to speak with a pharmacist.

Non-urgent questions or concerns can also be sent to us anytime by email through Pharmacy@aah.org.
Your email message will be responded to during business hours.

Visit us on the web at *AuroraPharmacy.org*.

Our fax number is 262-253-3001.

Scope of services

Our licensed team includes:

· Registered pharmacists

Our expert team includes:

- Certified pharmacy technicians
- · Billing specialists

Our Pharmacy Program provides patients and clients with:

- Medication Dispensing. Our pharmacy will fill each prescription as written by your doctor. We will ship the drug to you either by mail or by overnight courier. We do not charge you for shipping In most cases, if a generic drug is available and the doctor allows it, we will dispense an approved generic drug equal to the brand drug. But you need to know that for many medications, there are no equal generics.
- **Medication Counseling.** When people start a new drug, they have questions. Our pharmacy is ready to explain each new drug to patients and takes time to answer questions. We explain how to use the drug and what to expect the helpful effects and the side effects.
- Therapy Management. We give a high level of care to patients using complex drug treatments. Our patients who use narrow therapeutic medications may be at risk for side effects and other complications of treatment. Our pharmacy team will work closely with you and your doctor's team to make sure you get the best results from your drug.

Financial services

- Billing. Our staff will process billing with your insurances. You are responsible for any remaining copay for your drug. We can bill your credit card for your copays.
- **Financial Assistance.** Our financial team members are experts in checking and getting coverage for your drugs and finding help for high out-of-pocket costs. This team will also inform you if our pharmacy is out of network for your insurance. We'll work with you to find you whatever help you qualify for.

Aurora Mail Order was designed to meet the needs of Advocate Health patients. Our service area includes all states except: Arkansas, California, Connecticut, New Mexico, New York, Nevada, Utah, and Virginia.

What is a Mail Order Pharmacy?

Mail order pharmacy makes it easier for patients to get the desired results from their maintenance medications that treat chronic illness. Clinical pharmacists guide patients throughout their treatment. They work with patients to reduce side effects, ensure safety, and achieve the best possible results.

Mail order pharmacists help you, the patient, become an important member of your care team. This team also includes your doctors, family members and caregivers. It may also include nursing services and other providers (mental health, nutrition, etc.)

Patient training and education is the key of a successful pharmacy. A well-informed patient (or caregiver) is better prepared to be a partner in his or her own care plan. Education helps patients deal with difficult side-effects, improve communication, and get results.

Patient Rights and Responsibilities

As a patient of the pharmacy, you have certain rights and responsibilities.

You have the right to:

- Get prescribed products and services in a professional manner without discrimination relative to your sex, race, religion, ethnic group, sexual preference, or physical and/or mental disability.
- Be informed of any financial benefits when referred to the organization, be informed of your financial responsibility in advance of care or services being provided and be given claims information related to your

prescriptions.

- Be treated in a fair and courteous way, free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and misappropriation of client/patient property.
- Be provided identification by name and job title of the pharmacy team member providing services to you.
- 5. Speak to a health professional and get educational services and information needed to use drugs in the manner intended by your doctor.
- Express concerns or grievances without fear of reprisal and have concerns or grievances properly investigated.
- 7. Request to speak with staff's supervisors if necessary.
- 8. Have your personal health information shared only as allowed by state and federal law and to be informed of our procedures for disclosure of clinical records. Confidentiality of health care information is strictly maintained.
- 9. Be informed of any benefits or limitation of Aurora Pharmacy services and get referrals to appropriate doctors when needed.
- Decline participation, or disenroll, from any Aurora Pharmacy service at any point in time, simply by contacting us and expressing your choice.

You have the responsibility to:

- 1. Participate in the development of an effective plan of care. In doing so, you have responsibility to provide, to the best of your knowledge, accurate and complete medical, personal, contact and coverage information (and notify us of any changes).
- 2. Adhere to the treatment plan prescribed by your doctor and discuss your use of the mail order services.
- 3. Ask questions about your care.
- 4. Communicate any information, concerns and/or questions related to changes in your condition to Aurora Pharmacy caregivers and your doctor's care team.
- 5. Notify Aurora Pharmacy if you are going to be unavailable for scheduled delivery times.
- 6. Treat Aurora Pharmacy staff with respect and dignity without mistreatment or discrimination as to color, religion, sex, or national or ethnic origin.
- 7. Care for, and safely use drugs, supplies and/or equipment, according to instructions provided, for the purpose they were prescribed and only for/on the individual for whom they were prescribed.
- 8. Contact us right away by phone if you suspect any errors or have concerns with prescriptions you get from Aurora Pharmacy.
- 9. Pay all copays, coinsurances, and invoices before receiving your medication order.
- 10. Submit any forms needed for you to get services.
- 11. Notify Aurora Pharmacy of any changes in your insurance coverage. Inform us right away of any address or telephone changes.

