

DISCRIMINATION IS AGAINST THE LAW



Adena Health System complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Adena Health System does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

If you believe that Adena Health 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:

GRIEVANCE PROCEDURE AND COMPLIANCE
COORDINATOR
272 HOSPITAL RD
CHILLICOTHE, OHIO 45601
740-542-3472
740-779-7931 (TTY)
740- 779-7383 (FAX)

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights through the Office for Civil Rights Complaint Portal 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)
[HTTPS://OCRPORTAL.HHS.GOV/OCR/PORTAL/LOBBY.JSF](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf)

Adena Health System cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Adena Health System no excluye a las personas ni las trata de forma diferente debido a su origen étnico, color, nacionalidad, edad, discapacidad o sexo.

Si considera que Adena Health System no le proporcionó estos servicios o lo discriminó de otra manera por motivos de origen étnico, color, nacionalidad, edad, discapacidad o sexo, puede presentar un reclamo a la siguiente persona:

PROCEDIMIENTO DE QUEJA Y COORDINADOR DE
CUMPLIMIENTO
272 HOSPITAL RD
CHILLICOTHE, OHIO 45601
740-542-3472
740-779-7931 (TTY)
740- 779-7383 (FAX)

También puede presentar un reclamo de derechos civiles ante la Office for Civil Rights del Department of Health and Human Services de EE. UU. de manera electrónica a través de Office for Civil Rights Complaint Portal:

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)
[HTTPS://OCRPORTAL.HHS.GOV/OCR/PORTAL/LOBBY.JSF](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf)

COMPLAINT FORMS ARE AVAILABLE AT (PUEDE OBTENER LOS
FORMULARIOS DE RECLAMO EN EL SITIO WEB)
[HTTP://WWW.HHS.GOV/OCR/OFFICE/FILE/INDEX.HTML](http://www.hhs.gov/ocr/office/file/index.html)

