FREE RESOURCE FOR HEALTH CENTERS AND OTHER HHS FUNDING RECIPIENTS

Section 504 Website and PDF Checklist

HHS requires organizations that receive its funding to make their websites, mobile apps and online documents accessible to people with disabilities. The standard is WCAG 2.1 Level AA, under 45 CFR part 84, subpart I. An interim final rule published May 11, 2026 moved the compliance dates to the ones below. Use this checklist to plan the work, assign it and track it.

Your organization	Comply by
15 or more employees	**May 11, 2027**
Fewer than 15 employees	**May 10, 2028**

The rule covers content you provide directly and content you provide through vendors, licenses or other arrangements, such as a hosted website, patient portal or scheduling app.

1. Assign the work and take inventory

- ☐ **Name an owner.** Give one person responsibility for digital accessibility and the authority to hold vendors to it.
- ☐ **Confirm your date.** Count your employees and write down which compliance date applies to you.
- ☐ **List what you publish.** Every website, subdomain, mobile app and kiosk, including the ones vendors run for you.
- ☐ **List your vendors.** Website host, patient portal, online scheduling, telehealth, bill pay and online forms. Ask each for a current accessibility conformance report (often called a VPAT) against WCAG 2.1 AA.
- ☐ **Update contracts.** Add WCAG 2.1 Level AA requirements to new and renewing vendor agreements.

2. Website

- ☐ Images that carry meaning have alt text. Decorative images are marked as decorative.
- ☐ Every page works with a keyboard alone, and the focus outline is visible.
- ☐ Text has enough contrast with its background (at least 4.5 to 1 for normal text).
- ☐ Headings follow a logical order, and link text makes sense on its own (“Sliding fee application” rather than “click here”).
- ☐ Forms for appointments, contact and eligibility have labels and clear error messages.
- ☐ Pages still work when zoomed to 200 percent and on a phone screen.
- ☐ Each page declares its language, including Spanish and other translated pages.

3. PDFs and other documents

- ☐ **Inventory every document you post.** PDFs, Word files and fillable forms.
- ☐ **Fix the ones people use to get care first.** New patient packets, registration and consent forms, sliding fee applications, financial assistance policies, notices of privacy practices and schedules. Documents currently used to apply for, access or take part in your services must be accessible even if you posted them before the deadline.
- ☐ **Check the basics in each file.** Tags, a document title, correct reading order, alt text, table headers and the right language.
- ☐ **Watch for scanned pages.** A scan is a picture to a screen reader. It needs text recognition and a check of the numbers.
- ☐ **Label every form field.** A screen reader should announce what each field asks for.
- ☐ **Archive what you keep only for the record.** Move it to a clearly labeled archive area and stop editing it there.
- ☐ **Consider a web page instead.** Turning a short document into an accessible page is often the simpler fix.

4. Patient portal, apps and online services

- ☐ Test sign in, scheduling, messaging and bill pay with a keyboard and a screen reader, or have your vendor show you results.
- ☐ Ask each vendor for a dated plan to fix known gaps.
- ☐ A patient's own records behind a secure login fall under an exception, but the portal itself must be accessible, and you should still provide those records in an accessible format when a patient asks.

5. Video and audio

- ☐ Captions on all prerecorded video with sound, such as health education videos and recorded board meetings.
- ☐ Captions on live video you stream.
- ☐ Audio description for prerecorded video when important information is shown only on screen.
- ☐ Transcripts for audio only content, such as podcasts.

6. Keep it accessible

- ☐ Post an accessibility statement with a way to report a barrier and to request another format.
- ☐ Train the staff who post content: alt text, headings and accessible documents.
- ☐ Check new pages and documents before they go live, and recheck the site on a regular schedule.
- ☐ Keep a dated log of what you fixed, what you archived and any decisions you made along the way.

What the rule does not require you to fix

Archived content: kept only for reference, research or recordkeeping, unchanged since archiving, and stored in an area clearly labeled as archived.
Older documents: posted before your compliance date, unless people currently use them to apply for, access or take part in your services.
Third party content: unless it is posted for you under a contract, license or other arrangement.
Individual records: about one person or account and kept behind a password or other security.
Older social media posts: made before your compliance date.
The rule also allows limited relief for undue burden and for gaps with minimal impact on access. Both must be shown and documented.

Celsari can help

Celsari remediates and quality-checks PDFs and forms for HHS funding recipients, and reviews websites against WCAG 2.1 AA ahead of the deadline. Free online at celsari.com/guides/section-504-checklist/.

Sources: 45 CFR part 84, subpart I (sections 84.82 to 84.89); HHS interim final rule, Federal Register document 2026-09266, May 11, 2026; WCAG 2.1. Prepared October 2026. This checklist is general information, not legal advice.