How to use our services

Medication therapy can be complex. We want to make it as simple as possible for you to get started on your medication. So, let us take care of the details.

Your prescription

We will fill your prescription with drug just as the doctor orders it. Many medications aren't available as a generic. When a generic is available, we'll follow all state and federal laws that may require a generic substitute to be used. We will inform you when we provide a generic.

When we get your prescription, we'll make sure it's covered by your insurance. In some cases, the drug your doctor orders may not be available to us. In that case, we will either order your medication and subsequently delivery it upon arrival or notify you to reach out to your provider for alternative options. You may also contact other pharmacies regarding the availability of this medication and our pharmacists will work to transfer your prescription.

Your health is most important to us. We will work with you to make sure you always have the drug you need.

Refilling your drug

You may request refills up to 10 days in advance of your last dose using the following methods:

- The LiveWell app
- MyChart
- Using the pharmacy's automated touch-tone system
- Contacting one our pharmacy representatives

Keep in mind, your order may take 5-7 days to ship. If for any reason there will be a delay, we will call you.

Compliance packaging

The mail order provides a compliance packaging service for patients who may have complex therapy regimens and require medication organization for ideal results. Compliance packaging allows patients to be adherent to their medication therapy and provide optimal medication administration timing. Patients can opt out of the service at any time after signing up.

Emergencies

For urgent pharmacy-related needs, contact us toll-free 24/7 by calling **877-409-0148**. If you are experiencing a medical emergency, call **911**.

Travel – We will make every effort to give you any added drug you may need in advance of travel plans. Please notify us at least 10 days in advance of any planned travel. We will communicate with your insurer so that we can get any needed approvals to allow travel supplies.

Disasters – In the event of a natural disaster (flood, tornado, etc.) please contact us as soon as possible. We will work to make sure you get a supply of drug shipped to the place you want. If needed, we'll help in transferring your prescription to a place convenient for you. Prepare for emergencies: *ready.gov/plan*.

Transferring your prescription – If you want to have your prescription dispensed by a different pharmacy for any reason, we will help transfer the prescription information to your new pharmacy. Kindly ask the new pharmacy to contact us by phone and we'll transfer the prescription.

Lost and stolen drugs – Please take good care of your drugs. In the event of lost, stolen or damaged drugs, we will be happy to replace the drugs, but you may be responsible for any additional costs. Many insurance companies will not pay for replacement drug in these cases.

Missed doses or deliveries – Call us at 877-409-0148 if you miss doses, need help using your drug or equipment, or do not get your delivery on time.

Patient education services

People who know more about their conditions and the drugs used to treat those conditions often get better results. Our goal is to give our patients with the educational materials they need to become active and successful participants in their care. We do that by providing information in a variety of ways, so patients can use the format they prefer.

When you enroll in the mail order service, we'll begin by working with you to learn your specific needs. We'll provide you with information from written and online sources. And our pharmacy staff will always be available to help answer your questions or connect you with other sources of trusted information.

Education programs work better if there is good twoway communication. So that you can get the best benefits from your treatments, please be sure to notify us of any changes to your condition or drug treatments.

Advocate Health provides medical interpreters who can help you talk with your doctor or health care providers in your own language and other communication aids to help you and your family members with your visit. We provide this service at no cost to you. Please let us know if you require language help.

If you have questions or concerns about information got from us, or from other sources, feel free to contact us.

You can reach your pharmacy team toll-free at 877-409-0148.

Helpful patient resources

Many people like to learn more about their drug or their medical condition. Your local library is a good place to find information on medical conditions.

There are websites and patient programs available from the makers of most drugs.

Contact us and we can help get you enrolled in a

manufacturer support program.

In addition, these websites may be helpful for many patients:

• National Library of Medicine: nlm.nih.gov

• Emergency Preparedness: ready.gov/plan

• Advocate Health: AdvocateHealth.org

Drug Information Online: drugs.com

· Aurora Mail Order: AuroraPharmacy.org

Patient safety

Drug recalls – We carefully follow all drug recalls. In the rare event that a drug that we dispensed to you is recalled by the manufacturer, we will contact you directly by phone and give you instructions to get a replacement drug. You will not be charged for any drug to replace a recalled product. We only use vetted and licensed suppliers. If you are concerned that a drug may be counterfeit, contact us for help.

Safe disposal of drugs – If you no longer need a drug, there are safe ways to dispose of it. Follow specific disposal instructions on the drug label or patient information that goes with the drug. Make use of drug take-back programs in your community that allow the public to bring unused drugs to a central site for proper disposal.

Call your city or county government's household trash and recycling service (see blue pages in the phone book) to see if a take-back program is available in your community.

