



## Notice Informing Individuals of Nondiscrimination and Accessibility Requirements

### Discrimination is Against the Law

Rocky Mountain Primary Care, P.C. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Rocky Mountain Primary Care, P.C. does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Rocky Mountain Primary Care, P.C. 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, other formats)

Rocky Mountain Primary Care, P.C. provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages (additional time required)

If you need these services, contact the Office Manager at any of our locations.

If you believe Rocky Mountain Primary Care, P.C. has failed to provide these services or discriminated in any other way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Millard McQuaid, Executive Director  
7625 W. 92<sup>nd</sup> Ave, Westminster, CO, 80021  
Phone: 303-205-0113 extension 4  
Fax: 303-205-0124  
Email: [nmcquaid@rockymountainprimarycare.com](mailto:nmcquaid@rockymountainprimarycare.com)

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Denise Duysen, Practice Administrator, 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, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)  
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

**ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **303-205-0113**.

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **303-205-0113**.

**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 **303-205-0113**。

**주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **303-205-0113**

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **303-205-0113**.

**ማስታወሻ:** የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ **303-205-0113**.

**ملحوظة:** إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1- **303-205-0113**

**ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **303-205-0113**.

**ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **303-205-0113**.

**ध्यान दिनुहोस्:** तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् **303-205-0113**.

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **303-205-0113**.

**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。 **303-205-0113**

**XIYYEEFFANNAA:** Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa **303-205-0113**.

**توجه:** اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با **303-205-0113** تماس بگیرید.

**Dè dè nià kè dyédé gbo:** Ǿ jũ ké m̄ [Bàsɔ̀̀-wùdù-po-nyò] jũ ní, níí, à wuɖu kà kò dò po-poò béin m̄ gbo kpáa. Đá **303-205-0113**.

**Ige nti:** O buru na asu lbo asusu, enyemaka diri gi site na call **303-205-0113**.

**AKIYESI:** Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi **303-205-0113**.