Appendix A to Part 92—Sample Notice Informing Individuals About Nondiscrimination and Accessibility Requirements and Sample Nondiscrimination Statement:

Discrimination is Against the Law

[Name of covered entity] [Name of covered entity]

[Name of covered entity]:

[Name of Civil Rights Coordinator]

[Name and Title of Civil Rights Coordinator]

[TTY number—if covered] [Telephone number] [Mailing Address] [Civil Rights Coordinator] [Email] [Fax] entity has one

[Name and Title of Civil Rights Coordinator]
Office for Civil Rights Coordinator:

Office for Civil Rights (U.S. Department of Health and Human Services)

https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

Rights Complaint Portal:

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)