



2020 HERITAGE PROVIDER NETWORK

Health Plan Language Assistance

HEALTH PLAN	LAP THRESHOLD LANGUAGE	PLAN INTERPRETER ACCESS	PLAN TRANSLATION ACCESS (Vital Non-Standard Documents)	PLAN CONTACT QUESTIONS (interpreter/translation)	ADDITIONAL RESOURCES	LANGUAGE FORM VERIFICATION SUBMITTAL	LAST UPDATE
Aetna	Spanish	1-800 525-3148. This number bypasses provider services center and connects directly to qualified interpreters. Or call Member Services at 1855-772-9076 TTY 711	1-877-287-0117	Directly to interpreter Services 1800-525-3148	N/A		5/2019
Alignment		For California: To access Alignment's interpreter services for Members, please contact Member Services at (866) 634-2247 at least 7 (seven) days prior to the service. Hours are 8:00 a.m. to 8:00 p.m., - 7 days a week (except Thanksgiving and Christmas) October 1 through March 31. Hours are 8:00 a.m. to 8:00 p.m., - Monday to Friday (except holidays) from April 1 through September 30. Alignment provides fee aids and services to people with disabilities to communicate effectively such as: <ul style="list-style-type: none"> • Qualified sign language interpreters • Written information in other formats (large print audio, accessible electronic formats, other formats). Provides free language services to people whose primary language is not English, such as: <ul style="list-style-type: none"> • Qualified interpreter • Information Written in other languages 	1-866-634-2247				4/24/2019
Anthem Blue Cross	Medical- Access Program (MCAP) Major Risk Medical Insurance Program (MRMIP)	Telephone Interpreters : Medi-Cal Members Customer Service Center (Medi-Cal) 1-800-407-4627 (outside LA County) 1-888-285-7801 (inside LA County). After hours, call the 24/7 Nurse line (MedCall) at 1-800-224-0336 1-877-687-0549: Medi-Cal Access Program (MCAP) 1-877-687-0549: Major Risk Medical Insurance Program (MRMIP) Face to Face Interpreter Requests : Med-Cal Members <ul style="list-style-type: none"> ▪ Call the Anthem Member Services number on the Member's ID card for help (TTY/TDD: 711). 	Translation Members To ensure the timely translation of materials, encourage the Member to contact Anthem Blue Cross by calling 1-888-254-2721. Providers contact on members behalf 1-800-677-6669 to request translation on the Member's behalf. Urgent requests are handled within one business day and non-urgent requests are handled within two business days. A copy of the document is required in order to complete the translation request.	1 800-677-6669 Provider Care	https://mediproviders.anthem.com/ca/pages/free-interpreting-services.aspx	N/A	1/1/2020



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Anthem Blue Cross	Spanish Traditional Chinese Vietnamese Tagalog Korean	<ul style="list-style-type: none"> 800-407-4627 / 888-757-6034 (TTY) Monday-Friday 7am-7pm Call 24/7 Nurse Line for after-hours services at 1 800-224-0336 E-mail: ssp.interpret@anthem.com California Relay Service (24 hours a day/ 7 days a week): Interpreters are available to members, providers and staff at key points of medical contact. <ul style="list-style-type: none"> 72 business hours or more advance notice are required to schedule services needed for scheduling face-to-face and sign language interpreters. Twenty-four hour advance notice requested for cancellations <p>Have the following available:</p> <ul style="list-style-type: none"> Members ID number Need for an interpreter and state the language <p>Providers Anthem Blue Cross Medicaid / Medi-Cal State Sponsored Business: (800) 677-6669, request to speak to an interpreter. Providers may also schedule by e-mailing ssp.interpret@anthem.com Registration with our secure e-mail is required. Please type "secure" in the subject line.</p>	<i>These request need to be logged and tracked in your LAP Log</i>				
Blue Shield of California	Spanish Traditional Chinese Vietnamese	<p>Providers: Over-the-phone interpretation 800-541-6652, follow VRU menu.</p> <p>Member may get an interpreter or documents read and sent by calling the number on the back of the members ID card or 1-866-346-7198. For more help call the CA Dept. of Insurance at 1-800-927-4357</p> <p>In-Person Interpretation (IPI), or Face-to-Face Routine Visit To arrange for in-person interpretation services, the provider must call the Provider Customer Service number at (800) 541-6652 and speak to a Provider Customer Services Agent.</p> <p>Five (5) business days with advanced notice from the enrollee is preferred in order to make best efforts to accommodate the request</p>	<p>Request for Translation Providers are not delegated to provide translation of non-standard vital documents and <i>must forward such requests received from Blue Shield enrollees to Blue Shield.</i> <i>These request need to be logged and tracked in your LAP Log</i></p> <p>A provider who receives a request for a vital document translation should forward it to Blue Shield</p> <p>Urgent Within one business day.</p> <p>Routine Within two business days</p>	Call your Provider Relations representative.	blueshieldca.com/provider For a translation request use the following document.  BS_Lang. Asst. Req. Form.pdf		1/2020



