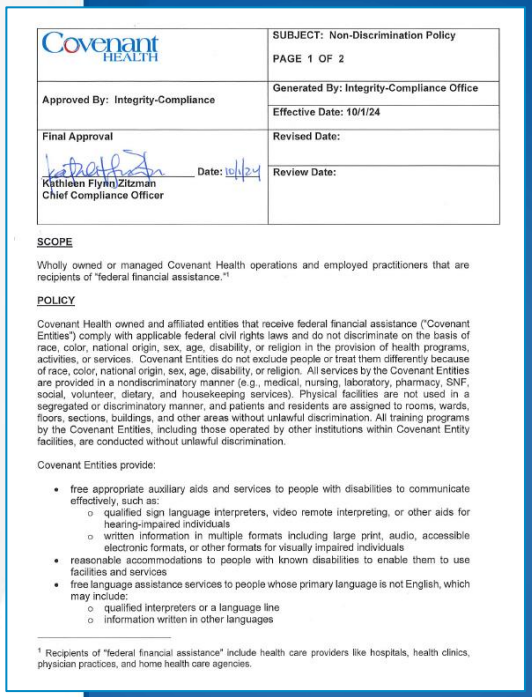
Nondiscrimination Training,
Including Effective Communication with Individuals Who Are Deaf/Hard of Hearing or Have Limited English Proficiency

Nondiscrimination Policy.

- Covenant Health complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, sex, age, religion, or disability.
- We do not exclude individuals or provide different services based on discriminatory characteristics. Healthcare services are provided in a nondiscriminatory and culturally competent manner (e.g., medical, nursing, laboratory, pharmacy, SNF, social, volunteer, dietary, and housekeeping services).
- Physical facilities are not used in a segregated or discriminatory manner, and patients and residents are assigned to rooms, floors, sections, buildings, and other areas without unlawful discrimination.



Covenant HEALTH

	SUBJECT: Non-Discrimination Policy PAGE 1 OF 2
Approved By: Integrity-Compliance	Generated By: Integrity-Compliance Office Effective Date: 10/1/24
Final Approval Date: 10/1/24 Kathleen Flynn Zitzman Chief Compliance Officer	Revised Date: Review Date:

SCOPE

Wholly owned or managed Covenant Health operations and employed practitioners that are recipients of "federal financial assistance."[1]

POLICY

Covenant Health owned and affiliated entities that receive federal financial assistance ("Covenant Entities") comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, sex, age, disability, or religion in the provision of health programs, activities, or services. Covenant Entities do not exclude people or treat them differently because of race, color, national origin, sex, age, disability, or religion. All services by the Covenant Entities are provided in a nondiscriminatory manner (e.g., medical, nursing, laboratory, pharmacy, SNF, social, volunteer, dietary, and housekeeping services). Physical facilities are not used in a segregated or discriminatory manner, and patients and residents are assigned to rooms, wards, floors, sections, buildings, and other areas without unlawful discrimination. All training programs by the Covenant Entities, including those operated by other institutions within Covenant Entity facilities, are conducted without unlawful discrimination.

Covenant Entities provide:

- free appropriate auxiliary aids and services to people with disabilities to communicate effectively, such as:
  - qualified sign language interpreters, video remote interpreting, or other aids for hearing-impaired individuals
  - written information in multiple formats including large print, audio, accessible electronic formats, or other formats for visually impaired individuals
- reasonable accommodations to people with known disabilities to enable them to use facilities and services
- free language assistance services to people whose primary language is not English, which may include:
  - qualified interpreters or a language line
  - information written in other languages

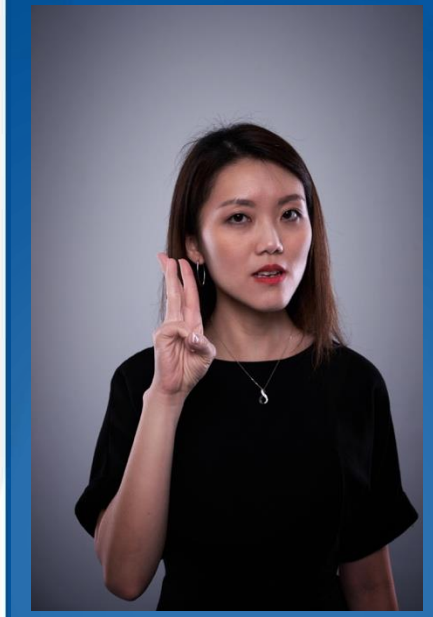
[1] Recipients of "federal financial assistance" include health care providers like hospitals, health clinics, physician practices, and home health care agencies.

Covenant HEALTH

Our Commitment.

Covenant Health provides timely and free appropriate auxiliary aids and services to people with disabilities to communicate effectively, such as:

- qualified sign language interpreters, video remote interpreting, or other aids for hearing-impaired individuals; and
- written information in multiple formats including large print, audio, accessible electronic formats, or other formats for visually impaired individuals.

