



Notice of Non-Discrimination

Blue Cross Blue Shield of Arizona (BCBSAZ) and Blue Cross Blue Shield of Arizona Advantage (BCBSAZ Advantage) does not discriminate on the basis of race, color, national origin, age, disability, or sex. We provide free aids and services to people with disabilities to communicate effectively with us, such as qualified interpreters and written information in other formats such as large print and accessible electronic formats. We also provide free language services to people whose primary language is not English, such as qualified interpreters and written information in other languages.

If you need these services for Medicare Advantage information, call 480-566-2868 (TTY: 711). If you believe that BCBSAZ Advantage 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 the BCBSAZ Advantage Civil Rights Coordinator at P.O. Box 82368, Phoenix, AZ 85071-2368, phone 480-684-7354 (TTY: 711), fax 480-684-7580, email azbluemedicarecompliance@azbluemedicare.com. You can file a grievance in person or by mail, fax, or email.

If you need these services for Part D or Medicare Supplement information, call 480-566-2868 (TTY: 711). If you believe that BCBSAZ 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 the BCBSAZ Civil Rights Coordinator at Attn: Civil Rights Coordinator, Blue Cross Blue Shield of Arizona, P.O. Box 13466, Phoenix, AZ 85002-3466, 602-864-2288, (TTY/TDD: 602-864-4823), crc@azblue.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance BCBSAZ's Civil Rights Coordinator 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, (TDD: 1-800-537-7697). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.