

**Community Mental Health Affiliation
of Mid-Michigan**

PROCEDURE: 3.4	Page 1 of 3	SUBJECT: Limited English Proficiency
Related Policy: 3.0		SUBJECT: Recipient/Enrollee Rights
Issuing Directors: Director of Quality, Customer Service and Recipient Rights, and Director of Affiliation Operations		Original Effective Date: 6/1/02

REVISED DATE

03/05/2007

Review Date(s)

10/04/2004	03/06/2008	02/28/2011			
06/23/2005	02/26/2009				
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I. PURPOSE:

To reduce barriers for beneficiaries of Community Mental Health Affiliation of Mid-Michigan (Limited English Proficiency [LEP]) and ensure meaningful and equal access to programs, services and benefits throughout the operations of the affiliation and its provider network.

II. STANDARDS:

The following federal and state statutes establish the standards for CMHAMM's Limited English Proficiency Procedures:

- A. PL 88-352 Title VI Non Discrimination in Federally Assisted Programs
- B. 65 CFR 50121 Executive Order 13166: Improving Access to Services for Persons with Limited English Proficiency
- C. MDCH Medicaid Contact: Limited English Proficiency.
Section 15.7,

III. DEFINITIONS:

- A. **Limited English Proficient (LEP):**
A person who is unable to speak, read, write or understand the English language at a level that permits them to interact effectively with health care providers and social service agencies. For the purposes of this policy, LEP will also apply to individuals whose primary form of communication is something other than the oral English language.
- B. **Interpretation:**
The oral transmittal of a message from one language to another, considering dialect, culture, and nuance.
- C. **Translation:**
The written interpretation of a message from one language to another, conveying the original meaning of the text with linguistic precision.
- D. **Communication:**
The effective transmission of messages using spoken language, Braille, American Sign Language, or available technology as necessary.

- E. **Population/Service Area:**
Includes any beneficiary who may potentially receive services from CMHAMM and its providers.
- F. **Vital Documents:**
Vital Documents may include, but are not limited to, applications, consent forms, releases of information regarding participation in a program, treatment plans, notices pertaining to the reduction, suspension, denial, or termination of services or benefits, notice of the right to appeal such actions or that require a response from beneficiaries, notices advising of the availability of free language assistance, and other outreach materials.

IV. PROCEDURES:

CMHAMM providers must ensure that beneficiaries who are LEP, visually and/or hearing impaired can effectively communicate the relevant circumstances of their situation, are given adequate information about services and benefits, and are able to effectively receive those services and benefits for which they are eligible.

- A. Each CMHSP/CA will assure that designated employees and members of its provider network have the ability to obtain appropriate interpretation, translation, and/or communication services or technical equipment to meet the needs of beneficiaries in their service areas.
- B. Each CMHSP/CA will ensure that written materials (including vital documents) will be translated for each eligible LEP demographic group that constitutes ten percent (10%) or 3,000 people, whichever is less, of the current census population.
- C. Each CMHSP/CA will ensure that, at a minimum, vital documents will be translated for LEP demographic groups that constitute five percent (5%) or 1,000, whichever is less, of the current census population.
- D. Each CMHSP/CA will ensure that LEP demographic groups of less than 100 persons receive written/oral notice of their right to receive competent oral translation of written materials.
- E. Each CMHSP/CA will ensure that outside contract agencies used for interpretation/translation services sign a confidentiality agreement binding the organization and its employees to observe and protect the confidentiality rights of consumers of CMHSP/CA services.
- F. Each CMHSP/CA will have effective methods for notifying persons who are LEP, visually, and/or hearing impaired, of their right to language assistance and the availability of such assistance free of charge. This notification may include, but is not limited to:
 - 1. Language identification cards,
 - 2. Posting and maintaining signs in regularly encountered languages other than English in waiting rooms, reception areas and other initial points of entry,
 - 3. Inclusion of statements about the services available and
 - 4. Right to free language assistance services, in appropriate non-English languages, in brochures, booklets, outreach and recruitment information,
 - 5. Uniform procedures for timely and effective telephone communication between staff and persons who are LEP.
- G. Employees of each CMHSP/CA shall not use friends, minor children, or family members as interpreters. If, after informing the LEP person of the right to free interpreter services, the person declines such services and requests the use of a family member or friend, CMH

may use the family member or friend if the use of such a person would not compromise the effectiveness of services or violate the LEP person's confidentiality. Even if the LEP person elects to use a family member or friend, the CMH employee should suggest that a trained interpreter sit in on/listen to the contact to ensure accurate interpretation. CMH employees must document the offer and declination in the LEP person's record.

- H. Each CMHSP/CA will ensure that designated staff are provided training relevant to accessing appropriate interpretation services in an expedient and professional manner, as well as where and how to obtain materials and equipment that will assist in other forms of communication. Further it is recommended that each CMHSP/CA maintain a training registry that allows for clear monitoring of each employee's status with regard to required training.
- I. Each CMHSP/CA will ensure that the identified language/communication needs of a beneficiary who is LEP, visually and/or hearing impaired will be documented in the person's clinical record.
- J. The PIHP will monitor the adequacy of language assistance services by assessing the following during annual site visits to its providers:
 - 1. The number of LEP persons encountered in the service population.
 - 2. The frequency with which LEP persons come in contact with the CMHAMM network.
 - 3. Internal resources of the provider available to meet the needs of the LEP consumers.
 - 4. External resources to meet the needs of LEP individuals.

V. APPLICATION:

All CMHAMM CMHSPs/CAs and network service providers

VI. MONITOR AND REVIEW:

The Director of Quality, Customer Service and Recipient Rights shall monitor CMHSP/CA compliance with these functions. The PIHP Director of Affiliation Operations will review this procedure annually. External review will include MDCH and CMS site visits and reporting.

VII. RELATED POLICIES AND PROCEDURES:

CMHAMM Policy 3.0 Enrollee Rights