



Assurance of Compliance with Civil Rights Laws

The Medicaid Provider's assurance of compliance with the Civil Rights laws discussed below, and any other relevant state and/or federal Civil Rights laws, is given in consideration of and for the purpose of enrolling as a provider in the Mississippi Medicaid and/or CHIP program(s) through which Provider would be reimbursed, in part, with federal financial assistance received from the United States Department of Health and Human Services.

1. Title VI of the Civil Rights Act of 1964, as amended (codified at 42 U.S.C. § 2000d *et seq.*), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin (including limited English proficiency) be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973, as amended (codified at 29 U.S.C. § 794), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of their disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department. Providers must provide notice as to how services to ensure participation in the program may be obtained.
3. Title IX of the Education Amendments of 1972, as amended (codified at 20 U.S.C. § 1681 *et seq.*), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex (including pregnancy, sexual orientation, and gender identity), be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975, as amended (codified at 42 U.S.C. § 6101 *et seq.*), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Section 1557 of the Patient Protection and Affordable Care Act, as amended (codified at 42 U.S.C. § 18116), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the

United States shall, on the ground of race, color, national origin (including limited English proficiency), age, disability, or sex (including pregnancy, sexual orientation, and gender identity) be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

6. As applicable, the Church Amendments, as amended (codified at 42 U.S.C. § 300a-7), the Coats-Snowe Amendment (codified at 42 U.S.C. § 238n), the Weldon Amendment (e.g., Consolidated Appropriations Act, 2022, Pub. L. No. 117-103, Div. H, Title V § 507(d), 136 Stat 49, 496 (Mar. 15, 2022)) as extended by the Continuing Appropriations and Ukraine Supplemental Appropriations Act, 2023, Pub. L. No. 117-180, Div. A, § 101(8) (Sep. 30, 2022); Section 1553 of the Patient Protection and Affordable Care Act, as amended (codified at 42 U.S.C. § 18113), and Section 1303(b)(4) of the Patient Protection and Affordable Care Act, as amended (codified at 42 U.S.C. § 18023(b)(4)), and 45 C.F.R. Part 88, to the extent that the rights of conscience are protected and associated discrimination and coercion are prohibited, in any program or activity for which the Applicant receives Federal financial assistance. Consistent with applicable court orders, the version of Part 88 in effect as of [October 20, 2022] is found at 76 Fed. Reg. 9968-9977 (Feb. 23, 2011).

Providers who have received a Medicare certification approval letter and the compliance letter (Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Age Discriminations Act of 1975 and Section 1557 of the Affordable Care Act of 2010) will be in compliance with the requirements herein as Medicare and Medicaid civil rights requirements mirror one another since both programs are recipients of federal financial assistance and are monitored for non-discrimination by the United States Department of Health and Human Services' Office of Civil Rights.

The Office of the Governor, Division of Medicaid (DOM) is responsible to obtain assurances from participating Providers and review and enforce compliance with those assurances. To assist Providers in their compliance efforts, technical assistance materials have been provided which may be helpful. DOM staff may request additional information from the Provider at any time which may be obtained through a written request, telephone contact, or site review. In DOM's sole discretion, DOM may conduct a review or audit of Provider's compliance with the requirements herein at any time.

Providers enrolled in the Mississippi Medicaid and/or CHIP program(s) must maintain and enforce written policies substantially similar to the examples provided herein. Provider must also broadly disseminate such policies to participants, beneficiaries, and potential beneficiaries, employees, patients, community organizations, and referral sources, including those with sensory impairments, other physical impairments, and/or Limited English Proficiency (LEP). Failure to do so may result in termination of Provider's enrollment.

Provider has a continuing obligation to ensure that qualified persons with disabilities are not denied services because of their disability. To meet this obligation, Provider should, on its initiative, examine the needs of sensory and speech-impaired patients/clients and potential patients/clients and make necessary auxiliary aids readily available if doing so would significantly improve Provider's ability to provide benefits and services.

