

# Quality Program Update

## 2025 Program Update

### Introduction

The PrimeWest Health Quality Program supports our mission, vision, and values. We work to improve and monitor the following:

- Medical care
- Patient safety
- Behavioral health services
- How services are delivered to our members

PrimeWest Health aims to meet high standards for quality and safety. We follow standards developed by the National Committee for Quality Assurance (NCQA). NCQA evaluates health plans on the quality of care patients receive, how happy patients are with their care, and health plans' efforts to keep improving. NCQA requires us to share information each year about our quality work. This report describes the activities we completed in 2025 and some projects we are working on for 2026.

### Past Quality Initiatives

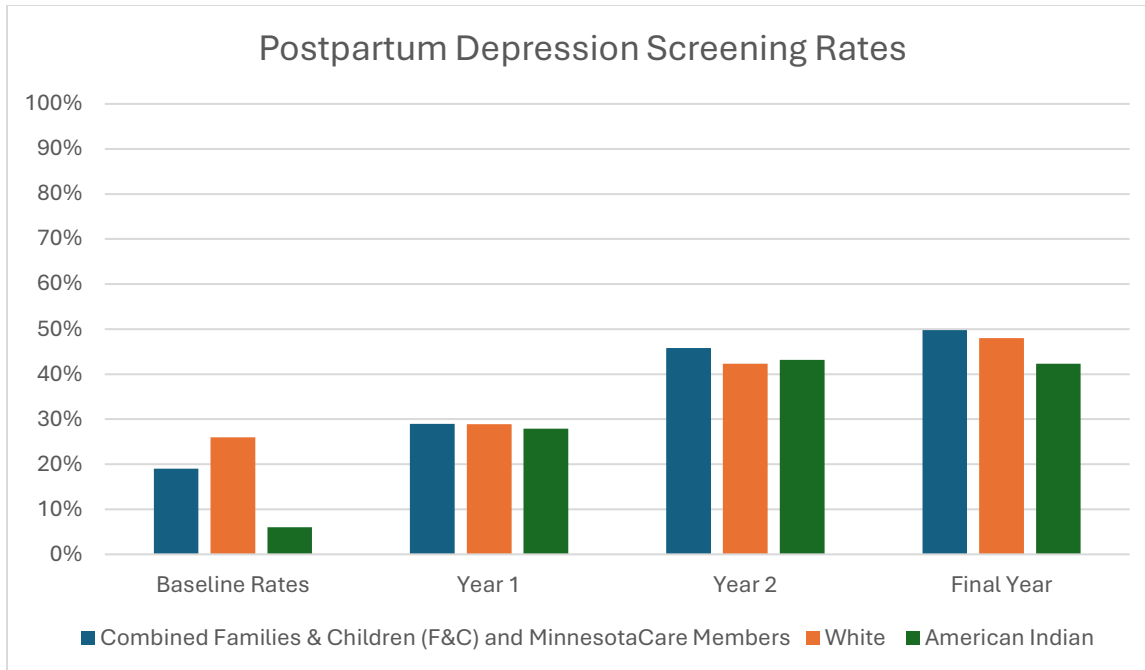
#### Postpartum Depression Screening with a Focus on American Indian Members Performance Improvement Project (PIP)

The goals of this project were as follows:

- Increase postpartum depression screening for members who recently gave birth
- Reduce the difference in screening rates between American Indian and white members who get a postpartum screening

This project included member and provider education and outreach. We also funded a grant that supported culturally specific care for American Indian members. The project began in 2021 and ended in 2023. In the final year, both goals were met. We educated providers about how to bill correctly for postpartum depression screenings during wellness visits, including face-to-face visits. This ensures we have accurate data when we contact members.

The following chart shows the postpartum depression screening rates during the project.



**Lessons Learned and Next Steps:**

- Strong provider-member relationships are important
- Provider feedback helps us improve
- Working closely with staff helps identify barriers and effective processes
- Member education is essential
- We need to collect screening data from providers and Public Health agencies

This project will continue through 2029 with updates such as the following:

- Including screenings billed under the mother in our outcome measure
- Reviewing disparity data in our expanded service area, which includes more diverse members

