

**Nondiscrimination in Health Programs and  
Activities Affordable Care Act – Section 1557;  
Title VI of the Civil Rights Act of 1964,  
Section 504 of the Rehabilitation Act of 1973,  
Age Discrimination Act of 1975**

Volunteers of America National Services (VOANS) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, gender identity or sexual orientation. VOANS does not exclude people or treat them differently because of race, color, national origin, age, disability, gender identity or sexual orientation.

VOANS: Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters, and
- 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, and
- Information written in other languages

If you need these services, ask a member of your care team. If you believe that VOANS failed to provide these services or discriminated in another way on the bases of race, color, national origin, age, disability, gender identity or sex, you can file a grievance with VOANS.

Volunteers of America National Services

7485 Office Ridge Circle  
Eden Prairie Minnesota 55344

You can file a grievance in person by mail, fax or email. If you need help filing a grievance, the VOANS Grievance Coordinator can 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 Suite 515F,  
HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD); 1-202-619-3818  
(Fax)

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

French Creole (Haitian Creole): ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou.

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

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。

Arabic:

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-xxx-xxx-xxxx (رقم هاتف الصم)

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.

Portuguese: ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.

Hmong: LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj.

Cushite: XIYYEEFFANNAA: Afaan dubbattu Oromiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama.

Italian: ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti.

Amharic: ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል፡ ወደ