**Informing Individuals About Nondiscrimination and Accessibility Requirements**

Surgery Center of Fort Wayne complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Surgery Center of Fort Wayne does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity).

            Surgery Center of Fort Wayne:

* 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 Amanda Shew

If you believe that Surgery Center of Fort Wayne has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity), you can file a grievance with:

* Gregory A. Wilson, Indiana Civil Rights Commissioner
* 100 North Senate Avenue, Room N300 Indianapolis, IN 46204
* 317-232-2600 Phone Number
* 317-232-6580 Fax Number

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Gregory A. Wilson 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 <https://www.hhs.gov/ocr/office/file/index.html>.