### **Statin Therapy in Members with Diabetes PIP**

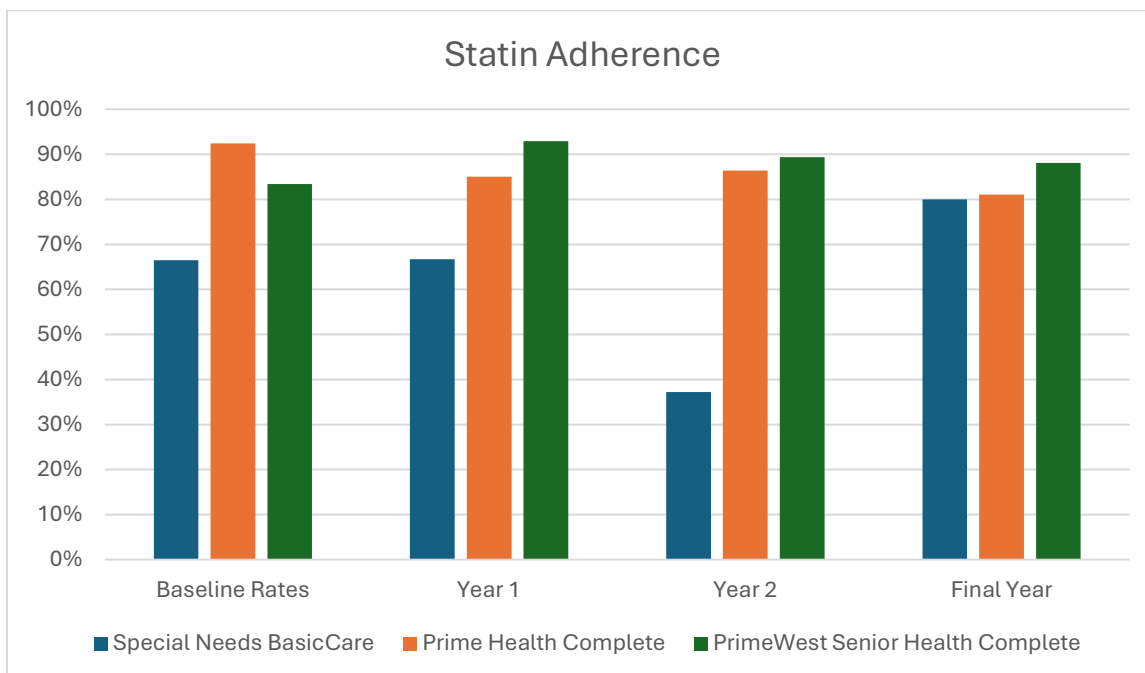
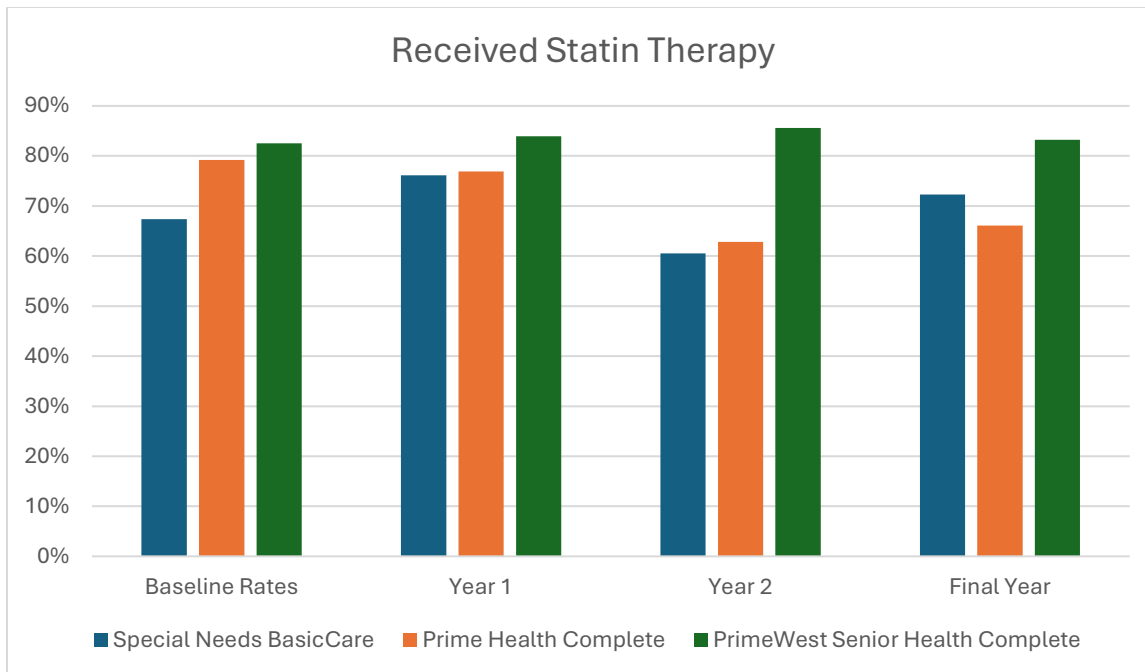
The goals of this project were as follow:

- Increase the number of members with diabetes who receive statin therapy
- Increase the number of members with diabetes who take their statin medication as prescribed

The project included education for members and providers, and partnership with county case managers. It began in 2021 and ended in 2023. Results were mixed:

- For PrimeWest Senior Health Complete (HMO SNP), we met both therapy and adherence goals
- For Prime Health Complete (HMO SNP), we did not meet the goals
- For Special Needs BasicCare, we met both goals

Charts show the rates of members who received statin therapy and the rates of those who stayed on their medication.



#### Lessons Learned and Next Steps:

- Continue outreach to engage members through the Focused Wellness program
  - Follow the COACH model to help members manage their health
    - COACH stands for **C**reate a care plan, **O**bserve the normal routine, **A**ssume a coaching style, **C**onnect tasks with vision and priorities, **H**ighlight efforts with data
  - Identify members ages 18 and over for the Focused Wellness diabetes program
- Continue working closely with internal staff
- Bring topics to stakeholder meetings for input
- Share gaps-in-care reports with providers and county case managers
- Stress the importance of provider collaboration

- Help address member barriers, including social determinants of health (SDOH)

To sustain progress, we will do the following:

- Provide county case manager and clinic risk lists
- Reach out to members with care gaps

### Community Baby Shower Focus Study

PrimeWest Health's current postpartum depression PIP has a focus on racial/ethnic disparities and includes community input. When reviewing baseline data, we found Hispanic members had the highest postpartum depression screening rates among white, American Indian, and Hispanic members.

To learn more about Hispanic members' experiences, we held a community baby shower. All participants spoke Spanish, so we provided an interpreter and Spanish education materials. We offered a survey, games, snacks, and prizes.

Nine participants and four PrimeWest Health staff members attended, including two nurses. An interpreter translated survey answers.

We also presented information about postpartum depression, gestational diabetes, resources for transportation, childbirth classes, and benefits for members on Medical Assistance.

Participants completed a survey (shown in the following table) about perinatal health.

| <b>Perinatal Health Survey Responses</b> | <b>Question 1: What do you and your family do to stay healthy? This can include physical, mental, and spiritual health.</b> | <b>Question 2: What do you think is most important when it comes to perinatal care (before and after giving birth)?</b>                   | <b>Question 3: Do you think it is important to be screened for postpartum depression? If not, why do you feel this way?</b> |
|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| Respondent 1                             | Attending annual check-ups always, recreation, and family walks                                                             | Both are important                                                                                                                        | Yes                                                                                                                         |
| Respondent 2                             | Eat healthy as best as I can, time with family and time to walk                                                             | The first two to be healthy for mom and baby. It is important late because it's good to be healthy for both of them and the whole family. | Yes                                                                                                                         |
| Respondent 3                             | Go out for walks, read and go out with friends                                                                              | Healthy eating                                                                                                                            | Yes                                                                                                                         |
| Respondent 4                             | Walks, eating fruits and vegetables                                                                                         | Tend to your nutrition                                                                                                                    | Yes                                                                                                                         |

| <b>Perinatal Health Survey Responses</b> | <b>Question 1: What do you and your family do to stay healthy? This can include physical, mental, and spiritual health.</b>            | <b>Question 2: What do you think is most important when it comes to perinatal care (before and after giving birth)?</b> | <b>Question 3: Do you think it is important to be screened for postpartum depression? If not, why do you feel this way?</b> |
|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| Respondent 5                             | Exercise, walk, sing, spend time doing stuff and spending time with family and fellowship                                              | Nutrition and routine                                                                                                   | Yes                                                                                                                         |
| Respondent 6                             | Healthy meals, dancing, and playing soccer                                                                                             | Good nutrition and exercise                                                                                             | Yes                                                                                                                         |
| Respondent 7                             | Walks three times a week, meditate three times a week, Friday game nights, Saturday is family time, and Sunday is movie and pajama day | Attending annual visits, psych evaluations, family adjustment, and being open to support from others                    | Yes                                                                                                                         |
| Respondent 8                             | Walks and talking about our days with others at the end of the day                                                                     | Family and partner support at all times to not feel alone                                                               | Yes                                                                                                                         |
| Respondent 9                             | Go out and eat healthy, talk about anything with your significant other to overcome difficulties                                       | Both are important for mom and child                                                                                    | Yes                                                                                                                         |

During group discussions, participants said family time is very important. Only one person had heard of PrimeWest Health before the event. Everyone agreed screening for postpartum depression is important, but not all understood the symptoms. Staff explained the difference between “baby blues” and postpartum depression.

