

Non-Discrimination Notice

This facility complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This facility does not discriminate against any person on the basis of color, race, gender, age, religion, national origin, ethnicity, culture, language, disability, genetic information, gender identity or expression, socioeconomic status, sexual orientation, veteran's status or any other basis protected by applicable federal, state or local law, in admission, treatment, visitation, or participation in our programs, services, and activities or employment.

Our facility:

- 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 Ethics and Compliance Officer (ECO) listed below.

If you believe that our facility has failed to provide these services or discriminated in another way on the basis of color, race, gender, age, religion, national origin, ethnicity, culture, language, disability, genetic information, gender identity or expression, socioeconomic status, sexual orientation, veteran's status or any other basis protected by applicable federal, state or local law, you can file a grievance with:

Ethics & Compliance Officer, 2435 Forest Drive, Columbia, SC

Telephone: (803)256-5300, Fax (803)256-5935

Email: Providence.eco@lpnt.net

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the ECO 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

1-800-368-1019, 800-537-7697 (TDD)

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

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-803-256-5300.

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 1-803-256-5300

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-803-256-5300.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-803-256-5300 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-803-256-5300.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-803-256-5300.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-803-256-5300.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-803-256-5300.

ध्यान: तमे गुजराती भाषा सहाय सेवाओ विना मूल्ये, बोले तो, छे तमने उपलब्ध छे. कोल करे 1-803-256-5300.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-803-256-5300.

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-803-256-5300.

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。1-803-256-5300 まで、お電話にてご連絡ください。

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-803-256-5300.

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-803-256-5300

ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយភាសាដោយឥតគិតថ្លៃ, មាន ដែលអាចប្រើបានទៅអ្នក។ ហៅទូរស័ព្ទទៅ 1-803-256-5300 ។