

## Non-Discrimination Notice

CHNW and its vendors and other contracted partners comply with all applicable federal, state, and local civil rights laws and do not discriminate, exclude, or treat people differently on the basis of race, color, national origin, ancestry, religion, sex, gender, marital status, age, sexual orientation, the presence of physical or mental disabilities, or any other reason(s) prohibited by law in its employment practices and or in the provision of health care services.

CHNW provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats, including large print, audio, accessible electronic formats, and others. CHNW also provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these types of services, contact Appeals & Grievances (1-866-907-1906).

If you believe that CHNW has failed to provide these services, or has discriminated against you in another way, you can file a grievance. You may file a grievance in person or by mail, fax, or email to:

### **Appeals & Grievances**

1111 3rd Ave, Suite 400

Seattle, WA 98101

Phone: 1-866-907-1906 or for TTY 711

Fax: (206) 613-8984

[AppealsGrievances@chpw.org](mailto:AppealsGrievances@chpw.org)

If you need help filing a grievance, contact Appeals & Grievances 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 of phone at:

### **U.S. Department of Health and Human Services**

200 Independent Ave. SW, Room 509F HHH Building, Washington, DC 20201

Phone: 1-800-368-1019 or for TDD 1-800-537-7697.