Rules of
Department of Health
Division 10—Office of the Director
Chapter 2—Civil Rights Compliance

Title                                Page
19 CSR 10-2.010 Civil Rights Compliance 3
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Title 19—DEPARTMENT OF HEALTH
Division 10—Office of the Director
Chapter 2—Civil Rights Compliance

19 CSR 10-2.010 Civil Rights Compliance Requirements

PURPOSE: This rule specifies civil rights compliance requirements for all health service providers and contractors who provide services for the Department of Health and for all hospitals and public health clinics that receive federal financial assistance or reimbursements for services provided.

Editor's Note: The secretary of state has determined that the publication of this rule in its entirety would be unduly cumbersome or expensive. The entire text of the material referenced has been filed with the secretary of state. This material may be found at the Office of the Secretary of State or at the headquarters of the agency and is available to any interested person at a cost established by state law.

(1) The following definitions shall be used in the interpretation and enforcement of this rule:

(A) Applicant is any individual who applies for services from a covered recipient agency;

(B) Assurance is a contractual agreement in which a covered recipient agency legally agrees to administer programs and services in accordance with this rule;

(C) Civil rights requirements are the requirements of Title VI of the Civil Rights Act of 1964 (42 USC 2000d—2000d.8), Section 504 of the Rehabilitation Act of 1973 (P.L. 93-116), the Age Discrimination Act of 1975, Title III of the American Disabilities Act of 1990 and this rule;

(D) Complainant is any person or group of persons who alleges discrimination on the basis of race, color, national origin, age, sex or disability in the delivery of health care services by a covered recipient agency;

(E) Complaint is a verbal or written allegation of discrimination which indicates that a health care service is provided in a manner that results in disparity of services to persons or groups of persons because of race, color, national origin, age, sex or disability;

(F) Compliance review is a review of a covered recipient agency conducted by the Department of Health (DOH) to determine compliance with the requirements of this rule;

(G) Covered recipient agency is any facility operated primarily to provide health care services as a nonprofit or for-profit institution which receives federal reimbursements for the services provided; and

(H) Federal assistance is any United States government funding, reimbursement, property or aid which is given to a covered recipient agency to provide health care services or program benefits to clients or patients.

(2) The DOH shall strive to assure that all public health care services and benefits are made available and provided to all eligible individuals without regard to race, color, national origin, age, sex or disability status.

(3) To eliminate duplication of civil rights compliance efforts, the DOH and the Department of Social Services (DSS) shall follow a cooperative agreement negotiated by the two departments designating the responsibilities and relationships of each agency in carrying out Title XIX (Medicaid) programs.

(4) Contractors who provide goods to DOH are not subject to this rule.

(5) In all contracts for services, the DOH shall include clauses regarding civil rights.

(A) A covered recipient agency shall comply with the civil rights requirements defined in subsection (1)(C) of this rule.

(B) A covered recipient agency which is a government entity and is receiving federal funds through DOH shall have and maintain a personnel merit system.

(C) A covered recipient agency which employs fifteen (15) or more persons shall designate an employee to coordinate civil rights efforts.

(D) A covered recipient agency which receives or contracts with DOH shall have and employ fifty (50) or more persons shall implement an affirmative action program that complies with the civil rights requirements.

(E) Each covered recipient agency shall implement a public notification system which encourages participation and informs all potential participants, particularly minorities, of the availability of its programs.

(F) Each covered recipient agency shall print in easily read type on all public program communications this statement: Eligibility criteria for acceptance and participation in this program are administered on a nondiscriminatory basis regardless of race, color, age, sex or disability.

(G) Each covered recipient agency shall maintain a system for collecting racial/ethnic participation data. This data shall include the number of recipients of services and shall be acceptable to DOH.

(H) Each covered recipient agency shall display DOH-approved nondiscrimination posters and policy statements in all facility areas frequented by employees, applicants and recipients of services.

(I) Each covered recipient agency shall display notice of the availability of complaint procedures and have appropriate guidelines in place for referring civil rights complaints and resolutions to the DOH for review and resolution. The DOH shall notify the appropriate federal agency of the receipt of a complaint if notification is required.

(J) Each covered recipient agency shall make reasonable accommodations for handicapped applicants and recipients of services including, but not limited to, provision of appropriate auxiliary aids to persons with impaired sensory or speaking skills, parking and access to the facility for the disabled, and removal of barriers to accessibility if the removal is readily achievable.

(K) If the covered recipient agency uses any funds from DOH and contracts in a subcontract, the contractor shall require the subcontractor to comply with subsections (5)(A)—(L) of this rule.

