

PULSE

MISSION MOMENTS: "KEEP CARL ALIVE:"

An IEHP Member's
Inspiring Recovery ▶

AVOID THE FLU:

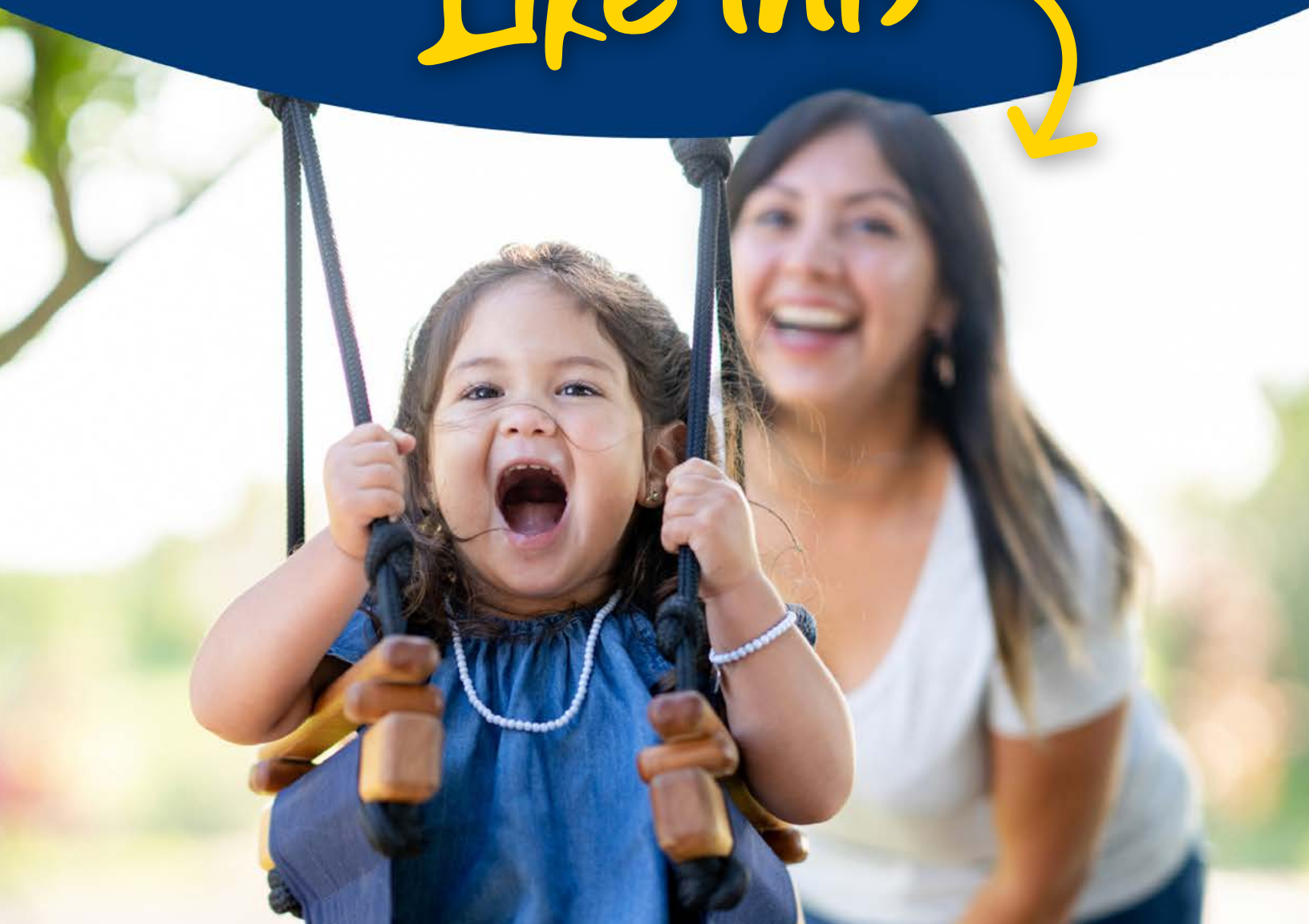
It's Worth A Shot

READY TO QUIT SMOKING?

We Can Help

For More **MOMENTS**

Like this




**Schedule a
well-child visit**

IE  **HP**

IEHP kids.org

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All IEHP Members



**Our Mission Moments:
"Keep Carl Alive"**

When Carl D.'s illness took a turn for the worse, one huge goal fueled his difficult recovery: To be there for his children's future.

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Get Care When You Need It!

IEHP's 24-Hour Nurse Advice Line
1-888-244-IEHP (4347)
TTY: 711



Connect to Free Local Resources

ConnectIE is a FREE one-stop website where you can find low-cost and no-cost community resources you might need, like:



- Food pantries
- Rental assistance
- Transportation
- Education
- Job training
- Health care
- And much more!

