



Nondiscrimination Notice

Health Alliance Plan of Michigan (HAP) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. HAP does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

HAP provides:

- **Free aids and services to help people communicate effectively with us**
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, others)
- **Free language services to people whose primary language is not English**
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact HAP's customer service manager:

General - (800) 422-4641 (TTY: 711) **Medicare** - (800) 801-1770 (TTY: 711)

Hours are 8 a.m. to 8 p.m., Seven Days a Week (Oct. 1 – March 31) and 8 a.m. to 8 p.m., Monday through Friday (April 1 - Sept. 30)

If you believe that HAP has failed to provide these services or discriminated on the basis of race, color, national origin, age, disability or sex, you can file a grievance with HAP's Appeal & Grievance team. Use the information below:

- **Mail:** 1414 E. Maple Rd., Troy, Michigan 48083
- **Phone:** **General** - (800) 422-4641 (TTY: 711)
Medicare - (800) 801-1770 (TTY: 711)
- **Fax:** (313) 664-5866

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

- **Online:** Use the Office for Civil Rights' Complaint Portal Assistant at: ocrportal.hhs.gov/ocr/portal/lobby.jsf
- **Mail:** U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201.
- **Phone:** (800) 368-1019 or TTY: (800) 537-7697.

Complaint forms are also available at www.hhs.gov/ocr/filing-with-ocr/



Multi-Language Insert

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-801-1770 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete gratis para responder cualquier pregunta que pueda tener sobre nuestro plan médico o de medicamentos. Para hablar con un intérprete, llame al 1-800-801-1770 (TTY: 711). Alguien que hable español lo podrá ayudar. Este es un servicio gratis.

Chinese Mandarin: 我们提供免费的口译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要这项口译服务，请致电 1-800-801-1770 (TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存在疑問，為此我們提供免費的傳譯服務。如需傳譯服務，請致電 1-800-801-1770 (TTY: 711)。我們講中文的人員將樂意為您提供協助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o gamutan. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa 1-800-801-1770 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay isang libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime d'assurance maladie ou d'assurance médicaments. Pour accéder au service d'interprétation, vous pouvez nous appeler au 1-800-801-1770 (TTY : 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương trình sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên, xin gọi 1-800-801-1770



(TTY: 711), sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihnen gerne Fragen zu unseren Gesundheits- und Arzneimittelprogrammen. Unsere Dolmetscher erreichen Sie unter 1-800-801-1770 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-801-1770 (TTY: 711)번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или плана предоставления медикаментов, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-801-1770 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-800-801-1770 (TTY: 711). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न का उत्तर देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-801-1770 (TTY: 711) पर फोन करें। कोई व्यक्ति जो हिन्दी भाषा बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-801-1770 (TTY: 711). Un nostro incaricato che parla italiano vi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que você tenha quanto ao nosso plano de saúde ou de medicação. Para obter um intérprete, entre



em contato conosco pelo número 1-800-801-1770 (TTY: 711). Você encontrará alguém que fale o idioma Português para ajudá-lo. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèpretasyon gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa plan medikaman nou an. Pou w jwenn yon entèprèt, jis rele nou nan 1-800-801-1770 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza, który pomoże w uzyskaniu odpowiedzi na temat ubezpieczenia zdrowotnego lub refundacji leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-801-1770 (TTY: 711). Usługa jest bezpłatna.

Japanese: 当社の医療保険や医薬品に関する質問にお答えするため、無料の通訳サービスをご用意しております。通訳サービスをご希望の方は、1-800-801-1770 (TTY: 711)までお電話ください。日本語を話せるスタッフがご対応いたします。こちらは無料のサービスです。