



BAPTIST HEALTH PLAN®

NON-DISCRIMINATION NOTICE

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

Baptist Health Plan:

- 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

If You need these services, contact the Baptist Health Plan Compliance Officer.

If You believe that Baptist Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, You can file a Grievance in person or by mail, fax, or email at:

Baptist Health Plan
Attention: Compliance Officer
651 Perimeter Dr., Suite 300
Lexington, KY, 40517
Toll free at 1.877.280.9512
Fax at 1.859.335.3720
Email Compliance.Officer@BaptistHealthPlan.com.

If You need help filing a Grievance, the Baptist Health Plan Compliance Officer is available to help You. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1.800.368.1019, 1.800.537.7697 (TDD).

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

English: ATTENTION: If You speak English, language assistance services, free of charge, are available to you. Call 1.844.405.1743 (TTY: 1.844.708.1389).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1.844.405.1743 (TTY: 1-844.708.1389).

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1.844.405.1743 (TTY : 1.844.708.1389).

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1.844.405.1743 (TTY: 1.844.708.1389).

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1.844.405.1743 (TTY: 1.844.708.1389).

Arabic: ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (رقم هاتف الصم والبكم: 844.405.1743.1).

Serbo-Croatian: OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1.844.405.1743 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 1.844.708.1389).

Japanese: 意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1.844.405.1743 (TTY:1.844.708.1389)まで、お電話にてご連絡ください。

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1.844.405.1743 (ATS : 1.844.708.1389).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1.844.405.1743 (TTY: 1.844.708.1389) 번으로 전화해 주십시오.

Pennsylvania Dutch: Wann du Deitsch (Pennsylvania German / Dutch) schwetzsch, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1.844.405.1743 (TTY: 1.844.708.1389).

Nepali: ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू नि:शुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1.844.405.1743 (टिटिवाइ: 1.844.708.1389).

Cushite (Oromo): XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1.844.405.1743 (TTY: 1.844.708.1389).

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните <1.844.405.1743 (телетайп: 1.844.708.1389).

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1.844.405.1763 (TTY: 1.844.708.1389).

Bantu – Kirundi: ICITONDERWA: Nimba uvuga Ikirundi, uzohabwa serivisi zo gufasha mu ndimi, ku buntu. Woterefona 1.844.405.1743 (TTY: 1.844.708.1389).