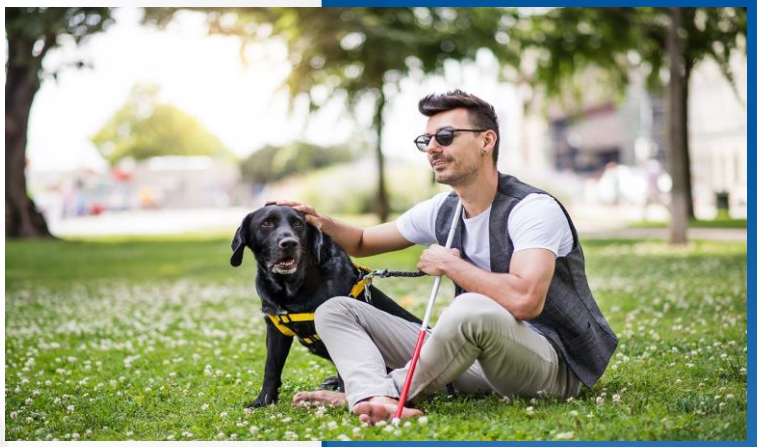


Our Commitment.

Covenant Health also offers timely and free language assistance to anyone who does not speak English as a primary language or has limited ability to read, write, speak or understand English

- Contact the house supervisor or clinic office manager for access to a video remote interpreter when a patient/companion has a communication barrier.
- Remember! Family members or friends are not used as interpreters unless specifically requested by the person, the interpreter is 18+, and reliance on the family member/friend is otherwise appropriate.

Our Commitment



Covenant Health also provides reasonable accommodations to people with known disabilities to enable them to use facilities and services.

Examples:

- Allowing a companion to assist a patient with a mobility disability when positioning the patient for a radiology scan.
- Modifying a policy requiring patients to complete their own paperwork, so staff can complete intake paperwork for a person with a brain injury or dyslexia who requests the assistance to fill out the paperwork.
- Allowing additional time to explain care to a patient with an intellectual disability.
- Allowing a service dog that has been trained to alert their handler with a seizure disorder at the onset of a seizure to be present in an exam room.

Nondiscrimination Coordinator

- Covenant Health coordinates its efforts to comply with applicable civil rights laws and regulations through a Non-Discrimination Coordinator based in the Covenant Health Integrity-Compliance Office.

- Patients needing reasonable modifications, appropriate auxiliary aids and services, or language assistance services, may contact the Non-Discrimination Coordinator at the Covenant Health Integrity-Compliance Office, 3003 Lake Brook Boulevard, Suite 102, Knoxville, TN 37909 or 888-731-3115.

Reporting Responsibilities

All Covenant Health employees, volunteers, and workforce members must **promptly report any claims of unlawful discrimination on the basis of race, color, national origin, sex, age, religion, or disability to the Covenant Health Non-Discrimination Coordinator** or Integrity-Compliance Office.

Grievance Procedure

- Covenant Health has adopted an internal grievance procedure for prompt and equitable resolution of grievances alleging discrimination on the basis of race, color, national origin, sex, age, religion, or disability.

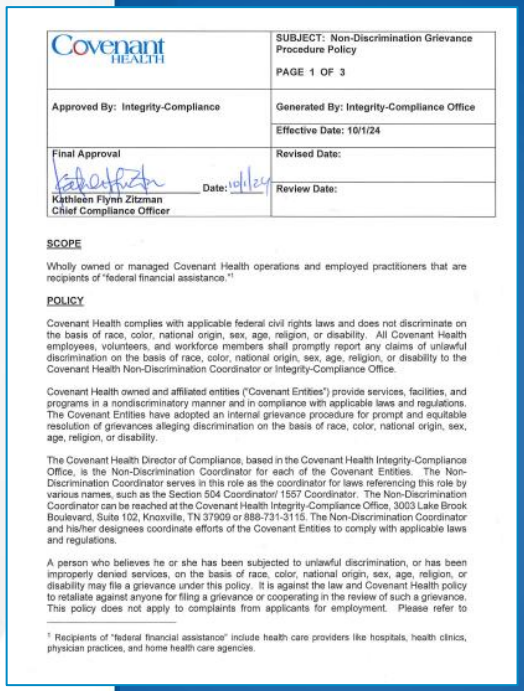
- Grievances regarding unlawful discrimination on the basis of race, color, national origin, sex, age, religion, or disability must be submitted in writing to the Non-Discrimination Coordinator for review within sixty (60) days of the date the person filing the grievance becomes aware of the alleged discriminatory action.
  - Grievances from hospital patients may be communicated verbally.

- The grievance should include the name and address of the person filing it, as well as the problem or action alleged to be discriminatory and the requested remedy or relief.

