

POLICY AND PROCEDURE

DEPARTMENT: Member Services	DOCUMENT NAME: Hard of Hearing/Language Specific Interpreter Services
PAGE: 1 of 7	REPLACES DOCUMENT:
APPROVED DATE: 12/2016	RETIRED:
EFFECTIVE DATE: 12/06/2016	REVIEWED/REVISED: 12/17, 10/18, 10/19, 8/20, 5/21, <u>5/22</u>
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: LA.MBRS.16

SCOPE:

Centene Corporate and Health Plan Member Services and Medical Management departments.

PURPOSE:

To provide a mechanism for the prompt use of interpreter services when necessary for non-English speaking or hard-of-hearing Members.

POLICY:

The Contractor shall make interpretation services, including real-time oral interpretation and the use of auxiliary aids such as TTY/TDD and American Sign Language (ASL), available free of charge to each Potential Enrollee and Enrollee. This applies to all non-English languages and not just those that Louisiana specifically requires (Spanish). These interpretation services shall be made available to Network Providers treating non-English speaking Enrollees at no charge. The Contractor may coordinate with the Louisiana Commission for the Deaf for American Sign Language interpretation services.

LHCC will offer Members interpretive services for languages other than English and for Members who are deaf or hard of hearing for any service where the member may have interaction with LHCC either telephonically or in person, including but not limited to member services, claims, utilization management, disease management, case management, and grievance and appeals. LHCC staff members will access interpreter services for those members/consumers speaking a language other than English. All interpretive services are available during normal business hours and after hours. *All after hours interpreter calls are handled by Envolve People Care. See Envolve People Care policy [EPC.NAL.MS.08](#).*

Spanish has been identified as a threshold language and as such the automated telephone message tree gives callers the option to choose a Spanish prompt and directs the caller appropriately. Additionally, LHCC attempts to employ bilingual staff for threshold languages.

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PROCEDURE:

Over the Phone Interpreters

1. When a member has chosen the Spanish prompt through the automated phone tree, the call is automatically placed in the call queue for a bilingual staff member, as available.
2. If a bilingual staff member is not available, the call will be answered by the next available representative.
3. When a call is received at LHCC from a Member that does not speak English, LHCC designee will determine the primary language and will utilize the designated Language Interpreter Service vendor, Voiance by calling 1-866-998-0338 and conferencing the member for translation services. LHCC designee should not use a child for interpretation services.
4. If the caller refuses interpretation services, LHCC designee should try to assist as much as possible with the language barrier. Designee should advise the caller they risk miscommunication without an interpreter and designee should document in OMNI that an interpreter was offered and refused. Each time the member calls, an interpreter should be offered and if declined again, that should be documented as well.
5. To access:
 - a) Ask the non-English speaker to hold. Advise that you are obtaining assistance.
 - b) The LHCC designee will place the call on CONFERENCE HOLD, using the conference feature on the telephone.
 - c) The LHCC designee will contact the Interpreter Service vendor via a three-way call, and give the vendor their billing information. {
 - d) a. Medicaid account # 13982;
 - e) b. Medicare Account # 20929;
 - f) c. MMP Account # 21173
 - g) d. Ambetter Account # 21172
 - h) State pin # 9583}
 - i) Enter 5-digit agent ID
 - e)j) State the language needed, if unsure press 0
 - e)k) Add ~~non-English speaker~~the caller to the line
 - Brief the interpreter on the nature of the call
 - Summarize what you want to accomplish and give any special instructions
 - Say “end of call” to the interpreter when the call is completed.

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- Document the reason for the call choosing the appropriate category/subcategory for the call type in OMNI.

Face to Face Interpreters

1. If the Member needs to utilize face-to-face interpreters for languages other than English, the LHCC designee will:
 - a) Inform the member that language services need to be scheduled 3-5 business days in advance of the scheduled appoint date/time
 - b) The LHCC designee create a request in OMNI using the Intent>General>Language Services selection. Once all needed information is entered the LHCC designee will hit submit and the request will auto-route to the Shared Services workbasket.
 - c) Upon scheduling, someone from the Shared Services team will reach out to both the Providers Office and the Member to confirm the schedule.
 - ~~a) Submit the request at least 7 days prior to the appointment via the health plan vendor website (LSA).~~
 - ~~b) LHCC vendor (LSA) will respond with scheduled appointment information by email to health plan.~~
 - ~~c) Health plan designee will make outreach to the member to confirm appointment details.~~
 - ~~d) If website is not available, contact LSA Customer Service at 866-827-7028.~~

~~For same day services, the health plan representative will verify HIPAA and eligibility with the member or provider. Once verified, the call center representative will warm transfer the provider to the designated vendor, Voiance at 1-866-998-0338 for same day translation services in office via phone.~~

Note: If you have an Urgent request that LSA services are required in less than 48 hours, please complete the Language Services intent via OMNI as listed above and in addition, send an email to InterpreterRequests@wellcare.com and your people leader. Subject:Urgent Interpreter Requests

Face to face visits may resume if appropriate COVID-19 protocol outlined by the governor or state public health officials is followed.

