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IN SENATE

March 29, 2010

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:

Section 1. Section 2807-c of the public health law is amended by adding a new subdivision 34 to read as follows:

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- 34. INTERPRETATION SERVICES. (A) NOTWITHSTANDING ANY PROVISION OF LAW, RULE OR REGULATION TO THE CONTRARY, THE COMMISSIONER SHALL ADJUST INPA-TIENT MEDICAL ASSISTANCE RATES OF PAYMENT TO PROVIDE REIMBURSEMENT FOR THE COSTS ASSOCIATED WITH THE PROVISION OF INTERPRETATION SERVICES PATIENTS IN RECEIPT OF MEDICAL ASSISTANCE WHO HAVE LIMITED ENGLISH PROFICIENCY. REIMBURSEMENT SHALL BE AVAILABLE FOR THE COSTS ASSOCIATED WITH THE PROVISION OF INTERPRETATION SERVICES AT ALL LOCATIONS DURING ALL TIMES THAT PATIENT CARE IS AVAILABLE, INCLUDING BUT NOT LIMITED HEALTH CARE, BILLING AND MAKING APPOINTMENTS. TO BE ELIGIBLE FOR REIMBURSEMENT, THE PROVISION OF INTERPRETATION SERVICES MUST BE DOCU-MENTED IN SUCH A MANNER AS TO ENABLE REPORTING TO AND AUDIT BY THE COMMISSIONER.
- (B) SUCH ADJUSTMENT SHALL BE MADE FOR DISCHARGES ON AND AFTER THE FIRST OF APRIL, TWO THOUSAND ELEVEN.
- (C) FOR PURPOSES OF THIS SUBDIVISION, "PATIENTS WITH LIMITED ENGLISH PROFICIENCY" MEANS PATIENTS WHOSE PRIMARY LANGUAGE IS NOT ENGLISH AND WHO CANNOT SPEAK, READ, WRITE OR UNDERSTAND THE ENGLISH LANGUAGE AT A LEVEL SUFFICIENT TO PERMIT SUCH PATIENTS TO INTERACT EFFECTIVELY WITH 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
 25 COMMUNICATE INFORMATION NECESSARY FOR THE PATIENT TO ACCESS SERVICES
 26 AND, IN THE CASE OF INTERPRETATION SERVICES PROVIDED DURING THE COURSE

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

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1 OF A CLINICAL ENCOUNTER, SERVICES PROVIDED BY INDIVIDUALS TRAINED AND 2 SKILLED IN MEDICAL INTERPRETING TECHNIQUES, ETHICS AND TERMINOLOGY.

