Discriminatory barriers in health and human services programs, including opioid use disorder treatment and recovery programs, can delay and prevent people with an opioid use disorder from getting the help and support they need.

Federal nondiscrimination laws enforced by the Office for Civil Rights (OCR) prohibit discrimination and require covered entities to provide individuals with equal opportunities to participate in federally funded program activities, regardless of race, color, national origin, age, disability, exercise of conscience, religion, or sex. These protections may extend to individuals in recovery from an opioid use disorder if they are members of a protected group.

WHO MUST COMPLY WITH THE LAW

Any entity that receives federal financial assistance from the U.S. Department of Health and Human Services must comply with federal nondiscrimination laws. Covered entities may include, but are not limited to:

- Substance Use Disorder Treatment Programs
- Hospitals and Health Clinics
- Pharmacies
- Contracted Service Providers
- Medical and Dental Providers
- Nursing Homes
- Child Welfare Agencies
- State Court Systems

In addition, state and local governments are prohibited from discriminating on the basis of disability.

HOW WE HELP

OCR assists covered entities by clarifying the federal civil rights laws they must comply with to ensure nondiscriminatory access to health care and human service programs, including evidence-based opioid use disorder treatment and recovery services, such as Medication Assisted Treatment.

COMPLIANCE BEST PRACTICES FOR COVERED ENTITIES

- Examining program eligibility and admission criteria to identify and eliminate discriminatory barriers to health and human services programs for individuals recovering from opioid use disorders, including treatment and recovery services.

- Ensuring that individuals who primarily speak a language other than English and have limited ability to read, write, speak, or understand English, have meaningful access to critical health and human services programs, like evidence-based opioid use disorder treatment and Medication Assisted Treatment (MAT).
• Ensuring that opioid use disorder treatment programs and other critical health and human services are accessible to persons with physical or mobility impairments and that programs provide auxiliary aids and services, at no additional cost when necessary, to ensure effective communication with qualified individuals with communication disabilities.

• Ensuring that health and human services programs, including child welfare programs, are accessible to qualified individuals recovering from opioid use disorders.

FOR MORE INFORMATION

If you are interested in learning more about how federal civil rights laws protect qualified individuals with an opioid use disorder, as well as how HIPAA allows the appropriate sharing of important health information about individuals who are in crisis due to opioid addiction, visit OCR’s website at: www.hhs.gov/ocr/opioids.

For more help, information and helpful resources concerning opioid prevention, treatment and recovery, visit HHS’s opioids website at: www.hhs.gov/opioids.

DISCLAIMER: This guidance document is not a final agency action, does not legally bind persons or entities outside the Federal government, and may be rescinded or modified at the Department’s discretion. Noncompliance with any voluntary standards (e.g., recommended practices) contained in this document will not, in itself, result in any enforcement action.

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