Grievance Procedure

- The Non-Discrimination Coordinator or the Covenant Health location will work to provide a response on the grievance no later than 60 days after filing.
- The availability and use of this grievance procedure does not prevent a person from filing a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)



Covenant HEALTH

Covenant HEALTH	SUBJECT: Non-Discrimination Grievance Procedure Policy PAGE 1 OF 3
Approved By: Integrity-Compliance	Generated By: Integrity-Compliance Office Effective Date: 10/1/24
Final Approval Date: 10/1/24 Kathleen Flynn Zitzman Chief Compliance Officer	Revised Date: Review Date:

SCOPE

Wholly owned or managed Covenant Health operations and employed practitioners that are recipients of "federal financial assistance."[1]

POLICY

Covenant Health complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, sex, age, religion, or disability. All Covenant Health employees, volunteers, and workforce members shall promptly report any claims of unlawful discrimination on the basis of race, color, national origin, sex, age, religion, or disability to the Covenant Health Non-Discrimination Coordinator or Integrity-Compliance Office.

Covenant Health owned and affiliated entities ("Covenant Entities") provide services, facilities, and programs in a nondiscriminatory manner and in compliance with applicable laws and regulations. The Covenant Entities have adopted an internal grievance procedure for prompt and equitable resolution of grievances alleging discrimination on the basis of race, color, national origin, sex, age, religion, or disability.

The Covenant Health Director of Compliance, based in the Covenant Health Integrity-Compliance Office, is the Non-Discrimination Coordinator for each of the Covenant Entities. The Non-Discrimination Coordinator serves in this role as the coordinator for laws referencing this role by various names, such as the Section 504 Coordinator/ 1557 Coordinator. The Non-Discrimination Coordinator can be reached at the Covenant Health Integrity-Compliance Office, 3003 Lake Brook Boulevard, Suite 102, Knoxville, TN 37909 or 888-731-3115. The Non-Discrimination Coordinator and his/her designees coordinate efforts of the Covenant Entities to comply with applicable laws and regulations.

A person who believes he or she has been subjected to unlawful discrimination, or has been improperly denied services, on the basis of race, color, national origin, sex, age, religion, or disability may file a grievance under this policy. It is against the law and Covenant Health policy to retaliate against anyone for filing a grievance or cooperating in the review of such a grievance. This policy does not apply to complaints from applicants for employment. Please refer to

[1] Recipients of "federal financial assistance" include health care providers like hospitals, health clinics, physician practices, and home health care agencies.

Covenant HEALTH

Accommodating a Deaf or Hard of Hearing Individual

- “Effective communication” is critical in health care; miscommunicati can lead to misdiagnosis or unwanted treatment
- Health care providers must take steps to ensure the patient, companion, or designated representative is able to communicate effectively
- A deaf or hard of hearing individual’s preferences on how to communicate effectively must be given “primary consideration”
- **Interpreter services are provided for free at Covenant Health locations**, either through Jeenie (preferred) or Stratus/AMN (backup) video remote interpretive services or an in-person interpreter provided by a contracted agency

Accommodating a Deaf or Hard of Hearing Individual

- When a deaf or hard of hearing individual is scheduled or on site, or requests an interpreter, alert the Administrative/House Supervisor (hospitals) or Office Manager (nonhospital locations) so effective communication can be ensured
- An individual's communication needs should be assessed on an ongoing basis (daily in the hospitals)
- For recurring scheduled visits (e.g., infusion, therapy, etc.), refer to the patient's record and expedite arrangements for the deaf/hard of hearing individual while on site
- Use the Covenant Health Communication Assessment Tool, discussed later in this presentation, to record the person's communication needs

Effective Communications Must Occur with the Following Individuals

- A deaf or hard of hearing patient
- A deaf or hard of hearing companion: a) a person whom the patient indicates should communicate with facility/clinic personnel about the patient, participate in any treatment decision, play a role in communicating patient's needs, condition history, or symptoms, or help the patient act on the information, advice, or instructions provided by facility/clinic personnel; b) a person legally authorized to make health care decisions on behalf of patient; or c) such other person with whom the facility/clinic personnel would ordinarily and regularly communicate the patient's medical condition
- A deaf or hard of hearing designated representative: an individual who has been designated by the patient to receive/obtain patient's personal health information, claim and benefit information, eligibility and coverage information, and/or payment and financial information