- 3 S 2. Paragraph (g) of subdivision 2 of section 2807 of the public 4 health law is amended by adding a new subparagraph (iii) to read as 5 follows:
- 6 (III) NOTWITHSTANDING ANY PROVISION OF LAW, RULE OR REGULATION TO THE 7 CONTRARY, THE COMMISSIONER SHALL ADJUST RATES OF PAYMENT FOR GENERAL HOSPITAL OUTPATIENT AND EMERGENCY SERVICES TO PROVIDE REIMBURSEMENT FOR THE COSTS ASSOCIATED WITH THE PROVISION OF INTERPRETATION SERVICES 9 10 PATIENTS IN RECEIPT OF MEDICAL ASSISTANCE WHO HAVE LIMITED ENGLISH 11 PROFICIENCY. SUCH ADJUSTMENT SHALL BE MADE FOR OUTPATIENT AND EMERGENCY 12 SERVICES PROVIDED ON AND AFTER APRIL FIRST, TWO THOUSAND ELEVEN. REIMBURSEMENT SHALL BE AVAILABLE FOR 13 THE COSTS ASSOCIATED WITH THE 14 PROVISION OF INTERPRETATION SERVICES AT ALL LOCATIONS DURING ALL TIMES 15 PATIENT CARE IS AVAILABLE, INCLUDING BUT NOT LIMITED TO HEALTH 16 CARE, BILLING AND MAKING APPOINTMENTS. TO BE ELIGIBLE FOR REIMBURSEMENT, 17 THE PROVISION OF INTERPRETATION SERVICES MUST BE DOCUMENTED IN MANNER AS TO ENABLE REPORTING TO AND AUDIT BY THE COMMISSIONER. 18 19 PURPOSES OF THIS SUBPARAGRAPH, "PATIENTS WITH LIMITED ENGLISH PROFICIEN-20 CY" MEANS PATIENTS WHOSE PRIMARY LANGUAGE IS NOT ENGLISH AND WHO CANNOT 21 SPEAK, READ, WRITE OR UNDERSTAND THE ENGLISH LANGUAGE AT A LEVEL CIENT TO PERMIT SUCH PATIENTS TO INTERACT EFFECTIVELY WITH HEALTH CARE 23 PROVIDERS AND THEIR STAFF. FOR PURPOSES OF THIS SUBDIVISION, "INTERPRE-TATION SERVICES" REFERS TO LANGUAGE ASSISTANCE SERVICES PROVIDED BY 24 25 INDIVIDUALS WITH SUFFICIENT FLUENCY IN BOTH ENGLISH AND THE RELEVANT 26 TO COMMUNICATE INFORMATION NECESSARY FOR THE PATIENT TO ACCESS SERVICES AND, IN THE CASE OF INTERPRETATION PROVIDED DURING THE 27 28 A CLINICAL ENCOUNTER, SERVICES PROVIDED BY INDIVIDUALS TRAINED AND SKILLED IN MEDICAL INTERPRETING TECHNIQUES, SKILLS, ETHICS AND TERMINOL-29 OGY. HOSPITALS MUST USE A SKILLED INTERPRETER OR TRANSLATION SERVICE 30 UNTIL SUCH TIME AS RULES AND REGULATIONS ARE PROMULGATED BY THE COMMIS-31 32 SIONER. AFTER SUCH RULES AND REGULATIONS ARE PROMULGATED, HOSPITALS 33 INDIVIDUALS WHO MEET SUCH CRITERIA IN ORDER TO RECEIVE REIMBURSEMENT. NO REIMBURSEMENT SHALL BE PROVIDED WHEN A PATIENT 34 WHO HAS BEEN INFORMED IN HIS OR HER PRIMARY LANGUAGE OF THE AVAILABILITY OF 35 FREE INTERPRETATION AND TRANSLATION SERVICES REQUESTS THE USE OF FAMILY, 36 37 FRIENDS OR OTHERS WHO ARE NOT FORMALLY TRAINED IN TRANSLATION OR INTER-38 PRETATION.
 - S 3. Section 2807 of the public health law is amended by adding a new subdivision 20 to read as follows:
- 20. NOTWITHSTANDING ANY PROVISION OF LAW, RULE OR REGULATION TO THE 41 CONTRARY, THE COMMISSIONER SHALL ADJUST RATES OF PAYMENT FOR DIAGNOSTIC 42 AND TREATMENT CENTERS LICENSED PURSUANT TO THIS ARTICLE TO 43 PROVIDE 44 REIMBURSEMENT FOR THE COSTS ASSOCIATED WITH THE PROVISION OF INTERPRETA-45 SERVICES FOR PATIENTS IN RECEIPT OF MEDICAL ASSISTANCE WHO HAVE LIMITED ENGLISH PROFICIENCY. SUCH ADJUSTMENTS SHALL BE 46 MADE 47 PROVIDED AT DIAGNOSTIC AND TREATMENT CENTERS LICENSED PURSUANT SERVICES 48 THIS ARTICLE ON AND AFTER APRIL FIRST, TWO THOUSAND 49 REIMBURSEMENT SHALL BE AVAILABLE FOR THE COSTS ASSOCIATED WITH THE 50 PROVISION OF INTERPRETATION SERVICES AT ALL LOCATIONS DURING ALL 51 THAT PATIENT CARE IS AVAILABLE, INCLUDING BUT NOT LIMITED TO HEALTH CARE, BILLING AND MAKING APPOINTMENTS. TO BE ELIGIBLE FOR REIMBURSE-52 MENT, THE PROVISION OF INTERPRETATION SERVICES MUST BE DOCUMENTED IN 53 54 SUCH A MANNER AS TO ENABLE REPORTING TO AND AUDIT BY THE COMMISSIONER. 55 THE PURPOSES OF THIS SUBDIVISION, "PATIENTS WITH LIMITED ENGLISH PROFICIENCY" MEANS PATIENTS WHOSE PRIMARY LANGUAGE IS NOT ENGLISH AND 56

