

McLaren Print System Order

Order No: 73063
Order Date: 2022-10-19
User: Korrine Ford
Phone: 517-913-3812

Ship Location: MGL-MMP Healthcare Associate Attn: Tori W.
1540 LAKE LANSING RD STE 101
LANSING, MI 48912

Brochures
Quantity: 1
Paragon Dept No: 54510
Dept Name: McLaren-MMP Healthcare Associates
Company Number: 810

Order Total Price: 8.00

Item Number: MHCC-545
Item Description: Nondiscrimination Poster
Revision Date: 10/2022
Print:
Paper:
Size:
Fold:
Finish:
Drill:
Poster: 11x17 laminated
Misc Info:



McLaren Health Care "McLaren" complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. McLaren does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. McLaren:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters or 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 and/or information written in other languages.

If you need these services, please contact any member of your care team or one of our Patient Representatives.

If you believe that McLaren has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you may file a grievance with the Patient Representative for your respective subsidiary.

You may file a grievance in person or by mail, fax, or email. If you need help filing a grievance, a Patient Representative is available to help you.

You may 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 505F, HHH Building Washington, D.C. 20001
1-800-368-1019, 800-537-7697 (TDD)

Spec. Info:

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

Spesifikasi dalam bahasa Inggris, tersedia untuk akses layanan pelanggan. Untuk informasi lebih lanjut, hubungi kami di (800) 368-1019.

معلومات إضافية باللغة الإنجليزية، متاحة لخدمة عملائنا. للحصول على مزيد من المعلومات، يرجى الاتصال بنا على الرقم (800) 368-1019.

Chinese

中文：如需获取更多信息，请访问www.hhs.gov/ocr/office/file/index.html，或致电(800) 368-1019。