(L) The DOH shall have the right to enforce all applicable clauses in subsections (5)(A)—(K) of this rule by appropriate and reasonable procedures including, but not limited to, requests, reports, site visits and inspection of relevant documentation of the contractor.

(6) All covered recipient agencies in a contractual relationship with DOH shall prepare and submit for DOH approval documentation on their civil rights requirements compliance to include assurances and an implementation plan.

(7) DOH staff responsible for monitoring programs administered by DOH and contracts for delivery of services shall complete a civil rights compliance review using the Department of Health Form DH-41.

(8) Periodically the DOH shall assess the compliance level of covered recipient agencies by conducting a desk audit or on-site review on randomly selected agencies. An on-site civil rights compliance review shall be performed by the DOH when there is evidence of substantial noncompliance as shown by a desk audit or a complaint investigation.

(9) If the contractor fails to comply with the terms of the civil rights assurance in the contract, DOH shall terminate the contract. Prior to termination of a contract, DOH shall give fifteen (15) days' notice to the contractor specifying the reasons why the department believes the contractor is not in compliance and shall provide the contractor an opportunity to show compliance with the contract. The contractor may request a conference with DOH during this period. The request shall be in writing to the director of the DOH.

Judith K. Moriarty (2/16/93)  CODE OF STATE REGULATIONS 3
Auth: Governor's Executive Order 87-6
and section 536.023.3, RSMo (1986). *
Original rule filed Sept. 8, 1992, effective
April 8, 1993.

*Original authority: Executive Order 87-6,
RSMo (1987) and 536.023.3, RSMo (1975),
amended 1970.
MISSOURI DEPARTMENT OF HEALTH

TITLE VI, SECTION 504
COMPLIANCE REVIEW FORM

NAME OF FACILITY: __________________________ TYPE OF FACILITY: __________________________

STREET: __________________________ CITY: __________________________ COUNTY: __________________________

NAME OF ADMINISTRATOR: __________________________ ZIP CODE: __________________________ TELEPHONE: __________________________

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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<th>EXPLANATION OF NO'S</th>
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<tr>
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<td>(1) Does the facility have a written non-discriminatory policy/poster displayed in a location where it can be seen by the public?</td>
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<td>(2) Are the USDA and OCR non-discrimination posters displayed?</td>
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<td>(3) Are all employees of the facility made aware of the policy of non-discrimination in the provision of services? How are employees made aware of this policy? Explain</td>
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<td>(4) Does the facility publicize that it provides services to all persons without regard to race, sex, age, handicap, color, or national origin? (Obtain copy of any advertisements, brochures, etc.)</td>
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<td>(5) Does the facility currently maintain records that show the race and sex of the persons to whom services are being provided?</td>
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<td>(6) Does the facility refer persons for services to other agencies in a manner which does not result in discrimination?</td>
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<td>(7) Do applications, stationery, brochures and other materials used by the facility indicate that services are provided in a non-discriminatory manner? (Obtain copy of applications, stationery, etc.)</td>
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<td>(8) Is the facility accessible to and usable by the handicapped? Please check the following: (a) Parking (b) Entrances (c) Waiting Areas (d) Restrooms (e) Telephones</td>
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<td>(9) Are services provided by the facility accessible to and usable by the handicapped?</td>
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<td>(10) Are auxiliary aids available for those clients/patients that may have a speech and/or hearing disability?</td>
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<td>(11) In the event the facility is not accessible to the handicapped, is there an alternate location where the same services may be obtained?</td>
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<td>(12) Are bilingual services and/or program materials available to limited or non-English communicating people?</td>
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<td>(13) Does the facility display DOH poster and brochures explaining availability of the complaint system?</td>
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<td>(14) Has the facility ever been the subject of a compliance review by a federal agency? If yes, what was the disposition?</td>
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<td>(15) Total unduplicated number of employees: Race: White: Black: Other Minority:</td>
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</table>

DATE: __________________________ DIVISION: __________________________ SIGNATURE & TITLE OF REVIEWER: __________________________

SECTION/DISTRICT: __________________________ FOR CRC USE ONLY FINDINGS: Full Compliance: __________________________

DISTRIBUTION: WHITE/CIVIL RIGHTS COORDINATOR, CANARY/FINANCIAL SERVICES, PINK/REVIEWER, GOLDENROD/CONTRACTOR

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION
services provided on a non-discriminatory basis

Judith K. Moriarty (2/16/93) CODE OF STATE REGULATIONS