

FamilyCare Health follows Federal and State civil rights laws. We do not discriminate, exclude or treat people differently because of their race, color, national origin, age, disability, sex, religion, sexual orientation, gender identity, or marital status.

FamilyCare Health offers these free services:

- Help for people with disabilities to communicate with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, computer-friendly formats, other formats)
- Language services for people whose main language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call Navigation Services: 800-458-9518.

If you believe that FamilyCare Health did not provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, religion, sexual orientation, gender identity, or marital status, you can file a complaint or grievance with:

Appeals and Grievances Coordinator

FamilyCare Health

825 NE Multnomah St., Suite 1400

Portland, OR 97232

Phone: 800-458-9518, TTY/TDD: 711

Fax: 503-345-5720

Email: Appeals&Grievances@familycareinc.org.

You can file a grievance in person, by mail, fax, or email. If you need help filing a grievance, Navigation Services can help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, online 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

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 800-458-9518 (TTY/TDD: 711).



ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 800-458-9518 (телетайп: 711).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 800-458-9518 (TTY/TDD: 711).

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 800-458-9518 (TTY/TDD: 711) 。

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 800-458-9518 (رقم هاتف الصم والبكم: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 800-458-9518 (TTY/TDD: 711)번으로 전화해 주십시오.

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្អល គឺអាចមានសំរាប់បម្រើអ្នក។ ចូរ ទូរស័ព្ទ 800-458-9518 (TTY/TDD: 711)។

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 800-458-9518 (ATS : 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 800-458-9518 (TTY/TDD: 711).

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。800-458-9518 (TTY/TDD: 711) まで、お電話にてご連絡ください。

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 800-458-9518 (TTY/TDD: 711).

ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 800-458-9518 (TTY/TDD: 711).

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 800-458-9518 (TTY/TDD: 711).

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 800-458-9518 (телетайп: 711).

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 800-458-9518 (TTY/TDD: 711) تماس بگیرید.

OHP-FC-16-088