

**Appendix A to Part 92—Notice Informing Individuals About Nondiscrimination and Accessibility Requirements and Nondiscrimination Statement:**

**Discrimination is Against the Law**

Health West, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Health West, Inc. does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Health West, Inc.:

- 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 Jeremy Smuin, Compliance Officer.

If you believe that Health West, Inc. 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:

Jeremy Smuin, Compliance Officer  
500 S. 11th Ave., Ste. 400, Pocatello, ID 83201  
208-232-7862 Ext. 1763, fax: 208-232-7869, or email [jeremy@healthwestinc.org](mailto:jeremy@healthwestinc.org)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Jeremy Smuin, Compliance 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>.

**Appendix B to Part 92—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 1-904-398-7205 (TTY: 1-866-268-3297)