Members also discussed access to dental care, transportation barriers, and challenges with the health care system, especially for those who do not speak English.

Recommendations from this event are as follows:

- Continue promoting postpartum depression resources
  - Increase social media posts about available resources
  - Consider offering more community baby showers in other locations
- Keep monitoring Hispanic screening rates and possible barriers
  - Help members overcome barriers that prevent them from attending appointments
- Continue education for Hispanic members on available resources
  - Provide more presentations and build partnerships to support new parents
- Keep monitoring transportation barriers and address Grievances related to transportation

PrimeWest Health is creating a social media video about our Families & Children program, including the Secure Member Site, care coordination, and 24-hour nurse line.

## Satisfaction Surveys

### Health Outcomes Survey (HOS)

The HOS survey is used by the Centers for Medicare & Medicaid Services (CMS) to measure the quality of care for Medicare members. Our goal was to maintain or improve our scores. From 2020 – 2024, members consistently reported positive experiences in areas such as the following:

- Fall risk management
- Urinary incontinence
- Physical activity
- Depression screening

We met our goal. We will continue current efforts around these topics.

### Consumer Assessment of Healthcare Providers and Systems (CAHPS®)<sup>1</sup>

The CAHPS survey is given yearly to members who meet the following criteria:

- Have been enrolled at least 5 of the last 6 months as of December 31, 2024
- Are 18 or older

The 2025 results showed strengths, such as the following:

- Rating of Health Plan
- Getting Needed Prescription Drugs

Areas to improve are as follows:

- Care Coordination
- Annual Flu Vaccines

PrimeWest Health reviews the results and makes changes to improve satisfaction. This may include the following:

- Member outreach
- Changes to care coordination programs
- Examining different communication methods with members
- Creating more targeted education for members

### County Case Manager Satisfaction Surveys

Minnesota Senior Care Plus (MSC+)/PrimeWest Senior Health Complete (PWSHC)/Special Needs BasicCare (SNBC)/Prime Health Complete (PHC) Satisfaction Surveys were mailed to 1,988 members in June 2025. Members must have been enrolled at least 3 months and not refused county case management. The response rate was 26 percent (508 responses). Our goal was to maintain or improve the 2024 satisfaction rate of 95 percent. The 2025 results showed 97 percent of respondents rated their experience as “good,” “very good,” or “excellent.” The goal was met.

### Focused Wellness Satisfaction Survey

PrimeWest Health checks satisfaction for members in the Focused Wellness program each year. In 2024, 100 percent of respondents were somewhat or very satisfied. This exceeded our 90 percent

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<sup>1</sup> CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ)

goal. A second question asked members to rate their experience from 1 – 10. Eighteen responded, and 17 gave a positive rating.

## Current Quality Initiatives

### Health Equity Focus

PrimeWest Health is working on many health equity efforts, including:

- Community Reinvestment Grant program
- Use of community health workers
- Data-driven programs
- Staff training
- Culture & Community Committee
- Health Equity Council

We also gather member feedback to improve cultural outreach.

PrimeWest Health attended two baby showers at Oshkiimaajitahdah in Redby for moms and expecting moms. We provided materials about postpartum depression and discussed the following:

- Healthy habits
- Cultural traditions
- Ways members get health information

Major learnings included:

- Most members use Google for health information
- Many members stay healthy by being active and eating well
- Many were unsure about cultural traditions related to pregnancy

We will continue working with American Indian women to learn more about important traditions during pregnancy and postpartum.

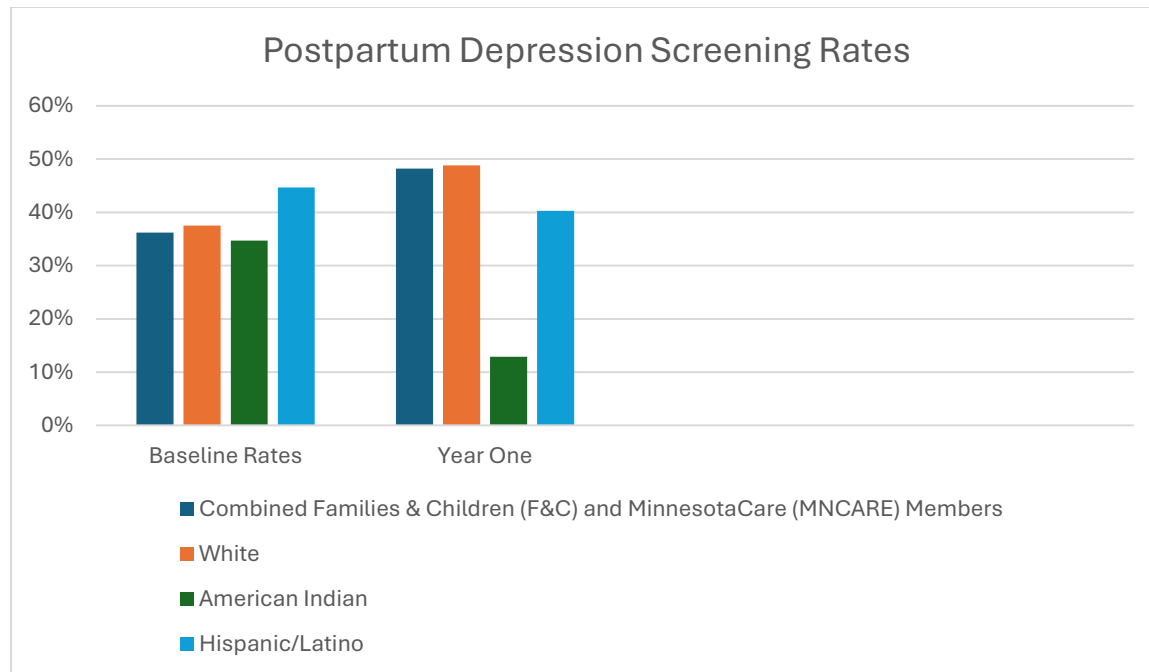
### Postpartum Depression Screening with a Focus on Racial/Ethnic Disparities PIP

The goals of this project are:

- Increase postpartum depression screening
- Reduce screening differences between racial/ethnic groups

This project began in 2021. In 2024, we expanded screenings to include any setting. We provide education, gather community input, funded a grant for culturally specific care, and have a coordinator focused on American Indian members.