OUR MISSION MOMENTS

"Keep Carl Alive"



When Carl D.'s illness took a turn for the worse, one huge goal fueled his difficult recovery: To be there for his children's futures.

In 2013, the normally active, happy and smiling Carl D. became tired. All the time.

Diagnosed with diabetes, Carl took steps to manage the chronic disease. But a year later, something was still wrong.

Blood tests confirmed it. Carl had Stage 4 lymphoma. Cancer.

Carl was admitted to the hospital right away, where he stayed for six months. After getting an infection, he spent four and a half months at Loma Linda Medical Center.

"I was terrified," said Carl, who owns and operates his own marketing business in San Bernardino. "So, I prayed. God told me I was going to be alright."

Carl experienced many ups and downs during his intense treatment, including a medically induced coma. With his immune system so weak, visitors were required to "gown up" with personal protective equipment (PPE) so Carl wouldn't get any sicker.

Carl's children rarely left their dad's side. His daughters, Shiane and Shalia, even did their homework while sitting on his hospital bed. At just 20 and 13 during that time, neither young woman was ready for marriage. But their father still worried about the future and thought, "I want to live so I can be in my kids' lives. Who's going to walk my daughters down the aisle?"



"Because my doctors and IEHP took care of everything I needed to get well."

Carl D., IEHP member

And that became a huge goal for Carl's recovery: To be there for his children's futures.

Sadly, while still in the hospital, Carl's adult son, Allen, was killed.

"I never felt so much pain in my life," said Carl, who left the hospital for one day to attend the funeral.

With a team of providers from Loma Linda University Medical Center and La Salle Medical Associates, along with support and services from Inland Empire Health Plan (IEHP), Carl eventually recovered. During his doctors' visits, he would remind them to focus on one goal: "Keep Carl Alive."

Carl – who turned 65 in July and happily chose IEHP DualChoice as his health insurance plan – says he feels IEHP truly cares about him. "Whenever I call, they always take care of me."

Things came full circle last November when Carl's hospital wish came true. "I got to walk my younger daughter down the aisle and give her away," Carl said. "Because my doctors and IEHP took care of everything I needed to get well. Everything."

Scan the QR code to watch IEHP's empowering video interview with Carl D.
Warning: You better bring a box of tissues for this one.



MEMBER FORMULARY:

Is Your Medicine Covered?

A formulary is a list of covered drugs for your health plan. The drugs on this list are selected by the plan with the help of a team of doctors and pharmacists. The drugs on this list tell you if there are any rules you need to follow to get your drugs.

Note: The drug lists may change year-round

WHAT IF YOUR DRUG IS NOT COVERED?

Call your doctor's office and ask for help. Your doctor may:

- Change your drug to one that is covered.
- Decide that your drug is “medically necessary” and fill out a Prior Authorization (PA) form.
- If a PA is needed, your doctor will send the proper forms to your pharmacy.

To learn more, see your Member Handbook or call IEHP Member Services. The number is on your member card.

IEHP DUALCHOICE (HMO D-SNP) MEMBERS:

- ▶ Call IEHP DualChoice Member Services at 1-877-273-IEHP (4347). TTY users should call 1-800-718-4347.
- ▶ Visit IEHP's website at www.iehp.org.

IEHP COVERED MEMBERS:

- ▶ Call IEHP Member Services at 1-855-433-IEHP (4347). TTY users should call 711.
- ▶ Visit IEHP's website at www.iehp.org.

IEHP MEDI-CAL MEMBERS:

Refer to Medi-Cal Rx Contract Drug list. To find out if a drug is on the Medi-Cal Rx Contract Drug List or to get a copy of it:

- ▶ Call Medi-Cal Rx at 1-800-977-2273. Press 7 for TTY.
- ▶ Visit Medi-Cal Rx online at www.Medi-CalRx.dhcs.ca.gov/home/.

IEHP & HEALTHY HEART NATION:

Health Disparities in the Black Community



Studies show African Americans have a higher risk of high blood pressure and diabetes than other ethnic groups in the United States. To help raise awareness about these health disparities in the Inland Empire and how to overcome them, IEHP has teamed up with Healthy Heart Nation (HHN). HHN seeks to reduce health and other disparities in African American communities here in the Inland Empire and across the nation.

IEHP has produced 10 new preventive care videos for HHN to share at local barbershops,

beauty salons and churches. These talk show-style videos provide health education, preventive care tips and wellness empowerment messages that can help save lives.

Visit IEHP's YouTube channel or scan the QR to watch. Please be sure to like and share the videos, and don't forget to subscribe to our channel. Learn more about Healthy Heart Nation and how to support their mission at www.myhhn.org.



YOUR Health MATTERS

Not your immigration status.

Get no cost health care



AVOID THE FLU

*It's worth
a shot*



It's flu season again. Time to get your annual flu shot. As an IEHP member, you can get a FREE flu shot every year.

WHO SHOULD GET THE FLU SHOT?

