NONDISCRIMINATION NOTICE

Discrimination is against the law. Sonoma County follows State and Federal civil rights laws. Sonoma County does not unlawfully discriminate, exclude people, or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation.

Sonoma County provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
  - ✓ Qualified sign language interpreters
  - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- 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 Sonoma County between 8:00 a.m. - 5:00 p.m. by calling 1-707-565-7895. Or, if you cannot hear or speak well, please call 711, or 1-800-735-2929 (TTY). Upon request, this document can be made available to you in braille, large print, audiocassette, or electronic form.

HOW TO FILE A GRIEVANCE

If you believe that Sonoma County has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity, or sexual orientation, you can file a grievance with a Sonoma County Behavioral Health Division (BHD) Grievance Coordinator. You can file a grievance by phone, in writing, in person, or electronically:

- By phone: Contact a Sonoma County BHD Grievance Coordinator between 8:00 a.m. - 5:00 p.m. by calling 707-565-7895. Or, if you cannot hear or speak well, please call: 711 or 1-800-735-2929 (TTY).
- In writing: Fill out a complaint form, or write a letter and send it to:

  Sonoma County BHD Grievance Coordinator
  2227 Capricorn Way
  Santa Rosa, CA 95407-5419

- In person: Visit your doctor's office or Sonoma County BHD, and say you want to file a grievance.
- Electronically: Visit Sonoma County BHD website at: https://sonomacounty.ca.gov/health-and-human-services/health-services/divisions/behavioral-health/contractor-resources/medi-cal-informing-materials

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call: **916-440-7370**. If you cannot speak or hear well, please call: **711 (Telecommunications Relay Service).**
- In writing: Fill out a complaint form or send a letter to:

  Department of Health Care Services Office of Civil Rights
  P.O. Box 997413, MS 0009
  Sacramento, CA 95899-7413

- Complaint forms are available at: http://www.dhcs.ca.gov/Pages/Language_Access.aspx.
- Electronically: Send an email to: CivilRights@dhcs.ca.gov.

OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing, or electronically:

- By phone: Call: **1-800-368-1019.** If you cannot speak or hear well, please call: **TTY/TDD 1-800-537-7697.**
- In writing: Fill out a complaint form or send a letter to:

  U.S. Department of Health and Human Services
  200 Independence Avenue, SW
  Room 509F, HHH Building
  Washington, D.C. 20201

- Complaint forms are available at:

  http://www.hhs.gov/ocr/office/file/index.html

- Electronically: Visit the Office for Civil Rights Complaint Portal at:

  https://ocrportal.hhs.gov/ocr/portal/lobby.jsf