The following chart shows Year One results.



We met our goal of increasing screenings but had mixed results reducing disparities. We closed the gap between white and Hispanic members but saw a decrease among American Indian members.

We will continue community events and plan to host two baby showers in 2025. We also added a \$50 gift card for postpartum visits.

### Depression and Diabetes PIP

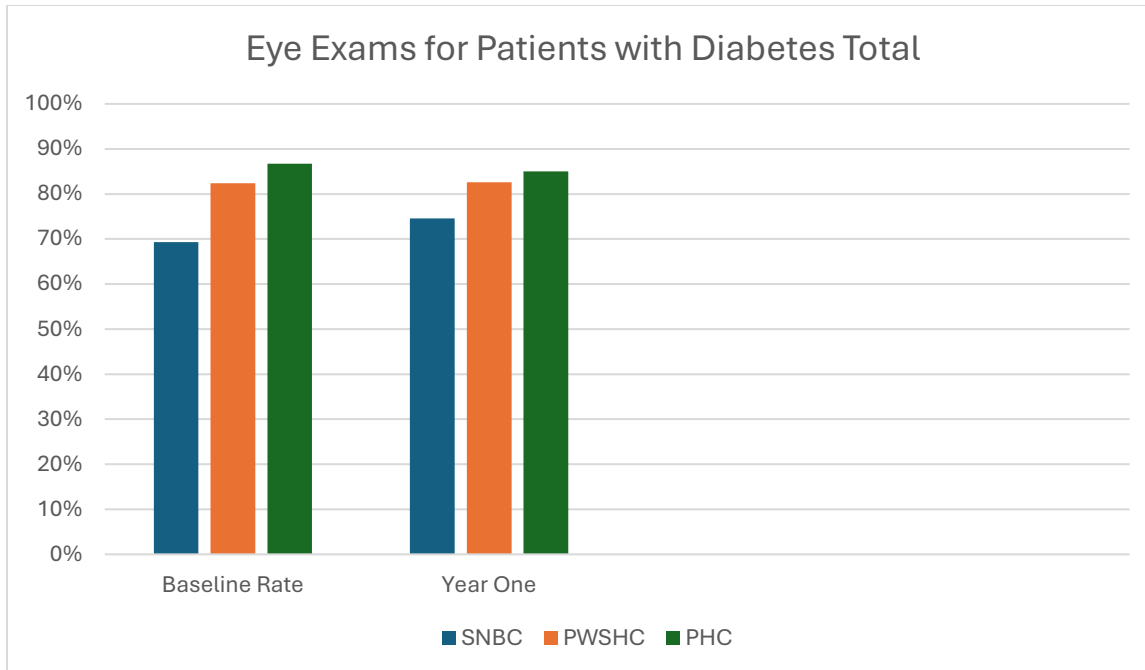
The goals of this project are:

- Increase eye exams for members with diabetes
- Understand how depression affects members with diabetes and improve gaps in care

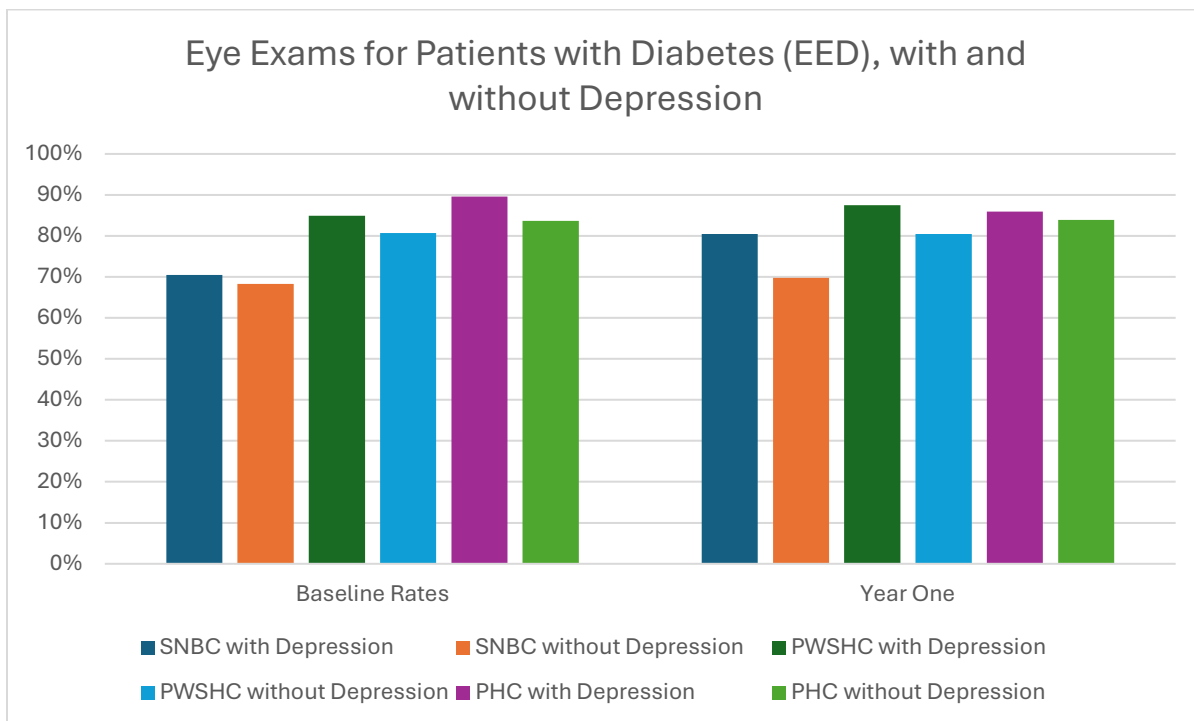
This project began in 2024. It includes education and member incentives for eye exams. We also gather feedback from members and case managers. We work with other health plans to create provider education.