Almost everyone 6 months old and older should get the flu shot. For people at higher risk for flu complications, the vaccine is vital.

This includes members who are:

- 65 years old or older
- Pregnant
- Residents of nursing homes and long-term care facilities
- Children, 6 months or older

Remember, it takes up to two weeks after getting the flu shot to be protected from the flu.

WHERE CAN I GET A FREE FLU SHOT?

Children must visit their IEHP doctor for their free flu shot. Adults can go to either their

doctor or a network pharmacy like CVS or Walgreens. Just be sure to call first. If you get a flu shot somewhere else, like work or a clinic, please let your doctor know so your record can be updated.

WHY SHOULD I GET THE FLU SHOT?

While it can't prevent the flu 100% of the time, the vaccine can lower your risk of getting the flu and spreading it to others. Plus, if you do end up getting the flu, the vaccine has proven to lower the risk of severe flu illness that can lead to hospital stays or even death.

WHAT IF I GET THE FLU AND CAN'T REACH MY DOCTOR?

Call the IEHP 24-Hour Nurse Advice Line at 1-888-244-IEHP (4347) or 711 for TTY users. Our nurses can connect you with a board-certified doctor by phone or virtual visit via video chat, if needed.

4 FLU SHOT MYTHS

1 I CAN GET THE FLU FROM THE FLU SHOT.

False. The flu shot is made from a virus that is not active, so it doesn't cause infection.

2 I'M HEALTHY. I DON'T NEED THE FLU SHOT.

False. Even healthy people can get sick, so the great thing about the flu shot is that it lowers your chances of getting sick.

3 I GOT A FLU SHOT LAST YEAR. I DON'T NEED A SHOT THIS YEAR.

False. The flu virus changes every year and so does the flu shot. You need a flu shot every year to fight this year's flu.

4 I GOT THE COVID-19 VACCINE, SO I CAN'T GET THE FLU VACCINE.

False. These are two very different viruses, and so are the vaccines used to help prevent them. The Centers for Disease Control and Prevention (CDC) recommends getting both vaccines to help maintain optimal health. Plus, if you want to save a trip, you can get the flu vaccine and the COVID-19 vaccine or booster at the same time.



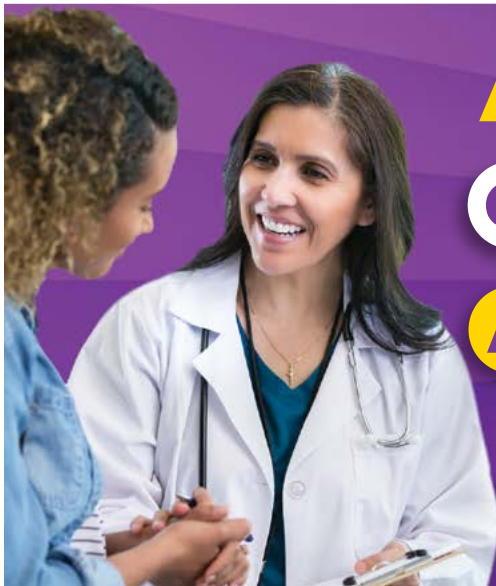
ASK THE DOCTOR



My kids are young and healthy. Do they really need a flu shot?



Yes. The CDC recommends a flu shot for all children 6 months old and older. A flu shot not only protects your child against getting the flu, but it also reduces the risk of flu illness complications that can lead to hospital stays and even death. Research shows this is true for both children who are healthy and those with an underlying illness.



GET NEEDED CARE

For IEHP Medi-Cal Members



Pharmacy Customer Service

To ask about prescription drug coverage & more, call **1-800-977-2273**.
24 hours, 7 days a week



IEHP 24-Hour Nurse Advice Line

1-888-244-IEHP (4347)
TTY 711
7 days a week,
including holidays



Medi-Cal Dental Program

Call the Beneficiary
Telephone Service Center
1-800-322-6384
TTY 711
Monday-Friday, 8am-5pm



IEHP Member Services

1-800-440-IEHP (4347)
TTY **1-800-718-4347**
Monday-Friday, 7am-7pm,
Saturday-Sunday, 8am-5pm



**To browse
our plan,
scan here:**





READY TO QUIT TOBACCO?

We can help

If you're ready to quit using tobacco products, having a solid plan helps. Here are four ways to increase your chances of success.

1 TRY NICOTINE REPLACEMENT THERAPY (NRT)

How does it work? Medicine in patches, gums, lozenges or sprays is used to “replace” the nicotine your body craves. Many studies have shown that NRT can nearly double your chances of quitting. Other medicines may also help you quit. Talk to your doctor to decide what's best for you.

2 GET SUPPORT FROM YOUR DOCTOR OR PHARMACIST

They can help with any prescriptions you need (like quit-smoking medicine). They may also offer a quitting program or other helpful resources.

