Nondiscrimination Statement

Bay-Arenac Behavioral Health Authority (BABHA) complies with applicable federal civil rights laws, including Section 1557 of the Affordable Care Act, a does not discriminate on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability, or sex (consistent with the scope of sex discrimination described at 45 CFR § 92.101(a)(2)) including sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes.

BABHA provides appropriate aid and modifications, in a timely manner and free of charge, to individuals with disabilities necessary to ensure access and an equal opportunity to participate in its programs, activities, services, and benefits. If an individual needs assistance engaging in effective communication regarding services provided or is an individual with limited English proficiency, services available may include qualified interpreters, including American Sign Language interpreter, in-person or video interpreting, qualified readers, and information in alternate formats such as large print, recorded audio, and accessible electronic formats.

To request these services or a reasonable modification, contact BABHA's Recipient Rights/Customer Services (RR/CS) Department by phone at (989) 895-2317 or by email at RRCSDept@babha.org.

If you believe BABHA failed to provide these services or discriminated against you, you may file a grievance with the Recipient Rights/Customer Services Department. You may file a grievance in person at 201 Mulholland Avenue Bay City, MI 48708, by phone (989) 895-2317 or by fax (989) 895-2715.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. This compliant can be completed electronically at https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf or via mail at U.S. Department of Health & Human Services 200 Independence Avenue, S.W. – 509F Washington, D.C. 20201

For assistance, call (800) 368-1019 or TDD (800) 537-7697. Complaint instructions and forms are available on the HHS civil rights complaint webpage.

Updated August 26, 2026. Based on Section 1557 of the Affordable Care Act, 45 C.F.R. Part 92, and applicable federal civil rights laws; reflects the June 2026 notice concerning partial vacatur of provisions of the 2024 rule.