



## Notice Informing Individuals About Nondiscrimination and Accessibility Requirements

Hunterdon Healthcare System supports The New Jersey Law Against Discrimination (N.J.S.A. 10:5-12) (LAD) as well as Section 1557 of the Affordable Care Act (ACA) of 2010 (42 U.S.C. 18116) and its implementing regulations at 45 CFR part 92. It is unlawful to subject people to differential treatment based on race, creed, color, national origin (including immigration status and English language proficiency), nationality, ancestry, age, sex (including pregnancy, childbirth, and related medical conditions), sex stereotyping, familial status, marital status, domestic partnership or civil union status, affectional or sexual orientation, gender identity or expression (including with respect to access to facilities), atypical hereditary cellular or blood trait, genetic information, liability for military service, and mental or physical disability, perceived disability, and AIDS and HIV status. Hunterdon Healthcare System:

- 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 the Organizational Effectiveness Department.

If you believe that Hunterdon Healthcare System 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: Organizational Effectiveness Department, 2100 Wescott Drive Flemington, NJ 08822, 908-788-6144, TTY: 908-788-6556, email: [patientexperience@hhsnj.org](mailto:patientexperience@hhsnj.org). You can file a grievance in person, by mail or email. If you need help filing a grievance, the Organizational Effectiveness Department is available to help you. In addition to contacting the Organizational Effectiveness Department at Hunterdon Healthcare System, you may also contact The Joint Commission at 1-800-994-6610.

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>.

### Limited English Proficiency of Language Assistance Services

**English:** ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-908-788-6144 (TTY: 1-908-788-6556)

**Arabic** ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-908-788-6144 (رقم هاتف الصم والبكم): (TTY: 1-908-788-6556)

**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 1-908-788-6144 (TTY: 1-908-788-6556)

**French** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-908-788-6144 (ATS: 1-908-788-6556).

**Gujarati** સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-908-788-6144 (TTY: 1-908-788-6556).

**Haitian-Creole** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-908-788-6144 (TTY: 1-908-788-6556).

**Hindi** ध्यान दें: यदि आप हद्दी बोलते हैं तो आपके लद्दे मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-908-788-6144 (TTY: 1-908-788-6556) पर कॉल करें।

**Italian** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-908-788-6144 (TTY: 1-908-788-6556).

**Korean** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1- 908-788-6144 (TTY: 1-908-788-6556) 번으로 전화해 주십시오.

**Polish** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-908-788-6144 (TTY: 1-908-788-6556).

**Portuguese** ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-908-788-6144 (TTY: 1-908-788-6556).

**Russia** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-908-788-6144 (телетайп: 1-908-788-6556).

**Spanish** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-908-788-6144 (TTY: 1-908-788-6556).

**Tagalog** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-908-788-6144 (TTY: 1-908-788-6556).

**Urdu** خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-908-788-6144 (TTY: 1-908-788-6556)

**Vietnamese** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-908-788-6144 (TTY: 1-908-788-6556).