3 ENROLL IN A COUNSELING PROGRAM

The “Kick it California” program can help you quit by phone or text. Paired with an expert, you build a quit plan together. Along the way,

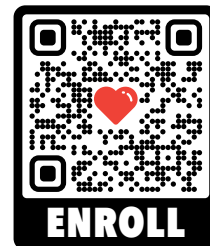
your counselor checks in on you and helps you stick with the plan. To get started, visit www.kickitca.org or call 1-800-300-8086.

4 ASK FAMILY, FRIENDS AND COWORKERS FOR HELP

Support from friends and loved ones can help increase your chances of quitting tobacco products for good. Share your quitting goals with your circle of support, and celebrate each goal you reach.

5 ATTEND IEHP'S NEW "QUITTING TOBACCO" CLASS

Scan the QR code to enroll or visit www.iehp.org and search Community Events.



For people who smoke, a lung cancer screening can save your life. This simple screening, which only takes a few minutes, can detect cancer early so you can get treatment. If you're a smoker between 50 and 80 years old (or if you quit in the last 15 years), talk to your doctor about lung cancer screening.



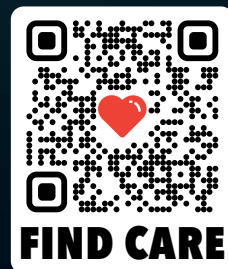
Mental HEALTH AND WELLNESS WITH IEHP

At IEHP, we value your mental health as much as we do your physical health. We share the World Health Organization's belief that "Mental health is an integral component of health and well-being, and underpins our abilities to make decisions, build relationships and shape the world we live in."

THREE WAYS TO FIND CARE

- 1. See your doctor:** If you're having a behavioral or mental health challenge, schedule a visit with your doctor.
- 2. Call IEHP Member Services at 1-800-440-IEHP (4347),** Monday–Friday, 7 a.m. – 7 p.m., and Saturday–Sunday, 8 a.m. – 5 p.m. TTY users should call 1-800-718-4347. Ask to speak to the Behavioral Health Department.

- 3. Visit IEHP's Mental Health and Wellness page:** Scan the QR code or visit www.iehp.org and search "Mental Health".



MENTAL HEALTH RIGHTS

When it comes to mental health services, you have rights as a patient to:

- Be treated with respect and dignity.
- Have your privacy protected.
- Understand treatment options and alternatives.
- Receive services appropriate for your age and culture.
- Get care that does not discriminate based on your age, gender, race, religion, sexual orientation or type of illness.

A health plan that fits *you*

From Nov. 1 to Dec. 31, 2024, recipients of DACA (Deferred Action for Childhood Arrivals) can sign up for a health plan during the open enrollment period. Select the "gained lawful presence" option from the list in the special-enrollment period section when you apply.

We're ready to talk, Monday-Friday, 8 a.m.-6 p.m. Call 1-855-538-IEHP (4347)

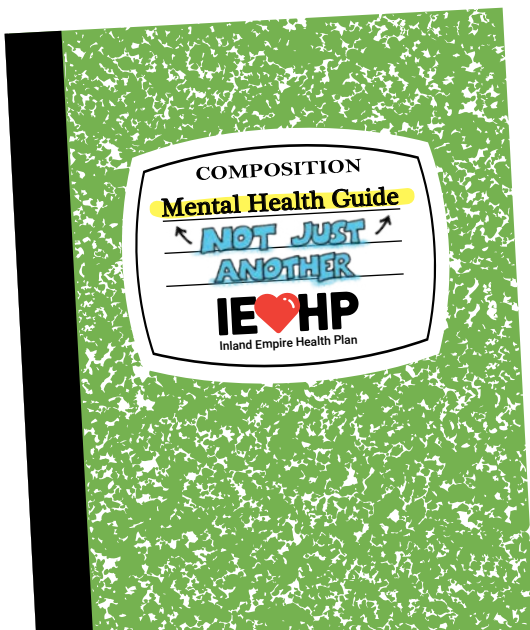
Open Enrollment
Nov. 1, 2024 to Jan. 31, 2025



TEEN MENTAL HEALTH GUIDE



Talking to your teen about feelings, let alone behavioral health, can be hard. That's why IEHP created our Teen Mental Health Guide. This award-winning guide shares facts, tips and resources to help answer questions you and your teen might have about mental health. Download a PDF copy or visit www.iehp.org and search Teen Health.



NEW MEMBERS:

Set Up Your First Visit with Your Doctor

If you're a new member, please schedule an Initial Health Appointment (IHA) with your new doctor right away, even if you're not feeling sick.

The purpose of your IHA is to help your doctor learn your health care history and needs.

During your visit, your doctor may:

- Ask you questions about your health history.
- Ask you to complete a health survey.
- Talk about health education counseling and classes.
- And more...

It's a good idea to write out the names of any medicines you take and how often you take

them. Make sure to bring it with you to your visit. Be open to talk with your doctor about your health care needs and concerns.

