

Section 1557 Nondiscrimination Regulations – 2024 Final Rule (full text of regulations [here](#))
 Summary of Requirements and Compliance Deadlines

	Requirement:	By When:	BBS Comments:
1.	<p>Analyze the specific nondiscrimination requirements under the 2024 Final Rule to ensure operational compliance, particularly the expanded protections related to auxiliary aids and services, language assistance, and the use of patient care decision support tools, including clinical algorithms and artificial intelligence.</p>	<p>Ongoing; Provisions related to use of patient care decision support tools are due by May 5, 2025; For Medicare Part B recipients that are newly required to comply, the deadline is July 5, 2025.</p>	<p><i>Note: This chart is only a summary and does not discuss the 2024 Rule’s provisions on accessibility for buildings and facilities, nondiscrimination in health insurance coverage and other health-related coverage.</i></p>
2.	<p>Designate a Section 1557 Coordinator who will be responsible for carrying out the requirements under Section 1557, including the investigation of any grievances</p>	<p>November 2, 2024</p>	<p>Section 1557 Coordinator is required for covered entities that employ 15 or more people.</p>
3.	<p>Post and Provide Notice of Nondiscrimination:</p> <ul style="list-style-type: none"> • Must contain/state— <ul style="list-style-type: none"> ○ Covered entity does not discriminate based on any of the protected classes ○ Offer specific information regarding reasonable modifications for individuals with disabilities and appropriate auxiliary aids and services ○ Offer specific information regarding language assistance services ○ How to file a grievance or complaint • HHS provides a sample notice to tailor for use • <i>Who</i> must it be provided to: <ul style="list-style-type: none"> ○ Participants, beneficiaries, enrollees, and applicants of its health programs and activities, and members of the public • <i>When</i> must it be provided: <ul style="list-style-type: none"> ○ On an annual basis to participants, beneficiaries, enrollees, and applicants ○ Upon request • <i>Where</i> must it be posted: <ul style="list-style-type: none"> ○ At a conspicuous location on the covered entity’s health program or activity website, if it has one 	<p>November 2, 2024</p>	<p>The Notice of Nondiscrimination is different, and separate from, the Nondiscrimination Policy described in #5 below.</p> <p>When providing the Notice of Nondiscrimination, you must also provide the Notice of Availability of Language Assistance Services and Auxiliary Aids and Services (“Notice of Availability”) described in #4 below.</p>

	<ul style="list-style-type: none"> ○ In clear and prominent physical locations, in no smaller than 20-point sans serif font (e.g., Arial or Calibri), where it is reasonable to expect individuals seeking service to be able to read or hear the notice 		
<p>4.</p>	<p>Post and Provide Notice of Availability of Language Assistance Services and Auxiliary Aids and Services (“Notice of Availability”)</p> <ul style="list-style-type: none"> ● Notice of Availability must— <ul style="list-style-type: none"> ○ Inform the reader that the covered entity provides language assistance services and appropriate auxiliary aids and services free of charge, when necessary; and ○ Be provided in English and translated into the <u>top 15 languages</u> most commonly spoken by individuals with limited English proficiency (“LEP”) of the relevant State(s) in which a covered entity operates. ● HHS provides a sample notice to tailor for use ● <i>Who</i> must it be provided to: <ul style="list-style-type: none"> ○ Participants, beneficiaries, enrollees, and applicants of its health programs and activities ● <i>When</i> must it be provided: <ul style="list-style-type: none"> ○ On an annual basis to participants, beneficiaries, enrollees, and applicants ○ Upon request ○ With certain <u>critical healthcare documents</u> (e.g., Notice of Nondiscrimination, Notice of Privacy Practices, application and intake forms) ● <i>Where</i> must it be posted: <ul style="list-style-type: none"> ○ At a conspicuous location on the covered entity’s health program or activity website, if it has one ○ In clear and prominent physical locations, in no smaller than 20-point sans serif font (e.g., Arial or Calibri), where it is reasonable to expect individuals seeking service to be able to read or hear the notice ○ With certain <u>critical healthcare documents</u> (e.g., Notice of Nondiscrimination, Notice of Privacy Practices, application and intake forms) 	<p>July 5, 2025</p>	<p>The preamble to the 2024 Final Rule suggests that covered entities <u>operating in more than one state</u> should aggregate the populations with LEP across all those states to determine the top 15 languages in their service area.</p> <p>OCR has provided translations of the model Notice of Availability in the top 15 languages in each state here.</p>

