

June 4, 2019

## Network Change Announcement: Northside Hospital and Gwinnett Medical Center Facilities and Ancillaries

Alliant is committed to maintaining a broad and varied network to provide its members a well-qualified selection of providers. From time to time, however, for various reasons our provider network may change.

As of July 1, the Agreement between Northside Hospital (its facilities and ancillaries) and Alliant will terminate. This includes:

- Northside Hospital Atlanta
- Northside Hospital Forsyth
- Northside Hospital Cherokee
- Gwinnett Advanced Surgery Center

In addition, between July 1 and no later than August 15 the following Gwinnett facilities and provider groups will be out of network. Another notice, confirming the final effective date of the termination, will be sent once confirmed.

- Gwinnett Medical Center Duluth
- Gwinnett Medical Center Lawrenceville
- Gwinnett Extended Care Center
- Glancy Rehabilitation Center
- Gwinnett Physician Group
- Gwinnett Pulmonary Group
- Gwinnett Cardiology Services
- Gwinnett Hospital System Physician Group
- Gwinnett Pulmonary Group
- Gwinnett Hospital System
- Gwinnett Internal Medicine Associates

Members impacted by these changes will receive a letter notifying them of the network change. Members may contact Customer Service at (866) 403-2785 for assistance in finding a new, in-network provider prior to the termination date of July 1, 2019. Continuation of health care services from current providers may be available for certain members, based on qualifications. Qualifications include being in an active course of treatment or being in at least the second trimester of pregnancy. Continuation of care may last up to 90-days with a terminating provider, allowing for time to transition to an appropriate in-network provider for future care. Member may request a Continuity of Care form from Customer Service. Following receipt of the completed form, a medical director will review and respond to requests within fifteen business days.

In keeping with our commitment, Alliant continues to work diligently with all its providers for the benefit of our members.

Alliant members continue to have access to a broad choice of qualified providers to meet health care needs. To find a new provider, visit AlliantPlans.com or call Customer Service at (866) 403-2785.

Notice of Non-Discrimination Alliant Health Plans complies with applicable Federal civil rights laws and does not discriminate on the basis ol race, color, national origin, age, disability, or sex. Alliant Health Plans does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.	ગુજરાતી(Gujarati) સુચના: જો તમે ગુજરાતી બોલતા હો, તો બિ:થુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1- 866-403-2785 (TTY: 711).
	Français (French) ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866- 403-2785 (ATS : 711).
<ul> <li>Qualified sign language interpreters</li> <li>Written information in other formats (large print, audio, accessible electronic formats, other formats)</li> <li>Provides free language services to people whose primary language is not English, such as:</li> <li>Qualified interpreters</li> <li>Information written in other language</li> </ul>	<b>አማርኛ (Amharic)</b> ማስታወሽ: የሚናንሩት ቋንቋ አማርኛ ከሆነ የትርንም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 1-866-403-2785 (መስማት ለተሳናቸው፡: 711).
	हिंदी (Hindi) ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-866-403-2785 (TTY: 711) पर कॉल 
If you believe that Alliant Health Plans 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: Sabrina LeBeau, Compliance Officer, PO Box 1128, Dalton GA 307222, ph: (706) 237-8802 or (888) 533-6507 ext 125, Fax: (706) 229-6289, Email: Compliance@AlliantPlans.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Sabrina LeBeau is available to help you.	파리 <b>Kreyòl Ayisyen (French Creole)</b> ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-866-403-2785 (TTY: 711).
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 <u>https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</u> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 1.500–368-1019, 200–358-1019, 200-550-7000, Commisting forces available at https://www.hbs.gov/orcr/offic.effile.findex.html	Русский (Russian) ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866- 403-2785 (телетайп: 711).
Language Assistance	ملحوظة:  إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان.  اتصل برقم 1-2785-2013 (رقم هاقت الصم والبكم: (171 TTY).
Enguish ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-403-278: (TTY: 711).	<b>Português (Portuguese)</b> ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-403-2785 (TTY: 711).
Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-403-2785 (ΠΥΥ: 711).	د. ایک از ایک
Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-403-2785 (TTY: 711,	لايچة. الان به زبان قارسي تصرمي من طنيد، نسهيدت زباني بصورت زايحان بزاي سما قرائمم مي باسد. با (TTY: 711) 1-2785-1366-403-1 تماس بگيزيد.
<b>한국어 (Korean)</b> 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-403-2785 (ITY: 711)번으로 전화해 주십시 h 오.	<b>Deutsch (German)</b> ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-403-2785 (ITY: 711).
<b>繁體中文(Chinese)</b> 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-866-403-2785 (TTY: 711)。	日本語(Japanese) 注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-866-403-2785 (TTTY:711)まで、お電話にてご連絡ください。
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