All new IEHP members should have an IHA within 120 days of enrolling. Those younger than 18 months need to be seen within two months of joining.

Call your doctor's office today and tell them you want to set up your Initial Health Appointment. The phone number for your doctor's office is on your IEHP member card. Be sure to bring your card with you on your visit.





IEHP COMMUNITY WELLNESS CENTERS

Free and open to everyone in the Inland Empire, our local Community Wellness Centers are your one-stop shop for:

- Health and fitness classes
- Wellness programs
- Cooking demos
- Job training and youth mentoring
- Immigration and housing support
- Health care and health plan options
- And more ...



Take a virtual tour of a CWC.

Stop by one of our three locations near you:

SAN BERNARDINO

805 W. Second St., Suite C
San Bernardino, CA 92410
(at the Marshalls Plaza)

RIVERSIDE

3590 Tyler St., Suite 101
Riverside, CA 92503
(across from Galleria at Tyler mall,
next to Dollar Tree)

VICTORVILLE

12353 Mariposa Road, Suites C-2 & C-3
Victorville, CA 92395
(near Vallarta Supermarkets)

Covering Your Health

PODCAST

with Evelyn Erives

IEHP



LISTEN NOW

Presented by IEHP, this free health and wellness podcast with influencer Evelyn Erives covers all areas of living a healthy and happy lifestyle.

Scan the QR code and start listening today!

ALCOHOL & SUBSTANCE USE DISORDER TREATMENT



IEHP encourages members who want help with alcohol use or other substance use to get care. Services for substance use are available from your doctor, inpatient hospitals, emergency departments and from specialty substance use service providers. County Behavioral Health Plans often provide specialty services.

To learn more about treatment options for substance use disorders, call:

- Riverside County Residents Substance Use Community Access:
1-800-499-3008
- San Bernardino County Residents Substance Abuse Referral Service:
1-800-968-2636

IEHP members can have an assessment to match them to the services that best fit their health needs and preferences. When medically necessary, available services include outpatient treatment, residential treatment and medicines for substance use disorders (also called Medication Assisted Treatment (MAT)) such as buprenorphine, methadone and naltrexone.

The county provides substance use disorder services to Medi-Cal members who qualify for these services. Members who are identified for substance use disorder treatment services are referred to their county department for treatment. IEHP will provide or arrange for MAT to be given in primary care, inpatient hospital, emergency department and other medical settings.

OPIOID USE DISORDER: Help End the Stigma and Save Lives

Addiction to opioids can happen to anyone. In fact, the Centers for Disease Control and Prevention (CDC) says in 2022, an estimated 6.1 million people in the United States suffer from opioid use disorder (OUD).¹

Please know that OUD does not make someone a bad or weak person. Just like any other disease, OUD can disrupt the normal functions of the body. Viewing someone as bad or weak because of a disease is called a stigma, and no one should do it. It can make it harder for people with this illness to seek treatment and get the care they need.

If someone close to you is at increased risk of opioid overdose, you can obtain naloxone with or without a prescription at any pharmacy. It also now readily available over the counter at any pharmacy. This life-saving medicine can reverse the effects of an opioid overdose. Talk to your doctor and pharmacist to learn more about this life saving medicine.

Tell caregivers, family members or friends how to use naloxone if you or loved one start to show signs of overdose. These signs may be slow breathing, cold or clammy skin and unconsciousness. You need to get emergency medical help right away if the signs of overdose are present. Just like an EpiPen for a person with allergies, carrying naloxone offers extra protection for those at a higher risk of opioid overdose.

¹ Medications for Opioid Use Disorder (MOUD) Study | Overdose Prevention | CDC



COMPLETE YOUR WELLNESS VISIT & GET A \$25 GIFT CARD



Making sure you see your doctor for your yearly wellness (or well-care) visit is a great way to stay healthy and prevent health problems. For IEHP DualChoice (HMO D-SNP) members, it's also an easy way to earn a \$25 gift card.

Now, we all know these exams save lives, so what's the catch? You must complete your wellness visit by Dec. 31, 2024, to earn the gift card. Once we receive proof from your doctor of your annual wellness visit, you will receive a reward certificate by mail within two weeks. Use this reward to choose from 16 different gift card options online or by phone.

WHAT TO EXPECT AT YOUR WELLNESS VISIT

During your visit, your doctor will ask you to fill out a special questionnaire called a "Health Risk Assessment." This tool will help your doctor and you develop a personal prevention plan to help you stay healthy. Your wellness visit may also include:

- Routine measurements (like height, weight and blood pressure)
- A review of your medical and family history
- A review of your current medicines
- Personalized health advice
- Advance care planning
- A cognitive and functional assessment
- And more ...

Don't wait until you get sick. Call your doctor today and schedule a wellness visit. Complete your wellness visit by the end of the year, and you'll get a \$25 gift card.





