

Discrimination is Against the Law Integrated Medical complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Integrated Medical does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. Integrated Medical: • 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 these services, contact Marisa Smith, Regional Manager. If you believe that Integrated Medical 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: Marisa Smith, Regional Manager Office for Civil Rights U.S. Department of Health and Human Services

1301 Young Street, Suite 1169 Dallas, TX 75202

Customer Response Center: (800) 368-1019

Fax: (202) 619-3818 TDD: (800) 537-7697

Email: ocrmail@hhs.gov

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Marisa Smith, Regional Manager is available to help you. 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, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD) Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-(800) 368-1019 TDD: 1-(800) 537-7697.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-(800) 368-1019 TDD: 1-(800) 537-7697.

LALE: Ñe kwōj kōnono Kajin Majōl, kwomaroñ bōk jermal in jipañ ilo kajin ñe am ejjelok wōñāñ. Kaalok 1-(800) 368-1019 TDD: 1-(800) 537-7697.

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-(800) 368-1019 TDD: 1-(800) 537-7697。

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ສໍ້ຄ່າ, ແມ່ນມີອັ້ມໃຫ້ທ່ານ. ໂທ 1-(800) 368-1019 TDD: 1-(800) 537-7697.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-(800) 368-1019 TDD: 1-(800) 537-7697.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-(800) 368-1019 TDD: 1-(800) 537-7697.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-(800) 368-1019 TDD: 1-(800) 537-7697.

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-(800) 368-1019 TDD: 1-(800) 537-7697.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-(800) 368-1019 TDD: 1-(800) 537-7697

번으로 전화해 주십시오 ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-(800) 368-1019 TDD: 1-(800) 537-7697

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-(800) 368-1019 TDD: 1-(800) 537-7697) まで、お電話にてご連絡ください。

Úयान दः यद आप हदः बोलतेह तो आपके िलए मर्यतु म भाषा सहायता सेवाएं उपलब्ध ह।
1-(800) 368-1019 TDD: 1-(800) 537-7697

**पर कॉल कर। ःनुना: शे तमेजरती बोलता हे, ती िनःणःुभाषा सहाय सेवाओ तमारा
माटुपलब्ध छ. झोन करे 1-(800) 368-1019 TDD: 1-(800) 537-7697.**

ملحوظة: إذا كنت تتحدث اذکر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-1019-368-800 (رقم ه)
والیکم الصم ه 1-008-735-7967