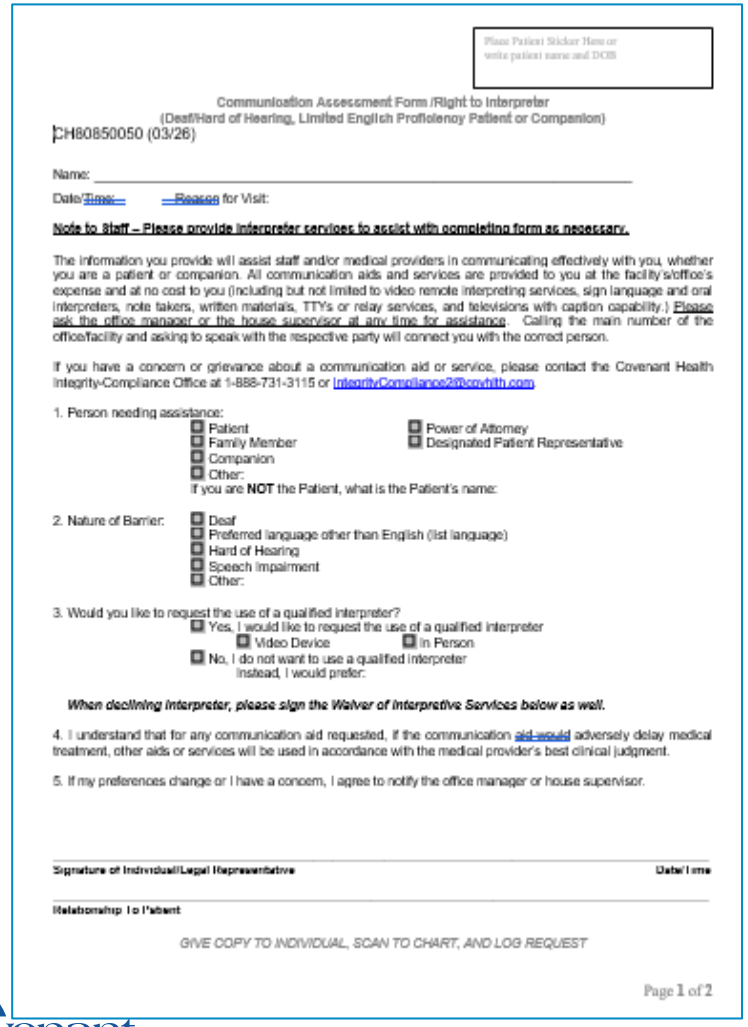
Effective Communication Must Begin Right Away

- The determination of which communication aid or service is necessary must be made, to the extent possible, at the time a visit is scheduled or on arrival, whichever is earlier
- Staff must promptly identify the communication needs of patients **and companions** who are deaf or hard of hearing
- Use all available means to communicate with the deaf or hard of hearing individual (e.g., VRI, pictographs, note-taking, etc.)
- Use the Covenant Health Communication Assessment Tool to identify and record the individual's communication preferences
- **Alert the Administrative Supervisor or Office Manager when a sign language interpreter is needed, whether in-person or through video remote interpretive service**

Communication Assessment Tool

- Once an individual who is deaf/hard of hearing is on site, use the Communication Assessment Tool for Deaf or Hard of Hearing Individuals (available in Cerner and in paper from at non-Cerner locations) to determine how to communicate effectively with the individual
  - Use Jeenie or the Stratus/AMN video remote interpretive services to read through the Communication Assessment Tool with the deaf or hard of hearing individual
  - The individual must sign the form
  - If an interpreter is refused, the individual must also sign the waiver in the form
  - Include the signed form in the patient's record
  - If an interpreter is requested, alert the Administrative Supervisor/Office Manager
- Keep other notes in the patient's record on communication aids and services that are provided

Communication Assessment Tool



Place Patient Sticker Here or write patient name and DOB

Communication Assessment Form /Right to Interpreter
(Deaf/Hard of Hearing, Limited English Proficiency Patient or Companion)

CH80850050 (03/26)

Name: _____

Date/Time: ~~Reason~~ for Visit:

Note to Staff – Please provide interpreter services to assist with completing form as necessary.

The information you provide will assist staff and/or medical providers in communicating effectively with you, whether you are a patient or companion. All communication aids and services are provided to you at the facility's/office's expense and at no cost to you (including but not limited to video remote interpreting services, sign language and oral interpreters, note takers, written materials, TTYs or relay services, and televisions with caption capability.) Please ask the office manager or the house supervisor at any time for assistance. Calling the main number of the office/facility and asking to speak with the respective party will connect you with the correct person.

If you have a concern or grievance about a communication aid or service, please contact the Covenant Health Integrity-Compliance Office at 1-888-731-3115 or IntegrityCompliance2@covhlth.com

1. Person needing assistance:
   - ☐ Patient
   - ☐ Family Member
   - ☐ Companion
   - ☐ Other:
   - ☐ Power of Attorney
   - ☐ Designated Patient Representative

   If you are **NOT** the Patient, what is the Patient's name:

2. Nature of Barrier:
   - ☐ Deaf
   - ☐ Preferred language other than English (list language)
   - ☐ Hard of Hearing
   - ☐ Speech Impairment
   - ☐ Other:

3. Would you like to request the use of a qualified interpreter?
   - ☐ Yes, I would like to request the use of a qualified interpreter
     - ☐ Video Device
     - ☐ In Person
   - ☐ No, I do not want to use a qualified interpreter
     Instead, I would prefer:

When declining interpreter, please sign the Waiver of Interpretive Services below as well.

4. I understand that for any communication aid requested, if the communication ~~aid would~~ adversely delay medical treatment, other aids or services will be used in accordance with the medical provider's best clinical judgment.