2025

Over-the-Counter (OTC) Benefit

At IEHP DualChoice (HMO D-SNP), we want you to achieve your best possible health. This is why we created the Vibrant Health Card for easy access to your OTC benefit.



Use your Vibrant Health Card to pay for over-the-counter products:

- Receive \$40 per quarter (every three months) to buy health and wellness items from an approved product list.

| Quarterly Funding Dates | |
|-------------------------|--------------------|
| Available on: | Expire on: |
| January 1, 2025 | March 31, 2025 |
| April 1, 2025 | June 30, 2025 |
| July 1, 2025 | September 30, 2025 |
| October 1, 2025 | December 31, 2025 |

- Buy products like vitamins*, pain relievers, cold medicine, first-aid supplies and more.
- Go to stores like CVS, Walgreens, Albertsons, Family Dollar, Dollar General and Walmart.

**Dual-purpose items can be used for both medical conditions and general health. But you need to talk to your doctor before buying these items.*

For a list of approved stores and products,

Scan ↘



Get up to a 100-day supply of medicine **DELIVERED TO YOUR HOME!**

Skip the trip to the pharmacy and never worry about running out of medicine. Learn how to sign up below.

With Mail Order Pharmacy, you get:

- ▶ FREE delivery to your home
- ▶ Up to a 100-day supply
- ▶ Refill reminders

Get started today!

Call SortPak at **1-877-570-7787** and let them know you want to sign up for Mail Order Pharmacy.

Have questions?

Call IEHP Member Services. The phone number is on your member card.

Please Note: If you do not wish to use this pharmacy, you can find a full list of other pharmacies in our network at **www.iehp.org**. Beneficiaries generally must use network pharmacies to access their prescription drug benefit.





NONDISCRIMINATION NOTICE

Discrimination is against the law. Inland Empire Health Plan (IEHP) follows State and Federal civil rights laws. IEHP does not unlawfully discriminate, exclude people, or treat them differently because 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.

IEHP 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 IEHP Member Services at **1-800-440-IEHP (4347)**, Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm, including holidays. If you cannot hear or speak well, please call **1-800-718-4347**. Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

Inland Empire Health Plan
10801 6th St., Rancho Cucamonga, CA
91730-5987
1-800-440-4347 (TTY: **1-800-718-4347**/California Relay 711)

HOW TO FILE A GRIEVANCE

If you believe that IEHP 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 IEHP's Civil Rights Coordinator. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact IEHP's Civil Rights Coordinator between 8am-5pm, by calling **1-800-440-4347**. Or, if you cannot hear or speak well, please call TTY: **1-800-718-4347**/California Relay 711.
- In writing: Fill out a complaint form or write a letter and send it to:
IEHP's Civil Rights Coordinator
10801 6th St., Rancho Cucamonga, CA
91730-5987
- In person: Visit your doctor's office or IEHP and say you want to file a grievance.
- Electronically: Visit IEHP's website at ***www.iehp.org***.

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- **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:
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**.

- **Electronically:** Send an email to **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, D.C. 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>**



AVISO DE NO DISCRIMINACIÓN

La discriminación es ilegal. Inland Empire Health Plan (IEHP) cumple las leyes de derechos civiles estatales y federales aplicables. IEHP no discrimina ilegalmente ni excluye a las personas o las trata de manera diferente por motivos de sexo, raza, color, religión, ascendencia, nacionalidad, identificación con grupo étnico, edad, discapacidad mental, discapacidad física, condición médica, información genética, estado civil, género, identidad de género u orientación sexual.

IEHP ofrece:

- Ayuda y servicios gratuitos a personas con discapacidad para ayudarles a comunicarse mejor, como:
 - ✓ Intérpretes calificados de lenguaje de señas
 - ✓ Información por escrito en otros formatos (impresa en letra grande, audio, formatos electrónicos accesibles y otros formatos)
- Servicios de idiomas sin costo a personas cuyo idioma principal no sea el inglés, como:
 - ✓ Intérpretes calificados
 - ✓ Información escrita en otros idiomas

Si necesita estos servicios, comuníquese con Servicios para Miembros de IEHP al **1-800-440-IEHP (4347)**, de lunes a viernes de 7am-7pm, y sábado y domingo de 8am a 5pm, incluidos días festivos. Si tiene dificultad para escuchar o hablar, llame al **1-800-718-4347**. Si lo solicita, puede tener disponible este documento en braille, impreso en letra grande, cinta de audio o formato electrónico. Para obtener una copia en alguno de estos formatos alternos, llame o escriba a:

Inland Empire Health Plan
10801 6th St., Rancho Cucamonga, CA
91730-5987
1-800-440-4347 (TTY: **1-800-718-4347**/Servicio de retransmisión de California 711)

