

## Know Your Civil Rights

To file a discrimination complaint at the State level, contact:

Wisconsin Department of Health Services,  
Affirmative Action and Civil Rights Office  
1 W. Wilson St., Room 555, P O Box 7850  
Madison, WI 53707-7850

(608) 266-1258 (Voice)

711 (TTY)

(608) 267-1434 (Fax)

3. You may also file directly at the Federal level with the U.S. Department of Health and Human Services. Contact:

U.S. Department of Health and Human  
Services, Office for Civil Rights—Region V,  
233 N. Michigan Ave., Suite 240  
Chicago, IL 60601  
(312) 886-2359 (Voice)  
(312) 353-5693 (TDD)

For FoodShare Wisconsin (Food Stamps)  
at the Federal level, contact:

USDA, Director, Office of Civil Rights  
1400 Independence Avenue, SW  
Washington, DC 20250-9410  
1 (800) 795-3272 (Voice) or  
(202) 720-6382 (TTY)

### Non-eligibility for services is not discrimination

It is important to differentiate between denial of benefits (lawful or unlawful) and exclusion from services. Persons who are denied benefits or who are excluded from services

because they do not meet the basic eligibility conditions for the receipt of these services are not protected by civil rights laws against this denial or exclusion. For example, in order to be eligible for FoodShare Wisconsin, a person's income must be below a certain level, and certain other basic eligibility conditions must be met. Civil rights laws have no effect on these basic eligibility conditions.

### Steps for Eligibility or Program Complaints

1. Ask to speak to a supervisor of your County Services Provider to see if you can resolve the situation. If not, talk to the County Complaint Coordinator. If you cannot find a mutually acceptable resolution, your county should refer you to the appropriate DHS Regional Area Administrations:

- Northeast (920) 448-5341 in Green Bay
- North (715) 365-2523 in Rhinelander
- Southeast (262) 521-5113 in Waukesha
- South (608) 264-6301 in Madison
- West (715) 836-5713 in Eau Claire

2. You must file for a fair hearing with the Wisconsin Division of Hearings and Appeals <http://dha.state.wi.us/home/> for FoodShare Wisconsin, Medicaid/BadgerCare, county mental health, AODA and developmentally disabled county services complaints.

When you receive inpatient services for mental illness, alcoholism, drug abuse or a developmental disability, you have the rights under §51.61(1) and 51.30, Wis. Stats., DHS 92 and DHS 124, Wis. Adm. Code, and 42 CFR 482.13. If you require additional information regarding these rights, please see a staff member of the facility or program providing services and it will be provided to you.

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**D**id you know participants in health and social service programs have special protection against discrimination? This is because of federal laws that are enforced through the Wisconsin Department of Health Services (DHS) at the state level. This brochure explains what that special protection is and gives information about some of these laws.



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### What is "discrimination"?

"Discrimination" is a direct action, whether intentional or not, which results in the unequal treatment or causes an adverse impact on categories of people protected by law. Discrimination may result from prejudice, which is adverse judgment or opinion formed about a person beforehand without knowledge or examination of the facts. While "prejudice" generally refers to opinions or thoughts, "discrimination" refers to actions. This means that individuals may not, because of their race, color, national origin, gender, age or disability:

- Be denied any service, financial aid or other benefit provided under a federally funded program;
- Be subjected to segregation or separate treatment in a federally funded program;
- Be provided any service, financial aid or benefit, which is different or is provided in a different manner from the way that service is provided to others;
- Be denied access to a service because buildings or facilities are not physically accessible to persons with disabilities or because no accommodation was provided to enable effective communication with the service provider;

- Be provided services without a competent interpreter in the primary language of a participant who has limited English proficiency. A limited English proficient (LEP) participant may also request an oral interpretation of vital information if no written translation is available;
- Be legally denied benefits by your service provider because of your religious beliefs or political affiliations. This is of particular note if you are a participant in FoodShare Wisconsin.

### Who is a "person with a disability"?

A person with a disability is one who (1) has a physical or mental condition that substantially limits a major life activity, (2) has a record of such a condition, or (3) is regarded as a person with a disability.

### What is "reasonable accommodation"?

If you are a person with a disability, you may make a request for a reasonable accommodation that must be given to you free of charge by the service provider. If you are deaf or hard of hearing and require a language sign interpreter, your service provider must offer you, at the very least, an interpreter with minimum national certification requirements (RAD or NAD).

### Who is a "limited English proficient (LEP) speaker"?

This is a person who cannot speak English well enough to be able to fully participate in a program or service funded by the State or the Federal governments. An LEP speaker must be provided an oral interpreter who is linguistically and culturally competent in the LEP speaker's primary language and in English.

### Steps for Filing a Discrimination Complaint

1. The first step is to file a discrimination complaint at your County Department of Human Services. Look for the name of the County's Equal Opportunity Coordinator or Complaint Coordinator and contact number on bulletin boards or at the receptionist or information desk.
2. If you are dissatisfied with the County's resolution, you may file a written or oral discrimination complaint directly with the Wisconsin Department of Health Services against an agency, health care facility or organization that you think may have discriminated against you.