

CONNECTICUT HEALTH INSURANCE EXCHANGE
d/b/a Access Health CT

POLICY AND PROCEDURE: NONDISCRIMINATION IN HEALTH PROGRAMS AND ACTIVITIES

Background

The Connecticut Health Insurance Exchange (the “Exchange”) is a covered entity established under Title I of the Affordable Care Act (42 U.S.C. 18116). Therefore, the Exchange is subject to Section 1557 of the Affordable Care Act (“Section 1557”) and its implementing regulations at 45 CFR part 92 (“Part 92”). Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities. Part 92 requires the Exchange to implement a grievance procedure and designate a responsible employee to investigate and resolve allegations of conduct that violate Section 1557 and Part 92.

Purpose

The purpose of this policy and procedure is:

1. To articulate the Exchange’s commitment to providing equal treatment with respect to its health programs and activities without consideration of race, color, national origin, sex, age, or disability; and
2. Designate a responsible employee and establish a grievance procedure to meet the requirements of Section 1557 and Part 92.

Policy

The Exchange is committed to providing equal treatment with respect to its health programs and activities. It is the policy of the Exchange not to discriminate on the basis of race, color, national origin, sex, age, or disability. Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age, or disability, may file a grievance under the Exchange’s Nondiscrimination Grievance Procedure.

Nondiscrimination Grievance Procedure

1. Grievances must be submitted to the Section 1557 Compliance Coordinator within sixty (60) days of the date the person filing the grievance becomes aware of the alleged discriminatory action. Grievances may be filed in person or by mail, fax, or email with Anthony Jones, Staff Attorney, 280 Trumbull Street, Hartford, CT 06103, (860) 757-5360, TTY: (855) 789-2428, Fax: (860) 757-5330, AHCT.Nondiscriminationgrievance@ct.gov.
2. A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the

remedy or relief sought. Assistance with filing a grievance is available by contacting Anthony Jones, Staff Attorney, 280 Trumbull Street, Hartford, CT 06103, (860) 757-5360, TTY: (855) 789-2428, Fax: (860) 757-5330, AHCT.Nondiscriminationgrievance@ct.gov.

3. The Section 1557 Compliance Coordinator (or her/his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Section 1557 Coordinator will maintain the files and records of the Exchange relating to such grievances. To the extent possible, and in accordance with applicable law, the Section 1557 Coordinator will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.
4. The Section 1557 Coordinator will issue a written decision on the grievance, based on a preponderance of the evidence, no later than 30 days after its filing, including a notice to the complainant of their right to pursue further administrative or legal remedies.
5. The person filing the grievance may appeal the decision of the Section 1557 Coordinator by writing to the Chief Executive Officer within 15 days of receiving the Section 1557 Coordinator's decision. The Chief Executive Officer shall issue a written decision in response to the appeal no later than thirty (30) days after its filing.

The availability and use of this Nondiscrimination Grievance Procedure does not prevent a person from pursuing other legal or administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age or disability in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201.

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>. Such complaints must be filed within 180 days of the date of the alleged discrimination.

Implementation

The Exchange appoints the Director of Legal Affairs and Policy as its Section 1557 Coordinator. The Section 1557 Coordinator shall monitor compliance with this policy and regularly report on these matters to the Chief Executive Officer (the "CEO") and the Board of Directors (the "Board"). All employees shall be responsible for complying with this policy. The CEO and the Board will provide any necessary guidance in carrying out this policy and any changes or modifications which may be necessary.

The Exchange will take initial and continuing steps to notify enrollees, applicants, and members of the public in its publications and communications that the Connecticut Health Insurance Exchange does not discriminate on the basis of race, color, national origin, sex, age, or disability

in its health programs and activities. Further, the Exchange will broadly disseminate the attached external-facing procedure (Attachment A) by posting it on its website, in its storefront locations, and at its community outreach events.

The Exchange will make appropriate arrangements to ensure that individuals with disabilities and individuals with limited English proficiency are provided auxiliary aids and services or language assistance services, respectively, if needed to participate in this grievance process. Such arrangements may include, but are not limited to, providing qualified interpreters, providing taped cassettes of material for individuals with low vision, or assuring a barrier-free location for the proceedings. The Section 1557 Coordinator will be responsible for such arrangements.

The Exchange will provide free aids and services to people with disabilities in order to communicate effectively with the Exchange. Such free aids and services include qualified sign language interpreters and written materials in alternative formats such as large print, accessible electronic and audio.

The Exchange will take affirmative steps to ensure meaningful access for individuals with limited English proficiency eligible to be served or likely to be encountered in its health programs and activities. The Exchange will implement a written "Language Access Plan" which addresses how the Exchange will determine an individual's primary language, identifies a telephonic oral interpretation service for accessing qualified interpreters, identifies a translation service that can access qualified translators, designates the kinds of language assistance services that may be necessary in particular circumstances and identifies any documents for which written translations should be routinely available.

Attachment A

SECTION 1557 GRIEVANCE PROCEDURE

The Exchange is committed to providing equal treatment with respect to its health programs and activities. It is the policy of the Exchange not to discriminate on the basis of race, color, national origin, sex, age, or disability.

The Exchange has adopted an internal grievance procedure providing for resolution of complaints alleging action prohibited by Section 1557 of the Affordable Care Act (42 U.S.C.18116) and its implementing regulations. Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs and activities.

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age, or disability may file a grievance under this procedure. It is against the law for the Exchange to retaliate against anyone who opposes discrimination, files a grievance, or participates in the investigation of a grievance.

1. Grievances must be submitted to the Section 1557 Coordinator within sixty (60) days of the date the person filing the grievance becomes aware of the alleged discriminatory action. Grievances may be filed in person or by mail, fax, or email with Anthony Jones, Staff Attorney, 280 Trumbull Street, Hartford, CT 06103, (860) 757-5360, TTY: (855) 789-2428, Fax: (860) 757-5330, AHCT.Nondiscriminationgrievance@ct.gov.
2. A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy or relief sought. Assistance with filing a grievance is available by contacting Anthony Jones, Staff Attorney, 280 Trumbull Street, Hartford, CT 06103, (860) 757-5360, TTY: (855) 789-2428, Fax: (860) 757-5330, AHCT.Nondiscriminationgrievance@ct.gov.
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4. The Section 1557 Coordinator (or her/his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it will be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Section 1557 Coordinator will maintain the files and records of Access Health CT relating to such grievances. To the extent possible, and in accordance with applicable law, the Section 1557 Coordinator will take appropriate steps to preserve the confidentiality of files and records relating to grievances and will share them only with those who have a need to know.
5. The Section 1557 Coordinator will issue a written decision on the grievance, based on a preponderance of the evidence, no later than 30 days after its filing, including a notice to the complainant of their right to pursue further administrative or legal remedies.

6. The person filing the grievance may appeal the decision of the Section 1557 Coordinator by writing to the Chief Executive Officer within 15 days of receiving the Section 1557 Coordinator's decision. The Chief Executive Officer shall issue a written decision in response to the appeal no later than thirty (30) days after its filing.

The availability and use of this grievance procedure does not prevent a person from pursuing other legal or administrative remedies, including filing a complaint of discrimination on the basis of race, color, national origin, sex, age or disability in court or with the U.S. Department of Health and Human Services, Office for Civil Rights. A person can file a complaint of discrimination electronically through the Office for Civil Rights Complaint Portal, which is available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201.

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>. Such complaints must be filed within 180 days of the date of the alleged discrimination.