

# STATE OF NEW YORK

4247

2025-2026 Regular Sessions

## IN SENATE

February 3, 2025

Introduced by Sen. PARKER -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law and the social services law, in relation to providing Medicaid reimbursement for interpretation services provided by hospital inpatient and outpatient departments

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Section 2807-c of the public health law is amended by  
2 adding a new subdivision 36 to read as follows:

3 36. Interpretation services. (a) Notwithstanding any provision of law,  
4 rule or regulation to the contrary, the commissioner shall adjust inpa-  
5 tient medical assistance rates of payment to provide reimbursement for  
6 the costs associated with the provision of interpretation services for  
7 patients in receipt of medical assistance who have limited English  
8 proficiency. Reimbursement shall be available for the costs associated  
9 with the provision of interpretation services at all locations during  
10 all times that patient care is available, including but not limited to  
11 health care, billing and making appointments. To be eligible for  
12 reimbursement, the provision of interpretation services must be docu-  
13 mented in such a manner as to enable reporting to and audit by the  
14 commissioner.

15 (b) Such adjustment shall be made for discharges on and after the  
16 first of April, two thousand twenty-seven.

17 (c) For purposes of this subdivision, "patients with limited English  
18 proficiency" means patients whose primary language is not English and  
19 who cannot speak, read, write or understand the English language at a  
20 level sufficient to permit such patients to interact effectively with  
21 health care providers and their staff.

22 (d) For the purposes of this subdivision, "interpretation services"  
23 refers to language assistance services provided by individuals with  
24 proven bilingual skills in both English and the relevant language to

EXPLANATION--Matter in italics (underscored) is new; matter in brackets  
[-] is old law to be omitted.

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1 communicate information necessary for the patient to access services  
2 and, in the case of interpretation services provided during the course  
3 of a clinical encounter, services provided by individuals trained and  
4 skilled in medical interpreting techniques, ethics and terminology.

5 § 2. Paragraph (g) of subdivision 2 of section 2807 of the public  
6 health law is amended by adding a new subparagraph (iv) to read as  
7 follows:

8 (iv) Notwithstanding any provision of law, rule or regulation to the  
9 contrary, the commissioner shall adjust rates of payment for general  
10 hospital outpatient and emergency services to provide reimbursement for  
11 the costs associated with the provision of interpretation services for  
12 patients in receipt of medical assistance who have limited English  
13 proficiency. Such adjustment shall be made for outpatient and emergency  
14 services provided on and after April first, two thousand twenty-seven.  
15 Reimbursement shall be available for the costs associated with the  
16 provision of interpretation services at all locations during all times  
17 that patient care is available, including but not limited to health  
18 care, billing and making appointments. To be eligible for reimbursement,  
19 the provision of interpretation services must be documented in such a  
20 manner as to enable reporting to and audit by the commissioner. For the  
21 purposes of this subparagraph, "patients with limited English proficien-  
22 cy" means patients whose primary language is not English and who cannot  
23 speak, read, write or understand the English language at a level suffi-  
24 cient to permit such patients to interact effectively with health care  
25 providers and their staff. For purposes of this subdivision, "interpre-  
26 tation services" refers to language assistance services provided by  
27 individuals with sufficient fluency in both English and the relevant  
28 language to communicate information necessary for the patient to access  
29 services and, in the case of interpretation provided during the course  
30 of a clinical encounter, services provided by individuals trained and  
31 skilled in medical interpreting techniques, skills, ethics and terminol-  
32 ogy. Hospitals must use a skilled interpreter or translation service  
33 until such time as rules and regulations are promulgated by the commis-  
34 sioner. After such rules and regulations are promulgated, hospitals  
35 shall use individuals who meet such criteria in order to receive  
36 reimbursement. No reimbursement shall be provided when a patient who  
37 has been informed in their primary language of the availability of free  
38 interpretation and translation services requests the use of family,  
39 friends or others who are not formally trained in translation or inter-  
40 pretation.

41 § 3. Section 2807 of the public health law is amended by adding a new  
42 subdivision 22 to read as follows:

43 22. Notwithstanding any provision of law, rule or regulation to the  
44 contrary, the commissioner shall adjust rates of payment for diagnostic  
45 and treatment centers licensed pursuant to this article to provide  
46 reimbursement for the costs associated with the provision of interpreta-  
47 tion services for patients in receipt of medical assistance who have  
48 limited English proficiency. Such adjustments shall be made for  
49 services provided at diagnostic and treatment centers licensed pursuant  
50 to this article on and after April first, two thousand twenty-seven.  
51 Reimbursement shall be available for the costs associated with the  
52 provision of interpretation services at all locations during all times  
53 that patient care is available, including but not limited to health  
54 care, billing and making appointments. To be eligible for reimburse-  
55 ment, the provision of interpretation services must be documented in  
56 such a manner as to enable reporting to and audit by the commissioner.

1 For the purposes of this subdivision, "patients with limited English  
2 proficiency" means patients whose primary language is not English and  
3 who cannot speak, read, write or understand the English language at a  
4 level sufficient to permit such patients to interact effectively with  
5 health care providers and their staff. For the purposes of this subdivi-  
6 sion, "interpretation services" refers to language assistance services  
7 provided by individuals with sufficient fluency in both English and the  
8 relevant language to communicate information necessary for the patient  
9 to access services and, in the case of interpretation provided during  
10 the course of a clinical encounter, services provided by individuals  
11 trained and skilled in medical interpreting techniques, skills, ethics  
12 and terminology.

13 § 4. Subdivision 8 of section 2807 of the public health law is amended  
14 by adding a new paragraph (g) to read as follows:

15 (g) Subject to receipt of all necessary federal approvals, rates of  
16 payment computed in accordance with this subdivision shall be further  
17 adjusted in accordance with the provisions of subdivision twenty of this  
18 section.

19 § 5. Subdivision 1 of section 368-a of the social services law is  
20 amended by adding a new paragraph (aa) to read as follows:

21 (aa) Notwithstanding any provision of law to the contrary, the full  
22 amount expended for interpretation services provided pursuant to subdivi-  
23 vision thirty-six of section twenty-eight hundred seven-c of the public  
24 health law, or subparagraph (iii) of paragraph (g) of subdivision two of  
25 section twenty-eight hundred seven of the public health law, or subdivi-  
26 sion twenty-three of section twenty-eight hundred seven of the public  
27 health law, after first deducting therefrom federal funds properly  
28 received or to be received on account of such expenditures.

29 § 6. Notwithstanding any provision of law, rule or regulation to the  
30 contrary, the effectiveness of subdivisions 4, 7, 7-a, and 7-b of  
31 section 2807 of the public health law, and section 18 of chapter 2 of  
32 the laws of 1988, as they relate to time frames for notice, approval or  
33 certification of rates of payment, and to the requirement of prior  
34 notice of rates of payment, are hereby suspended and shall for purposes  
35 of implementing the provisions of this act be deemed to have been with-  
36 out any force and effect from and after February 1, 2027 for such rates  
37 effective for the period April 1, 2027 through March 31, 2028.

38 § 7. This act shall take effect on the one hundred twentieth day  
39 after it shall have become a law. Effective immediately, the addition,  
40 amendment and/or repeal of any rule or regulation necessary for the  
41 implementation of this act on its effective date are authorized to be  
42 made and completed on or before such effective date.