



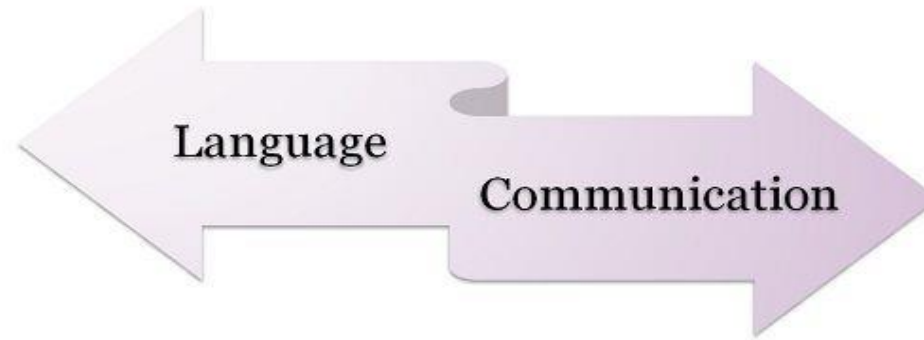
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CABINET FOR HEALTH  
AND FAMILY SERVICES

# **Consumer Rights Technical Advisory Committee**

*Language Access Barrier Updates*

*August 20, 2024*



**Purpose:** DMS will provide a high-level overview on the progress and any current initiatives to address this important issue including collaborative efforts with MCOs and Medicaid providers.

# Federal Guidance for Interpreter Services

## ➤ [Translation and Interpretation Services | Medicaid](#)

All providers who receive federal funds from HHS for the provision of Medicaid/CHIP services are obligated to make language services available to those with Limited English Proficiency (LEP) under Title VI of the Civil Rights Act and Section 504 of the Rehab Act of 1973. However, language interpretation services are not classified as mandatory 1905 services.

States are not required to reimburse providers for the cost of language services, nor are they required to claim related costs to Medicaid/CHIP. States may consider the cost of language services to be included in the regular rate of reimbursement for the underlying direct service. In those cases, Medicaid/CHIP providers are still obligated to provide language services to those with LEP and bear the costs for doing so. Still, states do have the option to claim Medicaid reimbursement for the cost of interpretation services, either as medical-assistance related expenditures or as administration.

# Federal Guidance for Interpreter Services

## ➤ [Section 1557 Final Rule: Frequently Asked Questions](#)

### What is Section 1557?

- Section 1557 is the non-discrimination provision of the Affordable Care Act (ACA). Section 1557 prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in specified health programs or activities, including those that receive Federal financial assistance.

### In what ways does Section 1557 protect patients?

- Section 1557 makes it unlawful for health care providers, including doctors' practices and hospitals that receive Federal financial assistance, to refuse to treat—or to otherwise discriminate against—an individual on the basis on their race, color, national origin, sex, age, or disability.
- Section 1557 imposes similar requirements on health insurance issuers that receive Federal financial assistance and the health insurance Marketplaces. The rule applies to both in-person and telehealth care.

# MCO Contract Language

- **Appropriate foreign language and/or oral interpreters shall be provided by the Contractor and available free of charge and as necessary to ensure availability of effective communication regarding treatment, medical history, or health education and otherwise comply with 42 C.F.R. 438.10(d).**
- **Enrollee written materials shall be provided** and printed in English, Spanish, and each Prevalent Non-English Language. Oral interpretation shall be provided for all non-English languages.
- **The Contractor staff shall be able to respond to the special communication needs** of the disabled, blind, deaf, and aged, and effectively interpersonally relate with economically and ethnically diverse populations. The Contractor shall provide ongoing training to its staff and Providers on matters related to meeting the needs of economically disadvantaged and culturally diverse individuals.

# Consumer Technical Advisory Committee Request



## Populations

- Specific Populations Identified
  - Limited English Proficiency (LEP)
  - American Sign Language (ASL)
  - People with speech impairment
  - People who are non-verbal



## One-Page Document

- Single Document (members)
  - Managed Care Organizations (MCOs)
  - Language Access & Supports
- Decision Tree
  - TAC request an accessible document for members, providers, and community partners.



## Pending Recommendation(s)

- Provider Letter
- Notice
  - The TAC request DMS issue a letter to providers clarifying that it the responsibility of providers to offer, coordinate, and provide language access services via a qualified medical interpreter
  - and, that providers should communicate (notify) the availability of language services to their patients in plain language.



