

# Discrimination is against the law.

Chorus Community Health Plans (CCHP) complies with all applicable civil rights laws and does not discriminate on the basis of race, color, national origin, sex, age, disability or other legally protected status in its administration of the plan, including enrollment and benefit determinations.

Chorus Community Health Plans provides appropriate auxiliary aids and services, including qualified language and sign interpreters for individuals with disabilities and who have language services needs and information in alternate formats, free of charge and in a timely manner, when such aids and services are necessary to ensure an equal opportunity to participate to individuals with disabilities.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age or disability may file a grievance in person, by mail, fax or email. The grievance must be filed within 60 days of when the person filing the grievance became aware of the alleged discriminatory action. It is against the law for Chorus Community Health Plans to retaliate against anyone who files a grievance or who participates in the investigation of a grievance. Members can request Chorus Community Health Plans's grievance procedure by contacting the Section 1557 Coordinator:

Director, Corporate Compliance  
Mail Station C760  
P.O. Box 1997  
Milwaukee, WI 53201-1997

Telephone: (414) 266-2215  
TDD-TTY (for the hearing impaired): (414) 266-2465  
Fax: (414) 266-6409  
Email: [TTwinem@childrenswi.org](mailto:TTwinem@childrenswi.org)

Members must submit their complaints in writing with their name, address, the problem or action alleged to be discriminatory and the remedy or relief sought. Members can also file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail at:

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:  
<http://hhs.gov/ocr/office/file/index.html>



## Language services

If you or someone you're helping has questions about Chorus Community Health Plans, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-482-8010.

### ALBANIAN

Nëse ju, ose dikush që po ndihmoni, ka pyetje për Chorus Community Health Plans, keni të drejtë të merrni ndihmë dhe informacion falas në gjuhën tuaj. Për të folur me një përkthyes, telefononi numrin 1-800-482-8010 (TTY: 711)

### ARABIC

إذا كنت أو شخص يساعدك على فهم خطط Chorus Community Health Plans، لديك الحق في الحصول على معلومات مجانية بلغتك. للتحدث مع مترجم، اتصل برقم 1-800-482-8010 (TTY: 711)

### BURMESE

Chorus Community Health Plans နှင့်ပတ်သက်၍ သင် သို့မဟုတ် သင်အကူအညီပေးနေသူ တစ်ဦးတွင် မေးမြန်းစရာများ ရှိမည်ဆိုပါက အကူအညီနှင့် သတင်းအချက်အလက်များကို အခမဲ့သင် ရယူပိုင်ခွင့် ရှိပါသည်။ စကားပြန်ဆိုသူ တစ်ဦးထံသို့စကားပြောဆိုရန်၊ 1-800-482-8010 တွင် ဖုန်းခေါ်ဆိုပါ။ (TTY: 711)

### CHINESE

如果您，或是您正在協助的對象，有關於[插入項目的名稱面]的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯，請撥電話 [在此插入數字] 1-800-482-8010 (TTY: 711)

### ENGLISH

If you or someone you're helping has questions about Chorus Community Health Plans, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-482-8010 (TTY: 711)

### FRENCH

Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Chorus Community Health Plans vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 1-800-482-8010 (TTY: 711)

### GERMAN

Falls Sie oder jemand, dem Sie helfen, Fragen zum Chorus Community Health Plans haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 1-800-482-8010 an (TTY: 711)

### HINDI

यदि आपके ,या आप द्वारा सहायता ककर जा रहे ककसी व्यक्ति के Chorus Community Health Plans के बारे में प्रश्न हैं ,तो आपके पास अपनी भाषा में मुफ्त में सहायता और सूचना प्राप्त करने का अधिकार है। ककसी भ्रमिषण से बात करने के लिए 1-800-482-8010 पर कॉिकरें। (TTY: 711)

### HMONG

Yog koj, los yog tej tus neeg uas koj pab ntawd, muaj lus nug txog Chorus Community Health Plans, koj muaj cai kom lawv muab cov ntshiab lus qhia uas tau muab sau ua koj hom lus pub dawb rau koj. Yog koj xav nrog ib tug neeg txhais lus tham, hu rau 1-800-482-8010 (TTY: 711)

### KOREAN

만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Chorus Community Health Plans 에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 1-800-482-8010 로 전화하십시오 (TTY: 711)