CÓMO PRESENTAR UNA QUEJA FORMAL

Si considera que IEHP no le ha proporcionado estos servicios o que lo ha discriminado ilegalmente de alguna otra forma por motivos de sexo, raza, color, religión, ascendencia, nacionalidad, identificación con grupo étnico, edad, discapacidad mental, discapacidad física, condición médica, información genética, estado civil, género, identidad de género u orientación sexual, puede presentar una queja formal ante el coordinador de derechos civiles de IEHP. Puede presentar una queja formal por teléfono, por escrito, en persona o en línea:

- Por teléfono: Comuníquese con el coordinador de derechos civiles de IEHP de 8am-5pm (Hora del Pacífico) llamando al **1-800-440-4347**. O, si no puede escuchar o hablar bien, llame a la línea TTY **1-800-718-4347**/Servicio de retransmisión de California 711.
- Por escrito: Llene un formulario de quejas o escriba una carta y envíela a:
 - IEHP's Civil Rights Coordinator
 - 10801 6th St., Rancho Cucamonga, CA
 - 91730-5987
- En persona: Vaya al consultorio de su médico o a IEHP y diga que quiere presentar una queja.
- En línea: Visite el sitio web de IEHP en www.iehp.org.

OFICINA DE DERECHOS CIVILES – DEPARTAMENTO DE SERVICIOS DE SALUD DE CALIFORNIA

También puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Servicios de Salud de California por teléfono, por escrito o en línea:

- **Por teléfono:** Llame al **(916) 440-7370**. Si no puede hablar o escuchar bien, llame al 711 (Servicio de retransmisión de telecomunicaciones).

- **Por escrito:** Llene un formulario de quejas o envíe una carta a:

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

Los formularios de quejas están disponibles en:

http://www.dhcs.ca.gov/Pages/Language_Access.aspx.

- **En línea:** Envíe un correo electrónico a **CivilRights@dhcs.ca.gov**.

OFICINA DE DERECHOS CIVILES – DEPARTAMENTO DE SALUD Y SERVICIOS HUMANOS DE LOS ESTADOS UNIDOS

Si considera que ha sido discriminado por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, también puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de los EE. UU. por teléfono, por escrito, o en línea:

- **Por teléfono:** Llame al **1-800-368-1019**. Si no puede hablar o escuchar bien, llame a la línea TTY/TDD al **1-800-537-7697**.

- **Por escrito:** Llene un formulario de quejas o envíe una carta a:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building

Washington, D.C. 20201

Los formularios de quejas están disponibles en: **<http://www.hhs.gov/ocr/office/file/index.html>**.

- **En línea:** Visite el Portal de Quejas de la Oficina de Derechos Civiles en

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

TAGLINES

English Tagline

ATTENTION: If you need help in your language call **1-800-440-4347 (TTY: 1-800-718-4347)**. Aids and services for people with disabilities, like documents in braille and large print, are also available. Call **1-800-440-4347 (TTY: 1-800-718-4347)**. These services are free of charge.

الشعار بالعربية (Arabic)

يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ **1-800-440-4347 (TTY: 1-800-718-4347)**. تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة بريل والخط الكبير. اتصل بـ **1-800-440-4347 (TTY: 1-800-718-4347)**. هذه الخدمات مجانية.

Հայերեն պիտակ (Armenian)

ՈՒՇԱՂՈՒԹՅՈՒՆ: Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք **1-800-440-4347 (TTY: 1-800-718-4347)**: Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ՝ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Չանգահարեք **1-800-440-4347 (TTY: 1-800-718-4347)**: Այդ ծառայություններն անվճար են:

ພາສາម្ចាស់ជាភាសាខ្មែរ (Cambodian)

ចំណាំ : បើអ្នក ត្រូវ ការជំនួយ ជាភាសា របស់អ្នក ឬ ទូរស័ព្ទ ទៅលេខ **1-800-440-4347 (TTY: 1-800-718-4347)**។ ជំនួយ និង សេវាកម្ម សម្រាប់ ជនពិការ ដូចជា ឯកសារស រេសរជាអកសរផុស សម្រាប់ជនពិការភ្នែក ឬឯកសារសេរសរជាអកសរពុម្ពធំ ក៏អាចរកបានផងដែរ។ ទូរស័ព្ទ មេកលេខ **1-800-440-4347 (TTY: 1-800-718-4347)**។ សេវាកម្មទាំងនេះមិនគិតថ្លៃឡើយ។

简体中文标语 (Simplified Chinese)

请注意：如果您需要以您的母语提供帮助，请致电 **1-800-440-4347 (TTY: 1-800-718-4347)**。我们另外还提供针对残疾人士的帮助和服务，例如盲文和大字体阅读，提供您方便取用。请致电 **1-800-440-4347 (TTY: 1-800-718-4347)**。这些服务都是免费的。

مطلب به زبان فارسی (Farsi)

توجه: اگر می‌خواهید به زبان خود کمک دریافت کنید، با **1-800-440-4347 (TTY: 1-800-718-4347)** تماس بگیرید. کمک‌ها و خدمات مخصوص افراد دارای معلولیت، مانند نسخه‌های خط بریل و چاپ با حروف بزرگ، نیز موجود است. با **1-800-440-4347 (TTY: 1-800-718-4347)** تماس بگیرید. این خدمات رایگان