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Blue Shield of California		<p>for face-to-face interpreters. At the time of the appointment, if a face-to-face interpreter has been scheduled and the interpreter does not show after a 15-minute wait time, the provider shall offer the enrollee the choice of using a telephone interpreter or the opportunity to reschedule the appointment</p> <p>For appointments made within 48 hours/Emergency (same or next day access for routine or urgent care): Provide services telephonically (see Over-the-Phone Interpretation above).</p>	<p><u>Non-Standard Vital Documents</u> Non-standard vital documents contain enrollee-specific information. These documents are not translated into threshold languages.</p> <p>Blue Shield will include with any non-standard vital documents distributed to enrollees the appropriate DMHC/CDI-approved written notice of the availability of interpretation and translation services.</p> <p>If translation or interpretation of any non-standard vital document is requested by the enrollee, Blue Shield will provide the requested translation within 21 calendar days of that request, with the exception of expedited grievances.</p> <p><u>To forward the Vital Document to Blue Shield:</u></p> <ul style="list-style-type: none"> • Complete Blue Shield's "Language Assistance Form" available at Provider Connection at blueshieldca.com/provider under Guidelines & resources, Patient care resources, and then Language Assistance Program; • Attach a copy of the document to be translated; • Fax the request 				
Brand New Day	<p>LA County: English, Spanish, Chinese (Cantonese and Mandarin), Arabic, Armenian, Farsi, Tagalog, Vietnamese, and Russian. Cambodian/Khmer, Korean,</p>	<p><u>Face to Face /Sign Language Interpreters</u> (including American Sign Language)</p> <p><u>Face to Face</u> Brand New Day provides free aids and services to people with disabilities to communicate e effectively with us, such as:</p> <ul style="list-style-type: none"> • Qualified sign language interpreters • Written information in other formats (large print, audio, accessible electronic formats, other formats) 			1-562-310-6868 Compliance Dept. Connie Snyder		1/27/2020



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Brand New Day	<p>Orange County: English, Spanish, Vietnamese, and Fars</p>	<p>Brand New Day also provides free language services to people whose primary language is not English, such as:</p> <ul style="list-style-type: none"> • Qualified sign language interpreters • Information written in other languages <p>Telephonic Interpretation Services Call Brand New Day's Member Services Department at: (866) 255-4795 TTY 711, speak to a member service representative. Member Services Dept. - Hours are:</p> <ul style="list-style-type: none"> ▪ October 1 – March 31: 7 days a week, 8 am – 8 pm, ▪ April 1 – September 30: Monday – Friday, 8 am – 8 pm <p>Give the Member Services Representative the following information:</p> <ul style="list-style-type: none"> ▪ Language being requested ▪ Member's name ▪ Member's ID number <p>Wait for the representative to connect you with an interpreter through Pacific Interpreters.</p> <p>When the interpreter joins the line, brief the interpreter: Explain the purpose of the call Give any special instructions you may have</p> <p>Face to Face Call Brand New Day's Member Services Department at (866) 255-4795 at least 5-10 business days prior to the patient's appointment. The following information will be required in order to access an interpreter:</p> <ul style="list-style-type: none"> ▪ Provider name ▪ Language being requested ▪ Member's name and ID number ▪ Member's date of birth ▪ Member's preferred gender of interpreter (if requested) ▪ Requestor name and contact number ▪ Date, time and duration of appointment 					



