
 <p>Behavioral Health Department Alameda County Health</p>	<p>Signed by:</p>  <p>By: <u>BA167CA0C0D444A.....</u> Karyn L. Tribble, PsyD, LCSW, Director</p>
<p>POLICY TITLE</p> <p>Effective Communication, Including Alternative Formats, for Individuals with Disabilities</p>	<p>Policy No: 300-7</p> <p>Date of Original Approval: 6/23/2026</p> <p>Date(s) of Revision(s):</p>

PURPOSE

This policy reiterates Federal and State requirements regarding communications with individuals with disabilities seeking behavioral health and substance use services, specifically Effective Communication, Including Alternative Formats, for Individuals with Disabilities.

This document is to assist in understanding the legal requirements of [Title II of the Americans with Disabilities Act \(ADA\) of 1990](#) and the [2010 ADA Standards for Accessible Design](#). Under the Civil Rights Act, ADA regulations have been developed and revised to continue the efforts to incorporate universal access throughout the United States.

AUTHORITY

- [Department of Health Care Services \(DHCS\) Behavioral Health Information Notice \(BHIN\) No: 24-007](#)
- [Section 1557 of the Patient Protection and Affordable Care Act \(ACA\) \(42 U.S. Code § 18116\)](#)
- [ADA \(42 U.S.C. 12101\)](#)
- [42 Code of Federal Regulations \(CFR\) 438.10; 45 CFR Part 92](#)
- Welfare and Institutions Code (W&IC) 14727
- Alameda County Behavioral Health Department ([ACBHD](#)) [Policy 100-2-8, Network Adequacy Standard Requirements, Data Collection, Monitoring, and Reporting](#)
- [ACBHD Policy 100-2-3, Timely Access to Service Standards and Tracking Requirements](#)
- [ACBHD Policy 100-2-2, 24/7 Language Assistance to Members](#)

SCOPE

All ACBHD County-Operated programs, in addition to entities, individuals, and programs providing behavioral health services under a contract or subcontract with ACBHD, are required to adhere to this policy.

BACKGROUND

The Affordable Care Act (ACA) was established in 2014 to expand Medicaid and offer medical services to those who were ineligible or did not have medical coverage. In addition, [Section 1557 \(42 U.S.C 181161](#) and [45 CFR Part 92](#) prohibits discrimination on the basis of race, color, national origin, sex, age, or disability (“protected classes”) in health programs or activities receiving federal financial assistance.

The ADA requires that services, programs, and activities provided by public entities must be accessible to individuals with disabilities including visual impairment. Title II of the ADA requires covered programs to effectively communicate with individuals with disabilities to ensure they benefit equally from government programs.

[45 CFR 92.102](#) and [28 CFR 35.160](#) require covered programs to ensure that communication with individuals with disabilities is as effective as communication with other Medicaid members. Medi-Cal behavioral health delivery systems must comply with all of the requirements set forth under Federal and State law and contracts between counties and the state. Accordingly, DHCS, its Medi-Cal behavioral health delivery systems (Mental Health Plans (MHPs), Drug Medi-Cal Organized Delivery System (DMC-ODS) counties, and Drug Medi-Cal (DMC) counties), and their subcontractors must provide a member who is blind or visually impaired, and other individuals with disabilities, with communication materials in the individuals' requested alternative format(s).

DHCS and its contractors must accommodate the communication needs of all qualified individuals and be prepared to facilitate alternative format requests for Braille, audio format, large print and accessible electronic format, such as a data CD, as well as requests for other auxiliary aids and services that may be appropriate.

POLICY

This policy ensures that a managed care plan's (MCP's) covered services continue to be available and accessible to qualified persons with disabilities with Medi-Cal in a timely manner so members can benefit equally from government programs and opportunities to fully participate in all county programs, service and activities.