Establishing Effective Nondiscrimination Policies and Notice Procedures

Various sections of the regulations implementing Title VI of the Civil Rights Act of 1964 (Title VI), Section 504 of the Rehabilitation Act of 1973 (Section 504), the Age Discrimination Act of 1975 and Section 1557 of the Affordable Care Act of 2010, require providers that are "recipients" of Federal financial assistance to notify beneficiaries, potential beneficiaries, employees, and others of the availability of programs and services to all persons without regard to race, color, national origin, sex, disability, Limited English Proficiency, or age. For notice to be effective, an appropriate policy statement of nondiscrimination must be adopted and disseminated. (see Part II)

To meet these requirements, many providers elect to adopt a single policy of nondiscrimination on the basis of race, color, national origin, sex, disability, or age in the provision of services and employment. Additional nondiscrimination factors, such as sex, religion or creed, methods of payment, etc., are sometimes added to meet other federal, state, or local requirements. (A model nondiscrimination policy statement is attached.)

Once adopted, the notice must be distributed to the general public and such protected groups as sensory impaired persons and those with Limited English Proficiency. "Effective Notice" does not mean that every individual within a particular group must be notified or that all publications must be translated into languages represented in the service area population. Nor does it specifically require an outreach program. It usually means, however, that the provider must take extra steps to ensure that persons protected by the regulations have an equal opportunity to receive notice of and access to its programs.

Part I: Steps to Develop an Effective Notice Procedure

An effective procedure can usually be developed by taking the following steps: (The specific procedure will necessarily reflect the kinds of information normally distributed by the provider, community resources available, and input from those resources.)

1. Identify the existing methods of distributing information on services, benefits, waivers of rights and consent to treatment to beneficiaries, potential beneficiaries, applicants and employees.
2. Familiarize yourself with your service area by identifying the major languages and disabled groups. This can be done by gathering statistical data from such sources as the U.S. Census, local and state planning bodies, chambers of commerce, educational institutions, and other providers.
3. Determine if the existing methods of giving notice adequately reach persons with limited proficiency in English and persons with impaired vision or hearing.
4. Consult with members of these groups or with organizations representing them for suggestions about ways to give notice to their constituencies, such as at regular

meetings and conferences, through newsletters or other publications, and by posting in the provider/vendor's office and locations frequented by the particular group.

- For persons whose primary or exclusive language is other than English, translated versions of the notices and bilingual interpreters should be available. For persons who are sensory or speech impaired, braille versions, voice tapes, interpreters, or readers should be available depending upon the circumstances. The persons and groups receiving the notice are usually the best guides for determining the most effective methods.
5. Describe how the notices will be disseminated to Limited English Proficient speaking persons end to persons with sensory or speech impairments. This usually means adopting an instruction or standard operating procedure.
 6. Notify and train appropriate staff about the notice procedure.

Part II: Notice Requirements and Regulation Citations

Title VI

- Notify participants, beneficiaries, and other interested persons of the provisions of the Title VI Regulation and how it applies to the recipient's program. 45 C.F.R. § 80.6(d).
- Notify all persons concerning their right to file a complaint of discrimination and the procedure for filing such a complaint. 45 C.F.R. § 80.6(d).

Section 504

- Adopt and implement procedures to ensure that interested persons, including those with impaired vision or hearing, can obtain information about the recipient's facilities which are accessible to and usable by disabled persons. 45 C.F.R. § 84.22(f).
- Notify disabled persons, including those with sensory or speech impairments, of any general notices of the recipient's services or benefits and of written materials concerning waivers of rights or consent to treatment (e.g., information releases, financial agreements, insurance assignments, informed consent for treatment). 45 C.F.R. § 84.52(b).
- Notify participants, beneficiaries, applicants, employees, and affiliated unions or professional organizations that the recipient does not discriminate on the basis of disability in violation of Section 504 in the areas of access, admission, treatment, or employment. 45 C.F.R. § 84.8(a).
 - Include in the notice the name or title of the employee designated by the recipient to be responsible for coordinating its efforts to comply with Section 504.
 - Ensure that persons with impaired vision or hearing receive effective notice of the foregoing.
- Include the nondiscrimination notice in publications of general information about the recipient's programs by adding appropriate inserts in existing materials and publications or by revising and reprinting the materials and publications. 45 C.F.R. § 84.8(b).



