



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



New York Medicaid Coverage of Language Services & Medical Interpreter Qualification Requirements

Joint IMIA/NYSDOH webinar

December 2012

Eric Candle

Member of the Board

NY State Chapter Chair

ecandle@imiaweb.org



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



- The **International Medical Interpreters Association** is a US-based international organization committed to the advancement of professional medical interpreters as the best practice to meaningful language access to health care for linguistically diverse (LEP) patients, www.imiaweb.org
- To achieve this goal the **IMIA** pursues the following main objectives:
 - Defining educational requirements and qualifications for medical interpreters
 - Establishing professional standards of practice for medical interpreting
 - Promoting the establishment of professional interpreting and translation services by medical institutions and related agencies
 - Acting as a clearinghouse for the collection and dissemination of information about medical interpreting & translation and related issues
 - Promoting research of cross-cultural communication in the healthcare setting
 - Promoting medical interpreting profession



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Medicaid

- U.S. health program for people/families with low incomes/resources
- jointly funded by the state and federal governments & managed by the states

New York Medicaid

- \$52 billion program; 5.1 million (out of 19.5 million residents) enrolled (has grown by 157,000 since December 2011)
- 1 million residents eligible but not enrolled
- new streamlined enrollment process – new enrollees
- \$27,105 – eligible income for a family of four
- Affordable Care Act offers eligibility for many new members
- Limited-English-Proficient (LEP) individuals account for 42% of New Yorkers below the poverty level
- Language is still a primary barrier to health care & coverage for LEP individuals



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Services by professional Interpreters are critical: medical, business, legal and accreditation cases

- ***Poor communication leads to poor care:*** unexpected deaths, catastrophic injuries and other adverse events (a pilot Joint Commission study established a rate of severe adverse events of 3.7% vs. 1.4% for LEP vs. English speaking patients) - ***medical case***
- ***Lack of access to professionally trained MIs impacts the cost and quality of healthcare:*** longer stays, higher charges & frequent ER readmissions - ***business case***
- ***Healthcare institutions in the U.S. have a legal obligation*** to provide language services if they are recipients of Government funding - ***legal case***
- ***New Joint Commission (on accreditation of Healthcare Organizations in the U.S.) Patient-Centered Communication Standards – accreditation case***



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Reimbursing Language Services

- States have tremendous flexibility in establishing reimbursement procedures for language services.
 - They can:
 - use hospital funds,
 - require assistance from Medicaid managed care plans, or
 - seek out local matching funds



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



General Strategy to advance reimbursement:

- identify Reimbursement Champions at the state level
- create/join a broad coalition of stakeholders, including hospitals, community health centers, professional associations, patient safety advocates, language access groups, provider associations, immigrant/refugee advocacy groups
- encourage Letters of Support for language services reimbursement
- include American Sign Language and communication assistance for people with disabilities
- work with State Representatives, DOH, Governor's office



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Two approaches to achieving reimbursement

- **Legislative action:**

- 2009 NY Assembly/Senate Bills A733/S3740 to reimburse hospital inpatient and outpatient departments and ERs, diagnostic & treatment centers, and federally-qualified health centers. Structured as a rate enhancement that would require tracking of service provision to enable audit. Status – open

- **Federal funding** (broad support from Governor, DOH & state legislators)

- Medicaid Redesign Team, MRT established in 2011 by Governor Cuomo (the first effort of its kind in NY State)

- Operated in two phases:

- Phase I - budget cuts

- Phase II – implementing reforms to Medicaid/health system (via variety of workgroups, including health disparities with one of the tasks to review reimbursement rates for linguistic and cultural competency)



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Federal reimbursement : Fiscal Impact

- Estimated cost of interpreting services (with and with no Federal Financial Participation, FFP) – 3 major components:
 - Percentage of Medicaid beneficiaries who will require interpreting services (to approaches: do not speak ‘very well’ or ‘well’)
 - Average hours of interpreting services required per visit (0.7 hrs in Diagnostic Testing Centers & outpatient setting, and 1 hr in inpatient setting – report by the Connecticut Health Foundation)
 - Hourly cost of interpreting services (\$30 to \$50/hr)
- Biggest barrier across the nation: cost in context of Financial climate, budget deficit, etc.