This policy specifically addresses effective communication for individuals with disabilities to include access to alternative formats including but not limited to free auxiliary aids and services for people with disabilities. Language assistance is addressed in [ACBHD Policy 100-2-2, 24/7 Language Assistance to Members](#). Accessibility of services is addressed in [ACBHD Policy 100-2-4, Accessibility of Services](#). Timely access is addressed in [ACBHD Policy 100-2-3, Timely Access to Service Standards and Tracking Requirements](#). Network adequacy is addressed in [ACBHD Policy 100-2-8, Network Adequacy Standard Requirements, Data Collection, Monitoring, and Reporting](#).

The entire Behavioral Health Plan (BHP) provider network, including both County-Operated programs/providers and contracted programs/providers, are to comply with all application requirements of Federal and State disability laws and rules. Medi-Cal behavioral health delivery systems are required to take appropriate steps to ensure effective communication with individuals with disabilities.

What are Reasonable Accommodations?

Accommodations include physical access to County offices, programs, services and public meetings, audio aids, visuals, aids, speech aids and alternative formats.

Description of Appropriate Aids and Services

Medi-Cal behavioral health delivery systems must provide appropriate auxiliary aids and services

to persons with impaired sensory, manual, or speaking skills. This includes the provision of qualified interpreters, free of charge and in a timely manner, and information in alternative formats, when such aids and services are necessary to ensure that individuals with disabilities have an equal opportunity to participate in, or enjoy the benefits of, the behavioral health delivery system's programs and activities. Without limitation, Medi-Cal behavioral health delivery systems must provide interpretive services and make member information available in the following alternative formats:

- Braille
- Audio Format
- Large Print
- Accessible Electronic Format (Data CD)
- Other Auxiliary Aids and Services

In determining what types of auxiliary aids and services are necessary, Medi-Cal behavioral health delivery systems must give "primary consideration" to the individual's request of a particular auxiliary aid or service. Medi-Cal behavioral health delivery systems must also provide auxiliary aids and services to a family member, friend, or associate of an individual or someone with whom it is appropriate for the Medi-Cal behavioral health delivery system to communicate (e.g., a disabled spouse of a member).

Auxiliary Aids and Services Include:

- Qualified interpreters on-site or through Video Remote Interpreting (VRI) services; note takers; real-time computer-aided transcription services; written materials; exchange of written notes; telephone handset amplifiers; assistive listening devices; assistive listening systems; telephones compatible with hearing aids; closed caption decoders; open and closed captioning, including real-time captioning; voice, text, and video-based telecommunication products and systems, text telephones (TTYs), videophones, captioned telephones, or equally effective telecommunications devices; videotext displays; accessible information and communication technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing.
- Readers; taped texts; audio recordings; Braille materials and displays; screen reader software; magnification software; optical readers; secondary auditory programs; large print materials; accessible information and communication technology; or other effective methods of making visually delivered materials available to individuals who are blind or have low vision.

Instructions on Using Interpretive Services

When providing interpretive services, Medi-Cal behavioral health delivery systems must use qualified interpreters to interpret for an individual with a disability, whether through a remote interpreting service or an on-site appearance. A qualified interpreter for an individual with a disability is an interpreter who:

- 1) Adheres to generally accepted interpreter ethics principles, including member confidentiality; and
- 2) Is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, terminology, and phraseology.

For an individual with a disability, qualified interpreters can include, for example, sign language interpreters, oral transliterators (individuals who represent or spell in the characters of another alphabet), and cued language transliterators (individuals who represent or spell by using a small number of handshapes).

Medi-Cal behavioral health delivery systems that provide a qualified interpreter for an individual with a disability through VRI services must provide: real-time, full-motion video and audio over a dedicated high-speed, wide-bandwidth video connection or wireless connection that delivers high-quality video images that do not produce lags, choppy, blurry, or grainy images, or irregular pauses in communication; a sharply delineated image that is large enough to display the interpreter's face, arms, hands, and fingers, and the participating individual's face, arms, hands, and fingers, regardless of body position; a clear, audible transmission of voices; and adequate training to users of the technology and other involved individuals so that they may quickly and efficiently set up and operate the VRI. However, VRI will not be effective in all circumstances and sometimes an on-site interpreter may be required.