# One Page Document

## ➤ Phase I

- Managed Care Organizations were asked to submit a One-page document outlining procedures for accessing interpreter services.
- DMS compiled information from all MCO's and collaborated with the Communications team to create a one-page document.

## ➤ Phase II

- DMS completed a thorough review of all MCO handbooks, websites, and procedures.
  - These results were then shared with the MCOs.
    - some MCOs completed internal websites reviews simultaneously.

❖ One-Page Document – Pending additional review and discussion

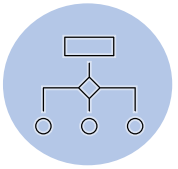


# Shared MCO Process Findings

## ➤ TAC requested procedures for specific populations

- Individuals with speech impairments and individuals who are non-verbal
- Members with speech and hearing impairments may utilize a teletypewriter (TTY) or other text input device to assist with calls
- Call representatives assist with 3-way calling
- In-person Interpreter Requests
- Materials are provided in large-print, Braille, and other accessible formats as needed.
- Ensure that websites, information kiosks, and other information and communication technologies are accessible to individuals with disabilities.
- Health Risk Assessment (HRA) – members are assessed for any special communication needs during the initial HRA.
  - Alerts are created on member records identifying specific needs.
- Case Managers are available for all members to provide additional support and identify the appropriate resources and services to ensure access to providers, appointments, and other health related social needs.

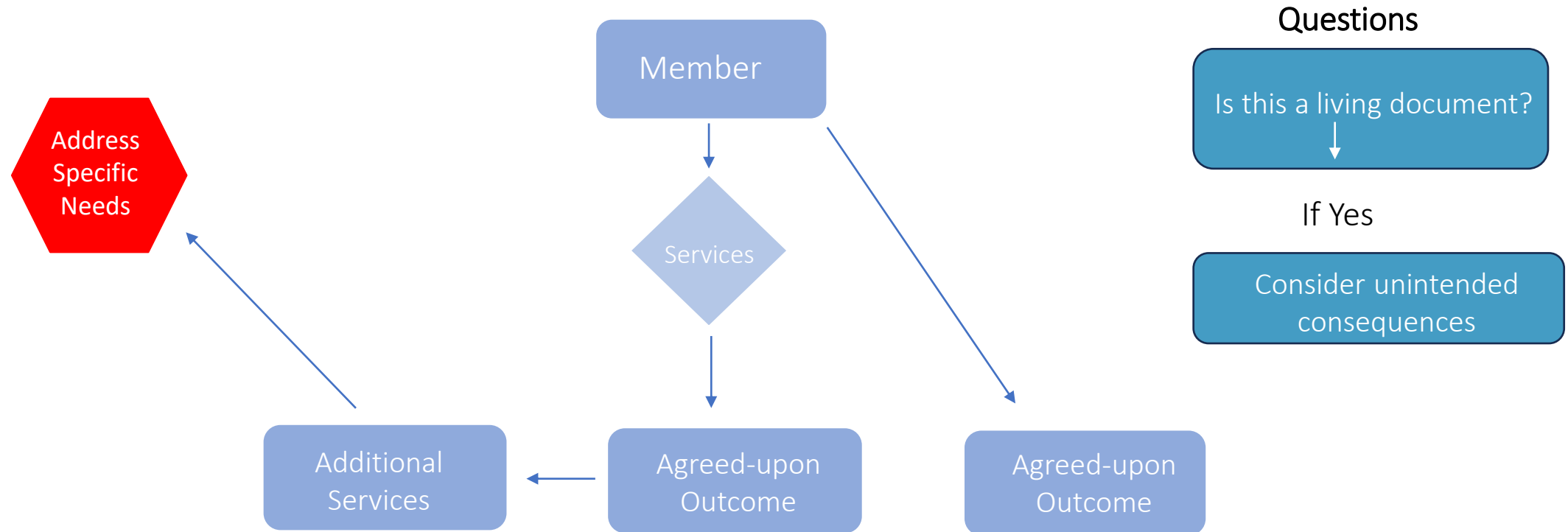




# Decision Tree

## ➤ Process

- Managed Care Organizations were asked to submit a specific details outlining services provided to the populations identified in the TACs request.
  - This information is currently under review to determine if a single streamlined document is the most feasible option.



# Where we are now

Streamlined systems processes are the goal.

Workgroups are exploring potential options.

One-Page document is currently under review for final edits

Reduce identified barriers.

Achieve equitable access.

# Questions or Comments

*Thank You*

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