



# Northern California Tile Industry Trust Funds

Health & Welfare • Vacation & Holiday • Defined Benefit Pension • Defined Contribution Pension

November 2024

## NOTICE OF NONDISCRIMINATION

### Discrimination is Against the Law

The Northern California Tile Health and Welfare Plan (“the Health Plan”) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (consistent with the scope of sex discrimination described at 45 CFR § 92.101(a)(2)). The Health Plan does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

#### The Health Plan:

Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services 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 assistance services to people whose primary language is not English, which may include:

- Qualified interpreters
- Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact the Health Plan at (925) 208-9995.

If you believe that the Health Plan 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 file a grievance with the Health Plan. You can file a grievance in person or by mail, fax, or email at:

Northern California Tile Industry Health and Welfare Plan  
7180 Koll Center Parkway, Suite 200  
Pleasanton, CA 94566  
P.O. Box 1607  
San Ramon, CA 94583  
Fax: (925) 462-0108  
Email: [staff@bac3tilebenefits.org](mailto:staff@bac3tilebenefits.org)

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:

7180 Koll Center Parkway, Suite 200 Pleasanton, CA 94566  
P.O. Box 1607 San Ramon, CA 94583  
Phone 925.208.9995 • Toll Free 888.208.0250 • Facsimile 925.462-0108  
[www.bac3tilebenefits.org](http://www.bac3tilebenefits.org) • [staff@bac3tilebenefits.org](mailto:staff@bac3tilebenefits.org)

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 <http://www.hhs.gov/ocr/office/file/index.html>.