



805 Sunset Blvd Conrad, MT 59425

[www.ponderamedical.org](http://www.ponderamedical.org)

Phone: 406-271-3211

Fax: 406-271-3917

*"Best of Care, Close to Home"*

## Nondiscrimination Policy

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

### **Pondera Medical Center:**

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 the Human Resources Department .

If you believe that Pondera Medical Center 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:

Human Resources Department,  
805 Sunset Blvd., Conrad, MT 59425,  
Phone: 406-271-2235, Fax: 406-271-3917  
[hr@ponderamedical.org](mailto:hr@ponderamedical.org).

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Human Resources Department 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, through the Office for Civil Rights Complaint Portal, available:

- online at: <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>
- by mail: U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building Washington, D.C. 20201

If you have any questions or need help filing a civil rights, conscience or religious freedom, or health information privacy complaint, you may email OCR at [OCRA@hhs.gov](mailto:OCRA@hhs.gov) or call the U.S. Department of Health and Human Services, Office for Civil Rights toll-free at: 1-800-368-1019, TDD: 1-800-537-7697.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (801) 572-7864.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche

Hilfsdienstleistungen zur Verfügung. Rufnummer: (801) 572-7864.

注意:如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 (801) 572-7864。

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。(801) 572-7864。ま

で、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa (801) 572-7864.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le (801) 572-7864.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (801) 572-7864.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-801-572-7864 번으로 전화해 주십시오.

ا: ٥٧٢-٧٨٦٤ ( ٨٠١ ) مقرب لصتا .ناجملاب كل رفاوتت ؤيوغلا ؤءءاسملا تامءء ناف؁ ؤغلا ركءا ؤءءءت ؤنك اء ( ٧٥٢ - مقر ٧٨٦٤

เรียน: ถา คุณพูด ภาษาไทยคุณสมารถไ้รับ ีการช่วยเหลือทางภาษาได้ฟรี โทร 1-801-572-7864.

MERK: Hvis du snakker norsk, er gratis språkassistentetjenester tilgjengelige for deg. Ring (801) 572-7864.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (801) 572-7864.

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером (801) 572-7864.

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannsch du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: (801) 572-7864.

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero (801)-572-7864.

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