

Iowa Total Care Quick Reference Guide: Language Access Services and Guidelines

Iowa Total Care is committed to providing culturally and linguistically appropriate healthcare services in a competent manner. This means all reasonable accommodations are provided to ensure equal access to communication resources for members. Iowa Total Care’s language access services are available free of cost to all Iowa Total Care members.

We provide language access services to the following members with*:

- Limited English proficiency (LEP).
- Deaf or hard of hearing.
- Speech or visual impairments.
- Culturally and ethnically diverse backgrounds.

***Language access services are not limited to the members identified above.**

| Services Offered | Guidelines |
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| Face-to-face and sign language interpretation services | <ul style="list-style-type: none"> • Interpreters are available to members, providers and staff for medical appointments. • There are two ways to access an interpreter through our language access services for Iowa Total Care members with LEP. <ul style="list-style-type: none"> – Call Member Services: 1-833-404-1061. Hours of operation: Monday through Friday 7:30 a.m. to 6 p.m. CT. – Complete the Language Access Services Request Form, available on our website (Provider Resources > Language Services) and email to Member Services (ITC-MemberServices@IowaTotalCare.com). • Note: Providers need to provide their NPI or TIN when scheduling interpretation services. • Schedule interpreter as soon as medical appointment is scheduled to ensure interpreter availability. Please have this information ready to expedite connecting to/scheduling an interpreter: <ul style="list-style-type: none"> – Member name. – Member ID. – Member language. – Date/time of appointment. – Nature of appointment (physical, med check, therapy, etc.). – Doctor/provider’s name. – Name/address/telephone of facility where appointment will take place. – Name and telephone of the person requesting interpretation services. • Cancellations or appointment changes should be made 48 hours in advance. Best practice is to educate members and ask them to contact Iowa Total Care member services if their scheduled appointment changes or cancels to ensure appropriate services are scheduled. |

| Services Offered | Guidelines |
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| Telephonic interpretation services | <ul style="list-style-type: none"> • Qualified interpreters are available over the phone upon demand. • There are two ways to access an interpreter through our language access services for Iowa Total Care members with LEP: <ul style="list-style-type: none"> – Call Member Services: 1-833-404-1061. Hours of operation: Monday through Friday 7:30 a.m. to 6 p.m. CT. Provide call center representative with: <ul style="list-style-type: none"> ▪ Member name. ▪ Member ID. ▪ Member language. ▪ The call center representative will verify insurance coverage before proceeding. ▪ Place the phone on speaker between yourself and the member so all parties can hear. ▪ You will be connected with an interpreter. – Complete the Language Access Services Request Form, available on our website (Provider Resources > Language Services) and email to Member Services (ITC-MemberServices@IowaTotalCare.com). • Note: Providers need to provide their NPI or TIN when scheduling interpretation services. • Proper documentation is a vital part of providing patients with interpretation services. To document that interpretation services were provided make sure the following information is documented in the patient’s chart: <ul style="list-style-type: none"> – Appointment date/time when interpretation services were received. – Member’s language. – Interpreter ID or name. – Interpreter phone number or agency. |
| TTY services for the hearing impaired | <ul style="list-style-type: none"> • Services are available for the deaf or hard of hearing during business hours via TTY line: 1-833-404-1061. • After-hours services are available through Relay 711 or Iowa Total Care’s 24/7 NurseLine at 1-833-404-1061. |
| Vital documents provided in threshold languages | <ul style="list-style-type: none"> • Materials translated prospectively include enrollment, eligibility and membership information; <i>Explanation of Coverage</i>; and notices of language assistance. • Members must indicate their preferred written language to receive prospectively translated materials. |
| Additional materials translated upon request | <ul style="list-style-type: none"> • Materials that are member-specific (for example, denial, delay or claims letters) are sent in English with the offer of translation upon request. • We send translated materials to the member no later than 21 days from the request date. • Oral translations will be provided for all languages. • Translators are proficient in healthcare terminology. • Translators receive training regarding HIPAA and ethical standards. |

Threshold Language Translations Available

Iowa Total Care's language access services meet the growing needs of our state's population as well as our membership. Threshold language translations are available in Spanish. Based on U.S. Census data released by the CMS, the top 15 non-English languages spoken by individuals with Limited English Proficiency (LEP) in Iowa are: Spanish, Chinese, Vietnamese, Serbo-Croatian (Bosnian), German, Arabic, Laotian, Korean, Hindi, French, Pennsylvania Dutch, Thai, Tagalog, Karen, and Russian.

How to Receive Language Access Services

There are two ways to access an interpreter through our language access services for Iowa Total Care members with LEP.

1. Call Member Services: 1-833-404-1061. Hours of operation: Monday through Friday 7:30 a.m. to 6 p.m. CT.
2. Complete the [Language Access Services Request Form](#), available on our website (Provider Resources > Language Services>) and email to Member Services (ITC-MemberServices@IowaTotalCare.com).

