

Case Dental Care, PLLC
Nondiscrimination Statement:

Discrimination is Against the Law

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

Case Dental Care, PLLC:

- 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)
- Provides free 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 Timothy Case, D.M.D.– Health Information Manager/Privacy Officer.

If you believe that Case Dental Care, PLLC 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: Timothy S. Case, D.M.D.– Health Information Manager/Privacy Officer, 3918 Tennessee Avenue, Suite 300 Chattanooga, TN 423-821-9771, Fax: 423-821-9772, E-mail: casedentalcare@bellsouth.net. You can file a grievance in person or by mail, fax,

or email. If you need help filing a grievance, Timothy S. Case, D.M.D.– Health Information Manager/Privacy Officer 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>.

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Appendix B to Part 92—Sample Tagline Informing Individuals With Limited English Proficiency of Language Assistance Services

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-845- 452-1700.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1- 845-452-1700

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-845-452-1700

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 1-845-452-1700。

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-845-452-1700번으로 전화해 주십시오.

signification communications that are small-size:

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