

## NOTICE OF NON-DISCRIMINATION

**SelectHealth from VNS Health (“SelectHealth”)**, complies with Federal civil rights laws. **SelectHealth** does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (as defined in 45 CFR § 92.101(a)(2)).

**SelectHealth** provides the following:

- Free aids and services to people with disabilities to help you communicate with us, 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 first language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, call **SelectHealth** at 1-866-469-7774. For TTY/TDD services, call 711.

If you believe that **SelectHealth** has not given you these services or treated you differently because of race, color, national origin, age, disability, or sex, you can file a grievance with Estelle Masiello, Director, Regulatory Affairs & Deputy Privacy Officer by:

- Mail: VNS Health  
Health Plan Compliance  
220 East 42nd Street, New York, NY 10017
- Phone: 1-888-634-1558 (for TTY/TDD services, call 711)
- Fax: 1-646-459-7729
- In person: Call the number above to schedule an appointment.
- Email: [CivilRightsCoordinator@vnshealth.org](mailto:CivilRightsCoordinator@vnshealth.org)

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by:

- Web: Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
- Mail: 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>
- Phone: 1-800-368-1019 (TTY/TDD 800-537-7697)

This notice is available at SelectHealth’s website: [SelectHealthNY.org](http://SelectHealthNY.org).