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READ, WRITE OR UNDERSTAND THE ENGLISH LANGUAGE AT A WHO CANNOT SPEAK, LEVEL SUFFICIENT TO PERMIT SUCH PATIENTS TO INTERACT EFFECTIVELY HEALTH CARE PROVIDERS AND THEIR STAFF. FOR THE PURPOSES OF THIS SUBDIVI-"INTERPRETATION SERVICES" REFERS TO LANGUAGE ASSISTANCE SERVICES PROVIDED BY INDIVIDUALS WITH SUFFICIENT FLUENCY IN BOTH ENGLISH AND RELEVANT LANGUAGE TO COMMUNICATE INFORMATION NECESSARY FOR THE PATIENT TO ACCESS SERVICES AND, IN THE CASE OF INTERPRETATION PROVIDED DURING THE COURSE OF A CLINICAL ENCOUNTER, SERVICES PROVIDED BY INDIVIDUALS TRAINED AND SKILLED IN MEDICAL INTERPRETING TECHNIQUES, SKILLS, AND TERMINOLOGY.

- S 4. Subdivision 8 of section 2807 of the public health law is amended by adding a new paragraph (g) to read as follows:
- (G) SUBJECT TO RECEIPT OF ALL NECESSARY FEDERAL APPROVALS, RATES OF PAYMENT COMPUTED IN ACCORDANCE WITH THIS SUBDIVISION SHALL BE FURTHER ADJUSTED IN ACCORDANCE WITH THE PROVISIONS OF SUBDIVISION TWENTY OF THIS SECTION.
- S 5. Subdivision 1 of section 368-a of the social services law is amended by adding a new paragraph (aa) to read as follows:
- (AA) NOTWITHSTANDING ANY PROVISION OF LAW TO THE CONTRARY, THE FULL AMOUNT EXPENDED FOR INTERPRETATION SERVICES PROVIDED PURSUANT TO SUBDIVISION THIRTY-FOUR OF SECTION TWENTY-EIGHT HUNDRED SEVEN-C OF THE PUBLIC HEALTH LAW, OR SUBPARAGRAPH (III) OF PARAGRAPH (G) OF SUBDIVISION TWO OF SECTION TWENTY-EIGHT HUNDRED SEVEN OF THE PUBLIC HEALTH LAW, OR SUBDIVISION TWENTY OF SECTION TWENTY-EIGHT HUNDRED SEVEN OF THE PUBLIC HEALTH LAW, AFTER FIRST DEDUCTING THEREFROM FEDERAL FUNDS PROPERLY RECEIVED OR TO BE RECEIVED ON ACCOUNT OF SUCH EXPENDITURES.
- S 6. Notwithstanding any provision of law, rule or regulation to the contrary, the effectiveness of subdivisions 4, 7, 7-a, and 7-b of section 2807 of the public health law, and section 18 of chapter 2 of the laws of 1988, as they relate to time frames for notice, approval or certification of rates of payment, and to the requirement of prior notice of rates of payment, are hereby suspended and shall for purposes of implementing the provisions of this act be deemed to have been without any force and effect from and after February 1, 2011 for such rates effective for the period April 1, 2011 through March 31, 2012.
- 36 S 7. This act shall take effect on the one hundred twentieth day 37 after it shall have become a law, provided that the commissioner of 38 health is immediately authorized and directed to promulgate, amend 39 and/or repeal any rules and regulations necessary to implement the 40 provisions of this act on its effective date.