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		<ul style="list-style-type: none"> ▪ Location of appointment (Name of Facility, Address, Suite/Room Number) ▪ Type/Purpose of appointment ▪ Provider Specialty ▪ Name and phone number of contact person at appointment site ▪ Other special instructions 					
Cal Optima		<p>Cal Optima Provides:</p> <ul style="list-style-type: none"> ▪ Staff who speak your language. ▪ Interpreter services, along with American Sign Language, at no cost to members for all health care needs. ▪ Interpreter services are available 24 hours a day, 7 days a week for: <ul style="list-style-type: none"> ○ Medical services such as doctor visits, after-hours services, urgent care services, pharmacy services and health education classes. ○ Non-Medical services such as customer service, member complaints and member orientation meetings. ▪ Health education and enrollment materials printed in several languages at no cost to you. ▪ Materials in other formats, such as braille, audio or large print at no cost. <p>Telephonic or Face to face Interpretation 714 246-8500 1 800-587-8088 Toll Free Monday through Friday, 8 a.m. to 5:30 p.m. 1 800-735-2929 TDD/TTY</p> <p>For scheduled appointments, make sure to ask for an interpreter at least 5 working days before the member’s appointment.</p>	<p>Cal Optima and its Health Networks shall provide, upon a Member’s request, a written translation of a non-standardized Member-specific document into Threshold language within twenty-one (21) calendar days.</p> <p>Cal Optima and its Health Networks shall provide translations of written informing documents at a reading level no higher than sixth (6th) grade</p> <p>Contact the member's health network listed on the Cal Optima ID card. For members enrolled in Cal Optima Direct, call 1714-246-8500.</p> <p><i>These request need to be logged and tracked in your LAP Log</i></p>	<p>Contact the member's health network listed on the Cal Optima ID card. For members enrolled in Cal Optima Direct, call 1-714-246-8500</p>	<p>www.Caloptima.org, Cultural Linguistic@caloptima.org</p>		2/4/2020



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Cal Optima		<p>*If the member is in a health network, please use their specific group*</p> <p>ADOC/UCMG/RMG (DELEGATED) Hanna Interpreting Services – Interpretation 24 hour access to interpreter services at no cost to members ADOC & REGAL All Customer Service Representatives have been trained to ensure that members are able to communicate their questions and or concerns in their language with the HANNA Interpreter Services.</p> <p>HPN has contracted “HANNA Interpreter Services” as the utilized company for interpretation services. HANNA Interpreter Services provides HPN members with over the phone Interpreting Services at free of charge to the Enrollees. Interpretation Services are offered 7 days a week 24 hours a day at 1-855-803-8250.</p> <p>PROCEDURE Customer Service Representatives are to follow the steps below in order to connect a member with an interpreter that can assist them in their threshold language:</p> <p>Incoming Queue Call</p> <p>Cal Optima Customer Service Representative (CSR) identifies member to be a limited English speaker and or member requests a specific language when speaking with the CSR.</p> <p>Contacting HANNA Interpreter Services Member is placed on a brief hold while CSR completes an outbound conference call to HANNA Interpreter Services. Below is the process for completing a conference call from the Cisco Telephone System:</p> <p>Dial HANNA Interpreter Services at: (1-855-803-8250) ☎ The language needed for interpretation</p> <ul style="list-style-type: none"> ▪ Your full name and call back number ▪ Your department name 					



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Cal Optima		<ul style="list-style-type: none"> ▪ The member’s full name ▪ The member’s ID number <p>Translation Services ISI. Inc. – Translation Services for Written Member Informing Materials (WMIM) and member specific language in NOA letters (818) 753-9181</p> <p>If the member is in Cal Optima Direct, (N/A) Customer Service Dept. 714-246-8500. Prior authorization is not required. Have the following ready:</p> <ul style="list-style-type: none"> ▪ Member’s name, ID , gender, and age ▪ Date and time of appt. ▪ Language needed ▪ Type of visit ▪ Approximate duration ▪ Type of visit ▪ Name of doctor/ facility ▪ Address and phone number of appointment/location 					
Blue Shield of California Promise Health Plan	<p>English, Spanish, Arabic, Armenian, Farsi, Korean, Chinese, Khmer (Cambodian), Russian, Tagalog,</p>	<p><u>Telephonic /Face to Face Interpreters</u> Call Care 1st Member Service Dept. during business hours:</p> <p><u>Medi-Cal (All counties)</u> 1-800-605-2556 8 a.m. - 6 p.m., Monday – Friday.</p> <p><u>Medicare & Commercial (All counties)</u> 1-800-544-0088 (TTY 711) Seven days a week from October 1 through March 31, Monday through Friday from April 1 through September 30</p> <p><u>Cal Medi Connect (All counties)</u> 1-855-905-3825 (TTY 711) Contact us 8 a.m. - 8 p.m., seven days a week:</p> <p>In case of emergency or after business hours for American Sign Language (ASL) interpreter, please call: Life Signs at 1-800-633-8883</p>					