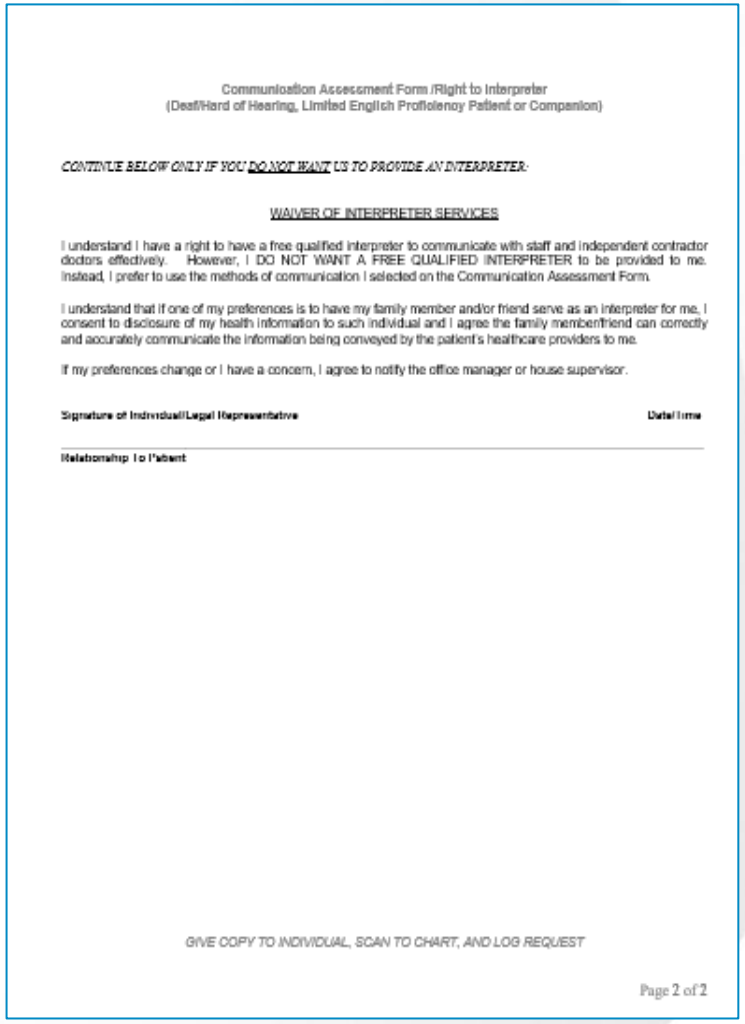
5. If my preferences change or I have a concern, I agree to notify the office manager or house supervisor.

Signature of Individual/Legal Representative **Date/Time**

Relationship to Patient

GIVE COPY TO INDIVIDUAL, SCAN TO CHART, AND LOG REQUEST

Page 1 of 2



Communication Assessment Form /Right to Interpreter
(Deaf/Hard of Hearing, Limited English Proficiency Patient or Companion)

CONTINUE BELOW ONLY IF YOU DO NOT WANT US TO PROVIDE AN INTERPRETER:

WAIVER OF INTERPRETER SERVICES

I understand I have a right to have a free qualified interpreter to communicate with staff and independent contractor doctors effectively. However, I DO NOT WANT A FREE QUALIFIED INTERPRETER to be provided to me. Instead, I prefer to use the methods of communication I selected on the Communication Assessment Form.

I understand that if one of my preferences is to have my family member and/or friend serve as an interpreter for me, I consent to disclosure of my health information to such individual and I agree the family member/friend can correctly and accurately communicate the information being conveyed by the patient's healthcare providers to me.

If my preferences change or I have a concern, I agree to notify the office manager or house supervisor.

Signature of Individual/Legal Representative **Date/Time**

Relationship to Patient

GIVE COPY TO INDIVIDUAL, SCAN TO CHART, AND LOG REQUEST

Page 2 of 2

Situations When Interpretive Services Are Required

Examples of circumstances when interpretive services are required:

- Discussing a patient's symptoms and medical condition, medications, and medical history
- Explaining medical conditions, treatment options, tests, medications, surgery and other procedures
- Providing a diagnosis and recommendations for treatment
- Communicating with a patient during treatment, testing procedures, and during physician rounds
- Obtaining informed consent for treatment
- Providing instructions for medications, post-treatment activities, and follow-up treatments
- Providing mental health services, including group or individual counseling for patients and family members
- Discussing powers of attorney, living wills, and/or complex billing and insurance matters
- During educational presentations, such as birthing or new parent classes, nutrition and weight management programs

In-Person Interpreter

- Although video remote interpretive services can be offered as an option for an individual who is deaf, an in-person interpreter may be needed for effective communication
- The individual's choice (about an in-person interpreter versus a video remote interpreter) must be given primary consideration
- Call the Administrative Supervisor/ Office Manager to contact a contracted agency for in-person interpreting services

Do Not Use Family and Friends to Interpret

A family member or friend should not be used as an interpreter or to facilitate communication unless:

- Specifically requested by the individual, the family member or friend is 18 years+ and agrees to provide such assistance, and reliance on that family member or friend is appropriate under the circumstances. A signed waiver refusing deaf interpreter services in the Covenant Communication Assessment Tool must be on record; OR
- In an emergency situation involving an imminent threat to the safety or welfare of the patient or public when no interpreter is available

Children under 18 years of age will not be used to interpret or facilitate communications except in an emergency situation involving an imminent threat to the safety or welfare of the patient or public when no interpreter is available

Timing Requirements for an Interpreter for Scheduled Services/Visits

If the visit or admission requiring interpretation is scheduled in advance and an interpreter is requested:

- Ask the individual scheduling the visit whether using a video remote interpreter (“VRI”) is acceptable
- Give the individual’s preference “primary consideration”
- Alert the Administrative Supervisor/Office Manager of any request for an interpreter (either in-person or VRI)
- Ensure either VRI or in-person interpreter is available at the time of the scheduled visit and complete the Communication Assessment form with the individual

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Timing Requirements for an Interpreter for Scheduled Services/Visits (cont'd.)

