

Discrimination is Against the Law

AmeriHealth Caritas VIP Care Choice (HMO-SNP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, including sex characteristics, intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes (consistent with the scope of sex discrimination described at 45 CFR § 92.101(a)(2)). AmeriHealth Caritas VIP Care Choice does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

AmeriHealth Caritas VIP Care Choice

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - qualified sign language interpreters
 - written information in other formats (large print, audio, accessible electronic formats, etc.).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - qualified interpreters
 - information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact AmeriHealth Caritas VIP Care Choice Member Services at **1-833-467-3302 (TTY 711)**. We are available from Monday – Friday, 8 a.m. to 8 p.m., from April 1 – September 30, or seven days a week. 8 a.m. to 8 p.m. from October 1 – March 31.

If you believe that AmeriHealth Caritas VIP Care Choice 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 Civil Rights Coordinator by mail, phone, or online.

Mail: AmeriHealth Caritas VIP Care Choice
Attn: Civil Rights Coordinator
P.O. Box 7140
London, KY 40742-7140
Phone: 1-833-467-3302 (TTY 711)
Email: dlacfcmergrievance@amerihealthcaritas.com

If you need help filing the grievance, the AmeriHealth Caritas VIP Care Choice 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:

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

Phone: 1-800-368-1019, (TDD 1-800-537-7697)

Online: <https://www.hhs.gov/ocr/complaints/index.html>

AmeriHealth Caritas VIP Care Choice is an HMO-SNP plan with a Medicare contract and a contract with the Delaware Medicaid program. Enrollment in AmeriHealth Caritas VIP Care Choice depends on contract renewal.

This notice is also available at the AmeriHealth Caritas VIP Care Choice website www.amerihealthcaritasvipcare.com/de.

H0738_002_124993_C