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	and Vietnamese	Please allow at least 5-7 business days for the request of face-to-face interpretation, and at least 14 business days for sign language assistance.					
Central Health Plan		<p>Central Health Medicare Plan:</p> <ul style="list-style-type: none"> ▪ Provides free aids and services to people with disabilities to communicate effectively with us, such as: <ul style="list-style-type: none"> ○ Qualified sign language interpreters ○ Written information in other formats (large print, audio, accessible electronic formats, other formats) ▪ Provides free language services to people whose primary language is not English, such as: <ul style="list-style-type: none"> ○ Qualified interpreters ○ Information written in other languages <p>Telephonic /Sign Language Interpreter Services Call Member Services at 1 866-314-2427 8AM -8PM 7 days a week Email: mbrsvcs@centralhealthplan.com</p>					
Cigna	Spanish Traditional Chinese	<p>– Cigna does not delegate interpreter services to medical groups</p> <p>– Cigna offers free telephonic interpretation for Cigna LEP Participants through our language service vendor.</p> <p>– To engage an interpreter once the Cigna participant is ready to Receive services, please call the number listed on the back of the Members ID card 1.800.806.2059.</p> <ul style="list-style-type: none"> • You will need the member’s Cigna ID number, • member date of birth • your TAX ID number • (or NCPDP for pharmacist) to confirm eligibility and access interpretation services. It is not necessary to arrange for these services in advance. 	<p>Obtaining Cigna Translated Documents</p> <p>Cigna will proactively send standard translated vital documents to those who have registered with Cigna indicating that their written language preference is Spanish or Traditional Chinese.</p> <p>Individuals may register their written or spoken language preference, as well as their race or ethnicity, in two ways:</p> <ol style="list-style-type: none"> 1. Call the telephone number on their ID card, or 2. Complete and send us the survey provided with their enrollment materials. <p>Cigna will also translate vital non-standard documents into Spanish and Traditional Chinese upon request. Documents that are not considered vital will not be translated.</p>	<p>California Language Assistance Program, please call Cigna Customer Service at 1.800.88Cigna (1.800.882.4462).</p> <p>If you are calling about a patient with a GWH-Cigna ID card, please call 1.866.494.2111.</p>	<p>Cigna California Language Assistance Program:</p> <p>https://www.cigna.com/healthcareproviders/resources/californialanguageassistance-program</p>		



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			<p>Vital documents are those that affect your patients' benefits and coverage. Vital standard documents are generic and contain no specific health plan participant information, such as applications and consent forms.</p> <p>Vital non-standard documents are customer-specific and may contain personal health information, such as denial letters and explanations of benefits.</p>				
<p>Well Care of California <i>Formerly Easy Choice</i></p>		<p>Well Care Health Plans, Inc.:</p> <ul style="list-style-type: none"> ▪ Provides free aids and services to people with disabilities to communicate effectively with us, such as: <ul style="list-style-type: none"> - Qualified sign language interpreter - Written information in other formats (large print, audio, accessible electronic formats, other formats) ▪ Provides free language services to people whose primary language is not English, such as: <ul style="list-style-type: none"> - Qualified interpreters - Information written in other languages <p>If you need these services, contact Well Care Customer Service for help or you can ask Customer Service to put you in touch with a Civil Rights Coordinator who works for Well Care.</p> <p>Hearing-Impaired, Interpreter and Sign Language Services Hearing-impaired, interpreter and sign language services are available to Members through Well Care Customer Service. PCPs should coordinate these services for Members and contact Customer Service if assistance is needed. To get an interpreter, just call us at 1 866-999-3945. Someone who speaks English/Language can help you. This is a free service.</p>	Not Covered	1-866-999-3945			1/21/2020