<p>5.</p>	<p>Adopt and Implement Written Policies and Procedures:</p> <p>HHS provides sample policies and procedures to tailor for use</p> <ul style="list-style-type: none"> • Nondiscrimination Policy <ul style="list-style-type: none"> ○ Must, at minimum, state that the covered entity does not discriminate on the basis of a protected class; that the covered entity provides language assistance services and appropriate auxiliary aids and services free of charge, when necessary for compliance; that the covered entity will provide reasonable modifications for individuals with disabilities; and provides the current contact information for the Section 1557 Coordinator (if applicable). • Grievance Procedures <ul style="list-style-type: none"> ○ A covered entity that employs 15 or more people must implement written grievance procedures that provide for the <u>prompt and equitable resolution</u> of grievances alleging any action that would be prohibited by Section 1557. • Language Access Procedures <ul style="list-style-type: none"> ○ Must describe the covered entity’s process for providing language assistance services to individuals with limited English proficiency (“LEP”). ○ At a minimum, must include current contact information for the Section 1557 Coordinator (if applicable); how an employee identifies whether an individual has LEP; how an employee obtains the services of qualified interpreters and translators the covered entity uses to communicate with an individual with LEP; the names of any qualified bilingual staff members; and a list of any electronic and written translated materials the covered entity has, the languages they are translated into, date of issuance, and how to access electronic translations. • Effective Communication Procedures <ul style="list-style-type: none"> ○ Must describe the covered entity’s process for ensuring effective communication for individuals with disabilities. ○ At a minimum, must include current contact information for the Section 1557 Coordinator (if applicable); how an employee 	<p>July 5, 2025</p>	<p>These policies and procedures must include an effective date and be reasonably designed, taking into account the <u>size, complexity, and the type</u> of health programs or activities undertaken by a covered entity.</p> <p>These policies and procedures may be combined with any other policies and procedures required under Title VI, Section 504 of the Rehabilitation Act, Title IX, and the Age Act, to the extent that Section 1557 provisions are also addressed.</p>
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	<p>obtains the services of qualified interpreters the covered entity uses to communicate with individuals with disabilities, including the names of any qualified interpreter staff members; and how to access appropriate auxiliary aids and services.</p> <ul style="list-style-type: none"> • Reasonable Modification Procedures <ul style="list-style-type: none"> ○ Must describe the covered entity’s process for making reasonable modifications to its policies, practices, or procedures when necessary to avoid discrimination on the basis of disability. ○ At a minimum, must include current contact information for the covered entity’s Section 1557 Coordinator (if applicable); a description of the covered entity’s process for responding to requests from individuals with disabilities for changes, exceptions, or adjustments to a rule, policy, practice, or service of the covered entity; and a process for determining whether making the modification would <u>fundamentally alter the nature of the health program or activity</u>, including identifying an alternative modification that does not result in a fundamental alteration to ensure the individual with a disability receives the benefits or services in question. 		
<p>6.</p>	<ul style="list-style-type: none"> • Train “relevant” employees on Section 1557 policies and procedures <ul style="list-style-type: none"> ○ Must train relevant employees “as necessary and appropriate” to carry out their functions consistent with the requirements under Section 1557 <ul style="list-style-type: none"> ○ “Relevant” employees include: permanent and temporary employees whose roles and responsibilities entail interacting with patients and members of the public; making decisions that directly or indirectly affect patients’ health care, including covered entity’s executive leadership team and legal counsel; and performing tasks and making decisions that directly or indirectly affect patients’ financial obligations, including billing and collections. 	<p>30 days following implementation of the written policies and procedures in #5, and no later than May 1, 2025</p>	<p>The 2024 Final Rule is silent as to training format and length.</p> <p>Training must be given to each relevant employee within a reasonable period of time after the employee joins the covered entity’s workforce.</p>