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Medicaid and State Child Insurance Program (SCHIP)* funding for language services

- Year 2000: Centers for Medicare and Medicaid Services (CMS) reminded state Medicaid directors that language services could be included as an optional covered service in their Medicaid and SCHIP programs and therefore allowing direct reimbursement of providers for these services
- As of today, only District of Columbia & 13 states (Hawaii, Idaho, Kansas, Maine, Minnesota, Montana, New Hampshire, Utah, Vermont, Virginia, Washington, Wyoming, and – since Oct. 2012 – New York) have elected to provide coverage

*SCHIP - covers uninsured children in families with incomes that are modest but too high to qualify for Medicaid



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



Medicaid and State Child Insurance Program (SCHIP)* funding for language services (cont.)

- Each state determines if, and how, it will reimburse health care providers for language services to Medicaid and SCHIP recipients. Individual hospitals cannot seek reimbursement unless their state has elected to do so.



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



States: Three primary reimbursing decisions

- **Covered vs. Administrative:** affects the amount of Medicaid reimbursement provided by the federal government: either the states' regular federal matching assistance percentage [FMAP] for a covered service, or 50% for administrative expenses
- **Types of medical providers assisted:** New York will reimburse Article 28, 31, 32 and 16 outpatient departments, hospital emergency rooms (HERs), diagnostic and treatment centers (D&TCs), federally qualified health centers (FQHCs) and office-based practitioners
- **Types of language services paid for:** most states reimburse contract on-site/telephonic interpreters but do not reimburse interpreters on a hospital's staff who may interpret as all or part of their job responsibility



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION

Leading the advancement of professional interpreters



NY Medicaid Coverage of Medical Language Interpreter Services

- The interpreter must demonstrate competency & skills in:
- medical interpreting techniques (National Certification oral exam),
- ethics (15% of National Certification written exam), and
- terminology (61% of National Certification written exam)
- It is recommended, but not required, that such individuals be recognized by the National Board of Certification for Medical Interpreters (NBCMI).



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters



The Joint Commission Standards for Patient-Centered Communication:

- Require healthcare providers to develop a system of identifying a patient's preferred language, to certify the competency of language services providers, to develop a program for delivering language services, to document each interpreting session, and to translate written documents/signage for most common languages
- [Standard HR.0102.01](#) instructs hospitals and healthcare organizations to define and confirm staff qualifications (language proficiency, education, training, and experience for all interpreters that work full time, part time, through an agency, or through a remote provider)



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters



Professional Interpreter vs. Ad Hoc vs. No Interpreter (a study by Dr. Flores et al.)

- Professional interpreters result in a significantly lower likelihood of errors of potential consequence than ad hoc and no interpreters. *Among professional interpreters, hours of previous training, but not years of experience, are associated with error numbers, types, and consequences*
- Requiring at least 100 hours of training for interpreters might have a major impact on reducing interpreter errors and their consequences in health care while improving quality and patient safety



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters



The Interpreter Evolution:

- Bilingual Person: a person who can render a message spoken in one language into a second language
- Interpreter: a bilingual person who renders a message spoken in one language into a second language, and who adheres to a code of professional ethics
- Professional interpreter: an interpreter with appropriate training & experience who interprets with consistency & accuracy & who adheres to a code of professional ethics
- Qualified Interpreter: a professional interpreter who is checked/tested for proficiency in both languages
- Certified Interpreter: an interpreter who has met the prerequisites & successfully passed certification exams



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters



Qualified Medical Interpreter:

- Strong language skills (interpreter is trained and tested for language proficiency in both languages)
- Successful completion of professional training
- Knowledge of medical terminology
- Adherence to a Code of Professional Ethics
- A sound grasp of culture
- Ability to think on one's feet
- Membership in a Professional Association
- Growth through Continuing Education
- Knowledge of one's limitations



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters



Eric Candle

Member of the Board

NY State Chapter Chair

ecandle@imiaweb.org

585-703-2527



**Medical interpreters
save lives in many languages**

International Medical Interpreters Association - www.imiaweb.org