

**- Nondiscrimination and Accessibility Statement -
DISCRIMINATION IS AGAINST THE LAW**

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

- 1) **Los Alamitos Cardiovascular/Performance Vein Institute of Los Alamitos** may provide contact information for 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)
- 2) **Los Alamitos Cardiovascular/Performance Vein Institute of Los Alamitos** may provide contact information for services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need the aforementioned services, contact Group Administrator at (562) 430-7533.

If you believe **Los Alamitos Cardiovascular/Performance Vein Institute of Los Alamitos** 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:

Group Administrator
3771 Katella Ave., Suite 300, Los Alamitos, CA 90720
Phone: (562) 430-7533 | FAX (562) 430-8055

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our Group Administrator 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
Phones: 1 (800) 368-1019 or 1 (800) 537-7697 (TDD)

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>