CIVIL RIGHTS COMPLIANCE TECHNICAL ASSISTANCE MATERIALS

Age Discrimination Act

- Notify program beneficiaries of the protection against discrimination on the basis of age provided by the Act and its regulations. 45 C.F.R. § 91.32(b).

Section 1557

- Prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities under TVI, Title IX, the Age Discrimination Act and Section 504 of the Rehabilitation Act. 45 C.F.R. § 92.1.
- Provide meaningful access to an individual with limited English proficiency that is served or encountered in its health programs and activities. The covered entity must offer that individual a qualified interpreter and translation services. 45 C.F.R. § 92.201(a).

Sample Nondiscrimination Policy

As a recipient of federal financial assistance, the (name of provider) does not exclude, deny benefits to, or otherwise discriminate against any person on the grounds of race, color, sex, or national origin, or on the basis of disability or age in admission to, participation in, or receipt of the services and benefits of any of its programs and activities or in employment therein, whether carried out by (name of provider) directly or through a contractor or any other entity with whom the (name of provider) arranges to carry out its programs and activities.

This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Section 1557 of the Affordable Care Act of 2010, and Regulations of the U.S. Department of Health and Human Services issued pursuant to the Acts, Title 45 Code of Federal Regulations Part 80, 84, 91, and 92. (Other Federal Laws and Regulations provide similar protection against discrimination on grounds of sex and creed.)

In case of questions concerning this policy, or in the event of a desire to file a complaint alleging violations of the above, please contact:

Provider Name
Coordinator
Telephone
number TDD

Sample Nondiscrimination Statement

(Name of provider) does not discriminate against any person on the basis of race, color, national origin, sex, disability, or age in admission, treatment, or participation in its programs, services and activities, or in employment. For further information about this policy, contact: (name, phone number, TDD).



How to Establish Effective Communication Procedures for Persons with Limited English Proficiency and Persons with Impaired Hearing, Vision, or Speech

The Department of Health and Human Services has issued regulations to notify health care and social service providers, who are recipients of federal financial assistance from the Department, of their civil rights obligations under Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and Section 1557 of the Affordable Care Act of 2010. Regulations at Title 45, Code of Federal Regulations Part 80, issued pursuant to Title VI, prohibit recipients from conducting any program, activity or service in a manner that excludes, denies, or otherwise discriminates on the basis of race, color, or national origin. Regulations at Title 45, Code of Federal Regulations Part 84, issued pursuant to Section 504, prohibit similar discrimination on the basis of disability. Regulations at Title 45, Code of Federal Regulations Part 92.101, prohibit covered entities from discriminating on the basis of color, national origin, sex, age, or disability. Health care and social service providers may also be subject to Title II or Title III of the Americans with Disabilities Act (ADA). Title II of the ADA prohibits discrimination against individuals with a disability in public services, and Title III of the ADA prohibits discrimination in public accommodations against individuals with a disability.

A frequent cause of discrimination on the basis of national origin in a health care setting that may violate Title VI is a provider's method of communicating with patients and other persons who, because of their national origin, have limited proficiency in speaking or understanding English. A similar cause of disability discrimination is a provider's ineffective communication with patients and other persons who have sensory or speech impairments. Providers have an obligation under 45 C.F.R. Part 80 to ensure that persons with limited proficiency in English, because of their national origin, have a meaningful opportunity to apply for, receive or participate in, or benefit from the services offered.

Under 45 C.F.R. Part 84, for providers with 15 or more employees, individuals with sensory or speech impairments must have an opportunity equal to, or as effective as, that afforded others to apply for, receive or participate in, or benefit from the services offered. One way for providers to meet these obligations is to establish written procedures (sample written procedures are included) and train staff on how to obtain assistance in communicating with patients who are Limited English Proficient (LEP), and who have sensory or speech impairments. Providers also have the obligation to provide communication aids and qualified interpreters at no cost to the LEP/sensory impaired person.

