

NOTICE OF NON-DISCRIMINATION

Highmark Blue Cross Blue Shield of Western New York (Highmark BCBSWNY) complies with Federal civil rights laws. **Highmark BCBSWNY** does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Highmark BCBSWNY provides the following:

- Free aids and services to people with disabilities to help you communicate with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose first language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call **Highmark BCBSWNY** at 866-231-0847. For TTY/TDD services, call 711.

If you believe that **Highmark BCBSWNY** has not given you these services or treated you differently because of race, color, national origin, age, disability, or sex, you can file a grievance with **Highmark BCBSWNY** by:

Mail: Member Complaints and Appeals Department
P.O. Box 62509
Virginia Beach, VA 23466-2509

Phone: 844-401-2292 (for TTY/TDD services, call 711)

Fax: 844-759-5954

In person: Highmark Blue Cross Blue Shield of Western New York
257 West Genesee St., #110
Buffalo, NY 14202

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by:

Web: Office for Civil Rights Complaint Portal at
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Mail: U.S. Department of Health and Human Services
200 Independence Ave. SW, Room 509F, HHH Building
Washington, DC 20201
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

Phone: 800-368-1019 (TTY/TDD 800-537-7697)