



Washington State Rx Services  
 P.O. Box 40168  
 Portland, OR 97240-0168



Return this form by Mail or Fax:  
 Washington State Rx Services  
 Attn: Appeal Unit  
 PO BOX 40168  
 Portland OR 97240-0168  
 Fax: 1-866-923-0412

## WASHINGTON STATE Rx SERVICES COMPLAINT AND APPEAL FORM

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Name of Person Filing Complaint Telephone#

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Address City State Zip

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Member Name Patient Name Member ID#

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Name of Provider Involved Address Telephone#

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Name of Provider Involved Address Telephone#

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Date(s) of Service

**Please write your complaint or appeal in the space below and on the back of this page.** Attach additional pages if needed. You may include any document such as explanation of benefits (EOBs), correspondence, or invoices which will help us investigate your complaint or appeal. **Please sign and date this form.**

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**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Upon receipt of your complaint or appeal, Washington State Rx Services will mail you an acknowledgment letter.



# Nondiscrimination notice



**We follow federal civil rights laws. We do not discriminate based on race, color, national origin, age, religion, disability, gender identity, sex or sexual orientation.**

We provide free services to people with disabilities so they can communicate with us. These include sign language interpreters and other forms of communication.

If your first language is not English, we will give you free interpretation services and/or materials in other languages.

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**If you need any of the above, call Customer Service at:**

1-888-361-1611 (TRS: 711)

**If you think we did not offer these services, or discriminated against you, you can file a written complaint.**

**Please mail or fax it to:**

Washington State Rx Services  
Attention: Appeal Unit  
P.O. Box 40168  
Portland, OR 97240-0168  
Fax: 866-923-0412

**Scott White coordinates our nondiscrimination work:**

Scott White,  
Compliance Officer  
601 SW Second Ave.  
Portland, OR 97204  
855-232-9111  
compliance@modahealth.com

**You can also file a civil rights complaint with:**

The U.S. Department of Health and Human Services,  
Office for Civil Rights

- Online complaint portal - <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
- Mail - U.S. Department of Health and Human Services  
200 Independence Ave S.W.  
HHH Building, Room 509F  
Washington, D.C. 20201
- Phone - 1-800-368-1019  
800-537-7697 (TDD)

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

**The Washington State Office of the Insurance Commissioner**

- Online complaint portal - <https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>
- Phone - 800-562-6900  
360-586-0241 (TDD)

Complaint forms are available at  
<https://fortress.wa.gov/oic/onlineservices/cc/pub/complaintinformation.aspx>



ATENCIÓN: Si habla español, hay disponibles servicios de ayuda con el idioma sin costo alguno para usted. Llame al 1-888-361-1611 (TRS: 711).

CHÚ Ý: Nếu bạn nói tiếng Việt, có dịch vụ hỗ trợ ngôn ngữ miễn phí cho bạn. Gọi 1-888-361-1611 (TRS: 711)

注意：如果您說中文，可得到免費語言幫助服務。請致電 1-888-361-1611 (聾啞人專用 TRS: 711)

주의: 한국어로 무료 언어 지원 서비스를 이용하시려면 다음 연락처로 연락해주시기 바랍니다. 전화 1-888-361-1611 (TRS: 711)

PAUNAWA: Kung nagsasalita ka ng Tagalog, ang mga serbisyong tulong sa wika, ay walang bayad, at magagamit mo. Tumawag sa numerong 1-888-361-1611 (TRS: 711)

تنبيه: إذا كنت تتحدث العربية، فهناك خدمات مساعدة لغوية متاحة لك مجانًا. اتصل برقم (الهاتف النصي) 1-888-361-1611 (TRS: 711)

بولتے ہیں تو لسانی (URDU) توجہ دیں: اگر آپ اردو اعانت آپ کے لیے بلا معاوضہ دستیاب ہے۔ 1-888-361-1611 (TRS: 711) پر کال کریں

ВНИМАНИЕ! Если Вы говорите по-русски, воспользуйтесь бесплатной языковой поддержкой. Позвоните по тел. 1-888-361-1611 (текстовый телефон TRS: 711).

ATTENTION : si vous êtes locuteurs francophones, le service d'assistance linguistique gratuit est disponible. Appelez au 1-888-361-1611 (TRS: 711)

توجہ: در صورتی کہ بہ فارسی صحبت می کنید، خدمات ترجمہ بہ صورت رایگان برای شما موجود است. با (TRS: 711) 1-888-361-1611 تماس بگیرید.

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपको भाषाई सहायता बिना कोई पैसा दिए उपलब्ध है। 1-888-361-1611 पर कॉल करें (TRS: 711)

Achtung: Falls Sie Deutsch sprechen, stehen Ihnen kostenlos Sprachassistentendienste zur Verfügung. Rufen sie 1-888-361-1611 (TRS: 711)

注意：日本語をご希望の方には、日本語サービスを無料で提供しております。1-888-361-1611 (TRS:、テレタイプライターをご利用の方は711)までお電話ください。

અગત્યનું: જો તમે (બાબાંતર કરેલ બાબાં અહીં દર્શાવેલ) બોલો છો તો તે બાબાં તમારે માટે વિના મૂલ્યે સહાય ઉપલબ્ધ છે. 1-888-361-1611 (TRS: 711) પર કોલ કરો

ໂປດຊາວ: ຖ້າທ່ານເວົ້າພາສາລາວ, ການຊ່ວຍເຫຼືອດ້ານພາສາແມ່ນມີໃຫ້ທ່ານໂດຍບໍ່ເສັຍຄ່າ. ໂທ 1-888-361-1611 (TRS: 711)

УВАГА! Якщо ви говорите українською, для вас доступні безкоштовні консультації рідною мовою. Зателефонуйте 1-888-361-1611 (TRS: 711)

ATENȚIE: Dacă vorbiți limba română, vă punem la dispoziție serviciul de asistență lingvistică în mod gratuit. Sunați la 1-888-361-1611 (TRS: 711)

THOV CEEB TOOM: Yog hais tias koj hais lus Hmoob, muaj cov kev pab cuam txhais lus, pub dawb rau koj. Hu rau 1-888-361-1611 (TRS: 711)

ត្រូវចងចាំ: បើអ្នកនិយាយភាសាខ្មែរ ហើយត្រូវការសេវាកម្មជំនួយផ្នែកភាសាដោយឥតគិតថ្លៃ គឺមានផ្តល់ជូនលោកអ្នក។ សូមទូរស័ព្ទទៅកាន់លេខ 1-888-361-1611 (TRS: 711)

HUBACHIISA: Yoo afaan Kshtik kan dubbattan ta'e tajaajiloonni gargaarsaa isiniif jira 1-888-361-1611 (TRS: 711) tiin bilbilaa.

โปรดทราบ: หากคุณพูดภาษาไทย คุณจะสามารถใช้บริการช่วยเหลือด้านภาษาได้ฟรี โทร 1-888-361-1611 (TRS: 711)

FA'AUTAGIA: Afai e te tautala i le gagana Samoa, o loo avanoa fesoasoani tau gagana mo oe e le togotia. Vala'au i le 1-888-361-1611 (TRS: 711)

IPANGAG: Nu agsasaoka iti Ilocano, sidadaan ti tulong iti lengguahe para kenka nga awan bayadna. Umawag iti 1-888-361-1611 (TRS: 711)

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń: 1-888-361-1611 (obsługa TRS: 711)