

McLaren Print System Order

Order No: 86633 Order Date: 2024-07-01 Order Request Date: User: Tashya Barrett

Phone:

Ship Location: McLaren Port Huron Academic Center for Family Medicine

1313 Stone Street Port Huron, MI 48060

Brochures Quantity: 2

Paragon Dept No: 29065

Dept Name: academic center for family medicine

Company Number:

Order Total Price: 11.00

Item Number: MHCC-545

Item Description: Nondiscrimination Poster

Revision Date: 10/2022

Print:
Paper:
Size:
Fold:
Finish:
Drill:

Poster: 11x17 paper

Misc Info:



McLaren Health Care "McLaren" complies with applicable fielderal civil rights laws and does not decriminate on the basis of race, color, national origin, age, deablity, or sex, McLaren does not exclude people or treat them differently because of race, color, national origin, age, deablity, or are. Mol over.

- 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 Putient 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://doxportal.html.gov/cortportal/biblyjul, or by mail or phone at:

U.S. Department of Health and Human Services.

200 Independence Avenue, SW

Room 500F, HPHH Building Weshington, D.C. 20001

1 900 369 1019, 900 537 7697 (700)

Complaint forms are available at http://www.hhs.gov/cork/fice/file/indox.html.

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