



Section: Customer Service	Procedure Name: Limited English Proficiency	Procedure #: MHL 06.04.01
Overarching Policy: 06.04 Medicare Limited English Proficiency		
Owner: Customer Services Manager	Reviewed By: Sarah Ameter	Total Pages: 4
Required By: <input type="checkbox"/> BBA <input type="checkbox"/> MDHHS <input checked="" type="checkbox"/> NCQA <input checked="" type="checkbox"/> Other (please specify): <u>See References Section</u>	Final Approval By: <i>Sarah Ameter</i>	Date Approved: Aug 2, 2022
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify): _____	Line of Business: <input type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): _____ <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Block Grant <input type="checkbox"/> SUD Medicaid <input checked="" type="checkbox"/> MI Health Link	Effective Date: 3/1/2020

Policy: No otherwise qualified person shall be excluded from participation in, be denied the benefits of, or be subject to discrimination in any mental health programs or services or related activities on the basis of language spoken. Current and prospective members seeking services shall be provided accurate and timely language assistance and effective communication at no cost to them. Services shall be provided in a culturally competent manner to all enrollees, including those with limited English proficiency or reading skills, and diverse culturally and ethnic backgrounds.

Purpose: To identify means by which Southwest Michigan Behavioral Health (SWMBH) will comply with Limited English Proficiency (LEP) requirements. A person who is identified as LEP is a person who does not use English as their primary language for oral or written method of communication. Collaboration within our service area and with our community partners will occur in order to ensure equal access and quality service and to enhance the person-centered process for persons with limited English proficiency, visual, hearing or cognitive communication impairment.

Scope: Member Services and Utilization Management Call Center

Responsibilities: SWMBH Member Services department shall ensure compliance with this procedure related to the process of assisting members with Limited English Proficiency.

Definitions:

- A. Qualified Translator/Interpreter: A person who has been tested and certified by a recognized body to provide an accurate interpretation from English to the oral or written language of the recipient.



The interpreter must be familiar with the terminology to be used and be committed to confidentiality.

- B. Telephone Interpretation Service: Interpreters who provide language interpretation services over the telephone.
- C. Persons with Limited English Proficiency (LEP): Individuals who cannot speak, write, read or understand the English language at a level that permits them to interact effectively with health care providers and social service agencies.

Procedure:

A. TTY/MRC Services for Deaf/Hard of Hearing

1. Members who are deaf or hard of hearing may call the Michigan Relay Center (MRC) at 711 to initiate interpreter services. This service is provided for free in Michigan. MRC will assist the member in calling SWMBH and will facilitate the interpretation.
2. SWMBH staff will strive to ensure that staff or care managers are available within seven minutes for members utilizing TTY/MRC services.
3. For outgoing calls to members, SWMBH staff will call MRC or another contracted interpreter agency and provide them with the phone number for the individual they are attempting to reach. The interpreter agency will call the person needing translation services via voice phone or TTY and facilitate the translation.
4. SWMBH staff will use contracted agencies that provide interpreter services for the deaf or hard of hearing.

B. Language Interpretation Services

1. SWMBH staff will offer interpreter services at no cost to callers who present as persons with Limited English Proficiency. Members who call into SWMBH may also directly ask for an interpreter.
2. SWMBH will strive to ensure interpreters are available within eight minutes of the member reaching SWMBH customer service staff or care managers.
3. When a person is identified as needing interpreter services, SWMBH staff will briefly place the member on hold while they call the contracted interpreter agency.
 - a. SWMBH will provide the interpreter agency with the language requested for the call.
4. Once the interpreter is on the line, SWMBH staff will conference the member in and the interpreter agency will facilitate verbal translation for the duration of the call.
5. For outgoing calls to members with language interpretation needs, SWMBH staff will first call the interpreter agency and provide them with the phone number for the individual they are attempting to reach. The interpreter agency will call the person with SWMBH staff on the line and facilitate translation for the duration of the call.
6. If in-person interpreter services are needed for a face-to-face meeting with SWMBH or a contracted provider agency, SWMBH staff may call or help the member call the interpreter agency to schedule interpreter services ahead of time.
7. SWMBH staff will use contracted agencies that provide language interpreter services.
 - a. SWMBH will attempt to obtain any required certifications from the contracted agency annually
 - b. SWMBH will provide any required certifications, upon request, to auditing entities



Effectiveness Criteria: Effectiveness of this procedure will be measured by interpreter services being provided correctly and in a timely manner for SWMBH members.

References:

- A. Medicare Communications and Marketing Guidelines: 80.1: Customer Service Call Center Requirements and Standards
- B. MI Health Link 3-Way Contract: 2.8 Enrollee Access to Services; 2.9.1 Enrollee Service Representatives; 2.9.2 Enrollee Service Telephone Responsiveness
- C. NCQA Standard: RR 3 Subscriber Information

Attachments: None






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Final Audit Report

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