

Basic Blue® Rx (PDP)

A Medicare Prescription Drug Plan

NOTICE OF RIGHTS NONDISCRIMINATION AND ACCESSIBILITY

Basic Blue® Rx (PDP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Basic Blue Rx does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Basic Blue Rx:

- 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 call our pre-enrollment call center at **1-888-575-7519**, daily, 8:00 a.m. to 8:00 p.m. local time (TTY: **711**).

If you believe that Basic Blue Rx 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 in writing to:

Basic Blue Rx Privacy
3400 Yankee Drive, R337
Eagan, MN 55121

You can file a grievance by mail. If you need help filing a grievance, Basic Blue Rx Privacy is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, through one of the following methods:

Electronically through the Office of Civil Rights Complaint Portal	https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf
By Mail	U.S. Department of Health and Human Services 200 Independence Avenue SW Room 509F, HHH Building Washington, DC 20201
By Phone	1-800-368-1019 800-537-7697 (TDD)

Mil Life Insurance, Inc. is the underwriter for Basic Blue Rx, a prescription drug plan with a Medicare contract. Enrollment in Basic Blue Rx depends on contract renewal. Mil Life Insurance, Inc. and each Blue Cross® and/or Blue Shield® plan are independent licensees of the Blue Cross® and Blue Shield® Association.

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-575-7519 (TTY: 711).

Chinese: 注意：如果您使用普通话，您可以免费获得语言援助服务。请致电 1-888-575-7519 (TTY: 711)。

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-575-7519 (TTY: 711).

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-575-7519 (TTY: 711).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-575-7519 (TTY: 711) 번으로 전화해 주십시오.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните по телефону 1-888-575-7519 (телетайп: 711).

Arabic:

ملحوظة: إذا كنت تتحدث العربية فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-888-575-7519 (رقم هاتف الصم والبكم: 711).

Italian: ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-888-575-7519 (TTY: 711).

French: ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-575-7519 (TTY: 711).

Haitian-Creole: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou w. Rele nan 1-888-575-7519 (ATS: 711).

Yiddish:

אויפֿמערקזאַם: אויב איר רעדט ייִדיש, עס זײַנען פֿאַראַן פֿאַר אײַך שפּראַך הילף באַדינען פֿרײַ פֿון אָפּצאַל. אַנקלינגט 1-888-575-7519 (TTY: 711).

Polish: UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-888-575-7519 (TTY: 711).

Cantonese: 注意：如果您使用粵語，您可以免費獲得語言援助服務。請致電 1-888-575-7519 (TTY: 711)。

Armenian: Ուշադրութիւն: Եթե խոսում եք հայերէն, ապա կարող եք օգտվել անվճար թարգմանչական ծառայություններից: Զանգահարեք 1-888-575-7519 (TTY (հեռատիպ)՝ 711) հեռախոսահամարով:

Mandarin: 注意：如果您使用普通话，您可以免费获得语言援助服务。请致电 1-888-575-7519 (TTY: 711)。