### LAOTIAN

້າທ່ານ, ຫຼື ຄົນທີ່ທ່ານກຳລັງຊ່ວຍເຫຼືອ, ມີຄຳຖາມກ່ຽວກັບ Chorus Community Health Plans ທ່ານມີສິດທີ່ຈະໄດ້ຮັບການຊ່ວຍເຫຼືອແລະຂໍ້ມູນຂ່າວສານທີ່ເປັນພາສາຂອງທ່ານຳໄປໃຊ້ຳາຍ. ການໃຊ້ລິນັກບານຍພາສາ, ໃຫ້ເຕີບຫາ 1-800-482-8010 (TTY: 711)

### PENNSYLVANIA DUTCH

Wann du hoscht en Froog, odder ebber, wu du helpscht, hot en Froog baut Chorus Community Health Plans, hoscht du es Recht fer Hilf un Information in deinre eegne Schprouch grieg, un die Hilf koschtet nix. Wann du mit me Interpreter schwetze witt, kannscht du 1-800-482-8010 uffrufe (TTY: 711)

### POLISH

Jeśli Ty lub osoba, której pomagasz macie pytania odnośnie Chorus Community Health Plans, masz prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 1-800-482-8010 (TTY: 711)

### RUSSIAN

Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Chorus Community Health Plans то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 1-800-482-8010 (TTY: 711)

### SOMALI

Haddii adiga iyo qof aad caawinaysaa su'aalo qabaan ku saabsan Chorus Community Health Plans, waxaad leedahay xaqaa aad caawimo ku hesho iyo macluumaadka luqaddaada iyaddoon kharash kugu fadhiiyin. Lahadal turjubaan wac 1-800-482-8010 (TTY: 711)

### SPANISH

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Chorus Community Health Plans tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 1-800-482-8010 (TTY: 711)

### TAGALOG

Kung ikaw, o ang iyong tinutulungan, ay may mga katanungan tungkol sa Chorus Community Health Plans, may karapatan ka na makakuha nga tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa 1-800-482-8010 (TTY: 711)

### VIETNAMESE

Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Chorus Community Health Plans quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 1-800-482-8010 (TTY: 711)

# Auxiliary Aids and Services

Chorus Community Health Plans (CCHP) provides free aids and services to people with disabilities to communicate effectively with us, including qualified interpreters (including sign language) and written information in other languages and formats (large print, audio, accessible electronic formats, other formats). To request, call CCHP at (414) 266-3490.

## ATTENTION

If you speak English, language assistance services are available to you free of charge. Call 1-800-482-8010 (TTY: 7-1-1).

## CEE B TOOM

Yog koj hais lus Hmoob, kev pab rau lwm yam lus muaj rau koj dawb xwb 1-800-482-8010 (TTY: 7-1-1).

## DIGTOONI

Haddii aad ku hadasho afka Soomaaliha, adeegyada caawimada luqadda waxaa lagu heli karaa iyagoo bilaash ah. Wac 1-800-482-8010 (TTY: 7-1-1).

## ໝາຍເຫດ

ຖ້າທ່ານເວົ້າພາສາລາວ, ທ່ານສາມາດໃຊ້ ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໄດ້ໂດຍ ບໍ່ເສຍຄ່າ. ໂທ 1-800-482-8010 (TTY: 7-1-1).

## ATENCIÓN

Si habla español, los servicios de asistencia de idiomas están disponibles sin cargo, llame al 1-800-482-8010 (TTY: 7-1-1).

## 注意

如果您说中文，您可获得免费的语言协助服务。请致电 1-800-482-8010 (TTY: 7-1-1)

## ВНИМАНИЕ

Если Вы говорите по-русски, Вам будут бесплатно предоставлены услуги переводчика. Позвоните по номеру: 1-800-482-8010 (TTY: 7-1-1).

ကျေးဇူးပြု၍ နားဆင်ပါ သင်သည် မြန်မာစကားပြောသူဖြစ်ပါက၊ သင့်အတွက် အခမဲ့ဖြင့် ဘာသာစကားကူညီရေး ဝန်ဆောင်မှုများ ရရှိနိုင်သည်။ 1-800-482-8010 (TTY: 7-1-1) တွင် ဖုန်းခေါ်ဆိုပါ။