

# NORTHERN CALIFORNIA PIPE TRADES TRUST FUNDS FOR UA LOCAL 342

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## **AFFORDABLE CARE ACT** **NOTICE OF NONDISCRIMINATION**

### **Discrimination is Against the Law**

The Northern California Pipe Trades Health and Welfare Plan (“the Plan”) is required by the Affordable Care Act to provide you with this Notice of Nondiscrimination about your rights under the law. The Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Plan does not exclude people or treat them differently because of their race, color, national origin, age, disability, or sex. For example, the law requires that women be treated equally with men in the health care they receive and prohibits the denial of health coverage based on pregnancy, gender identity and sex stereotyping.

The 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

If you need any of the above services, please contact the Trust Fund Office at (925) 356-8921.

### **Your Right to File Grievance & Appeal with the Plan’s Civil Rights Coordinator**

If you believe that the 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 written grievance (including an appeal) in person or by mail, fax, or email with the Plan’s Civil Rights Coordinator at the contact below. If you have questions on the Plan’s grievance procedures or need help filing a grievance, please contact the Plan’s Civil Rights Coordinator, Kim Biagi.

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Concord, CA 94518-2501  
Telephone: (925) 356-8921  
Fax: (925) 356-8938  
E-mail: [tfo@ncpttf.com](mailto:tfo@ncpttf.com)

You can also file a grievance with Kaiser Permanente by calling (800) 278-3296 or Blue Shield by calling (855) 256-9404. For information about Kaiser or Blue Shield’s grievance procedures please refer to your Kaiser or Blue Shield Evidence of Coverage booklet.

### **Your Right to File Complaint with the U.S. Department of HHS**

The availability of the Plan’s grievance procedure does not prevent you from pursuing other legal remedies. 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,  
Telephone: 1-800-868-1019, 800-537-7697 (TDD).

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

