

Notice of Nondiscrimination and Accessibility

Discrimination Is Against the Law

Banner Medicare Advantage complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex¹.

Banner Medicare Advantage does not exclude people or treat them less favorably because of race, color, national origin, age, disability or sex.

Banner Medicare Advantage:

- Provides people with disabilities reasonable modifications and appropriate auxiliary aids and services at no cost 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 language assistance services at no-cost 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, please call our Customer Care Center, 8 a.m. to 8 p.m., seven days a week, at:

Banner Medicare Advantage Dual HMO D-SNP: 877-874-3930, TTY 711

Banner Medicare Advantage Prime HMO: 844-549-1857, TTY 711

¹ The final rule provides that sex discrimination includes, but is not limited to, discrimination on the basis of sexual orientation, gender identity, sex characteristics (including intersex traits), pregnancy or related conditions, and sex stereotypes.

If you believe that Banner Medicare 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:

Grievance & Appeals Department
5255 E Williams Circle, Ste 2050
Tucson, Arizona 85711

Phone:

Banner Medicare Advantage Dual: 877-874-3930, TTY 711

Banner Medicare Advantage Prime: 844-549-1857, TTY 711

Fax: 520-874-3462, 866-465-8340

Email: BUHPGrievances&Appeals@bannerhealth.com

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, our Grievance and Appeal 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 (TDD)

Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

This notice is available on the Banner Medicare Advantage website:
www.BannerHealth.com/MA.