

Patient Groups Urge U.S. District Court to Prevent Discrimination Against LGBTQ and Limited English Proficiency Patients

Washington, D.C.—December 9, 2020— More than a dozen patient groups representing millions of Americans with serious and chronic health conditions are urging the U.S. District Court for the Southern District of New York to preserve protections in the Affordable Care Act (ACA) for lesbian, gay, bisexual, transgender and queer (LGBTQ) patients receiving health care services and restore translation notices for those with limited English proficiency (LEP) in the case of *New York v. U.S. Dept. of Health and Human Services*.

The groups filed an [amicus brief](#) in which they make clear that LGBTQ patients and non-native English speakers already face significant health disparities and allowing discrimination and limiting language translation of notices—as permitted under a June 2020 Health and Human Services rule—would further exacerbate these gaps and lead to poorer health outcomes.

The 2020 Rule rescinded a 2016 Rule intended to provide broad protections for LGBTQ and LEP individuals under section 1557 of the ACA.

Following is the groups’ joint statement:

“As organizations that represent millions of people with serious and chronic health conditions, we strongly urge the court to strike down the 2020 Rule that allows discrimination against LGBTQ and LEP individuals.

“These communities already face significant health disparities and this rule—if implemented—would exacerbate these challenges and create worse health outcomes. People with chronic illness such as HIV and cancer are more likely to have hospitalizations, ER visits, ambulatory surgeries, and provider visits. If they encounter discrimination or mistreatment while seeking care, which has been reported extensively by the LGBTQ community, they are more likely to avoid or delay necessary health care and endure poorer long-term outcomes. Forcing them to find different providers elsewhere is not a solution.

“Similarly, individuals with limited English proficiency face significant barriers to accessing necessary health care. They often have greater gaps in understanding their coverage which is proven to result in their forgoing services. In fact, people with limited English proficiency have disproportionately lower rates of cancer screening than English-proficient patients. Studies have found language to be the greatest barrier to understanding information and making treatment decisions for breast cancer patients with limited English skills. And those with limited language skills are among the least likely to have a usual place to go for medical care.

“Every person regardless of their race, color, national origin, gender identity, sexual orientation, age or disability should be given equal access to timely, quality, comprehensive health care without discrimination. We urge the court to reject the administration’s drastic and damaging rule change and protect patients as intended by the health care law.”

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The groups on the brief include the American Cancer Society, American Cancer Society Cancer Action Network, American Heart Association, American Lung Association, CancerCare, Cancer Support Community, Cystic Fibrosis Foundation, Epilepsy Foundation, Hemophilia Federation of America,

National Coalition for Cancer Survivorship, National Multiple Sclerosis Society, National Organization for Rare Disorders, National Patient Advocate Foundation, The AIDS Institute, and WomenHeart.