NONPRECEDENTIAL DISPOSITION
To be cited only in accordance with FED. R. APP. P. 32.1

United States Court of Appeals

For the Seventh Circuit
Chicago, Illinois 60604

Submitted February 24, 2025*
Decided February 25, 2025

Before

MICHAEL B. BRENNAN, *Circuit Judge*

AMY J. ST. EVE, *Circuit Judge*

DORIS L. PRYOR, *Circuit Judge*

No. 24-2557

SHAWANDA V. COLLINS,
Plaintiff-Appellant,

v.

CENTERS FOR MEDICARE AND MEDICAID SERVICES, et al.,
Defendants-Appellees.

Appeal from the United States District Court for the Eastern District of Wisconsin.

No. 24-cv-0490-bhl

Brett H. Ludwig,
Judge.

O R D E R

Shawanda Collins's mother died after receiving treatment in the Advocate Aurora Health system. While her mother was in one of its hospitals, staff members allegedly barred Collins from visiting her because they viewed Collins as an "angry black female." Collins sued Aurora for race discrimination and violations of her

* The appellees were not served with process and are not participating in this appeal. After examining the appellant's brief and the record, we have concluded that the case is appropriate for summary disposition. FED. R. APP. P. 34(a)(2)(C).

mother's rights. The district court dismissed all claims. We agree with the court that most of Collins's claims fail, but we conclude that she sufficiently pleaded that Aurora unlawfully blocked her from the hospital because of her race and remand that claim.

We accept the facts in Collins's complaint as true and review them in the light most favorable to her. *Luevano v. Wal-Mart Stores, Inc.*, 722 F.3d 1014, 1027 (7th Cir. 2013). On July 14, 2021, Collins's mother, Veronica Lee Collins Dixon, was admitted to Aurora St. Luke's Medical Center in Wisconsin for malnutrition. After Collins complained about her mother's care, St. Luke's staff members "falsely portrayed [her] as an 'angry black female' provoking discriminatory actions based on their racial profiling and their hate speech." Hospital staff barred her from visiting or calling her mother, and they also falsely reported that she had threatened an armed attack on the hospital (although security officers did not believe that report). She also alleges that the hospital's medical errors so aggravated her mother's condition that, after she was transferred to an affiliated hospital, she died from resulting complications.

Collins sued Aurora, the corporate owner of St. Luke's, and others. In her amended complaint, she accuses Aurora of violating her rights under Title VI of the Civil Rights Act, 42 U.S.C. § 2000d; the First or Fourteenth Amendments; and state law. She also brought claims against Aurora, as well as federal and state regulators, based on the allegedly inadequate care provided to her mother and to African American patients generally. These included asserted violations of 42 C.F.R. § 482.13, Title XIX of the Social Security Act, the Patient Safety and Quality Improvement Act, the Administrative Procedure Act, and Wisconsin's Deceptive Trade Practices Act.

The court screened this suit and dismissed it. *See* 28 U.S.C. § 1915(e)(2)(B)(ii). It ruled that the claims (other than the one against Aurora under Title VI) had many fatal defects, including the absence of state actors required for § 1983 liability, the lack of a private right of action, and the lack of standing. The court then turned to Collins's Title VI claim against Aurora. It considered her allegation that St. Luke's staff portrayed Collins as an "angry black female" and that this portrayal provoked discriminatory treatment. But it ruled that the allegation was conclusory and did not outweigh the implication from the complaint that the staff barred her from the hospital because she had complained about her mother's treatment, a reason that did not offend Title VI.

Collins then appealed. To determine whether Collins could proceed pro se in this appeal on behalf of her mother's estate, we ordered that she state whether she is the estate's sole beneficiary. *See Malone v. Nielson*, 474 F.3d 934, 937 (7th Cir. 2007). She has since informed us that she is not. (*See* Docket No. 14, Notice of Appellant Regarding

Beneficiary Status, filed Jan. 16, 2025.) Her status as a non-exclusive beneficiary disposes of most of her claims on appeal.

Collins first argues that 42 C.F.R. § 482.13 and other federal laws allow for a right of action by a patient harmed through inadequate medical care. We need not reach that issue because such claims belong to the estate of Collins's mother, not to Collins. Under Wisconsin's law, federal claims belong to an estate if they arise from the decedent's personal injury, as is the case here. *See Hutchinson ex rel. Baker v. Spink*, 126 F.3d 895, 898 (7th Cir. 1997); WIS. STAT. ANN. § 895.01(1)(am)(7). And because Collins is not the sole beneficiary of the estate, she cannot sue on the estate's behalf when proceeding pro se. *Malone*, 474 F.3d at 937. Although Collins challenges this rule, we consistently apply it to protect the interests of an estate's other beneficiaries. To the extent that Collins argues that federal and state regulators harmed her by inadequately protecting the interests of all African Americans, the claim fails because it is "a generally available grievance about government" for which she lacks standing. *Lujan v. Defs. of Wildlife*, 504 U.S. 555, 573–74 (1992). Finally, even if Collins could bring constitutional claims against Aurora on behalf of the estate (or to the extent she seeks to bring those claims on her own behalf), she fails to allege that Aurora is a state actor, as § 1983 requires. A defendant does not become a state actor simply by complying with regulations. *Scott v. Univ. of Chi. Med. Ctr.*, 107 F.4th 752, 760 (7th Cir. 2024).

