



**Dr. Keith Penner, DPM**

PODIATRIC MEDICINE AND SURGERY

# Notice of nondiscrimination and notice of availability of language assistance services and alternate formats

We\* comply with applicable civil rights laws and do not discriminate on the basis of race, color, national origin, age, sex, religion, ancestry, national origin, ethnic group identification, mental disability, physical disability, medical condition, genetic information, marital status, or sexual orientation (including pregnancy, sexual orientation, and gender identity).

We do not exclude people or treat them less favorably because of race, color, national origin, age, sex, religion, ancestry, national origin, ethnic group identification, mental disability, physical disability, medical condition, genetic information, marital status, or sexual orientation (including pregnancy, sexual orientation, and gender identity).

If you believe that we failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, of sex, you can send a complaint to the Civil Rights Coordinator:

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

Online: [ocrportal.hhs.gov/ocr/portal/lobby.jsf](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf)

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

Mail: U.S. Department of Health and Human Services  
200 Independence Ave. SW  
Room 509F, HHH Bldg.  
Washington, D.C. 20201

Complaint forms are available at [hhs.gov/ocr/office/file/index.html](https://hhs.gov/ocr/office/file/index.html)

## Office of Civil Rights - California Department of Health Care Services

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call 1-916-440-7370. If you cannot speak or hear well, please call 711 (Telecommunications Relay Service).
- In writing: Fill out a complaint form or send a letter to:  
Deputy Director, Office of Civil Rights Department of Health Care Services Office of Civil Rights  
P.O. Box 997413, MS 0009  
Sacramento, CA 95899-7413

Complaint forms are available at [dhcs.ca.gov/Pages/Language\\_Access.aspx](http://dhcs.ca.gov/Pages/Language_Access.aspx)

This notice is available at [penerapodiatry.com](http://penerapodiatry.com)

I have received and read the Notice of Nondiscrimination and Notice of Availability of Language Assistance Services and Alternate Formats.

**X** Initial \_\_\_\_\_ Date \_\_\_\_\_

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