The following charts show Year One results for eye exams.





*\*SNBC is Special Needs BasicCare, PWSHC is PrimeWest Senior Health Complete, and PHC is Prime Health Complete*



Results were mixed. SNBC and PWSHC populations improved, while PHC had a slight decrease. Members with both diabetes and depression had better results than those without depression.

We will continue project interventions through 2025. We are adding gaps-in-care tools to our internal system and will seek more input from eye care providers.

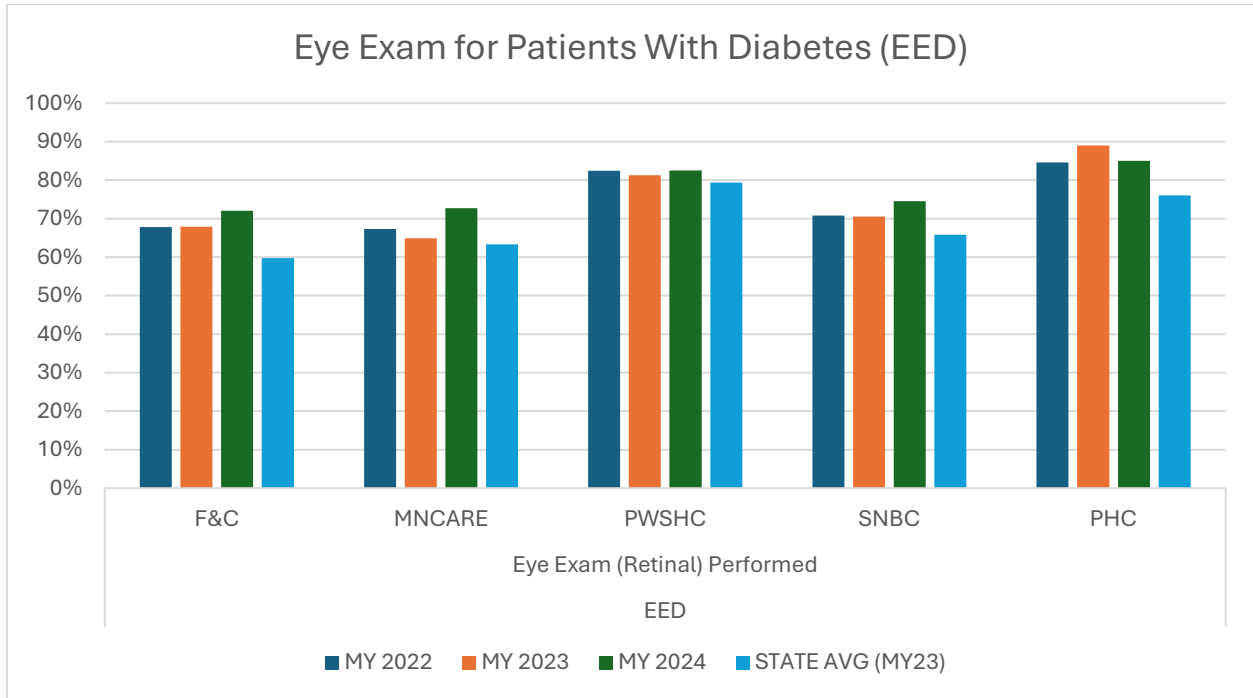
## Preventive Services Program Incentives

PrimeWest Health offers incentives to encourage members to complete preventive screenings. We mail vouchers to members who qualify. Members must complete the service and submit the voucher or fill out an online form.

Charts show measures included in the program.

### Eye Exams for Patients with Diabetes (EED)

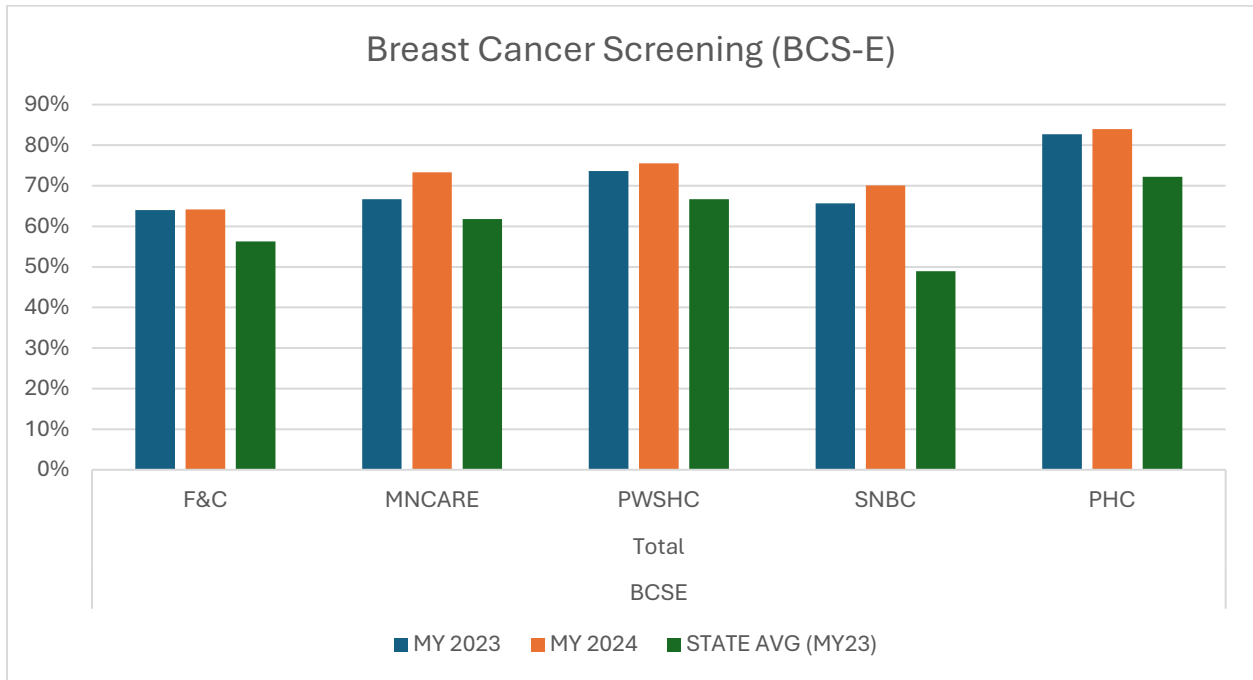
Members ages 18–75 who had an annual eye exam to screen for diabetic retinal disease.