हिंदी टैगलाइन (Hindi)

ध्यान दें अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो **1-800-440-4347 (TTY: 1-800-718-4347)** पर कॉल करें अशक्तता वाले लोगों के लिए सहायता और सेवाएं जैसे बरेल और बड़े पिरंट में भी दस्तावेज़ उपलब्ध हैं। **1-800-440-4347 (TTY: 1-800-718-4347)** पर कॉल करेंसे सेवाएं न: शुल्क हैं।

Nge Lus Hmoob Cob (Hmong)

CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau **1-800-440-4347 (TTY: 1-800-718-4347)**. Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau **1-800-440-4347 (TTY: 1-800-718-4347)**. Cov kev pab cuam no yog pab dawb xwb.

日本語表記 (Japanese)

注意日本語での対応が必要な場合は **1-800-440-4347 (TTY: 1-800-718-4347)**へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のためのサービスも用意しています。 **1-800-440-4347 (TTY: 1-800-718-4347)**へお電話ください。これらのサービスは無料で提供しています。

한국어 태그라인 (Korean)

유의사항: 귀하의 언어로 도움을 받고 싶으시면 **1-800-440-4347 (TTY: 1-800-718-4347)** 번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. **1-800-440-4347 (TTY: 1-800-718-4347)** 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

ເທກໄລພາສາລາວ (Laotian)

ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໃຫ້ທາດປີ **1-800-440-4347 (TTY: 1-800-718-4347)**. ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທິດປັ້ນອັກສອນນູນແລະມິໂຕພິມໃຫຍ່ໃຫ້ທາດປີ **1-800-440-4347 (TTY: 1-800-718-4347)**. ການບໍລິການເຫຼົ່ານີ້ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mien Tagline (Mien)

LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiex longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux **1-800-440-4347 (TTY: 1-800-718-4347)**. Liouh lorx jauv-louc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hlou mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx

1-800-440-4347 (TTY: 1-800-718-4347). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.

ਪੰਜਾਬੀ ਟੈਗਲਾਈਨ (Punjabi)

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ **1-800-440-4347 (TTY: 1-800-718-4347)**. ਅਪਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬੋਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼ਾਂ ਦੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ **1-800-440-4347 (TTY: 1-800-718-4347)**. ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

Русский слоган (Russian)

ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру **1-800-440-4347 (линия TTY: 1-800-718-4347)**. Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру **1-800-440-4347 (линия TTY: 1-800-718-4347)**. Такие услуги предоставляются бесплатно.

Mensaje en español (Spanish)

ATENCIÓN: si necesita ayuda en su idioma, llame al **1-800-440-4347 (TTY: 1-800-718-4347)**. También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al **1-800-440-4347 (TTY: 1-800-718-4347)**. Estos servicios son gratuitos.

Tagalog Tagline (Tagalog)

ATENSIYON: Kung kailangan mo ng tulong sa iyong wika, tumawag sa **1-800-440-4347 (TTY: 1-800-718-4347)**. Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento sa braille at malaking print. Tumawag sa **1-800-440-4347 (TTY: 1-800-718-4347)**. Libre ang mga serbisyonang ito.

แท็กไลน์ภาษาไทย (Thai)

โปรดทราบ: หากคุณต้องการความช่วยเหลือในภาษาของคุณ กรุณาโทรศัพท์ ไปที่หมายเลข **1-800-440-4347 (TTY: 1-800-718-4347)** นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์ และเอกสารที่พิมพ์ ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ ไปที่หมายเลข **1-800-440-4347 (TTY: 1-800-718-4347)** ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

Примітка українською (Ukrainian)

УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер **1-800-440-4347 (TTY: 1-800-718-4347)**. Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер **1-800-440-4347 (TTY: 1-800-718-4347)**. Ці послуги безкоштовні.



Inland Empire Health Plan

P.O. Box 1800
Rancho Cucamonga, CA 91729-1800

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Care you **CAN FEEL**

If you get a survey in the mail about your health care experience, **be sure to complete it and return it as soon as possible.**

Your answers help us improve the care we give, like connecting you to quality doctors and prescriptions.



Questions?

Call IEHP Member Services
1-800-440-IEHP (4347)
1-800-718-4347 TTY
Monday–Friday, 7am–7pm, and
Saturday–Sunday, 8am–5pm

IEHP.org    

Stay connected. Follow us!

California Department of Health Care Services (DHCS) Office of the Ombudsman

For help with Medi-Cal, you may call the California Department of Health Care Services (DHCS) Ombudsman Office at **1-888-452-8609**, Monday-Friday, 8am-5pm, excluding holidays. The Ombudsman Office helps people with Medi-Cal understand their rights and responsibilities.