If an in-person interpreter is requested but fails to arrive:

- Call the interpreter service to inquire about the status of the interpreter
- Convey this information to the individual
- If no agency can provide an in-person interpreter during the appointment:
  - Convey this information to the individual
  - Offer the option of either rescheduling the appointment or proceeding with a video remote interpreter

Timing Requirements for an Interpreter for Unscheduled Services/Visits

If the visit or admission requiring an interpreter is **not** scheduled in advance (e.g., ED visit):

- Complete the Communication Assessment Form as circumstances allow using the Jeenie or Stratus/AMN video remote interpreter (VRI)
- Ask the individual whether using the VRI is acceptable
- Give the individual's preference "primary consideration"
- If an in-person interpreter is required for effective communication, provide one as soon as possible

Deaf/Hard of Hearing Signage in Hospital Settings

- **White Boards.** White boards in patient rooms (where available) should indicate a patient/companion/designated representative's need for communication aids and the preferred form of communication, including preferred auxiliary aid request. White boards also can be used to communicate with the patient/companion/designated representative in the same means and manner used by hearing-aware patients. Use of written notes, like the white board or paper notes should be documented in the medical record.
- **Signs on Inpatient Doors.** For inpatients, or companions/designated representatives of inpatients, a "deaf/hard of hearing" sign should be placed on the patient's door to alert all healthcare providers and employees of the patient/companion/designated representative's hearing limitation. Contact the Administrative Supervisor for the sign.
- **Call Light.** A note will be placed next to the call light at the nurse's station to identify the patient as deaf or hard of hearing. This will indicate that staff must go into the individual's room when the call bell is activated.

Administrative/House Supervisors Are "ADA Administrators"

- Alert the on-duty Administrative/House Supervisor as soon as you identify a patient or companion who is deaf or hard of hearing, an interpreter is requested, or if there is a complaint about effective communication with someone who is deaf/hard of hearing
- As "ADA Administrators," the Administrative/House Supervisors are responsible for:
  - Being available 24/7 to answer questions and provide immediate access to interpreter services
  - Knowing how to use, maintaining and distributing communication aids like Jeenie or Stratus/AMN VRI, TTY devices, and pictographs, as well as being able to access in-person interpreters
- Complaint resolution on effective communications with someone who is deaf of hard or hearing, as well as grievance referral

For Covenant Health hospital locations

Available Auxiliary Aids for Communication

- Video Remote Interpreter or VRI
  - Jeenie is preferred
  - Stratus is a backup
- In-person interpreter
- Written communication (note taking)
- Pictographs
- TTY/TDD (just dial 9-711 to communicate with someone using a TTY device; the relay service will guide you through the call)

Video Remote Interpreter

- Jeenie and Stratus/AMN are 24/7 video interpreting service used for interpreting American Sign Language, as well as other languages
- The expectation is that video remote interpretive services will be real-time, full-motion video and audio with high-quality video images and audio transmission; report any connection or technical issues to the Administrative Supervisor/Office Manager right away
- If the patient, companion, or designated representative requests this service or it is necessary for effective communication, alert the Administrative Supervisor/Office Manager and obtain the video cart

- ***Note that VRI should not be used when it is not effective due, for example, to a limited ability to move head, hands or arms, vision or cognitive issues, significant emotional distress, significant pain, or due to space limitations in the room.***

