## MOLINA HEALTHCARE

### Non-Discrimination Notice – Section 1557 Molina Healthcare - Medicaid

Discrimination is against the law. Molina Healthcare follows State and Federal civil rights laws. Molina Healthcare does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

#### Molina Healthcare provides:

- Free aids and services in a timely manner to people with disabilities to help them communicate better, such as:
  - ✓ Qualified sign language interpreters
  - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services in a timely manner to people whose primary language is not English, such as:
  - ✓ Qualified interpreters
  - ✓ Written information in other languages

If you need these services, contact Molina Healthcare between 7:00 a.m. to 7:00 p.m. by calling 1-888-665-4621. If you cannot hear or speak well, please call 711. Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

Molina Healthcare Civil Rights Coordinator 200 Oceangate, Suite 100 Long Beach, CA 90802

By phone: 1-866-606-3889. If you cannot hear or speak well, please call 711.

#### **HOW TO FILE A GRIEVANCE**

If you believe that Molina Healthcare has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with Molina Healthcare's Civil Rights Coordinator. You can file a grievance by phone, in writing, in person, or electronically:

- <u>By phone:</u> Contact Molina Healthcare's Civil Rights Coordinator between 8:30 a.m. to 5:30 p.m. by calling 1-866-606-3889. Or, if you cannot hear or speak well, please call 711.
- In writing: Fill out a complaint form or write a letter and send it to: Molina Healthcare Civil Rights Coordinator 200 Oceangate, Suite 100 Long Beach, CA 90802



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- <u>In person:</u> Visit your doctor's office or Molina Healthcare and say you want to file a grievance.
- <u>Electronically:</u> Send an email to <u>civil.rights@molinahealthcare.com</u>. You can also visit Molina Healthcare's website at <a href="https://molinahealthcare.Alertline.com">https://molinahealthcare.Alertline.com</a>.

# <u>OFFICE OF CIVIL RIGHTS</u> – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- <u>By phone</u>: Call 916-440-7370. If you cannot speak or hear well, please call 711 (Telecommunications Relay Service).
- In writing: Fill out a complaint form or send a letter to:
   Deputy Director, Office of Civil Rights
   Department of Health Care Services
   Office of Civil Rights
   P.O. Box 997413
   Sacramento, CA 95899-7413
   Complaint forms are available at <a href="http://www.dhcs.ca.gov/Pages/Language\_Access.aspx">http://www.dhcs.ca.gov/Pages/Language\_Access.aspx</a>.
- <u>Electronically:</u> Send an email to <u>CivilRights@dhcs.ca.gov</u>.

# <u>OFFICE OF CIVIL RIGHTS</u> – U.S DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability, or sex, you can file a civil rights complaint (grievance) with the U.S. Department of Health and Human Services, Office for Civil Rights, by phone, in writing, or electronically:

- <u>By phone:</u> Call 1-800-368-1019. If you cannot speak or hear well, please call TTY/TDD: 1-800-537-7697.
- In writing: Fill out a complaint form or send a letter to:
   U.S. Department of Health and Human Services
   200 Independence Avenue, SW
   Room 509F, HHH Building
   Washington, D.C. 20201
   Complaint forms are available at <a href="http://www.hhs.gov/ocr/office/file/index.html">http://www.hhs.gov/ocr/office/file/index.html</a>.
  - Complaint forms are available at <a href="http://www.inis.gov/oci/ornee/ine/index.itting">http://www.inis.gov/oci/ornee/ine/index.itting</a>
- <u>Electronically:</u> Visit the Office for Civil Rights Complaint Portal at <a href="https://ocrportal.hhs.gov/ocr/portal/lobby.jsf">https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</a>.