Medi-Cal behavioral health delivery systems must not require an individual with a disability to provide their own interpreter. Moreover, Medi-Cal behavioral health delivery systems are prohibited from relying on an adult accompanying an individual with a disability to interpret or facilitate communication except when:

- 1) There is an emergency involving an imminent threat to the safety or welfare of the individual or the public and a qualified interpreter is not available; or,
- 2) The individual with a disability specifically requests that an accompanying adult interpret or facilitate communication, the accompanying adult agrees to provide that assistance, and reliance on that accompanying adult for that assistance is appropriate under the circumstances.
- 3) In addition, Medi-Cal behavioral health delivery systems are prohibited from relying on a minor child accompanying an individual with a disability to interpret or facilitate communication except when there is an emergency involving an imminent threat to the safety or welfare of the individual or the public and a qualified interpreter is not available.

In addition to requiring effective communication with individuals with disabilities, Health and Human Services' Office of Civil Rights regulations pursuant to Section 1557 incorporate other long-standing requirements of Federal law prohibiting discrimination based on disability. Medi-Cal behavioral health delivery systems are reminded that they must make reasonable modifications to policies, practices, or procedures when such modifications are necessary to avoid discrimination based on disability. This could include, for example, assisting a member who cannot write to fill out required forms, even when such assistance is not generally provided to members without a

disability.

PROCEDURE

A. Processes for Collecting and Sharing Alternative Format Selection Data

DHCS utilizes its Alternative Format database to store members' alternative format selections. The Alternative Format database receives alternative format preferences from member or their family. DHCS updates the system weekly with members' alternative format selections.

The standard alternative format options are large print, audio CD, data CD, and Braille. Below are descriptions of each format:

- Large print.
- Audio CD: Provides the ability to hear notices and information. Files in the CD are not encrypted.
- Data CD: This allows for the use of computer software to read notices and other written information. Files in the CD are not encrypted.
- Braille: Uses raised dots that can be read with fingers.

There are also non-standard alternative formats available by request, including but not limited to:

- Encrypted Audio CD: Provides the ability to hear Medi-Cal notices and other written information. Files in the CD are protected with a password.
- Encrypted Data CD: This allows for the use of computer software to read Medi-Cal notices and other written information. Files in the CD are protected with a password.

An individual may request a non-standard alternative format by calling the Alternative Format Helpline at 1-833-284-0040 or by submitting a request to DHCS's Office of Civil Rights. Medi-Cal behavioral health delivery systems must evaluate the request according to the applicable law.

Medi-Cal behavioral health delivery systems may use the Alternate Format database to identify individuals that have indicated their alternate format preference for receiving information. Medi-Cal behavioral health delivery systems shall provide all communications in the selected standard and non-standard alternative formats. Medi-Cal behavioral health delivery systems shall provide all communications in regular print for the following selections, in addition to the support or other format requested;

- No alternative format needed.
- I need a format not listed here.

Once an individual's request for a non-standard alternative format has been processed, communications shall be provided in the requested alternative format as well as in standard format. If an individual requests that communications be provided in a threshold language, all correspondence shall be translated into the requested language. Support from Medi-Cal behavioral health delivery systems shall be provided when requested.

B. Due Process Requirements

Constitutional due process requires that a member's benefits must not be reduced or

terminated without timely and adequate notice explaining the reasons for the proposed action and the opportunity for a hearing. ([Goldberg v. Kelly \(1970\) 397 U.S. 254, 267–268](#)). In the case of a member with a visual impairment or other disabilities requiring the provision of written materials in alternative formats, DHCS has determined that adequate notice means notice in the member’s selected alternative format or notice that is otherwise in compliance with the ADA, [Section 504 of the Rehabilitation Act of 1973](#), and [Government Code Section 11135](#). Medi-Cal behavioral health delivery systems may not deny, reduce, suspend, or terminate services or treatments without providing notice within applicable legal timeframes.

