

## Discrimination is Against the Law

MDwise complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. MDwise does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

### MDwise

- 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, contact **1-800-356-1204**.  
TDD/TTY: **1-800-743-3333** or **711**

If you believe that MDwise 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 with:

Phone: **1-800-356-1204**  
Email: [compliance@mdwise.org](mailto:compliance@mdwise.org)

MDwise Hoosier Healthwise  
P.O. Box 441423  
Indianapolis, IN 46244-1423

Hoosier Healthwise Fax:  
**1-877-822-7190**

MDwise Healthy Indiana Plan  
P.O. Box 44236  
Indianapolis, IN 46244-0236

Healthy Indiana Plan Fax:  
**1-877-822-7192**

MDwise Hoosier Care Connect  
P.O. Box 44214  
Indianapolis, IN 46244-0214

Hoosier Care Connect Fax:  
**1-877-822-7188**

You can file grievance in person or by mail, fax or email. If you need help filing a grievance, please contact member services.

**1-800-356-1204**

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, D.C. 20201

**1-800-368-1019**  
TDD/TTY: **1-800-537-7697**

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