

## NONDISCRIMINATION NOTICE

Discrimination is against the law. Health Net Dental follows State and Federal civil rights laws. Health Net Dental does not unlawfully discriminate, exclude people, or treat them differently on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

Health Net Dental provides:

- Free aids and services to people with disabilities to help them communicate better, 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 primary language is not English, such as:
  - ✓ Qualified interpreters
  - ✓ Information written in other languages

If you need these services, contact Health Net Dental between Monday-Friday 8am-5pm by calling 1-800-977-7307. Or, if you cannot hear or speak well, please call TTY: 711.

### HOW TO FILE A GRIEVANCE

If you believe that Health Net Dental has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with Health Net of California, Inc. Appeals & Grievances. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact Health Net of California, Inc. Appeals & Grievances between Monday-Friday 8am-5pm by calling 1-800-977-7307. Or, if you cannot hear or speak well, please call TTY: 711.
- In writing: Fill out a complaint form or write a letter and send it to:

Health Net of California, Inc. Appeals & Grievances  
PO Box 10348, Van Nuys, CA 91410-0348

- In person: Visit your doctor's office or Health Net Dental and say you want to file a grievance.
- Electronically: Visit Health Net Dental's website at [https://www.healthnet.com/portal/member/content/iwc/hndental/hn\\_dental.action](https://www.healthnet.com/portal/member/content/iwc/hndental/hn_dental.action).

#### OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711 (Telecommunications Relay Service)**.
- In writing: Fill out a complaint form or send a letter to:

Michele Villados  
Deputy Director, Office of Civil Rights  
Department of Health Care Services  
Office of Civil Rights  
P.O. Box 997413, MS 0009  
Sacramento, CA 95899-7413

Complaint forms are available at [http://www.dhcs.ca.gov/Pages/Language\\_Access.aspx](http://www.dhcs.ca.gov/Pages/Language_Access.aspx).

- Electronically: Send an email to [CivilRights@dhcs.ca.gov](mailto:CivilRights@dhcs.ca.gov).

#### OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability, or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, by phone, in writing, or electronically:

- By phone: Call 1-800-368-1019. If you cannot speak or hear well, please call TTY/TDD 1-800-537-7697.
- In writing: Fill out a complaint form or send a letter to:

U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Room 509F, HHH Building  
Washington, DC 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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