

LANGUAGE INTERPRETER SERVICES LEGISLATION

S.F. 827 (Higgins) Summary Information

<u>LANGUAGE INTERPRETER SERVICES</u>	<i>Short Description: Requiring coverage for interpreter services for health plan and medical assistance enrollees</i>	<i>Long Description: Requiring health plan companies to provide or cover language interpreter services to deaf and hard of hearing enrollees and for enrollees with limited English proficiency (LEP); requiring the commissioner of human services to establish a registry of spoken language interpreters and to adopt certain standards; modifying a certain medical assistance (MA) coverage provision for LEP services</i>
Senate: S.F 827 Higgins, Prettner Solon, Koering, Lourey and Torres Ray	2/15/07: Introduction & Referred to Health, Housing and Family Security	
House: H.F. N/A		

LANGUAGE INTERPRETER SERVICES LEGISLATION

Bill Text

S.F. No. 827, as introduced - 85th Legislative Session (2007-2008) Posted on Feb 14, 2007
1.1A bill for an act

1.2relating to health; requiring coverage for interpreter services for health plan

1.3and medical assistance enrollees; amending Minnesota Statutes 2006, section

1.4256B.0625, subdivision 18a; proposing coding for new law in Minnesota

1.5Statutes, chapter 62Q.

1.6BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. **[62Q.40] LANGUAGE INTERPRETER SERVICES.**

1.8(a) A health plan must cover sign language interpreter services provided to deaf and

1.9hard-of-hearing enrollees and language interpreter services provided to enrollees with

1.10limited English proficiency in order to facilitate the provision of health care services by a

1.11provider or health care facility. For purposes of this section, "provider" has the meaning

1.12given in section 62J.03, subdivision 8; and "health plan" includes coverage excluded

1.13under 62A.011, subdivision 3, clauses (7), (9), and (10). Interpreter services may be

1.14provided in person, by telephone, or by video conference. The health plan shall reimburse

1.15either the party providing interpreter services directly for the costs of language interpreter

1.16services provided to the enrollee or the provider or health care facility arranging for

1.17the provision of interpreter services. Providers and health care facilities that employ

1.18or contract with interpreters may bill and shall be reimbursed directly by health plan

1.19companies for such services. Except where health plan companies are already reimbursing
1.20a party providing or a provider or health care facility arranging for interpreter services,
1.21required reimbursement by health plan companies for interpreter services shall be phased
1.22in over a three-year period with a third of the cost reimbursed the first year, two-thirds
1.23of the cost reimbursed the second year, and full reimbursement the third year. A health
1.24plan company shall provide to enrollees, upon request, the policies and procedures for
1.25addressing the needs of deaf and hard-of-hearing enrollees and enrollees with limited
2.1English proficiency. All entities providing interpreter services must disclose their methods
2.2for ensuring competency upon request of any health plan company, provider, or consumer.
2.3(b) The commissioner of human services shall adopt the National Standards of
2.4Practice for Interpreters in Health Care and establish a registry of interpreters that lists
2.5interpreters meeting these standards. The registry shall require verification that the
2.6standards have been met through evidence of:
2.7(1) proficiency in English and another working language, both oral and written,
2.8and signing as applicable;
2.9(2) professional ethics;
2.10(3) basic interpreting competencies; and
2.11(4) knowledge of medical terminology.
2.12(c) The registry shall be established by September 1, 2008.

2.13 Sec. 2. Minnesota Statutes 2006, section 256B.0625, subdivision 18a, is amended to
2.14read:

2.15 Subd. 18a. **Access to medical services.** (a) Medical assistance reimbursement for
2.16meals for persons traveling to receive medical care may not exceed \$5.50 for breakfast,
2.17\$6.50 for lunch, or \$8 for dinner.

2.18(b) Medical assistance reimbursement for lodging for persons traveling to receive
2.19medical care may not exceed \$50 per day unless prior authorized by the local agency.

2.20(c) Medical assistance direct mileage reimbursement to the eligible person or the
2.21eligible person's driver may not exceed 20 cents per mile.

2.22(d) Medical assistance covers oral language interpreter services when provided by
2.23an enrolled health care provider ~~during the course of providing a direct, person-to-person~~
2.24~~covered health care service to an enrolled recipient that assists an enrollee with limited~~
2.25English proficiency in obtaining covered health care services.

2.26 Sec. 3. **EFFECTIVE DATE.**

2.27Section 1 is effective August 1, 2007, and applies to plans issued or renewed to
2.28provide coverage to Minnesota residents on or after that date. Section 2 is effective
2.29August 1, 2007.

LANGUAGE INTERPRETER SERVICES LEGISLATION

Senate Committee Contact List

Minnesota Senate Committees Health, Housing and Family Security Committee

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Room 15 Capitol
Monday and Wednesday
12:30 p.m. - 2:45 p.m.

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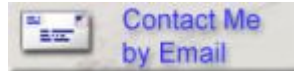
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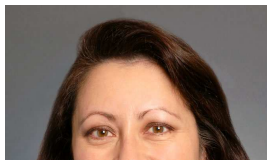
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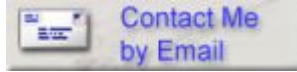
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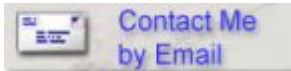
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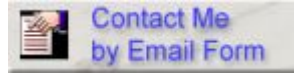
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