





## **Provider Language Services Complaint Form**

## Complete this form if you experience:

Issues with language services provided to an Iowa Total Care member (interpreter no show, customer services issues, languages not available, etc.).

## Once complete, please email this form to <u>C&L@IowaTotalCare.com</u> with subject line "Provider LAS Complaint".

| Facility/Clinic Information             |                                                                                                            |                                                                                |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| Date of Issue                           |                                                                                                            |                                                                                |
| Facility/Clinic Name                    |                                                                                                            |                                                                                |
| Language Service Information            |                                                                                                            |                                                                                |
| Type of Language Service                | <ul> <li>Telephone interpreter</li> <li>On-site interpreter</li> <li>Virtual remote interpreter</li> </ul> |                                                                                |
| Language Service Provider<br>(if known) | <ul> <li>Voiance</li> <li>Language Line</li> <li>Language Service<br/>Associates</li> </ul>                | <ul> <li>Akorbi</li> <li>Translation Station</li> <li>Other:</li> </ul>        |
| Language Interpreted                    | <ul> <li>Spanish</li> <li>American Sign Language</li> <li>Bosnian</li> </ul>                               | <ul> <li>Swahili</li> <li>Arabic</li> <li>Other (provide language):</li> </ul> |
| Interpreter Name<br>(if applicable)     |                                                                                                            |                                                                                |
| Interpreter ID<br>(if applicable)       |                                                                                                            |                                                                                |
| Summary of Issue                        |                                                                                                            |                                                                                |
|                                         |                                                                                                            |                                                                                |
| Submitter Information                   |                                                                                                            |                                                                                |
| Submitter Name                          |                                                                                                            |                                                                                |
| Submitter Phone Number                  |                                                                                                            |                                                                                |
| Submitter Email                         |                                                                                                            |                                                                                |

## Need to schedule language services?

Visit <u>Language Services webpage</u>, click on "Forms & Resources", and select 'Language Services Request Form: Provider Request.