*MY = Measurement Year*

### Breast Cancer Screening (BCS-E)

Women ages 50 – 74 who had a mammogram.

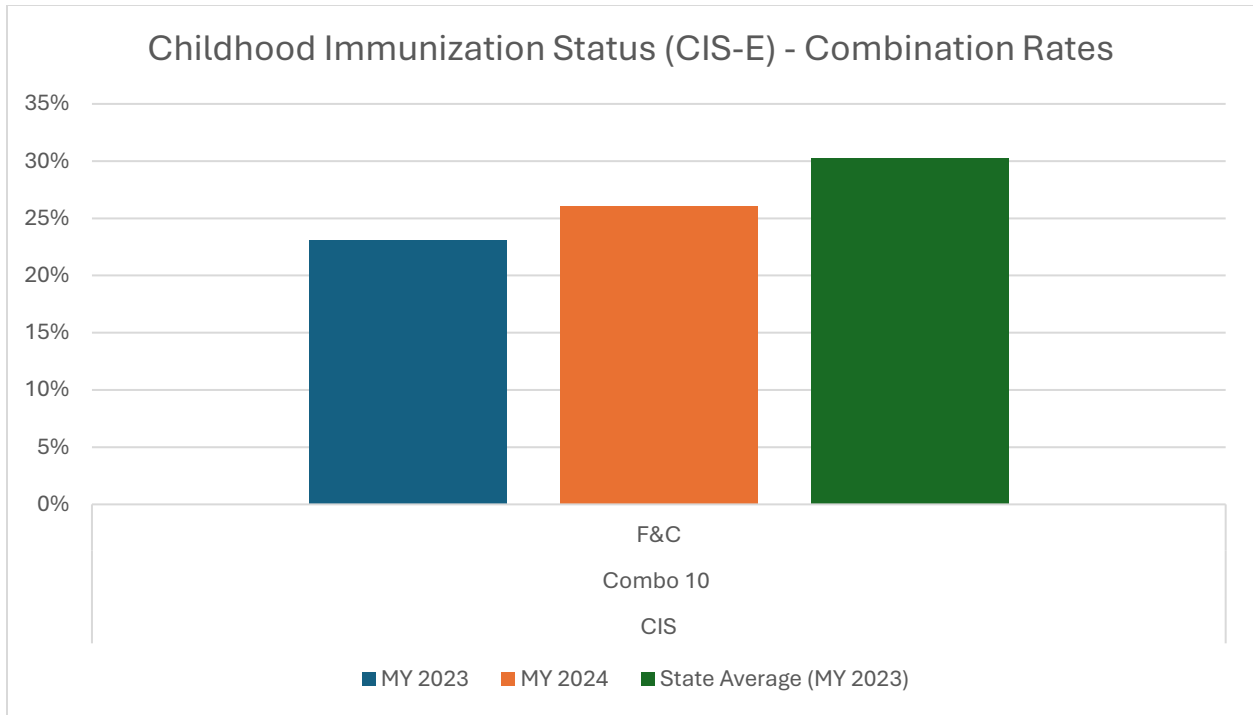


### Childhood Immunization Status (CIS-E)

Children who get all recommended vaccines by age 2. These include the following:

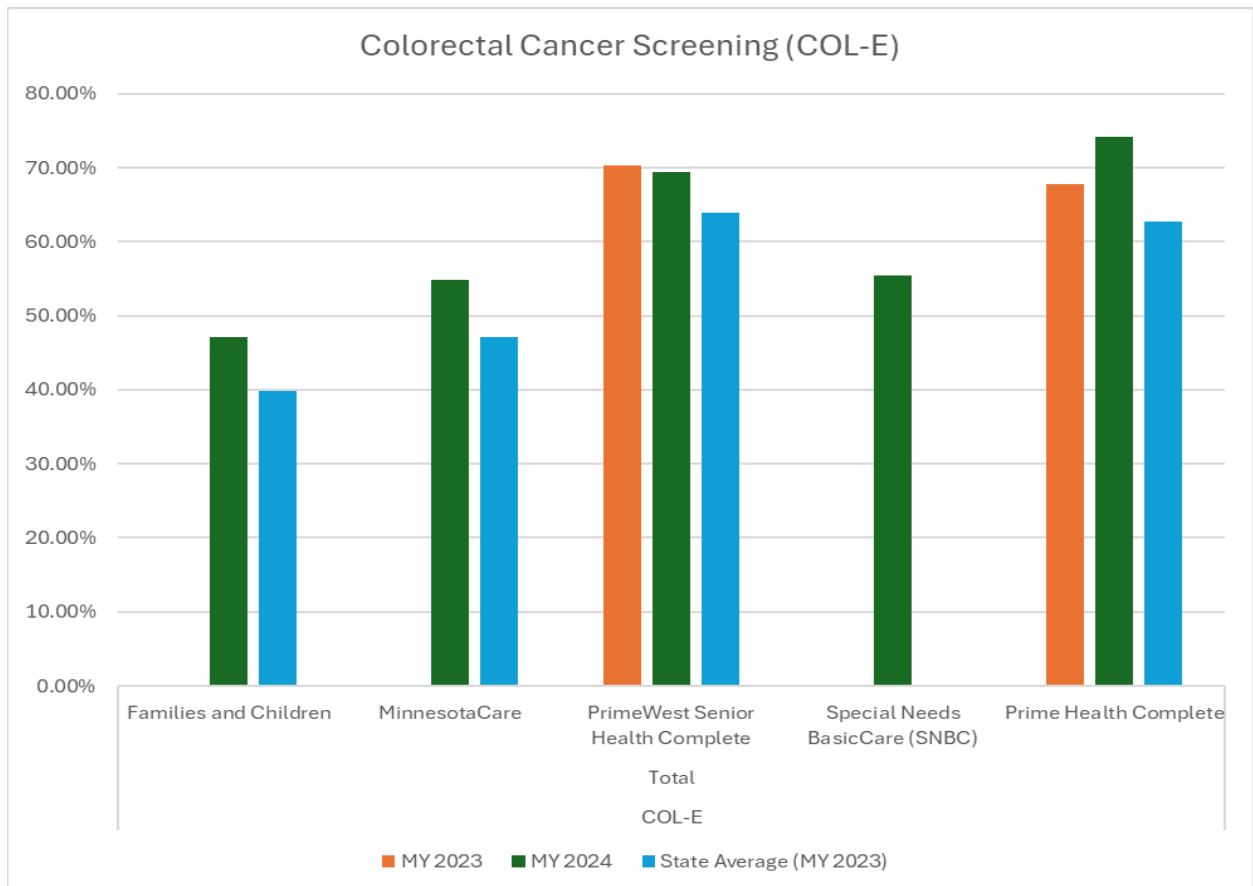
- 4 diphtheria, tetanus, and acellular pertussis (DTaP) vaccines
- 3 polio (IPV) vaccines
- 1 measles, mumps, and rubella (MMR) vaccine
- 2 haemophilus influenza type B (HiB) vaccines
- 3 hepatitis B (HepB) vaccines
- 1 chicken pox (VZV) vaccine
- 4 pneumococcal conjugate (PCV) vaccines
- 1 hepatitis A (HepA) vaccine
- 2 or 3 rotavirus (RV) vaccines
- 2 influenza (flu) vaccines

