

NOTICE AND STATEMENT OF NON-DISCRIMINATION AND ACCESSIBILITY

It is the policy of **Louisiana Women's Healthcare Associates, LLC** ("LWH"), not to discriminate on the basis of race, color, national origin, sex, age or disability. LWH has adopted an internal grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by Section 1557 of the Affordable Care Act (42 U.S.C. 18116) and its implementing regulations at 45 CFR part 92, issued by the U.S. Department of Health and Human Services. Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age or disability in providing health services. Section 1557 and its implementing regulations may be examined in the office of the designated individual who has been designated to coordinate the efforts of LWH to comply with Section 1557.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age or disability may file a grievance under this procedure to LWH's Compliance Officer at 225-201-2000. It is against the law for LWH to retaliate against anyone who opposes discrimination, files a grievance, or participates in the investigation of a grievance.

PROCEDURE:

- Grievances must be submitted to the proper Compliance Officer within 60 (sixty) days of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy or relief sought.
- The Compliance Officer (or her/his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Compliance Officer will maintain the files and records of LWH relating to such grievances. To the extent possible, and in accordance with applicable law, the Compliance Officer will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.
- The Compliance Officer will issue a written decision on the grievance, based on a preponderance of the evidence, no later than 30 (thirty) days after its filing, including a notice to the complainant of their right to pursue further administrative or legal remedies.
- The person filing the grievance may appeal the decision of the CEO by writing to the (Administrator / Chief Executive Officer / Board of Directors, etc.) within 15 (fifteen) days of receiving the Compliance Officer's decision. The (Administrator / Chief Executive Officer / Board of Directors, etc.) shall issue a written decision in response to the appeal no later than 30 (thirty) days after its filing.
- The availability and use of this grievance procedure does not prevent a person from pursuing other legal or administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age or disability in court or with the U. S. Department of Health and Human Services, Office for Civil Rights.
- A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaints Portal, which is 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
1-800-368-1019, 1-800-537-7697

- Complaint forms are available at: <https://www.hhs.gov/ocr/office/file/index.html>
- Such complaints must be filed within 180 (one hundred eighty) days of the date of the alleged discrimination.

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Contact LWH's Compliance Coordinator/Officer.

Español (Spanish)

ATENCIÓN: Si usted no habla Inglés, los servicios de asistencia de idioma, de forma gratuita, están disponibles para usted. Póngase en contacto con su centro de atención médica de Cumplimiento Coordinador / Oficial.

Français (French)

ATTENTION: Si vous ne parlez pas anglais, les services d'assistance de langues, gratuitement, sont à votre disposition. Contactez conformément coordonnateur / agent de votre établissement médical.

Tiếng Việt (Vietnamese)

Chú ý: Nếu bạn không nói được tiếng Anh, dịch vụ hỗ trợ ngôn ngữ, miễn phí, có sẵn cho bạn. Liên lạc với cơ sở y tế của bạn tuân thủ Điều phối viên / Cán bộ.

繁體中文 (Chinese)

注意：如果您不會說英語，您可以免費獲得語言協助服務。請聯繫您的醫療機構的合規協調員/主任。

العربية (Arabic)

هيبنت: اذا تنك لا ملكتا تامدخ دعاسم لا اللغوية، انجم ةيزيلكنذ لا رفوتو كل. لصتا زكرمب
يبط لا صاخلا كب لائتم لا قسئم / فظوم.

Tagalog (Tagalog – Filipino)

Pansin: Kung hindi ka nagsasalita ng Ingles, wika serbisyo ng tulong, nang walang bayad, ay magagamit sa iyo. Makipag-ugnayan sa iyong mga medikal na pasilidad Compliance Coordinator / Officer.

한국어 (Korean)

주의 : 당신이 영어, 무료 언어 지원 서비스를 구사하지 않는 경우, 사용할 수 있습니다. 의료 시설의 준수 코디네이터 / 담당자에게 문의하십시오.

Português (Portuguese)

ATENÇÃO: Se você não fala Inglês, serviços de assistência de linguagem, de forma gratuita, estão disponíveis para você. Entre em contato com o seu centro médico Compliance Coordenador / Officer.

日本語 (Japanese)

注意：あなたが英語を話せない場合は、言語支援サービス、無料で、あなたに利用可能です。あなたの医療施設のコンプライアンス・コーディネーター/オフィサーにお問い合わせください。

اُردُو (Urdu)

بجوت: رگا پآ یزیرگنا نابز یک ددم یک خدمات، تفم یک جراجنا نیهن ےتلوب تو، پآ یک ےئل بایتسد
نیم۔ پآ یک یبط تلوبس یک لیمعت رٹینیڈرآوک / مانڈپ ےس بطبار.

Deutsch (German)

LET OP: Als je geen Engels, de taal hulpdiensten gratis te spreken, zijn voor u beschikbaar. Neem contact op met uw medische faciliteit Compliance Coordinator / Officer.

Русский (Russian)

ВНИМАНИЕ: Если вы не говорите по-английски, переводческие услуги, бесплатно, доступны для вас. Обратитесь к своему медицинскому учреждению по соблюдению координатора / сотрудника.

ภาษาไทย (Thai)

ความสนใจ: ติดต่อ สิ่ง อ ระสานงาน /
หากคนไม่ได้พูดภาษาของกฤษฎบริการให้ความช่วยเหลือภาษาฟรีมีให้คณ นวยความสะดวกทางการแพทย์ของคุณปฎิบตป
เจ้าหน้าที่

ລາສາລາວ (Lao)

ຄວນລະວັ ງ: ຖ້ າຫາກວ່ າທ່ ານ ັບສາມາດ ອີ້ າລາສາອັ ງກິ ດ, ການ ອລາສາ, ສອຍຄ່ າໃຊ້ ຈ່ າຍ,
ບຶລການການຊ່ ອຍເຫຼືອ

ແມ່ ນພີ ໃຫ້ ເຫຼືອ ອທ່ ານ. ຕີ ດຕໍ່ ສະຖານີ ັທທາງການແພດຂອງທ່ ານມາດຕະຖານພໍ້ ປະສານງານ
/ ພະນັ ກງານ.

فارسی (Persian)

هجوت: ارگ به زبان انگلیسی، ختامد ککم زبان، رناگیا متبج نیم ککم، در دسترس شام هدنتس. پشریذ هگنهام کهدنن / ارسف
زكرم پیکشز خدو تسام بدیریگ.