



## **NOTICE TO THE PUBLIC NON-DISCRIMINATION STATEMENT AND ACCESSIBILITY REQUIREMENTS**

The Department of Health and Mental Hygiene (the Department) complies with applicable Federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, or sex.

The Department, upon request:

- Provides free aids and services to people with disabilities to communicate effectively with Department staff, 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, please contact the Department's health program, service, local health department or health insurance marketplace directly.

If you believe that the Department 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: Delinda Johnson, Equal Access Compliance Unit, Office of Equal Opportunity Programs, Maryland Department of Health and Mental Hygiene, 201 West Preston Street, Room 514, Baltimore, Maryland 21201, 410-767-6600 (voice), 1-800-735-2258 (TTY), (410) 333-5337 (Fax), [delinda.johnson@maryland.gov](mailto:delinda.johnson@maryland.gov) (email).

You may file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Delinda Johnson is available to help you.

You may 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, DC 20201, [1-800-868-1019](tel:1-800-868-1019), [800-537-7697](tel:800-537-7697) (TDD).

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

**Interpreter Services Are Available for Free**

*Help is available in your language: 410-402-7398 (TTY: 1-800-735-2258)  
These services are available for free.*

**Español/Spanish**

Hay ayuda disponible en su idioma: 410-402-7398 (TTY: 1-800-735-2258). Estos servicios están disponibles gratis.

**አማርኛ/Amharic**

እነዚህ አገልግሎቶች ያለክፍያ የሚገኙ ነጻ ናቸው።  
አገዛ በ ቋንቋዎ ማግኘት ይችላሉ:-: 410-402-7398 (TTY:1-800-735-2258)።

እነዚህ አገልግሎቶች ያለክፍያ የሚገኙ ነጻ ናቸው።

**العربية /Arabic**

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 7398-402-410 (رقم هاتف

الصم والبكم: ( 1-800-735-2258)

**中文/Chinese**

用您的语言为您提供帮助：410-402-7398 (TTY: 1-800-735-2258)。 这些服务都是免费的

**فارسی /Farsi**

خط تلفن کمک به زبانی که شما صحبت می کنید : 1-800-735-2258 (خط تماس افراد ناشنوا 1 7398-402-410

این خدمات به صورت رایگان در دسترس هستند

**Français/French**

Vous pouvez disposer d'une assistance dans votre langue : 410-402-7398 (TTY: 1-800-735-2258). Ces services sont disponibles pour gratuitement.

**ગુજરાતી/Gujarati**

તમારી ભાષામાં મદદ ઉપલબ્ધ છે: 410-402-7398 (ટીટીવાય: 1-800-735-2258). સેવાઓ મફત ઉપલબ્ધ છે

**kreyòl ayisyen/Haitian Creole**

Gen èd ki disponib nan lang ou: 410-402-7398 (TTY: 1-800-735-2258). Sèvis sa yo disponib gratis.

**Igbo**

Enyemaka di na asusu gi: 410-402-7398 (TTY: 1-800-735-2258). Orụ ndị a dị na enweghi ugwo i ga akwu maka ya.

**한국어/Korean**

사용하시는 언어로 지원해드립니다: 410-402-7398 (TTY: 1-800-735-2258). 무료로 제공 됩니다

**Português/Portuguese**

A ajuda está disponível em seu idioma: 410-402-7398 (TTY: 1-800-735-2258). Estes serviços são oferecidos de graça.

**Русский/Russian**

Помощь доступна на вашем языке: 410-402-7398 (TTY: 1-800-735-2258). Эти услуги предоставляются бесплатно.

**Tagalog**

Makakakuha kayo ng tulong sa iyong wika: 410-402-7398 (TTY: 1-800-735-2258). Ang mga serbisyong ito ay libre.

**اردو/Urdu**

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال 410-402-7398 (TTY: 1-800-735-2258) کر۔

**Tiếng Việt/Vietnamese**

Hỗ trợ là có sẵn trong ngôn ngữ của quý vị 410-402-7398 (TTY: 1-800-735-2258). Những dịch vụ này có sẵn miễn phí.

**Yorùbá/Yoruba**

Ìrànṣọ̀wọ̀ wà ní àrọ̀wọ̀tó ní èdè rẹ: 410-402-7398 (TTY: 1-800-735-2258). Awon ise yi wa fun o free.

## NOTICE TO THE PUBLIC NON-DISCRIMINATION POLICY STATEMENT AND COMPLAINT PROCEDURE

The Secretary of the Department of Health and Mental Hygiene by law and policy prohibits discrimination against anyone on the basis of race, color, age, national origin, sex, religion or disability.

This non-discrimination policy applies to all facilities and programs operated directly by the Department as well as providers of health services who receive federal funds or are a sub-recipient of federal funds including, but not limited to, Medicare A or Medicaid.

Anyone who believes that an act of discrimination has taken place in the areas of delivery of services, treatment procedures, or any other areas as detailed by Federal Civil Rights law, has a right to file a complaint and is entitled to a prompt investigation.

### PROCEDURES FOR FILING A COMPLAINT

1. Write or call the following:  
Equal Access Compliance Unit  
Office of Equal Opportunity Programs  
Maryland Department of Health and Mental Hygiene  
201 West Preston Street, 5<sup>th</sup> Floor, Baltimore, Maryland 21201  
410-767-6600 (Voice), 1-800-735-2258 (TTY)  
Website: <http://dhmh.maryland.gov/oeop>
2. Write or call the Director of the facility or program where the alleged discriminatory act took place, with copies to the Equal Access Compliance Unit.
3. Mail, email or fax a complaint to the U.S. Department of Health & Human Services, Office of Civil Rights, 150 South Independence Mall, Suite 372, Philadelphia, Pennsylvania 19106, 215-861-4431 (Fax), website: <http://www.hhs.gov/ocr/civilrights/complaints/index.html>

This information is required by Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975, the Omnibus Budget Reconciliation Act of 1981 (Block Grants) and the Federal Executive Order 13166.

Individuals with disabilities may contact all of the above agencies via the Maryland Relay System, 1-800-735-2258.