

## Section 1557 Regulations Clarify Nondiscrimination Protections and Access to Language Assistance

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May 2024

Section 1557 of the Affordable Care Act (ACA) prohibits discrimination on the basis of race, color, sex, national origin, age, and disability in many health care programs and services. The Department of Health and Human Services (HHS) Office for Civil Rights (OCR) Section 1557 regulations promote equitable and inclusive access to health care by clarifying the scope and application of the ACA's nondiscrimination provisions. The regulations are effective as of July 6, 2024, with certain provisions [phased in](#) over time.

Of particular importance to immigrant communities, the regulations provide standards and notification requirements for the delivery of language assistance services to people with limited English proficiency (LEP). People with LEP face structural barriers in access to health care, including ineffective communication, the lack of a usual source of care, and limited receipt of preventive services. Access to quality language assistance services is necessary to reduce disparities and to improve health outcomes for people with LEP.

The requirement that recipients of federal funding provide language services to ensure meaningful access to their programs is longstanding; however, Section 1557 and its implementing regulations provide important clarifications and updates related to the scope of that obligation.

### What is prohibited discrimination under 1557?

Section 1557 and the regulations build on preexisting civil rights laws to prohibit discrimination on the basis of race, color, sex, national origin, age, and disability. The regulations focus on:

- **Sex Discrimination**, which includes discrimination on the basis of pregnancy and related conditions, sex characteristics, sexual orientation, gender identity, and sex stereotypes.

- **Disability Discrimination**, which includes discrimination on the basis of physical and mental impairments, having had an impairment in the past, and being regarded as having an impairment.
- **National Origin Discrimination**, which includes discrimination on the basis of a person’s place of origin; their ancestors’ place of origin; and the physical, cultural, and linguistic characteristics of a national origin group. A place of origin includes both countries and global regions. The language access requirements discussed below are based on national origin discrimination.

The regulations acknowledge that discrimination can be based on the intersection of more than one protected characteristic. As a result a person discriminated against because of more than one characteristic, such as their age and primary language, can file a single complaint instead of having to go through separate complaint processes under different statutes.

### **Who is subject to the rule’s requirements?**

The regulations apply broadly to any person or entity that receives HHS funding or assistance and provides or administers health-related services, health insurance coverage, or assistance in obtaining health services or coverage. If any part of their health activities and programs are directly or indirectly supported by HHS, all aspects of the recipients’ health programs must comply with the regulations, including subrecipients of federal funds.

In addition to grants, loans, subsidies, and contracts, HHS assistance includes support provided by federal personnel and financial assistance HHS plays a role in providing or administering, including Medicare, Medicaid, and advanced premium tax credits available on the ACA marketplaces. As a result, covered entities include a wide cross-section of the health care sector, such as a doctor’s office that accepts Medicare Part B and a broker that represents an insurance issuer that sells plans on an ACA health insurance marketplace.

In addition to those described above, health programs operated or administered by HHS and state-based health insurance marketplaces are also covered entities.

### **What language assistance do the regulations require?**

Covered entities are required to take reasonable steps to provide meaningful access to persons with limited English proficiency (LEP) who are eligible to be served or likely to be affected by the covered entity's health programs. The regulations incorporate an important recognition that meaningful access includes providing language assistance to a person's LEP companions, such as a parent with LEP accompanying a child to a medical appointment.

Language assistance services must be accurate and timely, provided free of charge, and provided in a manner that protects the individual's privacy and independent decision making. LEP individuals cannot be required to provide their own interpreters.

### *Interpretation and translation*

Language assistance includes oral interpretation and written translation services. The regulations define qualified interpreter, qualified bilingual staff member, and qualified translator, and they require that persons providing services meet those standards. Generally, individuals must be proficient in the relevant languages, able to use any specialized vocabulary, and adhere to ethical standards.

An exception allows a community member to interpret in emergencies while a qualified interpreter is being found or when the LEP individual requests, in private with a qualified interpreter, that an accompanying adult such as a spouse act as interpreter. The use of minors to interpret is similarly limited to emergencies, and their interpretation must be confirmed by a qualified interpreter once one is secured.

### *Relay Interpretation*

The regulations acknowledge that it is sometimes necessary to use more than one interpreter to ensure effective communication; for example, a person who interprets a Central American indigenous language into Spanish and a second person who interprets the Spanish into English. This practice, called "relay interpretation" is acceptable under the regulations if both interpreters are qualified.

### *Digital tools*

The regulations respond to the prevalence of machine translation tools like Google Translate by requiring that a qualified human translator review any machine translation of text that is critical for meaningful access to an activity or program. The

rule also incorporates functionality, quality, and training standards for remote audio and video interpretation.

### **How will LEP individuals know they can receive language assistance services?**

The regulations require covered entities to provide notices of nondiscrimination and the availability of language assistance, as well as auxiliary aids and services for people with disabilities. The availability notices must be provided in English and the 15 languages most commonly spoken by people with LEP in the state or states where the covered entities operate.

The notices must be provided directly to program participants, members, or clients on an annual basis; posted in a conspicuous location on the covered entity's website; and displayed in physical locations where people seeking services can be reasonably expected to see them. The availability notices must also be included in certain electronic or written communications, including applications and intake forms, medical consent forms, and communications related to cost and payment.

### **How must covered entities prepare to provide language assistance services?**

Covered entities are required to develop and implement written policies and procedures for complying with Section 1557 and the regulations. These policies and procedures include specific procedures describing the entity's process for providing language access for individuals with LEP. They are required to train employees who have contact with program participants, members or clients, and those who perform tasks or make decisions related to patients' care or financial obligations in the entity's civil rights policies and procedures.

Any covered entity that employs 15 or more people is also required to establish a grievance policy and to designate one or more employees to coordinate the entity's compliance with its Section 1557 obligations. The Section 1557 coordinator's duties include ensuring the implementation of the entity's language access policies and procedures and processing grievances.

### **What can a person do if they believe their civil rights under Section 1557 have been violated?**

Anyone who believes that they (or a person they are assisting) has been denied required language assistance or otherwise subjected to discrimination in violation of Section 1557 can [file a complaint](#) with the HHS Office for Civil Rights, which has online forms available in many languages. They may also file a grievance with a covered entity's Section 1557 coordinator if the entity has one. Contact information for Section 1557 coordinator is provided in the nondiscrimination notice described above.