

NON-DISCRIMINATION NOTICE

Community Healthlink (CHL) complies with applicable Federal and State civil rights laws and does not discriminate on the basis of race, color, national origin, citizenship, alienage, religion, creed, sex, sexual orientation, gender identity, age, or disability. Further, Community Healthlink 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.

Community Healthlink 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, and other formats)

Community Healthlink also 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 [contact us](#) and identify the service(s) you need. If you are calling a non-24 hour CHL program outside of business hours, please leave a message, including your name and contact number, and a CHL representative will return your call when business hours resume.

If you believe that Community Healthlink has failed to provide these services or discriminated in another way on the basis of race, color, national origin, citizenship, alienage, religion, creed, sex, sexual orientation, gender identity, age, or disability, you can file a grievance with: Michael Archambault, Human Rights Coordinator, 72 Jaques Ave Worcester, MA 01610, (t) 508-860-1263, (f) 508-860-1023, marchambault@communityhealthlink.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Human Rights Coordinator 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
Phone: 800-368-1019 or 800-537-7697 (TDD)

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

If you speak a language other than English, language assistance services are available at no cost to you. Contact us.

Español (Spanish): ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. [Comuníquese con nosotros.](#)

Português (Portuguese): ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. [Entre em contato conosco.](#)

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. [Liên lạc với chúng tôi.](#)

العربية (Arabic): إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم. اتصل بنا. [اتصل بنا.](#)

Shqip (Albanian): KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. [Kontakt neve.](#)

नेपाली (Nepali): ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । [हामीलाई सम्पर्क गर्नुहोस्.](#)

繁體中文 (Chinese): 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。 [請和我們聯絡。](#)

Русский (Russian): ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. [Для контактов.](#)

Kreyòl Ayisyen (French Creole): ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. [Kontakte nou.](#)

ខ្មែរ (Khmer): ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសាដោយមិនគិតល្អល គឺអាចមានសំរាប់អ្នក។ [ទាក់ទងមកយើង។](#)

한국어 (Korean): 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. [문의.](#)

Français (French): ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. [Contactez-nous.](#)

Italiano (Italian): ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. [Rivolgetevi a noi.](#)

λληνικά (Greek): ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. [Επικοινωνήστε μαζί μας.](#)

Polski (Polish): UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. [Skontaktuj się z nami.](#)

हिंदी (Hindi): ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। [हमसे संपर्क करें.](#)

ગુજરાતી (Gujarati): સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. [અમારો સંપર્ક કરો.](#)