

Notice of Non-Discrimination

Circle Health, Inc. (and its consolidated affiliates) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Circle Health, Inc. does not exclude people or treat them differently because of race, color, national origin, citizenship, alienage, religion, creed, sex, sexual orientation, gender identity, age, or disability and, where applicable, political beliefs, marital status, familial or parental status, or protected genetic information.

Circle Health, 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)
- 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 Circle Health Interpreter Services Department at 978-937-6591

If you believe that Lowell General Hospital 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:

Circle Health, Inc.
Attn: Patient Advocacy
295 Varnum Avenue
Lowell, MA 01854
Phone: 978-937-6458
Fax: 978-937-6880

You can file a grievance in person or by phone, mail, or fax. If you need help filing a grievance, the Patient Advocacy Department is available to help you.

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>.

Español - ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 978-937-6591.

Français - ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 978-937-6591.

Kreyòl Ayisyen - ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 978-937-6591

Português - ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 978-937-6591.

Italiano - ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 978-937-6591.

Αλληνικά - ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 978-937-6591.

Русский - ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 978-937-6591.

Polski - UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 978-937-6591.

हिंदी (Hindi)- ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 978-937-6591 पर कॉल करें।

繁體中文 - 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 978-937-6591.

한국어 (Korean) -주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 978-937-6591 번으로 전화해 주십시오.

ខ្មែរ (Cambodian) - ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយភ្នែកភាសា ដោយមិនគិតលុយ គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 978-937-6591.

Tiếng Việt - CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 978-937-6591.

العربية (Arabic) - تنبيه:

6591-937-978 ةءاسملا تامءء نائف؁ ةءغلا ركذا ئءءءء ءءك اءا: ةءءءءم 978-937-6591

مكبلاو مصلا فءاه مقر).

ءوءراءى (Gujarati) - سۇءنا: ءءو ءمه ءوءراءى بءلءا هءو؁ ءو نل:ءوءك بءاءا سهاءء سهءاءءو ءمءارا مءءه

ءءلءءء هءو. ءءون ءرءو 978-937-6591.