

APPENDIX A

NOTICE

Notice Informing Individuals About Nondiscrimination and Accessibility Requirements

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

The Osceola Community Hospital

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters; and
 - 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; and
 - Information written in other languages

If you need these services, contact the Section 1557 Coordinator.

If you believe that The Osceola Community Hospital as 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:

Section 1557 Coordinator
600 9th Avenue North
Sibley, Iowa 51249
Phone 1-712-754-2574
Fax 1-712-754-3782

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Section 1557 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, 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>.

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-712-754-2574.

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-712-754-2574.

Chinese: 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 1-712-754-2574。

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-712-754-2574.

Serbo-Croatian: OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-712-754-2574.

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-712-754-2574.

Arabic: كل رفاوتت ةىوغلل ا ةدعاسملا تامدخ نإف، ةغلل ركذا تكدحت تنك اذإ: ةظوح لم -1-712-754-2574)
1 مقرب لصتا. ن اجملاب
مكبل او مصل افتاه. -.

Laotian: ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-712-754-2574.

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-712-754-2574. 번으로 전화해 주십시오.

Hindi: ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-712-754-2574. पर कॉल करें।

French: ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-712-754-2574.

Pennsylvania Dutch: Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-712-754-2574.

Thai: เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-712-754-2574.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-712-754-2574.

Karen: ymol.ymo;= erh>uwdRAunD

AusdmtCd<AerRM>Ausdmtw>rRpXRvXAwvXmbl.vXmphRAeDwrHRb.ohM. vDRIAud;
1-712-754-2574.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-712-754-2574.

APPENDIX B

Taglines

Section 1557 requires posting of the taglines in at least the top 15 non-English languages spoken in the state in which the entity is located or does business. Below are the top 15 languages for the states in the Avera Health footprint. You will need to add the appropriate phone number at your facility where indicated on the tagline. Click the following link to obtain translations of the taglines as required by your state location and then click on the PDF entitled “Tagline”:

<http://www.hhs.gov/civil-rights/for-individuals/section-1557/translated-resources/index.html>.

Iowa

1	IA	Spanish
2	IA	Chinese
3	IA	Vietnamese
4	IA	Serbo-Croatian
5	IA	German
6	IA	Arabic
7	IA	Laotian
8	IA	Korean
9	IA	Hindi
10	IA	French
11	IA	Pennsylvanian Dutch
12	IA	Thai
13	IA	Tagalog
14	IA	Karen
15	IA	Russian

Minnesota

1	MN	Spanish
2	MN	Hmong
3	MN	Cushite
4	MN	Vietnamese
5	MN	Chinese
6	MN	Russian
7	MN	Laotian
8	MN	Amharic
9	MN	Karen
10	MN	German
11	MN	Mon-Khmer, Cambodian
12	MN	Arabic
13	MN	French
14	MN	Korean
15	MN	Tagalog

Nebraska

1	NE	Spanish
2	NE	Vietnamese
3	NE	Chinese
4	NE	Arabic
5	NE	Karen
6	NE	French
7	NE	Cushite
8	NE	German
9	NE	Korean
10	NE	Nepali
11	NE	Russian
12	NE	Laotian
13	NE	Kurdish
14	NE	Persian (Farsi)
15	NE	Japanese

North Dakota

1	ND	Spanish
2	ND	German
3	ND	Chinese
4	ND	Cushite
5	ND	Vietnamese
6	ND	Bantu
7	ND	Arabic
8	ND	Swahili
9	ND	Russian
10	ND	Japanese
11	ND	Nepali
12	ND	French
13	ND	Korean
14	ND	Tagalog
15	ND	Norwegian

South Dakota

1	SD	Spanish
2	SD	German
3	SD	Chinese
4	SD	Karen
5	SD	Vietnamese
6	SD	Nepali
7	SD	Serbo-Croatian
8	SD	Amharic
9	SD	Sudanic
10	SD	Tagalog
11	SD	Korean
12	SD	Russian
13	SD	Cushite
14	SD	Ukrainian
15	SD	French

APPENDIX C
NONDISCRIMINATION
STATEMENT

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

APPENDIX D

GRIEVANCE

PROCEDURE

Section 1557 Grievance Procedure

It is the policy of the Osceola Community Hospital not to discriminate on the basis of race, color, national origin, sex, age or disability. The Osceola Community Hospital has adopted an internal grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by Section 1557 of the Affordable Care Act (42 U.S.C. § 18116) and its implementing regulations at 45 C.F.R. pt. 92, issued by the U.S. Department of Health and Human Services.

Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age or disability in certain health programs and activities. Section 1557 and its implementing regulations may be examined in the office of:

Section 1557 Coordinator
600 9th Avenue North
1-712-754-2574
Fax 1-712-754-3782

who has been designated to coordinate the efforts of The Osceola Community Hospital to comply with Section 1557.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age or disability may file a grievance under this procedure. It is against the law for to ret Osceola Community Hospital aliate against anyone who opposes discrimination, files a grievance, or participates in the investigation of a grievance.

Procedure:

- Grievances must be submitted to the Section 1557 Coordinator within 60 days of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy or relief sought.
- The Section 1557 Coordinator (or her/his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Section 1557 Coordinator will maintain the files and records of [INSERT FACILITY NAME] relating to such grievances. To the extent possible, and in accordance with applicable law, the Section 1557 Coordinator will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.

- The Section 1557 Coordinator will issue a written decision on the grievance, based on a preponderance of the evidence, no later than 30 days after its filing, including a notice to the complainant of their right to pursue further administrative or legal remedies.
- The person filing the grievance may appeal the decision of the Section 1557 Coordinator by writing to the Administrator/Chief Executive Officer within 15 days of receiving the Section 1557 Coordinator's decision. The Administrator/Chief Executive Officer shall issue a written decision in response to the appeal no later than 30 days after its filing.

The availability and use of this grievance procedure does not prevent a person from pursuing other legal or administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age or disability in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is 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
1-800-868-1019
800-537-7697 (TDD)

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>. Such complaints must be filed within 180 days of the date of the alleged discrimination.

The Osceola Community Hospital will make appropriate arrangements to ensure that individuals with disabilities and individuals with limited English proficiency are provided auxiliary aids and services or language assistance services, respectively, if needed to participate in this grievance process. Such arrangements may include, but are not limited to, providing qualified interpreters, providing taped cassettes of material for individuals with low vision, or assuring a barrier-free location for the proceedings. The Section 1557 Coordinator will be responsible for such arrangements.