

Cleveland Clinic Employee Health Plan Non-Discrimination Notice

Cleveland Clinic's Employee Health Plan (EHP) (<https://employeehealthplan.clevelandclinic.org>) and Employee Wellness Program (<https://employeehealthplan.clevelandclinic.org/Home/Healthy-Choice/Guidelines>) comply with applicable laws and do not discriminate on the basis of race, color, culture, ethnicity, national origin (including limited English proficiency and primary language), age, disability, religion, socioeconomic status, or sex (including but not limited to sex characteristics, intersex traits, pregnancy or related conditions, sexual orientation, and sex stereotypes). EHP and the Employee Wellness Program do not exclude people or treat them differently in any health programs and/or activities because of race, color, culture, ethnicity, national origin (including limited English proficiency and primary language), age, disability, religion, socioeconomic status, or sex (including but not limited to sex characteristics, intersex traits, pregnancy or related conditions, sexual orientation, and sex stereotypes).

EHP and the Employee Wellness Program provide, free of charge, reasonable modifications for individuals with disabilities, and appropriate auxiliary aides and services and language assistance to enable individuals to have an equal opportunity to access its health programs and/or activities. Such modifications, auxiliary aids and services and language assistance may include:

- Qualified interpreters (including ASL interpreter services).
- Information in other formats (i.e., audio, accessible electronic formats, other formats).
- Information written in other languages.

If you need interpreter or other communication related services, please contact **Cleveland Clinic Global Patient Services Dispatch** at 1-833-858-1813 or 216-445-7044.

If you require other reasonable modifications due to a disability, please contact **Cleveland Clinic Section 1557 Coordinator** at:

Cleveland Clinic Ombudsman Department

Attn: Section 1557 Coordinator

9500 Euclid Avenue, A-50

Cleveland, Ohio 44195

Telephone: 1-800-223-2273

Fax: (216) 445-6086

Email: 1557Coordinator@ccf.org

Webpage: <https://my.clevelandclinic.org/departments/patient-experience/depts/officepatient-experience/ombudsman>

EHP and the Employee Wellness Program shall provide reasonable accommodations to allow qualified individuals with disabilities to access its health programs and/or activities. You cannot be retaliated against for exercising these rights.

If you believe that EHP or the Employee Wellness Program has failed to provide appropriate modifications, auxiliary aids and services and language assistance services or discriminated in another way on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability, or sex (including but not limited to sex characteristics, intersex traits, pregnancy or related conditions, sexual orientation, and sex stereotypes), you can file a grievance with Cleveland Clinic Ombudsman Department, using the contact information above. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Cleveland Clinic Ombudsman Department is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services via any of the following:

- email (OCRComplaint@hhs.gov)
- phone (toll-free at: 1-800-368-1019, TDD: 1-800-537-7697)
- OCR Complaint Portal (ocrportal.hhs.gov/ocr/smartscreen/main.jsf)
- USPS at: Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

ENGLISH: ATTENTION: Free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-833-858-1813 (TTY: 711) or speak to your provider.

Spanish: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-833-858-1813 (TTY: 711) o hable con su proveedor.

French Creole: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd aladispozisyon w gratis pou lang ou pale a. Èd ak sèvis siplemantè apwopriye pou bay enfòmasyon nan fòm aksesib yo disponib gratis tou. Rele nan 1-833-858-1813 (TTY: 711) oswa pale avèk founisè w la.

Chinese (simplified): 备注: 您可获得免费的语言协助服务。还可免费提供适当的辅助工具和服务，以无障碍格式提供信息。请致电 1-833-858-1813 (TTY: 711) 或咨询您的医疗服务提供者。

Chinese (traditional): 注意: 您可獲得免費的語言協助服務。同時也免費提供適當的輔助和服務，讓您以無障礙方式獲得資訊。請致電 1-833-858-1813 (聽話障專線：711) 或與您的醫療服務提供者洽談。

Vietnamese: LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-833-858-1813 (Người khuyết tật: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

Tagalog: PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyon sa tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-833-858-1813 (TTY: 711) o makipag-usap sa iyong provider.

French: ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-833-858-1813 (TTY : 711) ou parlez à votre fournisseur.

Nepali: ध्यान दिनुहोस्: तपाईंका लागि भाषा सहायता सेवाहरू निःशुल्क उपलब्ध छन्। पहुँचयोग्य ढाँचामा जानकारी प्रदान गर्न उपयुक्त सहायक सहायता र सेवाहरू पनि निःशुल्क उपलब्ध छन्। 1-833-858-1813 (TTY: 711) मा कल गर्नुहोस् वा आफ्नो प्रदायकसँग कुरा गर्नुहोस्।

Portuguese: ATENÇÃO: Serviços gratuitos de de assistência linguística estão disponíveis para você. Ajudas e serviços auxiliares apropriados para fornecer informações em formatos acessíveis também estão disponíveis gratuitamente. Ligue para 1-833-858-1813 (TTY: 711) ou fale com seu médico.

Arabic:

كما تتوفر وسائل. إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية: تنبيه - اتصل على الرقم م. مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجاناً "أو تحدث إلى مقدم الخدمة (1-833-858-1813 (TTY: 711) .

Russian: ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-833-858-1813 (TTY: 711) или обратитесь к своему поставщику услуг.

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-833-858-1813 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

Korean: 주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-833-858-1813 (TTY: 711) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Italian: ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l'1-833-858-1813 (TTY: 711) o parla con il tuo fornitore.

Polish: UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 1-833-858-1813 (TTY: 711) lub porozmawiaj ze swoim dostawcą.

Serbian: PAŽNJA: Besplatne usluge jezičke pomoći su vam na raspolaganju. Odgovarajuća pomoćna sredstva i usluge za pružanje informacija u dostupnim formatima su takođe dostupni besplatno. Pozovite 1-833-858-1813 (TTY: 711) ili razgovarajte sa svojim pružaocem usluga.

Croatian: PAŽNJA: Dostupne su vam besplatne usluge jezične pomoći. Odgovarajuća pomoćna pomagala i usluge za pružanje informacija u pristupačnim formatima također su dostupni besplatno. Nazovite 1-833-858-1813 (TTY: 711) ili razgovarajte sa svojim pružateljem usluga.

Japanese: 注: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル（誰もが利用できるよう配慮された）な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。1-833-858-1813（TTY: 711）までお電話ください。または、ご利用の事業者にご相談ください。