If in doubt about proper disposal, talk to one of our pharmacists.

What to do if you have a drug reaction – Drugs can treat or prevent illness and disease. However, sometimes drugs can cause problems. These problems are called adverse drug reactions. You should know what to do if you think that you or someone you take care of is having an adverse drug reaction.

If you have any questions about something unexpected, please contact your doctor or give us a call. If you have any serious problem, such as difficulty breathing, bleeding, severe nausea and vomiting, get care from a doctor right away.

Reporting drug errors – We strive to be fully accurate when dispensing drugs to our patients. If you ever believe that something isn't right with your prescription, or if the prescription information didn't match what your doctor or pharmacist told you, contact us right away by phone. We'll check everything and make sure you get the drug just as your doctor ordered.

We take quality seriously. We will record and report any drug error through our continuous quality program. We will take steps to correct any processes that could lead to error so that we can prevent any future errors of a similar manner.

Reporting service complaints – Our goal is to give every patient service that is perfect in every way. If you have any reason to submit a complaint about our service, please call Advocate Health's toll-free pharmacy customer care line at 888-409-0148. You can speak with someone 8 a.m. to 3:30 p.m. Monday through Friday or leave a message 24/7 and we'll respond the next business day.

Our Pharmacy is licensed in Wisconsin. Complaints or grievances about our service may be directed online to the Wisconsin Pharmacy Examining Board at dsps.wi.gov.

Medication safety at home

Drugs can help you feel better or control a medical condition. If you take them in the wrong way, they can make you feel worse. If you take drugs prescribed by your doctor, or if you buy drugs "over the counter," follow these rules:

- Store all drugs that need to be kept cold in the fridge, in an area away from anything else.
- Store all drugs that should be stored at room temperature in a clean, dry area, out of children's reach.
- Read the label with care.
- Take the drug just as your doctor tells you.

- Bring a list of drugs that you are using every time you visit the doctor.
- Ask your doctor to help you make a schedule, so you know what drugs to take at what time of day.
- If possible, use only one pharmacy for all your drugs.
 The pharmacist can help you keep track of what drugs you are taking.
- Make sure your caregiver(s) know what drugs you take and when you take them.
- Do not combine prescription and over-the-counter drugs or nutrition supplements unless your doctor approves it.
- **Do not** take the drug or change how much of the drug you take or how often you take it without first talking to your doctor.
- Do not take someone else's drugs.

What you should know about each drug you take:

- Name (generic and brand name)
- Reason for taking it
- How much to take
- · How often to take it
- How long to take it
- Possible side effects and what to do if you experience them
- Special instructions (i.e.: take with meals, at bedtime)

Ask questions! Talk with your doctor or pharmacist if there is anything you do not understand about your drug.



Advocate Aurora Health Chief Privacy Officer 750 W. Virginia Street Milwaukee, WI 53204 1-888-847-6331 www.AdvocateAuroraHealth.org

Your Information. Your Rights. Our Responsibilities.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

YOUR RIGHTS

You have the right to:

- · Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- · Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- · Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

See page 2 for more information on these rights and how to exercise them.

YOUR CHOICES

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

See page 3
for more information on
these choices and how
to exercise them.

OUR USES AND DISCLOSURES

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- · Help with public health and safety issues
- Do research
- · Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

See page 3 & 4 for more information on these uses and disclosures.

YOUR RIGHTS

When it comes to your health information, you have certain rights.

This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. We may require that you put your request in writing. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how
 to do this.
- We may say "no" to your request, but we'll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say "yes" to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.

Get a list of those with whom we've shared information

- You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

• You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting: Chief Privacy Officer 750 W. Virginia Street, Milwaukee, WI 53204 Phone: 1-888-847-6331 online: advocateaurorahealth.ethicspoint.com
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share.

If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information (your name, room location, general condition and religious affiliation) in a hospital directory. This information, except for religious affiliation, may be provided to people who ask for you by name. Members of the clergy may obtain your religious affiliation.

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- · Marketing purposes
- Sale of your information
- · Most sharing of psychotherapy notes
- In the case of fundraising:
 - We may contact you for fundraising efforts, but you can tell us not to contact you again.

OUR USES AND DISCLOSURES

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Treat vou

• We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you
when necessary.

Example: We use health information about you to manage your treatment and services.

Bill for your services

• We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- · Preventing disease
- · Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

• We can use or share your information for health research.

Comply with the law

• We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests

• We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

• We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

• We can share health information about you in response to a court or administrative order, or in response to a subpoena.

OUR RESPONSIBILITIES

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing.

