

# Discrimination is Against the Law

Hartford HealthCare complies with applicable State and Federal civil rights laws and does not tolerate discrimination against any person, including patients and health care team members, on the basis of race, color, national origin, including limited English proficiency and primary language, ethnicity, culture, language, disability, age, religion, socioeconomic status, sex, sexual orientation, sex characteristics (including intersex traits), pregnancy or related conditions, sex stereotypes, gender identity or expression, or any other characteristic protected by law. Coercion or other discrimination on the basis of conscience, whether based on religious beliefs or moral convictions, in certain circumstances, will also not be tolerated, in compliance with applicable Federal health care conscience protection statutes including the Church Amendments, the Public Health Service Act, the Weldon Amendment, the Affordable Care Act, and other authorities, per the U.S. Department of Health and Human Services.

Hartford HealthCare provides reasonable modifications for individuals with disabilities and appropriate auxiliary aids and services.

## Language Services

### Hartford HealthCare:

- Provides free and timely aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (braille, large print, audio, accessible electronic formats, other formats)
- Provides free and timely 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 Elizabeth Begley at 860.696.1246.

ATTENTION: Language assistance services, free of charge, are available to you. Call 1-860-696-1246 (TTY: 1-860-545-2247).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-860-696-1246 (TTY: 1-860-545-2247).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-860-696-1246 (TTY: 1-860-545-2247).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-860-696-1246 (TTY: 1-860-545-2247).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-860-696-1246 (TTY: 1-860-545-2247).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-860-696-1246 (TTY: 1-860-545-2247).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-860-696-1246 (TTY: 1-860-545-2247).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-860-696-1246 (TTY: 1-860-545-2247).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-860-696-1246 (телетайп: 1-860-545-2247).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-860-696-1246 (TTY: 1-860-545-2247).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-860-696-1246 (رقم هاتف الصم والبكم: 1-860-545-2247).

주의: 한국어를 사용하지는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-860-696-1246 (TTY: 1-860-545-2247). 번으로 전화해 주십시오.

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-860-696-1246 (TTY: 1-860-545-2247).

ध्यान दें: यदि बोलते हैं तो आपके आप हिंदी लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-860-696-1246 (TTY: 1-860-545-2247). पर कॉल करें।

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-860-696-1246 (TTY: 1-860-545-2247).

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-860-696-1246 (TTY: 1-860-545-2247).

If you believe that Hartford HealthCare has failed to provide these services or discriminated or coerced in another way on the basis of race, color, national origin, age, disability, sex, or conscience, you can file a grievance with:

### Elizabeth Begley

Civil Rights Coordinator

9 Farm Springs

Farmington, CT 06032

P: 860.696.1246 TTY 860.545.2247

Fax 860.665.8088, or e-mail

[Elizabeth.Begley@hhchealth.org](mailto:Elizabeth.Begley@hhchealth.org)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Elizabeth Begley, Civil Rights Coordinator 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 [ocrportal.hhs.gov/ocr/portal/lobby.jsf](http://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 [hhs.gov/ocr/office/file/index.html](http://hhs.gov/ocr/office/file/index.html).

Hartford HealthCare



[HartfordHealthCare.org/patients-visitors/patients-statement-of-non-discrimination](http://HartfordHealthCare.org/patients-visitors/patients-statement-of-non-discrimination)