

## OCR NOTICE OF NONDISCRIMINATION

Source: HHS Office for Civil Rights

### **NT Family Dental PLLC, DBA Aspire® Family Dental**

complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

### **NT Family Dental PLLC, DBA Aspire® Family Dental**

does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

### **NT Family Dental PLLC, DBA Aspire® Family Dental**

- 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)
- 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 Amber Rodriguez, Civil Rights Coordinator

If you believe that NT Family Dental PLLC, DBA Aspire® Family Dental 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:

Amber Rodriguez, Civil Rights Coordinator

554 East Robinson St., North Tonawanda, NY 14120

PH: (716) 695-1137

TTY: (716) 833-1637 ext 106

Fax: (716) 260-1483

Email: [amberrodriguez@aspirefd2.com](mailto:amberrodriguez@aspirefd2.com)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Amber Rodriguez, Civil Rights Coordinator 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, DC 20201

Toll Free: 1-800-868-1019,

800-537-7697 (TDD)

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