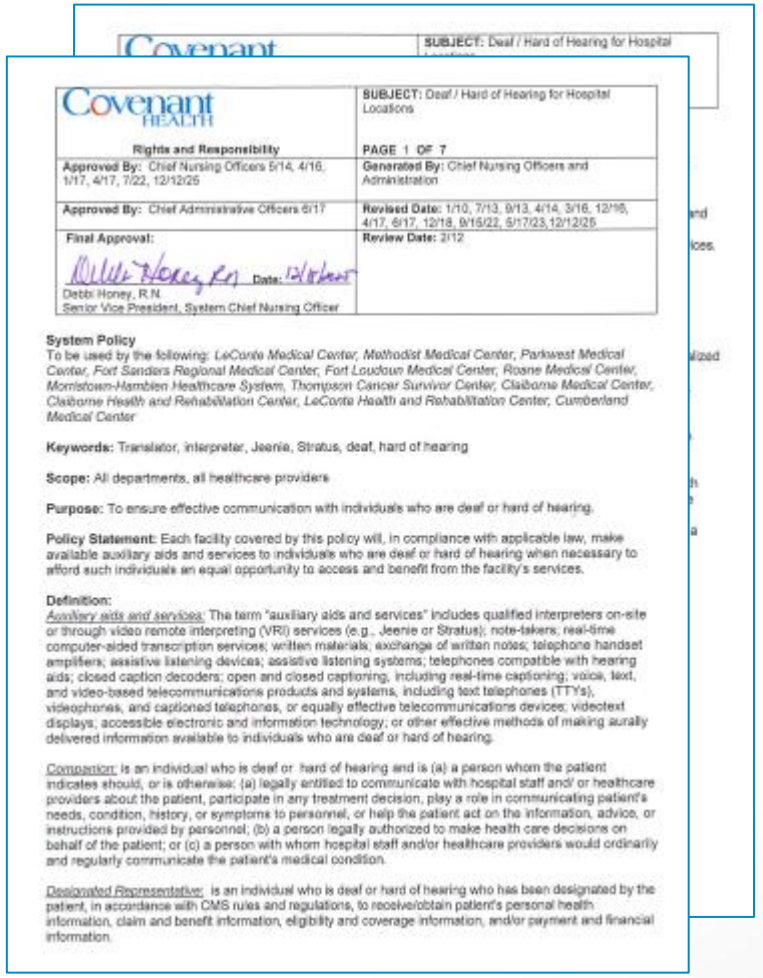
How to Use the Video Remote Interpreter Service

- Alert Administrative Supervisor/Office Manager that interpreter being provided (Administrative Supervisor will log that an interpreter is being provided)
- Position iPad in front of patient and check volume
- Open the Jeenie or AMN language service app
- Log in
- Select language (e.g., American Sign Language)
- Greet interpreter
- Ensure video is high resolution and real-time with no blurring or lagging
- Report any connectivity/technical issues to the Administrative Supervisor/Office Manager
- Use Stratus/AMN as a backup if Jeenie has connectivity/technical issues

Overview of the Deaf and Hard of Hearing Procedure

1. Address interpreter request and contact House Supervisor/ Office Manager
2. Fill out Communication Assessment Form when individual on site
3. Provide individual preferred method of communication (VRI or in-person)
4. If in-person requested, use VRI until interpreter arrives
5. Update signage in room, on door, and at nursing station

Deaf/Hard of Hearing Policy
Hospital and Nonhospital Locations



Covenant HEALTH

Rights and Responsibility	SUBJECT: Deaf / Hard of Hearing for Hospital Locations PAGE 1 OF 7
Approved By: Chief Nursing Officers 5/14, 4/16, 1/17, 4/17, 7/22, 12/12/25	**Generated By:** Chief Nursing Officers and Administration
Approved By: Chief Administrative Officers 6/17	**Revised Date:** 1/10, 7/13, 9/13, 4/14, 3/16, 12/16, 4/17, 6/17, 12/18, 9/15/22, 5/17/23,12/12/25
Final Approval: Debbi Honey, R.N. Senior Vice President, System Chief Nursing Officer	**Review Date:** 2/12

System Policy
To be used by the following: *LeConte Medical Center, Methodist Medical Center, Parkwest Medical Center, Fort Sanders Regional Medical Center, Fort Loudoun Medical Center, Roane Medical Center, Morristown-Hamblen Healthcare System, Thompson Cancer Survivor Center, Claiborne Medical Center, Claiborne Health and Rehabilitation Center, LeConte Health and Rehabilitation Center, Cumberland Medical Center*

Keywords: Translator, interpreter, Jeenie, Stratus, deaf, hard of hearing

Scope: All departments, all healthcare providers

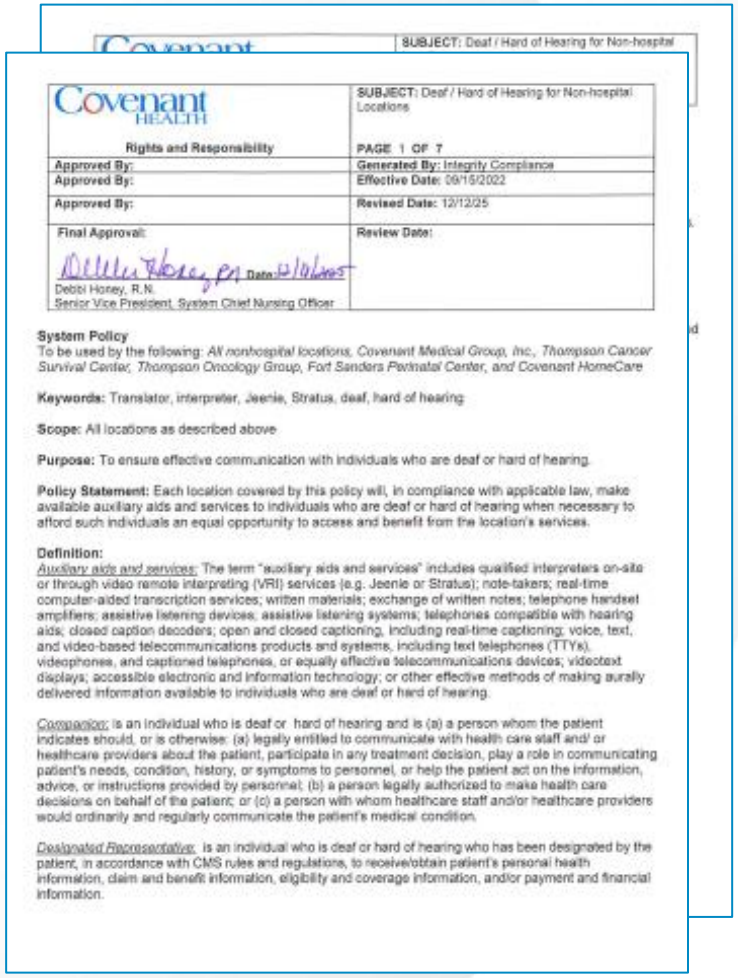
Purpose: To ensure effective communication with individuals who are deaf or hard of hearing.

