

## DISCRIMINATION IS AGAINST THE LAW

**Boundary Community Hospital** complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. **Boundary Community Hospital** does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, or because a patient is covered by a program such as Medicaid or Medicare. If this facility provides emergency services, it must not deny those services to a person who needs them but cannot pay for them.

### **Boundary Community Hospital:**

- 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 the Patient Advocate.

If you believe that **Boundary Community Hospital** 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: Civil Rights Coordinator, 6640 Kaniksu Street, Bonners Ferry, Idaho 83805  
(208) 267-3141 ext 4283, [patientadvocate@bcch.org](mailto:patientadvocate@bcch.org). You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the 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 <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>.

## INTERPRETER SERVICES AVAILABLE

ATTENTION: Language assistance services, free of charge, are available to you. Please call 1-800-752-6096.

Español (Spanish)

**ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-752-6096.

**Deutsch (German)**

**ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-752-6096.

**Français (French)**

**ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-752-6096.

**Srpsko-hrvatski (Serbocroatian)**

**OBAVJEŠTENJE:** Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-800-752-6096.

**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。請致電1-800-752-6096

**Tagalog**

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-752-6096.

**Русский (Russian)**

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-752-6096.

**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。1-800-752-6096 まで、お電話にてご連絡ください。

**Português (Portuguese)**

**ATENÇÃO:** Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-752-6096.

**العربية (Arabic)**

ن اجم ل اب كل رفاوتت ةىوغلل ا ةدعاسملا تامدخ نإف ،ةغلل لكذا ثدحتت تنك اذا :ةظوحلم 1-800-752-6096 مقرب لصتا

**한국어 (Korean)**

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-752-6096번으로 전화해 주십시오.

**Tiếng Việt (Vietnamese)**

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-752-6096.

**Română (Romanian)**

**ATENȚIE:** Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-800-752-6096.

नेपाली (Nepali)

ध्यान ढदनुहोसः तपाइले नेपाल ढोल्नहन्छ भन तपाइको ढनिम्त भाषा सहायता सवाहरु ढनःशल्क रूपमा उपलब्ध छ । फोन गनुहोसर् 1-800-752-6096 ।

**Italiano (Italian)**

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-752-6096