 If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to the Terms of this Notice

We reserve the right to change our privacy practices, policies and procedures at any time. We reserve the right to change the terms of this notice. These changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

Other Instructions for Notice

- Effective Date of this Notice: September 1, 2019
- For more information about your privacy rights or if you are concerned that your rights may have been violated, please contact: Advocate Aurora Health Chief Privacy Officer 750 W. Virginia Street, Milwaukee, WI 53204 Phone: 1-888-847-6331 online: advocateaurorahealth.ethicspoint.com We may restrict access to or disclosure of health information about you as required by other state and federal laws, if those laws are more protective of your health information.
- Advocate Aurora Health participates in the About Health Organized Health Care Arrangement (OHCA), an organized system of health care in which more than one covered entity participates in the joint arrangement. The purpose of the participation includes conducting quality assessment and improvement activities, conducting utilization review, and performing other clinically integrated network activities. Your health information may be shared with other About Health OHCA participants for these purposes.
- We may participate in the electronic exchange of health information with other entities for the allowable purposes of treatment, payment, or health care operations. In an effort to improve the quality and efficiency of health care in our communities, we may allow other health care providers to participate in a joint electronic health record.

Notice of Nondiscrimination in Service Delivery

Advocate Aurora Health complies with all applicable State and Federal Civil Rights laws. No person shall be excluded from participation, be denied benefits, or otherwise subject to discrimination in any manner on the basis of race, color, national origin or ancestry, age, sex, sexual orientation, gender identity, religion, political belief or affiliation, order of protection status, military status, physical or mental disability or association with a person with a disability, marital status, or pregnancy. This policy covers eligibility for the access to service delivery and treatment in all Advocate Aurora Health programs and activities.

Advocate Aurora Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages
- · Does not require individuals to rely on minor children, relatives, or friends to interpret

If you need these services at an Advocate Aurora Health location, notify a facility representative.

How to File a Service Delivery Complaint

If you believe that Advocate Aurora Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you are encouraged to promptly file a grievance with:

Civil Rights Coordinator

750 W. Virginia Street, Milwaukee, WI 53204 Phone: 1.888.568.6845 Email: CivilRights@aurora.org

You can file a grievance in person, by mail, or email. If you need help filing a grievance, a Patient Relations Representative or the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the State or Federal Department of Health and Human Services, Office for Civil Rights. Complaints may be filed electronically, by mail, or by phone.

Illinois Department of Human Rights

James R. Thompson Center 100 W. Randolph Street, 10th Floor – Intake Unit, Chicago, IL 60601

Voice: 312.814.6200 TDD: 866.740.3952

Wisconsin Department of Health Services

Office of Civil Rights Compliance One West Wilson St, Room 651 P.O. Box 7850, Madison, WI 53707-7850 Voice: 608.266.1258 TTY: 800.947.3529

Fax: 608.267.1434

Email: DHSCRC@dhs.wisconsin.gov

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 Voice: 800,368,1019, TDD: 800,537,7697

https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

(قيبر على المغللا) Arabic

تامدخلا ميدقت يف صررفال اؤفاكت قسايس نع تنامول عم يلع لوصحالا تدراً اذا لي جستالا بستكم نم المبالط ي جريف ،(Equal Opportunity in Service Delivery) لفت غلب قنرسن يال ع لصحتسو

Chinese Simplified (简体中文)

如果您想了解我们的"提供服务均等机会"政策的相关信息,请在登记 处咨询,工作人员会为您提供一份简体中文的政策副本。

Chinese Traditional (繁體中文)

如您想瞭解關於「提供服務均等機會」政策的資訊,請前往登記處諮 詢,工作人員會為您提供一份繁體中文的政策副本。

Hmong (Hmoob)

Yog koj xav tau ntaub ntawv kev paub txog ntawm Kev Muaj Vaj Huam Sib Luag Txog Lub Cib Fim nyob rau tsab cai Kev Pab Cuam Xa Khoom thov nug tau nyob rau ntawm rooj sau npe thiab lawv yuav muaj ib daim theej tawm rau koj ua koj hom lus.

Spanish (Español)

Si desea información sobre nuestra política de igualdad de oportunidades en la prestación de servicios, consulte en el mostrador de inscripción y se le dará una copia en su idioma.

Russian (Русский)

Если вы хотите узнать более подробную информацию о нашей политике обеспечения равных возможностей при предоставлении услуг, обратитесь на регистрационную стойку, и копия этого документа будет предоставлена на нужном вам языке.

Korean (한국어)

서비스 제공 정책 내 기회균등에 대한 정보를 원하실 경우, 등록 창구에 문의하시면 원하시는 언어로 작성된 문서를 제공해드립니다.

Polish (Polski)

Jeśli chce Pan(i) uzyskać informacje na temat polityki równych szans w dostępie do usług, należy poprosić w rejestracji o jej kopię przetłumaczoną na język polski.