

# Notice of Non-Discrimination

Family Health Center of Marshfield, Inc., complies with applicable Federal and Wisconsin civil rights laws and does not unlawfully discriminate, exclude or treat people differently on the basis of race, color, national origin, age, disability, sex, creed, ancestry, sexual orientation, gender identity, marital status, arrest record, conviction record, genetic information, pregnancy, military service, use or non-use of an unlawful product.

Family Health Center of Marshfield, Inc., 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)

Family Health Center of Marshfield, Inc., 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 Language Services at 1-855-679-2789.

If you believe that Family Health Center of Marshfield, Inc., 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 by phone, by mail or email with:

Patient Experience  
1307 N. St. Joseph Avenue  
Marshfield, WI 54449  
Telephone: 1-800-942-5420

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 my 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, 1-800-537-7697 (TDD)  
Complaint forms are available at  
[www.hhs.gov/ocr/office/file/index.html](http://www.hhs.gov/ocr/office/file/index.html)

# Notice of Non-Discrimination

## Shqip (Albanian)

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## Hmong

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

## Tagalog (Tagalog)

PAUNAWA: Kung nagsasalita ka ng Tagalog, may mga libreng serbisyo para sa tulong sa wika na maaari mong gamitin. Tumawag sa 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

- Paunawa - tungkol sa mga batas laban sa diskriminasyon
- ANG IYONG MGA KARAPATAN SA PAGKAPRIBADO NG IMPORMASYONG PANGKALUSUGAN

## Русский (Russian)

ВНИМАНИЕ! Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните по номеру 1 (800) 368-1019 (телетайп: 1 (800) 537-7697).

- Информационные листки о законах, запрещающих дискриминацию
- ВАШИ ПРАВА НА ЗАЩИТУ КОНФИДЕНЦИАЛЬНОСТИ МЕДИЦИНСКОЙ ИНФОРМАЦИИ

## Español (Spanish)

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

- Hojas de datos - sobre las leyes en contra de la discriminación
- Derechos sobre la confidencialidad de la información sobre su salud

# Notice of Non-Discrimination

## 繁體中文 (Chinese)

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 (TTY 文字電話：1 (800) 537-7697)。

- [事實紙頁-關於反.視的法律](#)
- [您的健康資訊隱私權](#)
- [您的健康信息隱私權](#)

## 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 (800) 368-1019 (TTY: 1 (800) 537-7697).

- [T Thông Tin - v các điều luật chng phân biệt đi x](#)
- [Quyền Bảo mật Thông tin Sức khỏe của Quý vị](#)

## 한국어 (Korean)

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

- [정보안내서 -- 차별 금지법에 관한 정보](#)
- [개인의 의료 정보 보호 권리](#)

## Nederlands (Dutch)

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## العربية (Arabic)

الرقم على اتصال بالمجان لك تتوافر اللغوية المساعدة خدمات فإن، العربية تتحدث كنت إذا: ملحوظة 1019-368 (800) 1 (800) 537-7697 (والبكم الصم هاتف)

## 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 (800) 368-1019 (TTY: 1 (800) 537-7697)。

# Notice of Non-Discrimination

## Italiano (Italian)

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufen Sie uns an unter 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## Persian (Farsi)

شما دسترس در، رایگان بطور، زبانی رسالتی یاری خدمات، کنیدی صحبت فارسی زبان به اگر: توجه می

یگیری دتماس ( TTY: 1 (800) 537-7697 ) ، 1 (800) 368-1019 شماره با باشد

## Pennsylvania Dutch:

Wann du [Deitsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff:

1 (800) 368-1019 ، (TTY: 1 (800) 537-7697 )

## Romanian:

Dacă dumneavoastră sau persoana pe care o asistați aveți întrebări privind [introduceți numele programului SBM], aveți dreptul de a obține gratuit ajutor și informații în limba dumneavoastră. Pent a vorbi cu un interpret, sunați la [introduceți numărul aici]. 1 (800) 368-1019 (TTY: 1 (800) 537-7697)

## Ukrainian:

Якщо у Вас чи у когось, хто отримує Вашу допомогу, виникають питання про [insert SBM program name], у Вас є право отримати безкоштовну допомогу та інформацію на Вашій рідній мові. Щоб зв'язатись з перекладачем, задзвоніть на 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## Hindi:

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।

1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## Laotian:

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1 (800) 368-1019 (TTY: 1 (800) 537-7697).

## Urdu:

1-1 کریں کال۔ ہیں دستیاب میں مفت خدمات کی مدد کی زبان کو آپ تو، ہیں بولتے اردو آپ اگر: خبردار (800) 368-1019 (TTY: 1 (800) 537-7697).

## Telugu:

శ్రద్ధ పెట్టండి: ఒకవేళ మీరు తెలుగు భాష మాట్లాడుతున్నట్లయితే, మీ కొరకు తెలుగు భాషా సహాయక సేవలు ఉచితంగా లభిస్తాయి. 1 (800) 368-1019 (TTY: 1 (800) 537-7697) కు కాల్ చేయండి.

## Dareen:

Haddii aad ku hadashid [Soomaali], waxaad heli kartaa adeegyada kaalmada luqadda oo lacag la'aan ah. Wac 1 (800) 368-1019 (TTY: 1 (800) 537-7697).