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Updated on 10/2/2021
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Discrimination is against the law

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

PerformCare reduces language barriers to accessing services through the New Jersey Children’s System of Care by:

- Providing free aids and services to people with disabilities to communicate effectively with us, such as:
  - Written information in other formats (large print, audio, accessible electronic formats, and other formats).
  - Telecommunication devices such as Device for the Deaf (TDD) and Text Telephone (TTY) systems to enable individuals who are deaf, hard of hearing, or speech-impaired to use the phone to communicate.
- Providing language services at no cost to people whose primary language is not English, such as:
  - Qualified interpreter services.
  - Information written in other languages.

If you need these services, contact PerformCare at 1-877-652-7624 or [TTY (for the hearing impaired) 1-866-896-6975]. We are available 24 hours a day, seven days a week.

If you believe that PerformCare 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 submit a complaint by mail or phone, by either calling PerformCare’s Quality department at 1-877-652-7624 or by writing to:

PerformCare
Attn: Quality Department
300 Horizon Center Drive, Suite 306, Robbinsville, NJ 08691

If you need help filing a complaint, PerformCare’s Quality department 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](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

1-800-368-1019, 1-800-537-7697 (TDD)


Multi-language interpreter services

**Attention: If you do not speak English, language assistance services are available to you at no cost. Call 1-877-652-7624 (TTY 1-866-896-6975).**


Arabic: 


Bengali: পাঠান করুন, যদি আপনি বাংলা, ক্যাম্বিয়ান, বাংলা বলতে পারেন, তাহলে নিম্নলিখিত ভাষা সহায়তা পরিষেবার উপর আপনার আরো তথ্য হবে। ফোন করুন ১-৮৭৭-৬৫২-৭৬২৪ (TTY 1-866-896-6975).


Hindi: चित्र: यदि आप हिंदी बोलते हैं तो आपके लिए यूरूप में भाव सहायता सेवाएं उपलब्ध हैं। 1-877-652-7624 (TTY 1-866-896-6975) पर कॉल करें।

Chinese Cantonese: 注意：如果您使用粵語，您可以免費獲得語言援助服務。請致電：1-877-652-7624 (TTY 1-866-896-6975)。


Urdu: 

توجد فرمائيون: أجرأب اردو بوتلي بم، تو اب كي زياني كل کي خدمات منست
مین دستیاب بین. کال کرینیج (TTY 1-877-652-7624 (TTY 1-866-896-6975).

Turkish: Dikkat: Türkçe konuşuyorsanız dil yardımı hizmetlerinden ücretsiz olarak yararlanabilirsiniz. 1-877-652-7624 (TTY 1-866-896-6975) numaralı telefonu arayın.