



ALAMEDA ALLIANCE WELLNESS (HMO D-SNP) NONDISCRIMINATION NOTICE

Discrimination is against the law. Alameda Alliance for Health (Alliance) follows State and Federal civil rights laws. The Alliance does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, and/or sexual orientation.

The Alliance provides:

- Free aids and services in a timely manner to people with disabilities to help them communicate better, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services in a timely manner to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Alameda Alliance Wellness Member Services Department, Monday – Sunday (seven (7) days a week), 8 am – 8 pm, by calling toll-free at **1.888.88A.DSNP (1.888.882.3767)**. If you cannot hear or speak well, use TTY or call **1.800.735.2929**. Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form.

To obtain a copy in one of these alternative formats, please call or write to:

Attn: Member Services Department
Alameda Alliance for Health
1240 South Loop Road
Alameda, CA 94502

Toll-Free: **1.888.88A.DSNP (1.888.882.3767)**
If you cannot hear or speak well, use TTY or call **1.800.735.2929**

HOW TO FILE A GRIEVANCE

If you believe that the Alliance has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, and/or sexual orientation, you can file a grievance with the Alliance.

You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact the Alameda Alliance Wellness Member Services Department, Monday – Sunday (seven (7) days a week), 8 am – 8 pm, by calling toll-free **1.888.88A.DSNP (1.888.882.3767)**. If you cannot hear or speak well, use TTY or call **1.800.735.2929**.
- In writing: Fill out a complaint form or write a letter and send it to:

Attn: Grievances and Appeals Department
Alameda Alliance for Health
1240 South Loop Road
Alameda, CA 94502
- In person: Visit your doctor’s office or the Alliance and say you want to file a grievance.
- Electronically: Visit the Alliance website at **www.alamedaalliance.org**.

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call **1.916.440.7370**. If you cannot speak or hear well, please call TRS **711**.
- In writing: Fill out a complaint form or send a letter to:

Deputy Director, Office of Civil Rights
Department of Health Care Services Office of Civil Rights
PO Box 997413, MS 0009
Sacramento, CA 95899-7413

Complaint forms are available at **www.dhcs.ca.gov/Pages/Language_Access.aspx**.

- Electronically: Send an email to **CivilRights@dhcs.ca.gov**.

OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability, and/or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- By phone: Call **1.800.368.1019**. If you cannot speak or hear well, please call TTY/TDD **1.800.537.7697**.
- In writing: Fill out a complaint form or send a letter to:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

Complaint forms are available at **www.hhs.gov/ocr/office/file/index.html**.

- Electronically: Visit the Office for Civil Rights Complaint Portal at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**.