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		If the member speaks a language other than English, language assistance services free of charge are available at 1 877-374-4056 (TTY 711)					
Golden State		If you speak English, language assistance services, free of charge, are available to you. Call 1-877-541-4111 (TTY: 1-877-551-4111). Member Services Email: customer.service@gsmhp.com					1/22/2020
Health Net	<p>Oral translations in 150 languages,</p> <p><u>MEDI-CAL /CMC</u> Kern, San Joaquin, Stanislaus, and Tulare: Spanish Los Angeles: Arabic, Armenian, Cambodian, Chinese, Farsi, Korean, Russian, Spanish, Tagalog, and Vietnamese San Diego: Arabic, Spanish, Tagalog, and Vietnamese</p> <p><u>MEDICARE</u> Based on Health Net Members Benefits'</p> <p><u>COMMERCIAL</u> Chinese Korean Vietnamese Spanish</p>	<p><u>INTERPRETER SERVICES</u></p> <p><u>LINE OF BUSINESS</u> HMO, HSP, PPO, EPO, POS, Medicare Supplemental members- 1(800) 641-7761 M-F 8 AM - 6PM After hours and weekends- 1(800) 546-4570 M-F 5 PM - 8AM including Weekends and Holidays.</p> <p>Commercial Contact Health Net Member Services at the telephone number on the members ID Card</p> <p>Medicare Advantage 1(800) 929-9224 M – F 8AM – 5PM</p> <p>Medi-Cal Contact Health Net Member Services at the telephone number on the members ID Card or by calling the Health Net Provider Services Center 1(800) 675-6110 , for After-hours select member option</p> <p>Covered California 1(888)926-2164 M – F 8AM -6PM 1(800)546-4570 After Hours M-F 6PM to 8AM including Weekends and Holidays</p> <p>Cal Medi-Connect- Los Angeles Interpreter Services: 1 (855) 464-3571 (M-F 8AM – 5PM) 1 (800) 546-4570 (M-F 5PM -8AM) Afterhours, Weekends and Holidays</p>	<p><u>Translation Services: MediCal, Cal MediConnect, Medicare Advantage</u></p> <ul style="list-style-type: none"> Health Net must provide translations and alternate formats of utilization and case management materials for members that have a preferred language or format listed on the Health Net eligibility file. All LEP members may request a translation or alternate format of utilization management (UM) or case management (CM) letters. If a Health Net member requests translation or an alternative format of an English document produced by a delegated PPG, the provider must refer the member to the Member Services telephone number on the member's identification (ID) card. When Member Services receives the request, Health Net will request the document from the PPG. The PPG must submit the document within 48 hours Tagline and nondiscrimination notices must be included in correspondence sent to the member on Health Net's behalf. 		<p>Health Net Provider Manual</p> <p>PROVIDER SERVICES MediCal 1-800-675-6110 provider.healthnet.com</p> <p>PROVIDER SERVICES Cal Mediconnect provider_services@healthnet.com Los Angeles County 1-855-464-3571 San Diego County 1-855-464-3572</p> <p>PROVIDER SERVICES Medicare provider_services@healthnet.com Medicare (individual) 1-800-929-9224 provider.healthnetcalifornia.com Medicare (employer group) 1-800-929-9224 provider.healthnet.com</p>		1/22/2020



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Health Net		<p>Cal Medi-Connect- San Diego Interpreter Services: 1 (855) 464-3572 (M-F 8M-5PM) 1 (800) 546-4570 (M-F 5PM -8AM) Afterhours, Weekends and Holidays</p> <p>Face to Face Appointments You may request an interpreter by calling the appropriate telephone numbers below or the number on the member's identification (ID) card a <i>minimum of five days prior to the appointment</i>. Have ready:</p> <ul style="list-style-type: none"> Member ID number Language needed when calling <p>Sign Language Sign Language Interpretation is available. Please request a sign language interpreter as soon as the appointment is made, but not less than 5 business days before the appointment.</p>	<ul style="list-style-type: none"> Delegated provider groups can send in member information requiring translation to: provider_services@healthnet.com Request must include: <ul style="list-style-type: none"> Member ID Member name The document requested The members address Materials must be in a Word or unlocked PDF format, scanned or faxed documents are not accepted. Care plans must include proof the document is at or below 8th grade reading level (Commercial & Medicare) 6th grade reading level (Medi-Cal & CMC). Providers use the same process for requesting an alternate format of any UM or CM materials in English or a threshold language. 		<p>PROVIDER COMMUNICATIONS provider.communications@healthnet.com fax 1-800-937-6086</p>		
Humana		<p>Providers are contractually and federally required to ensure "equality of opportunity for meaningful access" to healthcare services and activities. This includes during the doctor visits/appointments/follow up ensuring that Non-English/ Limited English and Disabled members are provided effective communication of "vital information" that could create a consequence or an adverse risk to the patient/member (i.e. Over the Phone Interpretation, Video Interpretation, In person</p> <p>Providers when creating appointment with members (current and future) must provide:</p> <ul style="list-style-type: none"> Notification of availability of oral interpretation (over the phone, video or in-person) for Non English/Limited English appointments. 					11/27/2018



