



NOTICE TO THE PUBLIC

NON-DISCRIMINATION STATEMENT AND ACCESSIBILITY REQUIREMENTS

The Maryland Department of Health (the Department) complies with applicable Federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, or sex.

The Department, upon request:

- Provides free aids and services to people with disabilities to communicate effectively with Department staff, such as, but not limited to:
 - Qualified sign language interpreters
 - Writing information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides **NO COST, FREE** language services to people whose primary language is not English, such as, but not limited to:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please contact the Department's health program, service, local health department or health insurance marketplace directly.

If you believe that the Department has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Maryland Department of Health, Office of Equal Opportunity Programs, Equal Access Compliance Unit (EACU), 201 West Preston Street, Room 422, Baltimore, Maryland 21201, 410-767-6600 (Voice) 410-333-5337 (Fax), mdh.oeop@maryland.gov (email). Deaf and hard of hearing individuals may use relay.

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, EACU staff are 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/smartscreen/main.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, 1-800-868-1019, 800-537-7697 (TDD).

Complaint forms are available at

<https://www.hhs.gov/sites/default/files/civil-rights-complaint-form-11-30-2019.pdf>

Language Accessibility Statement

If you speak English, language assistance services, free of charge, are available to you.

Call: 0-000-000-0000 (TTY: 7-1-1).

Español/Spanish

Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al: 0-000-000-0000 (TTY: 7-1-1).

አማርኛ/Amharic

የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገኙበት ተዘጋጅተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 0-000-000-0000 (መስማት ለተሳናቸው፡ TTY: 7-1-1)።

العربية /Arabic.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 0000-000-000-0 (رقم هاتف الصم والبكم): (TTY: 7-1-1).

Bàsɔ̀ -wùdù-po-nyò (Bassa)

Dè dɛ nià kɛ dyédjé gbo: ɔ jũ ké m̀ [Bàsɔ̀-wùdù-po-nyò] jũ ní, nií, à wuɖu kà kò d̀ò po-poò béin m̀ gbo kpáa. Đá 0-000-000-0000 (TTY:7-1-1)

中文/Chinese

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 0-000-000-0000 (TTY: 7-1-1)。

فارسی /Farsi

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با (0-000-000-0000) تماس بگیرید TTY: 7-1-1

Français/French

Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le: 0-000-000-0000 (ATS: 7-1-1).

ગુજરાતી /Gujarati

સહાય તમારી ભાષામાં ઉપલબ્ધ છે: 0-000-000-0000 (ટીટીવાય: 7-1-1). આ સેવાઓ મફતમાં ઉપલબ્ધ છે.

kreyòl ayisyen/Haitian Creole

Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 0-000-000-0000 (TTY: 7-1-11).

Igbo

O buru na asu lbo asusu, enyemaka diri gi site na call 0-000-000-0000 (TTY: 7-1-1)

한국어/Korean

한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 0-000-000-0000 (TTY: 7-1-1)번으로 전화해 주십시오.

Português/Portuguese

Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 0-000-000-0000 (TTY: 7-1-1)

Русский/Russian

Помощь доступна на вашем языке: 0-000-000-0000 (TTY: 7-1-1). Эти услуги предоставляются бесплатно.

Tagalog

Makakakuha kayo ng tulong sa iyong wika: 0-000-000-0000 (TTY: 7-1-1). Ang mga serbisyong ito ay libre.

اردو/Urdu)

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 0000-000-000-0 (TTY: 7-1-1)۔

Tiếng Việt/Vietnamese

Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 0-000-000-0000 (TTY: 7-1-1).

Yorùbá/Yoruba

Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi 0-000-000-0000 (TTY: 7-1-1)

MDH Non-Discrimination Statement and Taglines for Small-Sized Significant Publications and Communications Template

Use this template to add the Non-Discrimination Statement and Taglines on **small-sized significant publications and communication** (e.g. postcards and pamphlets) required in accordance to Section 1557 of the Affordable Care Act (ACA). Full size significant publications and communication require posting of the MDH Non-Discrimination Notice, Grievance Procedure and taglines advising that language assistance is available at no cost in a least the [top 15](#) languages spoken by individuals with limited English proficiency in Maryland.

Instructions:

1. Fill in the general contact number and TTY contact number for your MDH program in the applicable fields. **(Note: the telephone numbers you list must connect the public with appropriate staff within your entity who understands their requirement to provide meaningful language access or auxiliary aids, will connect the public to appropriately trained bilingual staff and/or is aware of how to utilize the interpretation, translation and visual communications services provided by the State of Maryland. This contact number should not be the MDH main telephone number if your program has a different main telephone number that is published. This telephone number must also not be the number to EACU, OEOP. Providing an inaccurate or different telephone number than the general public utilizes to communicate with your program causes unnecessary delays in services and may also be viewed as differential treatment.)**
2. Save the document.
3. Use the content from the document in the development or replacement of small-sized significant publications and communications. Section 1557 permits covered entities to exhaust already existing publications first before adding the statement and taglines.

MDH Non-Discrimination Statement

The Department of Health (MDH) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, sex, age, and/or disability, in its health programs and activities.

English

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