That brings us to Collins's Title VI claim against Aurora and her argument that the district court applied an improperly high pleading standard. Title VI provides: "No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." 42 U.S.C. § 2000d. This law supplies a private right of action against the recipient of the assistance who has intentionally discriminated against a covered plaintiff based on a protected category like race. *Alexander v. Sandoval*, 532 U.S. 275, 280–81, 285 (2001).

We have not articulated the pleading standard under Title VI, but cases under Title VII are analogous. In *Swierkiewicz v. Sorema N. A.*, 534 U.S. 506, 511, 513, 515 (2002), the Supreme Court held that Title VII plaintiffs need not plead race discrimination with "specificity," "particularity" or in the form of a "prima facie case." After *Swierkiewicz*, we ruled that statements that race or sex intentionally motivated a decision suffice under Title VII. *See, e.g.*, *Tamayo v. Blagojevich*, 526 F.3d 1074, 1084 (7th Cir. 2008); *E.E.O.C. v. Concentra Health Servs., Inc.*, 496 F.3d 773, 781 (7th Cir. 2007). We reaffirmed this rule after *Bell Atlantic Corp. v. Twombly*, 550 U.S. 544 (2007) and *Ashcroft v. Iqbal*,

556 U.S. 662 (2009). *See Freeman v. Metro. Water Reclamation Dist. of Greater Chi.*, 927 F.3d 961, 965 (7th Cir. 2019). We see no reason to distinguish between pleading standards under Title VI and Title VII in a case like this one where the plaintiff, who is pro se, receives the benefit of a more relaxed standard when pleading discrimination. *Luevano*, 722 F.3d at 1027.

With this standard in mind, we conclude that Collins has adequately pleaded intentional race discrimination by Aurora, an alleged recipient of federal assistance. She asserts that Aurora's staff, having "falsely portrayed [Collins] as an 'angry black female,'" prevented her from visiting her dying mother because she is African American. True, the complaint may also be narrowly read to suggest that hospital staff had other motivations to block her access—because Collins complained about her mother's treatment, or because she had threatened harm—reasons that Title VI does not bar. But at this stage, Collins is entitled to have us draw the reasonable inferences in her favor. *McCray v. Wilkie*, 966 F.3d 616, 620 (7th Cir. 2020). So construed, the complaint adequately pleads that Aurora intentional discriminated against her by shutting her out of a federally funded hospital because she is African American.

Before we conclude, we observe an issue that the district court will need to address on remand: Does Title VI cover a *visitor*, like Collins, to St. Luke's? Title VI is one of many civil rights statutes that link a prohibition on discrimination to federal funding. *E.g.*, 20 U.S.C. § 1681; 29 U.S.C. § 794; 42 U.S.C. § 6102; 42 U.S.C. § 18116. These statutes require plaintiffs to show that they fall within the "zone of interests" covered by the statute. *See T.S. ex rel. T.M.S. v. Heart of CarDon, LLC*, 43 F.4th 737, 740–41 (7th Cir. 2022). Long ago, we applied this rule to a Title VI case by requiring that the plaintiff "be the intended beneficiary of, an applicant for, or a participant in a federally funded program." *Doe ex rel. Doe v. St. Joseph's Hosp. of Fort Wayne*, 788 F.2d 411, 418–20 (7th Cir. 1986) (internal quotation marks and footnote omitted), *overruled on other grounds by Alexander v. Rush N. Shore Med. Ctr.*, 101 F.3d 487 (7th Cir. 1996); *see also Simpson v. Reynolds Metals Co.*, 629 F.2d 1226, 1235 (7th Cir. 1980) (applying the principle to a claim raised under 29 U.S.C. § 794). That would appear to exclude from coverage Collins, a prospective visitor and not a patient. But in 1988, Congress enacted the Civil Rights Restoration Act, 42 U.S.C. § 2000d-4a (provision relevant to Title VI), which clarified that a recipient of federal funds may not discriminate in *any* of its operations. In *Heart of CarDon*, we held that this Act undermined the "intended beneficiary" rule, and we rejected a defendant's invocation of it there. 43 F.4th at 744–46.

Heart of CarDon was not a Title VI case, and we have not yet addressed whether the Civil Rights Restoration Act eviscerates the "intended beneficiary" rule we laid out in *St. Joseph's Hospital* for Title VI, and whether Collins, as a visitor, falls within Title VI's "zone of interest." In this appeal's current posture, where the complaint was dismissed at screening without adversarial briefing addressing this issue, we are not equipped to answer it. We therefore vacate the judgment on Collins's claim under Title VI—that she experienced racial discrimination—so that Aurora can be served. If Aurora moves to dismiss on the ground that Collins does not fall within Title VI's "zone of interest," the district court should in the first instance invite briefing on the matter and resolve it in a manner consistent with *Heart of CarDon*, 43 F.4th at 740–41, 744–46.

We close by quickly dispatching a final issue. Collins argues that the district court erred by not addressing her state law claims. Because we reinstate her claim under Title VI based on discrimination that she experienced, the district court will need to decide whether to exercise supplemental jurisdiction over those state-law claims. *See Brunson v. Murray*, 843 F.3d 698, 715 (7th Cir. 2016).

We AFFIRM in all respects except for Collins's one claim against Aurora that, through its staff, Aurora violated Title VI by blocking her access to one of its hospitals based on her race. We VACATE the judgment on that single claim and REMAND for further proceedings consistent with this order.