Relay Services for Deaf or Hard of Hearing Members

1. If a deaf or hard of hearing Member requests assistance:
 - a) Ask the Member to hold and advise that you are obtaining assistance.

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b) Contact the local State Relay Service via three-way calling by dialing 711.

c) Provide pertinent information regarding the Member's need.

~~e)d) Proceed with the call based on the relay operator's instructions.~~

~~d)e) Schedule time and place for interpreter to meet with Member (at least 2 working days prior to the needed appointment).~~ In an emergency:

- During normal working hours, contact Telecommunications Relay Systems as soon as possible.
- After normal working hours, contact Telecommunications Relay Systems through the services of the "911" dispatcher.

2. Louisiana Healthcare Connections is committed to comply with all applicable State and Federal legal requirements pertaining to effective communication in situations where interpreters are used.

a) Log the content of the conversation within OMNI making note that interpreter service is required for corresponding with the Member.

3. Language Services: Quality Standards

To ensure timeliness for access to medical information and/or for languages and/or materials that do not meet state and federal requirements for written translations, LHCC, at a minimum, provides oral translations in all languages (including members who have visual impairments) by facilitating a reading of the material to the member in their preferred language through use of qualified bilingual staff and/or interpreter vendors.

a.) Vendors:

I. Quality standards for interpreter services will be included in each interpreter vendor contract. Interpreter quality standards include:

- i. Standards to adhere to generally accepted interpreter ethics principles, such as those published by the National Council for Interpreting in Health Care, including patient confidentiality;
- ii. Demonstrated proficiency in speaking and understanding both spoken English and at least one other spoken languages
- iii. Demonstrated ability to interpret effectively, accurately, and impartially, both receptively and expressly, to and from such language(s) and English, using any necessary specialized vocabulary, terminology and phraseology.

b.) Bilingual Providers/Staff:

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Bilingual providers and staff are considered qualified to provide language services if they have a demonstrated proficiency in speaking and understanding both English and at least one other language, including any necessary specialized vocabulary, terminology, and phraseology; are able to effectively, accurately, and impartially communicate directly with individuals with limited English proficiency in their primary language. LHCC will collect information on language capability of providers and staff who provide bilingual services and will document the languages spoken in the provider directory.

Evaluating Utilization and Satisfaction with Language Services

1. LHCC will assess, at least annually, Member utilization and satisfaction with language services offered by LHCC. Assessment may include analysis of the following:
 - a) Utilization of language line services or requests for translated materials
 - b) Telephone hold times for members requesting language services compared to members not requesting language services
 - c) Member complaints regarding interpretive services
 - d) CAHPS survey questions related to language and interpretive services

REFERENCES: EPC.NAL.MS.08

[LDH Model contract](#)

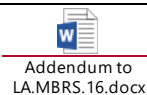
[2.4.1.11](#)

[2.9.11.1.2](#)

[2.10.4.1](#)

[2.3.15](#)

ATTACHMENTS:



DEFINITIONS:

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REVISION	DATE
3. <i>added Voiance as designated vendor</i>	12/01/17
5. c. added Medicaid and Medicare billing information.	12/01/17
5. Added Document the reason for the call choosing the appropriate category/subcategory for the call type in CRM.	12/01/17
6. Replaced three way call with submit request via vendor website. d. added If website is not available, contact LSA customer service 866-827-7027 and process for same day services.	12/01/17
Replaced Nursewise with Envolve People Care.	12/01/17
Linked reference to EPC.NAL.MS.08	12/01/17
Changed title of approver from Director of Customer Service to Director of Operations.	12/01/17
7. d. Clarified interpreter services during an emergency.	12/01/17
References: replaced NW.MS.08 with EPC.NAL.MS.08	
Minor formatting changes	10/17/18
Changed CRM to OMNI	10/17/18
Added 'Over the phone' to first Interpreter procedure	10/17/18
No revisions	10/19
Added Adendum Addendum for Covid 19	08/20
Grammatical Change to align with corp policy. Changed the policy name from "hearing impaired" to "hard of hearing"	5/21
<u>Updated policy section with language from LDH model contract. Paragraph 1</u>	<u>5/22</u>
<u>Removed addendum for COVID 19</u>	<u>5/22</u>
<u>Added items f, g, i, and j, and modified item k under item #5 over the phone interpreter procedure</u>	<u>5/22</u>
<u>Entire Face to Face interpreter section was updated due to new process for handling these items</u>	<u>5/22</u>
<u>Added item d and e to first section under Relay for Deaf or Hard of Hearing Members section</u>	<u>5/22</u>
<u>Added references to LDH model contract</u>	<u>5/22</u>

POLICY AND PROCEDURE APPROVAL

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The electronic approval retained in Archer is considered equivalent to a physical signature.