



NOTICE OF NONDISCRIMINATION

Discrimination is Against the Law

Mountain Land Rehabilitation 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, sex, gender identity or sexual orientation.

Mountain Land Rehabilitation provides free aids and services to people with disabilities to communicate effectively with company representatives, such as:

- Qualified sign language interpreters
- Written information in other formats (such as large print, audio, accessible electronic formats)
- Language services to people whose primary language is not English, such as:
 - ✓ Qualified interpreters
 - ✓ Information written in other languages

If you need these services, contact your treating clinician or a Manager.

If you believe that Mountain Land Rehabilitation has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, the following options are available to you to communicate your concern:

Directly:

Bob Farrell, Chief Executive Officer at 800.574.4792 x106
Laura Riddell, Chief Compliance Officer at 800.574.4792 x103
Voicemail: 800.574.4792 x203
Email at compliance@mlrehab.com:

You may file a grievance in person or by mail to:
Mountain Land Rehabilitation
Attn: Compliance
1952 East 7000 South, Suite 100
Salt Lake City, UT 84121

If you need assistance in filing a grievance, you may contact either of the aforementioned individuals who can either assist you or direct you to someone that will assist 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://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>.

Español (Spanish)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

繁體中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

Tagalog (Tagalog – Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

Հայերեն (Armenian)

Ուշադրություն: եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցություն:

یسرافی (Farsi, Sudan, Persian)

امش یارب ناگیار تروصب دیکن یم وگتفگ یسراف نابز هب رگا هجوت

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

日本語 (Japanese)

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。

اڤرعبڤة (Arabic)

مقرب لصلتا. اناجلاب كل رفاوتت غوغل للدعاسم الامدخ ناف، غللال ركذا ثدحتت تنك اذا: غظوخلم

ਪੰਜਾਬੀ (Punjabi)

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹੈ।

ខ្មែរ (Cambodian)

សំខាន់ៗ: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយភាសាសំខាន់ៗគឺជាការសម្រេចបានសំខាន់ៗរបស់អ្នក។ ចូរ ទូរស័ព្ទ

Hmoob (Hmong)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj.

हिंदी (Hindi)

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।

ภาษาไทย (Thai)

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี