



# ClarionHealth

## Clarion Health Nondiscrimination Policy for Medicare

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

- 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 **1-844-824-8771**.

If you believe that Clarion Health 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 with Clarion Health Grievance and Appeals Department, P.O. Box 21345, Eagan, MN, or call **1-844-824-8771**. (Dial **711** for TTY/TDD services.) You can file a grievance in person, by mail or by phone. If you need help filing a grievance, Clarion Health's Grievance and Appeals Department 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, D.C. 20201**  
**1-800-368-1019, 800-537-7697 (TTY)**

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



# ClarionHealth

## Getting Help in a Language Other than English

**ATTENTION: If you speak other languages, language assistance services, free of charge, are available to you. Call 1-844-824-8771 (TTY/TDD: 711).**

### **Español (Spanish)**

ATENCIÓN: Si usted habla español, tiene a su disposición, gratis, servicios de ayuda para idiomas. Llame al **1-844-824-8771** (TTY/TDD: 711).

### **中文 (Chinese)**

注意：如果您講中文，我們免費提供相關的語言協助服務。請致電**1-844-824-8771** (TTY/TDD : 711)。

### **Русский (Russian)**

ВНИМАНИЕ! Если Вы говорите на русском языке, Вам доступны бесплатные услуги переводчика. Звоните по тел. **1-844-824-8771** (служба текстового телефона, TTY/TDD: 711).

### **Kreyòl Ayisyen (Haitian Creole)**

ATANSYON: Si ou pale Kreyòl Ayisyen, gen sèvis èd nan lang gratis ki disponib pou ou. Rele nimewo **1-844-824-8771** (TTY/TDD: 711).

### **Italiano (Italian)**

ATTENZIONE: Sono disponibili servizi gratuiti di assistenza linguistica in italiano. Chiamare il numero **1-844-824-8771** (TTY/TDD: 711).

### **Français (French)**

ATTENTION : si vous parlez français, une assistance d'interprétation gratuite est à votre disposition. Veuillez composer le 1-844-824-8771 (Sourds et malentendants : 711).

### **Ελληνικά (Greek)**

ΠΡΟΣΟΧΗ: Εάν μιλάτε Ελληνικά, διατίθενται για σας υπηρεσίες γλωσσικής βοήθειας, δωρεάν. Καλέστε **1-844-824-8771** (για άτομα με προβλήματα ακοής/TTY/TDD: 711).

### **Shqip (Albanian)**

VINI RE: Nëse flisni Shqip, shërbimi i asistencës për gjuhën do të jetë në dispozicionin tuaj, pa pagesë. Telefononi **1-844-824-8771** (Shërbimi i teletekstit TTY/TDD: 711).