**Anti-Discrimination Notice**

American Health Advantage of Louisiana, offered by Dignity Care Corporation (HMO I-SNP), complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. American Health Advantage of Louisiana does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

American Health Advantage of Louisiana:

- 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 reasonable modifications, appropriate auxiliary aids and services or language assistance services, contact American Health Advantage of Louisiana Member Services.

If you believe that American Health Advantage of Louisiana 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: American Health Advantage of Louisiana, ATTN: Member Grievances, 201 Jordan Road Franklin, TN 37067, telephone: 1-866-266-6010 (TTY/TDD 833-312-0046) 8:00 A.M. to 8:00 P.M., seven (7) days a week, October 1 through March 31; 8:00 A.M. to 8:00 P.M., Monday to Friday, April 1 through September 30, fax: 1-844-280-5360, email: Compliance@AmHealthPlans.com.

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 http://www.hhs.gov/ocr/office/file/index.html.

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