Policy Statement: Each facility covered by this policy will, in compliance with applicable law, make available auxiliary aids and services to individuals who are deaf or hard of hearing when necessary to afford such individuals an equal opportunity to access and benefit from the facility's services.

Definition:
Auxiliary aids and services: The term "auxiliary aids and services" includes qualified interpreters on-site or through video remote interpreting (VRI) services (e.g., Jeenie or Stratus); 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 telecommunications products and systems, including text telephones (TTYs); videophones, and captioned telephones, or equally effective telecommunications devices; videotext displays; accessible electronic and information technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing.

Companion: is an individual who is deaf or hard of hearing and is (a) a person whom the patient indicates should, or is otherwise: (a) legally entitled to communicate with hospital staff and/ or healthcare providers about the patient, participate in any treatment decision, play a role in communicating patient's needs, condition, history, or symptoms to personnel, or help the patient act on the information, advice, or instructions provided by personnel; (b) a person legally authorized to make health care decisions on behalf of the patient; or (c) a person with whom hospital staff and/or healthcare providers would ordinarily and regularly communicate the patient's medical condition.

Designated Representative: is an individual who is deaf or hard of hearing who has been designated by the patient, in accordance with CMS rules and regulations, to receive/obtain patient's personal health information, claim and benefit information, eligibility and coverage information, and/or payment and financial information.



Covenant HEALTH

Rights and Responsibility	SUBJECT: Deaf / Hard of Hearing for Non-hospital Locations PAGE 1 OF 7
Approved By:	**Generated By:** Integrity Compliance
Approved By:	**Effective Date:** 09/15/2022
Approved By:	**Revised Date:** 12/12/25
Final Approval: Debbi Honey, R.N. Senior Vice President, System Chief Nursing Officer	**Review Date:**

System Policy
To be used by the following: *All nonhospital locations, Covenant Medical Group, Inc., Thompson Cancer Survival Center, Thompson Oncology Group, Fort Sanders Perinatal Center, and Covenant HomeCare*

Keywords: Translator, interpreter, Jeenie, Stratus, deaf, hard of hearing

Scope: All locations as described above

Purpose: To ensure effective communication with individuals who are deaf or hard of hearing.

Policy Statement: Each location covered by this policy will, in compliance with applicable law, make available auxiliary aids and services to individuals who are deaf or hard of hearing when necessary to afford such individuals an equal opportunity to access and benefit from the location's services.

Definition:
Auxiliary aids and services: The term "auxiliary aids and services" includes qualified interpreters on-site or through video remote interpreting (VRI) services (e.g. Jeenie or Stratus); 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 telecommunications products and systems, including text telephones (TTYs); videophones, and captioned telephones, or equally effective telecommunications devices; videotext displays; accessible electronic and information technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing.

Companion: is an individual who is deaf or hard of hearing and is (a) a person whom the patient indicates should, or is otherwise: (a) legally entitled to communicate with health care staff and/ or healthcare providers about the patient, participate in any treatment decision, play a role in communicating patient's needs, condition, history, or symptoms to personnel, or help the patient act on the information, advice, or instructions provided by personnel; (b) a person legally authorized to make health care decisions on behalf of the patient; or (c) a person with whom healthcare staff and/or healthcare providers would ordinarily and regularly communicate the patient's medical condition.

Designated Representative: is an individual who is deaf or hard of hearing who has been designated by the patient, in accordance with CMS rules and regulations, to receive/obtain patient's personal health information, claim and benefit information, eligibility and coverage information, and/or payment and financial information.

Covenant HEALTH

Be in Touch with Questions/Concerns

Chief Compliance Officer:	Kathleen Flynn Zitzman kzitzman@covhlth.com
Director of Compliance:	Janice Watkin Jwatkin@CovHlth.com
Confidential Integrity Report Line:	(888) 731-3115
Online:	http://covnet/integrity-compliance
Email:	IntegrityCompliance2@covhlth.com