

Capital Health Plan Advantage Plus (HMO)
Capital Health Plan Preferred Advantage (HMO)
Capital Health Plan Retiree Advantage (HMO)
Nondiscrimination and Accessibility Notice (ACA §1557)

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

Provider Directory

If you need these services, contact Member Services at one of the numbers listed below. If you believe that Capital Health Plan 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:

This directory provides a list of Capital Health Plan Silver Advantage, Advantage Plus, Preferred Advantage and Retiree Advantage network providers.
 2140 Centerville Place
 Tallahassee, FL 32308

This directory is for Capital Health Plan's service area, which includes Calhoun, Franklin, Gadsden, Jefferson, Leon, Liberty, and Wakulla counties in the state of Florida. Phone: Member Services 850-383-3311, 1-877-247-6512, TTY 850-383-3534 or 1-877-870-8943, Fax: 850-523-7419, Email: memberservices@chp.org. Medicare members or prospective members call 850-523-7441 or 1-877-247-6512 (TTY 850-383-3534 or 1-877-870-8943) 8:00 a.m. - 8:00 p.m., seven days a week, October 1 - March 31; 8:00 a.m. - 8:00 p.m., Monday - Friday, April 1 - September 30. State of Florida members call 1-877-392-1532, 7:00 a.m. - 7:00 p.m. You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, our Member Services Department 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: Capital Health Plan Silver Advantage, Advantage Plus, Preferred Advantage and Retiree Advantage are HMO plans with a Medicare contract. Enrollment in Capital Health Plan Silver Advantage, Advantage Plus, Preferred Advantage and Retiree Advantage depends on contract renewal.
 Room 509F, HHH Building
 Washington, DC 20201

This document may be available in other formats such as Braille or large print. For additional information, call Member Services at the phone numbers listed above. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

The provider network may change at any time. You will receive notice when necessary.

Have a disability? Speak a language other than English? Call to get help for free.
 1-877-247-6512, TTY/TDD 850-383-3534 or 1-877-870-8943

Vous souffrez d'un handicap ? Vous parlez une autre langue que l'anglais ? Appelez pour obtenir une aide gratuite. 1 877 247 6512, Télécscripteur/ATME 850 383 3534 ou 1 877 870 8943

Hai una disabilità? Non parli inglese? Chiama uno di questi numeri per chiedere assistenza gratuita:
 1-877-247-6512, TTY/TDD 850-383-3534 o 1-877-870-8943

هل تعاني من إعاقة؟ هل تتحدث لغة غير اللغة الإنجليزية؟ اتصل للحصول على المساعدة المجانية.
 أو 1-877-247-6512، جهاز الاتصال الهاتفي للصم/الهااتف النصي، (TDD/TTY) 850-383-3534، 1-877-870-8943

Haben Sie eine Behinderung? Möchten Sie mit uns in einer anderen Sprache als Englisch kommunizieren?
 Rufen Sie an, um kostenlos Unterstützung zu erhalten. 1-877-247-6512, TTY/TDD 850-383-3534 oder 1-877-870-8943

Sectic

**What is the service
 Silver Advantage
 Advantage**