



Non-Discrimination Notice

React Health Holding, LLC, and health care provider subsidiaries d/b/a ReactDx, (collectively, “ReactDx”) 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).

ReactDx 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).

ReactDx:

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, please contact **(800)234-3278, option 2**.

If you believe that ReactDx 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:

Civil Rights Coordinator – Compliance Department

600 Atlantis Road

Melbourne, FL 32904

- **Phone: (321) 821-2032,**
- **Fax: (866) 294-3975,**
- **Email: Compliance@ReactDx.com**

You can file a grievance by mail, fax, or email. If you need help filing a grievance, our Civil Rights Coordinator is available to help you by calling **(321) 821-2032**.

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>.

ATTENTION: If the primary language you speak is other than English, language assistance services, free of charge, are available to you.

繁體中文 (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。

Español (Spanish)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на языке, отличном от английского, то вам доступны бесплатные услуги перевода.

العربية (Arabic)

بالمجان لك تتوافر اللغوية المساعدة خدمات فإن، الإنجليزية اللغة ليست بها تتحدث التي الأساسية اللغة كانت إذا: ملحوظة

Tagalog (Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.

Français (French)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

日本語 (Japanese)

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。

ध्यान दें: यदि आप हिंदी (Hindi)

बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं पर कॉल करें।

فارسی (Persian - Farsi)

است فراهم شما برای رایگان صورت به زبانی تسهیلات، کنیدی صحبت انگلیسی از غیر زبانی به اگر: توجه

Italiano (Italian)

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti.

ગુજરાતી (Gujarati)

સુચના: જો તમે બોલો છો તે પ્રાથમિક ભાષા અંગ્રેજી મસવાયની છે, તો મન:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે.

Português (Portuguese)

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.

ພາສາລາວ (Laotian)

ໂປດຊາບ: ຖ້າຫາກວ່າທ່ານເວົ້າ ພາສາລາວ, ພວກເຮົາມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສຍຄ່າ, ໃຫ້ທ່ານ.