# **Privacy Complaint Form**



An Independent Licensee of the Blue Cross and Blue Shield Association

## Purpose: Use this form to file a privacy complaint.

You can complain about our privacy practices. You can also complain if you think we did not follow:

- Our Notice of Privacy Practices
- Our Privacy Policies, or
- Federal Privacy rules.

We will look into your complaint. We will answer you in writing. Your complaint will not change your rights under the law. A complaint will not affect your coverage with us, your benefits, or claims.

If you have questions or need help, call our Privacy Office at (602) 864-2255. You can also file a complaint with the United States Department of Health and Human Services.

| Member Information  |                        |            |          |  |
|---|------------------------|------------|----------|--|
| Name  | Date of Birth          |            |          |  |
| Address   |                        |            |          |  |
| City  |                        |            | Zip Code |  |
| Phone #   | Email                  | BCBSAZ ID# |          |  |
| If you are not the member, fill this out                          |                        |            |          |  |
|   | Relationship to Member |            |          |  |
| Phone #   | Email                  |            |          |  |
|   |                        |            |          |  |
| What is your Complaint?   |                        |            |          |  |
| Tell us what your complaint is. Include dates, names and details. |                        |            |          |  |
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| Tell us what you want us to do about your complaint: |                  |  |  |
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|  | <u>Signature</u> |  |  |
| Requestor's Signature                                | Date             |  |  |

### YOU CAN GET A COPY OF THIS COMPLAINT

Please send the completed form to us. You can mail it to: BCBSAZ Privacy Office, Mail Stop C300, P.O. Box 13466, Phoenix AZ 85002-3466. Email it to: <a href="mailto:privacy@azblue.com">privacy@azblue.com</a> or Fax it to (602) 544-5661.

For questions about completing this form, call 602-864-2255 or 800-232-2345 Extension 2255 or email privacy@azblue.com.

### **Notice of Non-Discrimination**

Blue Cross Blue Shield of Arizona (BCBSAZ) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BCBSAZ provides appropriate free aids and services, such as qualified interpreters and written information in other formats, to people with disabilities to communicate effectively with us. BCBSAZ also provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, call 602-864-4884 for Spanish and 877-475-4799 for all other languages and other aids and services.

If you believe that BCBSAZ 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: BCBSAZ's Civil Rights Coordinator, Attn: Civil Rights Coordinator, Blue Cross Blue Shield of Arizona, P.O. Box 13466, Phoenix, AZ 85002-3466, 602-864-2288, TTY/TDD 602-864-4823, crc@azblue.com. You can file a grievance in person or by mail or email. If you need help filing a grievance BCBSAZ's Civil Rights 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, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

## **Multi-language Interpreter Services**

Spanish: Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Blue Cross Blue Shield of Arizona, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 602-864-4884.

Navajo: Díí kwe'é atah nílínigíí Blue Cross Blue Shield of Arizona haada yit'éego bína'ídíłkidgo éí doodago Háida bíjá anilyeedígíí t'áadoo le'é yína'ídíłkidgo beehaz'áanii hólo díí t'áá hazaadk'ehjí háká a'doowołgo bee haz'ą doo bąąh ílínígóó. Ata' halne'ígíí koji' bich'j' hodíilnih 877-475-4799.

Chinese: 如果您,或是您正在協助的對象,有關於插入項目的名稱 Blue Cross Blue Shield of Arizona 方面的問題,您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員,請撥電話 在此插入數字 877-475-4799。

Vietnamese: Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Blue Cross Blue Shield of Arizona quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 877-475-4799.

#### Arabic:

إن كان لديك أو لدى شخص تساعده أسئلة بخصوص Blue Cross Blue Shield of Arizona، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون اية تكلفة .للتحدث مع مترجم اتصل ب. 479-475-877

Tagalog: Kung ikaw, o ang iyong tinutulangan, ay may mga katanungan tungkol sa Blue Cross Blue Shield of Arizona, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa 877-475-4799.

Korean: 만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Blue Cross Blue Shield of Arizona 에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 877-475-4799 로 전화하십시오.

French: Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Blue Cross Blue Shield of Arizona, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 877-475-4799.

German: Falls Sie oder jemand, dem Sie helfen, Fragen zum Blue Cross Blue Shield of Arizona haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 877-475-4799 an.

Russian: Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Blue Cross Blue Shield of Arizona, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 877-475-4799.

Japanese: ご本人様、またはお客様の身の回りの方でも、Blue Cross Blue Shield of Arizona についてご質問が ございましたら、ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はか かりません。通訳とお話される場合、877-475-4799 までお電話ください。

#### Farsi

اگر شما، یا کسی که شما به او کمک میکنید ، سوال در مورد Blue Cross Blue Shield of Arizona ، داشته باشید حق این را دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید 4799-475-877 [تماس حاصل نمایید.

### Assyrian:

٤, ٤ﺳﻪﻩ، ﺑﺮ ﺳﺒﺮ ﻗﻐړﻭﻗﺎ ﺟﻪﻧﻨﻪﺧﻪﻭﻩﻣ ﻋﻤﻪﺭ، ٤ﻳﻤﻜﻪﻣﻮﺭ ﺗﻪﺗﻘﺎ ﺗﻪﻣ Blue Cross Blue Shield of Arizona؛ ﺑﻮﺗﯩﻜﯩﻤﻪﺭ ﻣﯩﻠﻪﻣﺎ، ﺳﻤﻪﺭ, ﺩﻳﻤﻜﻪﻣﻮﺭ ﺑﻪﺗﯩﻜﯩﻤﻪﺭ ﺗﻪﺗﯩﻜﯩﻤﻪﺭ. ﺑﻪﻧﺪﯨﺪﻩﺭ ﺗﻪﺗﯩﻜﯩﻜﻪﺭ ﺗﻪﺗﯩﻜﯩﻜﻪﺭ ﺗﻪﺗﯩﻜﯩﻜﻪﺭ ﺗﻪﺗﯩﻜﯩﻜﻪﺭ ﺗﻪﺗﯩﻜﯩﻜﻪﺭ. ﺗﻪﺗﯩﻜﯩﻜﻪﺭ ﺗﻪﺗﯩﻜﯩﻜﻪﺭ.

Serbo-Croatian: Ukoliko Vi ili neko kome Vi pomažete ima pitanje o Blue Cross Blue Shield of Arizona, imate pravo da besplatno dobijete pomoć i informacije na Vašem jeziku. Da biste razgovarali sa prevodiocem, nazovite 877-475-4799.

Thai: หากคณ หรอคนทคณกาลงชวยเหลอมคาถามเกยวกบ Blue Cross Blue Shield of Arizona คณมสทธทจะไดรบความชวยเหลอและขอมลในภาษา ของคณไดโดยไมมคาใชจาย พดคยกบลาม โทร 877-475-4799