Note: Providers need to provide their NPI or TIN when scheduling interpretation services.

Cultural Competency Resources

In addition to language services, the Cultural and Linguistics Program offers web-based information regarding: cultural differences including communication styles; healthcare traditions; commonly held beliefs; alternative medicine; and healing disparities including quality of care and preventive care, pain management and treatment, and aging.

You will find more cultural and linguistic tools on our website under Provider Resources > Language Services:

- U.S. Department of Health and Human Services: A Physician's Practical Guide to Culturally Competent Care: <https://cccm.thinkculturalhealth.hhs.gov/>
- Industry Collaboration Effort's Better Communication, Better Care: Provider Tools to Care for Diverse Populations: [https://www.iowatotalcare.com/content/dam/centene/iowa-total-care/PDF/Better_Communication,_Better_Care_-_Provider_Tools_to_Care_for_Diverse_Populations%20\(2\).pdf](https://www.iowatotalcare.com/content/dam/centene/iowa-total-care/PDF/Better_Communication,_Better_Care_-_Provider_Tools_to_Care_for_Diverse_Populations%20(2).pdf)
- And many more resources on our provider website under Language Services: <https://www.iowatotalcare.com/providers/resources/language-services.html>.

Tips to Optimize Communications with Your Patients

Here are a few tips to optimize communications when working with telephone interpreters:

- If possible, speak to the interpreter privately prior to the contact, providing relevant information regarding the member and the important information to convey.
- Interpreters are not allowed to rephrase or clarify. Encourage the interpreter to request clarification or to redirect explanations as needed.
- Direct the conversation to the member, not the interpreter.
- Use short sentences limited to a single concept, if possible.
- Allow adequate time for the interpreter to convey the information in the member's language.
- Avoid excessive medical terminology or technical explanations unless the member requests them.
- Avoid interrupting the interpreter.
- If the member's non-verbal cues indicate confusion, ask the member to summarize or restate what you have communicated.

Working Effectively with Members with LEP

Offer interpretation services to members who appear to be LEP, even if a member brings a family member or friend to their healthcare visit to act as an interpreter. The use of a qualified interpreter is preferred because relatives and friends

are not usually proficient in healthcare terminology. Children should only be used as interpreters if there is imminent danger.

More Communication Tips

Here are a few more communication tips for your use when working with patients:

- Speak slowly, not loudly, with your patient.
- Organize information into short, simple sentences. Place important topics at the beginning and end of the conversation.
- Use open-ended questions to assess for understanding.
- If the member initially refused interpreter services and is not demonstrating full understanding, offer interpreter services again.
- Monitor non-verbal cues, such as facial expressions, positioning and body language. These may indicate understanding or confusion.

Best Practices for Providers

Hospitals, physicians and other healthcare professionals should:

- Complete a language skills self-assessment, which is kept on file. The assessment of their choice should be a prescreening/self-assessment tool to be done before seeking a staff member to use their multilingual skills with patients. Language skills assessments do not qualify as appropriate documentation for staff to be considered a qualified interpreter that adheres to generally accepted interpreter ethics and principles.
- Document the member's preferred spoken and written language in their office chart or medical record.
- Document the communication aid used for the visit (for example, the person who provided interpretation services); any use or refusal of a professional interpreter; or the use of family, friend, office staff or the provider as the interpreter.
- Post Free Interpretation Services sign (when available) at key points of contact.

Notice: Please Avoid Using Minors, Family Members, or Friends as Interpreters

Federal law prohibits providers and staff from recommending or requiring the use of family or friends to interpret, or requesting them to provide their own interpreter. Interpretation services must be available at the time of the appointment. Minors should never be used as interpreters except in the case of an emergency involving imminent danger or threat to the safety and welfare of an individual or the public where there is no qualified interpreter available.

If you use a minor, document the reason a minor was used. Similarly, an adult may be used to interpret or aid in communication in an emergency involving imminent danger and there is no qualified interpreter available or; when the limited English proficient (LEP) individual specifically requests that an accompanying adult interpret, the adult agrees and reliance on that adult is appropriate. Bilingual providers and staff are considered qualified to provide language services if they have a demonstrated proficiency in speaking and understanding both English and at least one other language, including any necessary specialized vocabulary, terminology, and phraseology; are able to effectively, accurately, and impartially communicate directly with individuals with limited English proficiency in their primary language. Iowa Total Care verifies language capability of health plan staff through bilingual assessments in target languages and through the hiring, training and evaluation process for staff in English. Members should always be advised of the risks of using an untrained interpreter could result in miscommunication of medical information and compromise quality of care. It may also cause embarrassment when discussing sensitive topics. If a member declines interpretation services, it is best practice that providers document such in the medical record at the time of service. It is also recommended that an interpreter be offered for every encounter regardless of whether the member has refused the service in the past and that each offer be documented in the member's chart.