

Notice of Availability

English: Free interpretation services are available to you. Additional services and resources necessary to provide information on accessible formats are also available at no cost. Call 1-877-492-5189 (TTY: 711) or speak with your healthcare provider.

Spanish: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-877-492-5189 (TTY: 711) o hable con su proveedor.

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-877-492-5189 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

Vietnamese: LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-877-492-5189 (Người khuyết tật: 711), hoặc trao đổi với người cung cấp dịch vụ của bạn."

Amharic: ማሳሰቢያ፡- አማርኛ የሚናገሩ ከሆነ፣ የቋንቋ ድጋፍ አገልግሎት በነፃ ይቀርብልዎታል። መረጃን በተደራሽ ቅርጸት ለማቅረብ ተገቢ የሆኑ ተጨማሪ አገዛዎች እና አገልግሎቶች እንዲሁ በነፃ ይገኛሉ። በስልክ ቁጥር 1-877-492-5189 (TTY: 711) ይደውሉ ወይም አገልግሎት አቅራቢዎን ያነጻጽሩ።

Oromo: HUBADHAA: Yoo afaan Oromoo dubbattu ta'e, tajaajilli gargaarsa afaanii bilisaa siniif ni argama. Gargaarsi gargaaraa fi tajaajilli sirrii ta'ee fi odeeffannoo bifa dhaqqabamaa ta'een kennuunis bilisaan ni argama. Bilbilaa 1-877-492-5189 (TTY: 711) yookiin dhiyeessaa kee waliin haasa'aa.

Arabic:

نبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم (711) 1-877-492-5189 أو تحدث إلى مقدم الخدمة.

French: ATTENTION: Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-877-492-5189 (TTY: 711) ou parlez à votre fournisseur.

Karen: ဆို- နမ့်ကတိတိ တာနီလီဖုန်းအံ့၊ အသိ၊ တာအိန်ဒီး ကျိတ်တိဆိန်ထွဲမာစါလီ လာတလတ် ဘျှန်လတ်စွဲလောနီဂီလီလီ. တာအိန်ဒီး တာမာစါတာနီဟူဝီးလီဒီး တာမာစါတာမာ လာအ ကြီးအဘဉ် လာကဟ့ဉ်တာဂိုတာကျိလီ လာတာမာနီအီသုတဖဉ် လာတလတ်ဘျှန်လတ်စွဲလောနီဂီလီလီ. ကိး 1-877-492-5189 (TTY: 711) မ့တမ့ ကတိတိတာနီ နပုလောဟ့ဉ် နတိကွဲထွဲမာစါတက့ဉ်.

Simplified Chinese: 注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 1-877-492-5189 (文本电话：711) 或咨询您的服务提供商。

Swahili: MAKINIKA: Ikiwa wewe huzungumza Kiswahili, msaada na huduma za lugha bila malipo unapatikana kwako. Vifaa vya usaidizi vinavyofaa na huduma bila malipo ili kutoa taarifa katika mifumo inayofikiwa pia inapatikana bila malipo. Piga simu 1-877-492-5189 (TTY: 711) au zungumza na mtoa huduma wako.

Nepali: सावधान: यदि तपाईं नेपाली भाषा बोल्नुहुन्छ भने तपाईंका लागि निःशुल्क भाषिक सहायता सेवाहरू उपलब्ध छन्। पहुँचयोग्य ढाँचाहरूमा जानकारी प्रदान गर्न उपयुक्त सहायता र सेवाहरू पनि निःशुल्क उपलब्ध छन्। 1-877-492-5189 (TTY: 711) मा फोन गर्नुहोस् वा आफ्नो प्रदायकसँग कुरा गर्नुहोस्।

Tagalog: PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-877-492-5189 (TTY: 711) o makipag-usap sa iyong provider.

Yoruba: ÀKÍYÈSÌ: Tí ó bá lè sọ èdè Yorùbá, àwọn ètò ìrànlọwọ́ èdè wà lófẹ́ẹ́ fún ọ. A ó tún pèsè àwọn ohun èlò ìrànlọwọ́ àti àwọn isẹ́ tó bá yẹ láti pèsè isọfúnni nípa àwọn ọ̀nà tí ó rọ̀rùn láti lóye lófẹ́ẹ́. Pe 1-877-492-5189 (TTY: 711) tàbí kí o bá olùpèsè rè sọrọ̀.

Russian: ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-877-492-5189 (TTY: 711) или обратитесь к своему поставщику услуг.

Ukrainian: УВАГА: Якщо ви розмовляєте українською мовою, вам доступні безкоштовні мовні послуги. Відповідні допоміжні засоби та послуги для надання інформації у доступних форматах також доступні безкоштовно. Зателефонуйте за номером 1-877-492-5189 (TTY:711) або зверніться до свого постачальника».

Large print – If you require materials in large print, please call: 1-877-492-5189 (TTY: 711).

Notice of Nondiscrimination

Discrimination is against the law. Sanford Health complies with applicable federal civil rights laws and does not discriminate, exclude or treat people differently on the basis of race, color, national origin, religion, pregnancy and related conditions, sex (including sexual orientation, gender identity, sex stereotypes, sex characteristics and intersex traits), age, disability, health status, marital status, arrest or conviction record or military participation in the administration of the plan, including enrollment and benefit determinations.

Sanford Health:

- 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 these services, please contact Member Services at 1-877-492-5189 (TTY: 711)

If you believe that Sanford Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, religion, pregnancy and related conditions, sex (including sexual orientation, gender identity, sex stereotypes, sex characteristics and intersex traits), age, disability, health status, marital status, arrest or conviction record or military participation, you can file a grievance with the Section 504 Coordinator at:

Mailing Address: Section 504 Coordinator, 2301 E. 60th Street, Sioux Falls, SD 57103

Telephone Number: (877) 473-0911 (TTY 711)

Fax: (605) 312-9886

Email: shpcompliance@sanfordhealth.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Section 504 Coordinator 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, DC 20201

Phone: 1-800-368-1019 (TDD 800-537-7697)

More information is available at <http://www.hhs.gov/ocr/index.html>.