C. ACBHD Grievance Process

Members may file a grievance with ACBHD or an ACBHD-Contracted Provider by reviewing ACBHD Policy [300-1-1, Consumer Grievance and Appeal System](#) located on ACBHD’s Providers website in the [online Policies and Procedures Manual](#).

D. State Hearing Request Process

Members may ask for a State hearing to have an Administrative Law Judge review an adverse decision. Members may use any of the following methods to request a hearing, and must complete the request within 90 calendar days from the notice of action being mailed:

- Send a written request for a State hearing to the following address:
California Department of Social Services (CDSS)
State Hearings Division
P.O. Box 944243, Mail Station 9-17-37
Sacramento, CA 94244-2430; or
- Call the CDSS, State Hearings Division, at 1-800-743-8525 or for hearing or speech impaired use TDD 1-800-952-8349; or
- Request a State hearing online at <https://www.cdss.ca.gov/hearing-requests> and follow the instructions to request a hearing, either with or without setting up an account. If the member does not provide a copy of the notice of action with their request for a State hearing, they must provide the following information with their request:
 - Member’s name
 - Date of birth
 - Case number
 - Address
 - Telephone number where the member can be reached

NON-COMPLIANCE

- I. Contractors not in compliance with contract provisions, or with State or Federal law and/or regulations, shall be immediately responsible for remedy.
- II. ACBHD may, at its discretion, issue a Corrective Action Plan (CAP) or Contract Compliance Plan (CCP), as appropriate.
- III. The cost to implement the CAP or CCP shall be borne by the Contractor.

- IV. Staff shall report incidents of non-compliance to their department manager, who shall submit those incidents of non-compliance to ACBHD Quality Management (QM).
- V. Incidents of non-compliance shall be submitted within 15 days of reasonable awareness of the non-compliance.
- VI. Failure to address identified issues may result in further action by ACBHD up to and including program termination, as specified in [ACBHD Policy # 1302-1-1](#), Contract Compliance and Sanctions for ACBHD-Contracted Providers.
- VII. Staff shall not face retribution for submitting a notice of non-compliance.
- VIII. Any communication that contains protected health information (PHI) or otherwise confidential information (e.g., as defined by the Health Insurance Portability and Accountability Act (HIPAA), 42 Code of Federal Regulations (CFR), Part 2, etc.) shall be sent through secure methods such as email with secure encryption.

CONTACT

ACBHD Office	Current As Of	Email
Health Equity Division (HED)	2/2/2026	officeofethnicservices@acgov.org

DISTRIBUTION

This policy will be distributed to the following:

- ACBHD Staff
- ACBHD Contract Providers
- Public

ISSUANCE AND REVISION HISTORY

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Revision Author	Reason for Revision	Date of Approval by (Name, Title)

DEFINITIONS

Term	Definition
Americans with Disabilities Act (ADA)	The ADA is a 1990 U.S. Federal civil rights law prohibiting discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and public/private spaces. It guarantees equal opportunity for people with disabilities, similar to protections based on race or sex.

Behavioral Health Plan (BHP)	Specialty Mental Health Services (SMHS) in the Mental Health Plan (MHP) and Substance Use Disorder (SUD) services in the Drug Medi-Cal Organized Delivery System (DMC-ODS) are collectively referred to as the Behavioral Health Plan (BHP). The BHP includes Alameda County Behavioral Health Department (ACBHD) and ACBHD-contracted providers.
Disability	A disability is a physical or mental condition that limits a person's movements, senses, or activities.
Enrollee	An enrollee is an individual enrolled in Alameda County Medi-Cal and eligible for BHP services.
Medi-Cal	California's Medicaid health care program that covers and pays for a variety of health services for children and adults with limited income and resources (i.e., at or below the Federal poverty level).
Reasonable Accommodations	Accommodations include physical access to County offices, programs, services, and public meetings, and audio aids, visual aids, and speech aids. These include a general definition of reasonable accommodations, and specific examples of types of audio aids, visual aids, and speech aids.

APPENDICES

None