These make up the Combo 10 rate shown in the following chart.



### Colorectal Cancer Screening (COL-E)

Members ages 45 – 75 who had a colorectal cancer screening.



## Quality Program Update

### Lessons Learned and Impact on Future

PrimeWest Health has found that our incentive program is overall effective for our members. However, sending reminders of the incentive program has not increased use. Therefore, reminders are no longer sent for this program.

Feedback about this program showed that people would like to have digital options. A QR code was added in 2025 so members can submit the voucher electronically.

## Conclusion

PrimeWest Health will continue monitoring ongoing initiatives during 2026. Our Quality Program will keep supporting quality improvement efforts and reporting on the following each year:

- Quality initiatives
- Data
- Lessons learned
- How results shape future projects

**1-866-431-0801 (toll free); TTY 1-800-627-3529 or 711**

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ትኩረት፡ አማርኛ የሚናገሩ ከሆኑ፣ ነጻ የቋንቋ እርዳታ አገልግሎቶች፣ ያለ ምንም ክፍያ፣ እና ያለ ምንም መዘግየት ለእርስዎ ይገኛሉ። በተጨማሪም፣ መረጃን በተደራሽ ቅርፀቶች ለማቅረብ፣ ተገቢ ረዳት መርጃዎች እና አገልግሎቶች ከክፍያ ነጻ እና በጊዜ ይገኛሉ። እባክዎ ከላይ ባለው ቁጥር ይደውሉ ወይም አቅራቢዎን ያነጋግሩ። Amharic

تنبيه: إذا كنت تتحدث العربية، فستكون خدمات المساعدة اللغوية متاحة لك مجاناً وبدون تأخير غير ضروري. بالإضافة إلى ذلك، تتوفر المساعدات والخدمات المساعدة المناسبة لتوفير المعلومات بتنسيقات يسهل الوصول إليها مجاناً وفي الوقت المناسب. يرجى الاتصال بالرقم أعلاه أو التحدث إلى مقدم الخدمة الخاص بك. Arabic

သတိပြုပါ- သင်သည် မြန်မာဘာသာ ဘာသာစကားဖြင့် ပြောဆိုပါက၊ အခမဲ့ ဘာသာပြန်ဆိုပေးသော ဝန်ဆောင်မှုများကို မလိုလားအပ်သည့် နှောင့်နှေးကြန့်ကြာမှုတို့မရှိဘဲ အခမဲ့ ရရှိနိုင်ပါသည်။ ထို့အပြင်၊ အသုံးပြုခွင့်ရရှိထားသောပုံစံများတွင် သတင်းအချက်အလက်များ ပေးဆောင်နိုင်ရန်အတွက် သင့်လျော်သော အရန်အကူအညီများနှင့် ဝန်ဆောင်မှုများကို အချိန်နှင့်တစ်ပြေးညီ အခမဲ့ရရှိနိုင်ပါသည်။ အထက်တွင် ဖော်ပြထားသောနံပါတ်ကို ဖုန်းခေါ်ဆိုပါ သို့မဟုတ် သင်၏ဝန်ဆောင်မှုပေးသူထံ စကားပြောဆိုပါ။ Burmese

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ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition gratuitement et sans délai inutile. En outre, des aides et services auxiliaires appropriés permettant de fournir des informations dans des formats accessibles sont disponibles gratuitement et en temps opportun. Veuillez appeler le numéro ci-dessus ou parler à votre prestataire. French

CEEB TOOM: Yog tias koj hais lus Hmoob, muaj cov kev pab cuam lus pab dawb rau koj xwb thiab tsis muaj qhov qeeb li. Dhau no lawm, tseem muaj ntaub ntawv qhia txog cov cuab yeej pab hnov lus thiab cov kev pab cuam ua hom qauv ntawv uas mus siv tau dawb yam tsis sau nqi thiab raws sij hawm. Thov hu rau tus xov tooj saum toj no los sis tham nrog koj tus kws kho mob. Hmong

တိန်နီ- ဖဲနမ့်ကတိၤကညီကျိန်န့ၣ်,သဘျုကျိန်တၢ်ဟ့ၣ်မၤစၢၤအတၢ်ဖံးတၢ်မၤတဖၣ်ကအိၣ်ဝဲဒၣ်လၢနဂီၢ်လၢတလိၣ်ဟ့ၣ်အပူၤဒီးတထုးတၢ်ဆၢကတိၢ်ယံၣ်ယံၣ်ဘၣ်န့ၣ်လီၤ. အမံၤညါ, တၢ်န့ၣ်ဟ့ၣ်အပီးအလီၤလၢအဖိးမံဒီးတၢ်မၤစၢၤအတၢ်ဖံးတၢ်မၤတဖၣ်လၢကဟ့ၣ်တၢ်ဂ့ၢ်တၢ်ကျိၤလၢက့ၢ်ဂီၢ်လၢတၢ်မၤန့ၢ်သ့အီၤညီန့ၣ်ကအိၣ်ဝဲဒၣ်လၢအပူၤတအိၣ်ဒီးတၢ်ကဟ့ၣ်အီၤအဆၢကတိၢ်ဘၣ်ဘၣ်န့ၣ်လီၤ. ဝံသးစူၤကိးဘၣ်လိတဲစိနီၢ်ဂီၢ်လၢထးမ့တမ့ၢ်ကတိၤတၢ်ဒီးန့ၣ်ဟ့ၣ်တၢ်မၤစၢၤတၢ်တက့ၢ်. Karen

