



OCR NOTICE OF NONDISCRIMINATION

Source: HHS Office for Civil Rights

MOUNTAIN VIEW DENTAL, PA

complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

MOUNTAIN VIEW DENTAL, PA

does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

- 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)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in languages other than English

If you need these services, contact Angela Simino, Practice Manager/Compliance Coordinator.

If you believe that Mountain View Dental, PA 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:

Angela Simino, Practice Manager

PO Box 239

Whitefield, NH 03598

Telephone: (603) 837-9342

Fax: (603) 837-2890

Email: mvd@smilewise.net

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Angela Simino 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, DC 20201

Toll Free: 1-800-868-1019, 800-537-7697 (TDD).

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

MOUNTAIN VIEW DENTAL, PA

Attention: If you do not speak English, language assistance services, free of charge are available to you. Call 603-837-9342 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 603-837-9342 (TTY: 711).

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 603-837-9342 (TTY: 711).

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 603-837-9342 (TTY: 711)。

ਧਿਆਨ ਮੰਨੁਹੋਸ਼: ਤਪਾਇਏਲੇ ਨੇਪਾਲ ਬੋਲਨਹਨਛ ਮਨ ਤਪਾਇਏਕੋ ਮਨਿਸ਼ ਭਾਸਾ ਸਹਾਯਤਾ ਸਵਾਹਰੂ ਮਨ:ਸ਼ਲਕ ਰੂਪਮਾ ਤਪਲਵਧ ਛ। ਫੋਨ ਗਨੁਹੋਸਰ 603-837-9342 (TTY: 711)।

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 603-837-9342 (TTY: 711).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 603-837-9342 (TTY: 711).

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 603-837-9342 (TTY: 711).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم هاتف - 603-837-9342 (TTY: 711) (الصم والبكم)

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 603-837-9342 (TTY: 711).

PERHATIAN: Jika Anda berbicara dalam Bahasa Indonesia, layanan bantuan bahasa akan tersedia secara gratis. Hubungi 603-837-9342 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 603-837-9342 (TTY: 711) 번으로 전화해 주십시오.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 603-837-9342 (TTY: 711).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. 603-837-9342 (TTY: 711).

ICITONDERWA: Nimba uvuga Ikirundi, uzohabwa serivisi zo gufasha mu ndimi, ku buntu. Woterefona 603-837-9342 (TTY: 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 603-837-9342 (TTY: 711).