Riverside University HEALTH SYSTEM
Behavioral Health

NONDISCRIMINATION NOTICE

Discrimination is against the law. RUHS-BH follows State and Federal civil rights laws. RUHS-BH does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

RUHS-BH provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, braille, audio or accessible electronic formats)
- 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 RUHS-BH between 8:00am-5:00pm by calling 800-499-3008. Or, if you cannot hear or speak well, please call 711. Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form.

HOW TO FILE A GRIEVANCE

If you believe that RUHS-BH has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with the RUHS-BH Compliance Office. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact Ashley Trevino-Kwong between 8:00am-5:00pm by calling 800-413-9990. Or, if you cannot hear or speak well, please call 711.
- In writing: Fill out a complaint form or write a letter and send it to:

RUHS-BH Compliance Office
9990 County Farm Road
Riverside, CA 92503

- In person: Visit your doctor's office or RUHS-BH and say you want to file a grievance.
- Electronically: Visit RUHS-BH website at

  https://www.ruhealth.org/behavioral-health

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711 (California State Relay)**.
- In writing: Fill out a complaint form or send a letter to:

  Department of Health Care
  Services Office of Civil Rights
  P.O. Box 997413, MS 0009
  Sacramento, CA 95899-7413

  Complaint forms are available at
  http://www.dhcs.ca.gov/Pages/Language_Access.aspx

- Electronically: Send an email to CivilRights@dhcs.ca.gov.

OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- By phone: Call **1-800-368-1019**. If you cannot speak or hear well, please call **TTY/TDD 1-800-537-7697**.

- In writing: Fill out a complaint form or send a letter to:

  U.S. Department of Health and Human Services
  200 Independence Avenue, SW
  Room 509F, HHH Building
  Washington, D.C. 20201

- Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

- Electronically: Visit the Office for Civil Rights Complaint Portalat https://ocrportal.hhs.gov/ocr/portal/lobby.jsf