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ចូរកត់ចំណាំ៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសាគតិកត្តាផ្លូវអាចរកបានសម្រាប់អ្នកដោយមិនគិតថ្លៃនិងដោយគ្មានការពន្យារពេលមិនចាំបាច់។ ព្រឹត្តិការណ៍នេះ ផ្តល់នូវសេវាកម្មជំនួយសមស្របដើម្បីផ្តល់ព័ត៌មានក្នុងរូបវន្តដែលអាចចូលប្រើបាន អាចរកបានដោយមិនគិតថ្លៃ និងទាន់ពេលវេលា។ សូមទូរសព្ទទៅលេខខាងលើ ឬនិយាយទៅកាន់អ្នកផ្តល់សេវារបស់អ្នក។ Khmer

주의: 한국어를 사용하시는 경우, 불필요한 지연 없이 무료로 언어 지원 서비스를 받으실 수 있습니다. 또한, 접근 가능한 형식으로 정보를 제공해 주는 적절한 보조 도구와 서비스를 무료로 적시에 이용하실 수 있습니다. 위의 번호로 전화하시거나 담당 의료 제공자에게 문의해 주십시오. Korean

ຂໍຂວັນ ເອົາໃຈໃສ່: ຖ້າ ທ່ານ ເວົ້າ ລາວ, ການບໍລິການການ ຊ່ວຍເຫຼືອ ດ້ານພາສາ ແມ່ນມີໃຫ້ ທ່ານ ໂດຍບໍ່ເສຍຄ່າ ແລະ ໂດຍບໍ່ມີການ ຊັກຊ້າທີ່ບໍ່ຈຳ ເປັນ. ນອກຈາກນັ້ນ, ການ ຊ່ວຍ ເຫຼືອ ແລະ ການບໍລິການຜົນທີ່ເໝາະສົມໃນການສະໜອງຂໍ້ມູນ ໃນຮູບແບບທີ່ສາມາດເຂົ້າ ເຖິງໄດ້ແມ່ນມີໃຫ້ໂດຍບໍ່ເສຍຄ່າ ແລະ ທັນເວລາ. ກະລຸນາໂທຫາເບີໂທຂ້າງເທິງ ຫຼື ຜົ້ນກັບຜູ້ໃຫ້ບໍລິການຂອງທ່ານ. Lao

HUBADHAA: Afaan Oromoo dubbattu yoo ta'e, tajaajilootni deeggarsa afaanii barfannaa hin barbaachisne malee bilisaan isiniif kennamu. Dabalataanis, odeeffannoo bifa argamuun danda'uun dhiyeessuf tajaajilliwwaniifi deeggarsiwwan dabalataa bilisaafi yeroosaa eeggate jira. Maaloo lakkkoofsa armaan olii irratti bilbilaa yookiin ogeessa fayyaa keessan haasofsiisaa. Oromo

ВНИМАНИЕ: Если вы говорите по-русски, вам доступны бесплатные услуги языковой помощи, которые оказываются безвозмездно и своевременно. Кроме того, бесплатно и своевременно предоставляются соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах. Позвоните по указанному выше номеру или обратитесь к своему поставщику услуг. Russian

FIIRO GAAR AH: Haddii aad ku hadasho Soomaali, adeegyada kaalmada luqadda bilaashka ah ayaa laguugu heli karaa adiga lacag la'aan oo aan lahayn daahid aan lama huraan ahayn. Intaa waxaa dheer, caawimooyinka iyo adeegyada ku habboon si loogu bixiyo macluumaadka qaabab la heli karo ayaa lagu heli karaa lacag la'aan iyo waqti ku habboon. Fadlan wac lambarka kore ama la hadal adeeg bixiyahaaga. Somali

ATENCIÓN: Si habla español, los servicios gratuitos de asistencia en otros idiomas están disponibles para usted de forma gratuita y sin demoras innecesarias. Además, se dispone de ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles de forma gratuita y oportuna. Llame al número mencionado anteriormente o hable con su proveedor. Spanish

LU'U Ý: Nếu quý vị nói Tiếng Việt, dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn cho quý vị, hoàn toàn miễn phí và không bị chậm trễ không cần thiết. Ngoài ra, các thiết bị và dịch vụ hỗ trợ phù hợp để cung cấp thông tin ở các định dạng dễ tiếp cận cũng được cung cấp miễn phí và kịp thời. Vui lòng gọi số ở trên hoặc nói chuyện với nhà cung cấp của quý vị. Vietnamese

## Civil Rights Notice

**Discrimination is against the law.** PrimeWest Health does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

Civil Rights Coordinator

PrimeWest Health

3905 Dakota St Alexandria, MN 56308

Toll Free: 1-866-431-0801; TTY: 1-800-627-3529 or 711; Fax: 1-320-762-8750

Email: [compliance@primewest.org](mailto:compliance@primewest.org)

**Auxiliary Aids and Services:** PrimeWest Health provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs.

**Contact PrimeWest Health at [memberservices@primewest.org](mailto:memberservices@primewest.org), or call Member Services at 1-866-431-0801 or TTY 1-800-627-3529 or 711. The call is free.**

**Language Assistance Services:** PrimeWest Health provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact PrimeWest Health at [memberservices@primewest.org](mailto:memberservices@primewest.org), or call Member Services at 1-866-431-0801 or TTY 1-800-627-3529 or 711. The call is free.**

## Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You may also contact any of the following agencies directly to file a discrimination complaint.

### U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the **OCR** directly to file a complaint:

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

Midwest Region

233 N. Michigan Avenue, Suite 240 Chicago, IL 60601

Customer Response Center: 800-368-1019, TTY: 800-537-7697

Email: [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov)



**Minnesota Department of Human Rights (MDHR)**

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights

540 Fairview Avenue North, Suite 201, St. Paul, MN 55104

651-539-1100 (voice), 800-657-3704 (toll-free), 711 or 800-627-3529 (MN Relay), 651-296-9042 (fax)

[Info.MDHR@state.mn.us](mailto:Info.MDHR@state.mn.us) (email)

**Minnesota Department of Human Services (DHS)**

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator

Minnesota Department of Human Services

Equal Opportunity and Access Division

P.O. Box 64997

St. Paul, MN 55164-0997

651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.