



american family care[®]
The Right Care. Right Now.

NOTICE AND NON-DISCRIMINATION STATEMENT

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

American Family Care:

- **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**
- **Provides free language services to people whose primary language is not English, such as:**
 - **Qualified interpreter services**
 - **Information written in other languages**

If you need these services, please notify clinic staff.

If you believe that American Family Care 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:

AFC Corporate Compliance Director
3700 Cahaba Beach Rd.
Birmingham, AL 35242
205.380.5530 (p)
eehumphreys@americanfamilycare.com

You can file a grievance in person or by mail, fax, or email. If you need help filing grievances contact: The Compliance Office as given above.

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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TENNESSEE


ENGLISH

Point to your language. An interpreter will be called. The interpreter is provided at no cost to you.


Spanish Español 
Señale su idioma y llamaremos a un intérprete.
El servicio es gratuito.


German Deutsch 
Zeigen Sie auf Ihre Sprache. Ein Dolmetscher wird
angefordert. Der Dolmetscher ist für Sie kostenlos.


Arabic عربي 
أشر إلى لغتك. وسيتم الاتصال بمترجم فوري. كما
سيتم إحضار المترجم الفوري مجاناً.


Gujarati ગુજરાતી 
તમારી ભાષાનો ઉલ્લેખ કરો. દુભાષિયાને બોલાવી શકાશે.
દુભાષિયાને બોલવવામાં તમારે ખર્ચ આપવો નહિ પડે.


China 請指認您的語言，以便為您提供免費的口譯服務。 請指認您的語言，以便為您提供免費的口譯服務。


Japanese 日本語 
あなたの話す言語を指してください。
無料で通訳サービスを提供します。


Vietnamese Tiếng Việt 
Hãy chỉ vào ngôn ngữ của quý vị. Một thông dịch viên sẽ được
gọi đến, quý vị sẽ không phải trả tiền cho thông dịch viên.


Tagalog Tagalog 
Ituro po ang inyong wika. Isang tagasalin ang
ipagkakaloob nang libre sa inyo.


Korean 한국어 
귀하께서 사용하는 언어를 지정하시면 해당
언어 통역 서비스를 무료로 제공해 드립니다.


Hindi हिंदी 
अपनी भाषा को इंगित करें। जिसके अनुसार आपके लिए दुभाषिया
बुलाया जाएगा। आपके लिए दुभाषिया की निशुल्क व्यवस्था की जाती है।

French Français 
Indiquez votre langue et nous appellerons un
interprète. Le service est gratuit.

Russian Русский 
Укажите язык, на котором вы говорите. Вам вызовут
переводчика. Услуги переводчика предоставляются бесплатно.

Laotian ພາສາລາວ 
ຊີ້ບອກພາສາທີ່ເຈົ້າເວົ້າໄດ້. ພວກເຮົາຈະຕິດຕໍ່ນາຍພາສາໃຫ້.
ທ່ານບໍ່ຕ້ອງເສຍເງິນຄ່າແປໃຫ້ແກ່ນາຍແປພາສາ.

Farsi فارسی 
زبان مورد نظر خود را مشخص کنید. یک مترجم برای شما درخواست
خواهد شد. مترجم بصورت رایگان در اختیار شما قرار می گیرد.

Amharic አማርኛ 
ቋንቋዎትን ያመልክቱ። አስተርጓሚ ይጠራል።
አስተርጓሚው በነጻ ይቀርብልዎለታል።