Sample Policy for Communication with Persons with Sensory Impairments

(Name of provider) will take such steps as are necessary to ensure that qualified persons with disabilities, including those with impaired sensory or speaking skills, receive effective notice concerning benefits or services or written material concerning waivers of rights or consent to treatment. All aids needed to provide this notice are provided without cost to the person being served.

Sample Policy for Communication with Persons with Hearing Impairments

For persons who are deaf/hearing impaired and who use sign-language as their primary means of communication, the following procedure has been developed and resources identified for obtaining the services of a qualified sign-language interpreter to communicate both verbal and written information:

(Insert the information for obtaining the services of a qualified sign-language interpreter. The information should identify the staff person authorized to obtain the interpreter, the information on the agency that has agreed to provide the service, telephone numbers and hours of availability and/or a list of qualified staff interpreters. Methods used to train patient contact staff in the use of effective methods of communication with Sensory Impaired persons should also be included. If you utilize a Telecommunication Device for the Deaf (TDD), explain where it is located, how to operate it, and the telephone number. If there is an arrangement for sharing a TDD, explain the sharing arrangement, the telephone number, and the procedures for borrowing the device)

Note: Family members and friends should be used as interpreters only if: 1) the patient/client has been made aware of the availability of qualified sign language interpreters at no additional charge and, without any coercion whatsoever, chooses the services of family members or friends, or 2) no interpreters are available within 30 miles of provider/vendor.

Sample Policy for Communication with Persons with Visual Impairments

Reader/staff will communicate the content of written materials concerning benefits, services, waivers of rights, and consent to treatment forms by reading them out loud to visually impaired persons. Provider can also provide the following aids for visually impaired persons in addition to reading:

(If any such aids are available, such as large print, taped, and braille materials, identify the other aids are available, where they are located, and how they are used.)

Sample Policy for Communication with Persons with Speech Impairments

Writing materials, typewriters, TDD, and computers are available to facilitate communication concerning program services and benefits, waivers of rights, and consent to treatment forms for persons with speech impairments.

Sample Policy for Communication with Persons of Limited English Proficiency

It is the policy of (name of provider) to provide communication aids (at no cost to the person being served) to Limited English Proficient (LEP) persons, including current and prospective patients, clients, family members, interested persons, *et al.*, to ensure them a meaningful opportunity to apply for, receive or participate in, or benefit from the services offered. The services of a qualified interpreter are available at no additional charge or the (client/patient) may choose to rely on a family member or friend in an emergency situation. The choice of the (client/patient) and presence of an interpreter will be documented after every visit.

Note: Providers should designate an employee to implement methods of effective communication with LEP persons who will

- *Maintain and routinely update a list of all bilingual persons, organizations, and staff members who are available to provide bilingual services, and*
- *Develop written instructions on how to gain access to these services, i.e., contact persons, telephone numbers, addresses, languages available, hours available, fees and conditions under which the person(s) are available.*
- *Post a short “tagline” written in at least the top 15 languages spoken by individuals with limited English Proficiency in relative state informing that language assistance service is free of charge.*
- *Use a translator when translating written content in paper or electronic form.*

Sample Section 504 Notice

This Provider and all of its programs and activities are accessible to and usable by disabled persons, including persons with impaired hearing and vision. Access features include:

- Convenient off-street parking designated specifically for disabled persons.
- Curb cuts and ramps between parking areas and buildings.
- Level access into first floor level with elevator access to all other floors.
- Fully accessible offices, meeting rooms, bathrooms, public waiting areas, cafeteria, patient treatment areas, including examining rooms and patient wards.
- A full range of assistive and communication aids provided to persons with impaired hearing, vision, speech, or manual skills, without additional charge for such aids.

If you require any of the aids listed above, please let the receptionist or your nurse know.