

## Ascendant Orthopedic Alliance Patient Non-Discrimination Notice

It is the policy of Ascendant Orthopedic Alliance not to engage in discrimination against or harassment of any person seeking patient care. Ascendant Orthopedic Alliance complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, religion, pregnancy, sex, sexual orientation, gender identity, age, or disability.

Ascendant Orthopedic Alliance does not exclude or treat people differently because of race, color, national origin, religion, pregnancy, sex, sexual orientation, gender identity, age, or disability.

### Ascendant Orthopedic Alliance

- 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, communication boards, magnifying reading aids and audio communications)
- 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, please ask for assistance at the reception desk or contact Robin McLaughlin, Non-Discrimination Coordinator

If you believe that Ascendant Orthopedic Alliance has failed to provide these services or discriminated in another way on the basis of race, color, national origin, religion, pregnancy, sex, sexual orientation, gender identity, age, or disability, you can file a grievance with Robin McLaughlin, Non-Discrimination Coordinator, 2310 California Road, Elkhart, IN 46514, Telephone number – (574)-970-4455 (1-800-398-2058) or Fax – (574) 294-2186, or Email [Rmclaughlin@ascendantortho.org](mailto:Rmclaughlin@ascendantortho.org).

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Robin McLaughlin, Non-Discrimination Coordinator, is available to help you.

### Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-574-264-0791.

### Chinese

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 1-574-264-0791

### German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-574-264-0791

### Pennsylvania Dutch

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-574-264-0791.

### Burmese

သတိပြုရန် - အကယ်၍ သင်သည် မြန်မာစကားကို ပြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့်အတွက် စီစဉ်ဆောင်ရွက်ပေးပါမည်။

ဖုန်းနံပါတ် 1-574-264-0791 သို့ ခေါ်ဆိုပါ။

### Arabic

قد دعا سملا في وع للاف رفاوت ت كل ناجملاب. ل صد تامقرب 574-264-0791-1 (مقر مصلا مك بلو: 1-574-264-0791-1 عظوالم: اذا ت نك ث حد تت ركذا اللغه، نإف ت امدخ ف تاه

### Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-574-264-0791 번으로 전화해 주십시오.

### Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-574-264-0791

### French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-574-264-0791

### Japanese

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-574-264-0791まで、お電話にてご連絡ください。

### Dutch

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-574-264-0791

### Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-574-264-0791

### Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-574-264-0791

### Panjabi

ਭਾਸ਼ਾ ਸੇਵਾ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਵਿਚ ਗੱਲਬਾਤ ਕਰਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਨੂੰ ਮੁਫ਼ਤ ਵਿਚਾਰ ਸੇਵਾਵਾਂ ਦੀ ਸਹੂਲਤ ਮਿਲੇਗੀ। 1-574-264-0791 'ਤੇ ਸੰਪਰਕ ਕਰੋ।

### Hindi

सहायता: यदि आप हिंदी में बातचीत करते हैं, तो आपको मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-574-264-0791 पर संपर्क करें।

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 of 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  
1-800-868-1019, 800-537-7697(TDD)

**ASCENDANT**  
ORTHOPEDIC ALLIANCE  
Complaint forms are available at <https://www.ascendantortho.com/file/index.html>