



DERMATOLOGY ASSOCIATES

OF ROCHESTER

100 White Spruce Boulevard

Rochester, NY 14623

(P) 585-272-0700

(F) 585-272-8356

Non-Discrimination Statement

At Dermatology Associates of Rochester (DAR), we believe that each of our patients has the right to be cared for with respect, dignity, fairness, and compassion. It is our policy to provide care, treatment, and services free from discrimination related to race, color, national origin, age, disability, sex, sexual orientation, source of payment, gender identity or expression, ancestry, citizenship status, marital or parental status, pregnancy, military or veteran status, religion, socioeconomic status, or any other category protected by law.

DAR does not exclude from participation, deny benefits to, or engage in discrimination against any person employed or seeking employment on the basis of race, color, creed, religion, national origin, age, disability, genetic information, sex, sexual orientation, gender identity or expression, transgender status, gender dysphoria, ancestry, citizenship status, marital or parental status, pregnancy, military or veteran status, religion, socioeconomic status, or any other classification protected by applicable federal, state or local law.

Language Access

DAR 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)

DAR also 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 us at Dermatology Associates of Rochester by email at info@dermrochester.com or by phone at 585-272-0700. Services are primarily provided remotely through the use of a third-party vendor under contract with DAR.

If you believe that DAR has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity, you can file a grievance with: Kristina Riker by email at kriker@dermrochester.com or by phone at 585-272-0700.

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:

Policy of Non-Discrimination
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)