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		<ul style="list-style-type: none"> Notification of availability of video or in-person sign language interpretation for hearing impaired members. <p>Oral Interpretation Vendor Voiance an “Over the Phone” and “Video Interpreter” vendor setup a no-contract, pay as you go model for providers to offer interpretation services in 200 languages and video interpretation in 24 languages (including American Sign Language) to meet providers contractual and federal requirements, please click the link below to sign up:</p> <p>https://www.voiance.com/services/AccountSignUp/ServiceAgreement.aspx?g=d0db2690-d029-41978eee-27e292848969</p> <p>Telephonic Interpreter Call Member Services on the back of the Member ID Card 1877-320-1235 (TTY:711) for assistance</p> <p>Members with Disabilities For our customers with disabilities or limited English proficiency, we provide the following communication services at no cost when interacting with Humana:</p>					
IEHP	Spanish	<p>Telephonic Interpreter and Alternative Formats Call Member Services at 1-800-440-IEHP (4347) Duals Member Services at 1-877-273-4347 8AM – 8PM – 7days/week</p> <p>Alternative Formats You can get this information for free in other auxiliary formats, such as braille, 16-point font large print and audio.</p> <p>Face to Face Interpreter Call IEHP Member Services at least 5 working days before the scheduled appointment to make arrangements for a foreign language or sign language interpreter. To cancel your request, call at least 2 days before your Doctor visit.</p> <p>TTY users, please call 1-800-718-4347 seven days a week 8am – 5pm</p>	IEHP Policy and Procedure Manual Medicare Dual Choice MA_09A	Member Services – Scheduling, Gabriel Uribe – Operations uribe-g@iehp.or	https://ww3.iehp.org		1/22/2020



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IVHP		<p>Interpretation Services 1-800-251-8191 (TTY/TDD 711)</p> <p>October 1 to March 31, 8 am to 8 pm, 7 days a week. April 1 to September 30, 8 am to 8 pm, Monday through Friday.</p>					1/28/2020
LA CARE	Spanish Chinese Armenian Arabic Farsi Cambodian Khmer Korean Russian Tagalog Vietnamese	<p>Telephonic Interpreting Services (PPG) Call 1-855.322.4022 Press:</p> <ul style="list-style-type: none"> ▪ 1 for Spanish ▪ 2 for Other Languages ▪ 3 for Operator <p>Please provide the following information to an operator to be connected with an interpreter:</p> <ul style="list-style-type: none"> • LA CARE Member ID • Independent Physician Association (IPA) <p>Document the interpreter name and ID # for reference. Brief the interpreter, and give any special instructions. Dial the patient into the call.</p> <p>Telephonic Interpreting Services (Provider) Call 1-855.322.4034 and provide the following information to an operator to be connected with an interpreter:</p> <ul style="list-style-type: none"> • Physician's National Provider Identifier (NPI) • LA CARE Member ID <p>Face to Face Interpreting Services (PPG) Call Member Services to request an interpreter at least 10 business days prior to the medical appointment. American Sign Language is also available for deaf and hard of hearing patients: CALL L.A. CARE immediately if there are any changes to a patient's appointment.</p>	<p>Translation Services (PPGs Responsibilities) Members have the right to receive written informing materials in their preferred threshold language and format.</p> <ul style="list-style-type: none"> ▪ PPGs must provide written informing materials in member's preferred language and format on a routine basis. ▪ PPGs are responsible for translating any written informing materials that they generate, including member specific information in form letters (e.g., Notice of Adverse Benefit Determination letters, denial letters, etc.) ▪ Written informing materials and other significant publications should also include a tagline and a non-discrimination notice. ▪ PPGs are responsible for making these materials available in alternative formats, such as large print and audio. <p><i>Please note member requests are logged and submitted LA CARE quarterly</i></p> <p><i>Please also log these request on your PPG LAP log</i></p>	For more information about any of these services, contact LA Care's C & L Services at CulturalandLinguisticServices@lacare.org .	To receive more information about upcoming trainings or to schedule an onsite training session, contact CLStrainings@lacare.org		1/16/2020



2020 HERITAGE PROVIDER NETWORK

Health Plan Language Assistance

HEALTH PLAN	LAP THRESHOLD LANGUAGE	PLAN INTERPRETER ACCESS	PLAN TRANSLATION ACCESS (Vital Non-Standard Documents)	PLAN CONTACT QUESTIONS (interpreter/translation)	ADDITIONAL RESOURCES	LANGUAGE FORM VERIFICATION SUBMITTAL	LAST UPDATE																				
		<table border="1" data-bbox="516 480 1053 737"> <thead> <tr> <th colspan="2">LA CARE</th> <th colspan="2">PLAN PARTNERS</th> </tr> </thead> <tbody> <tr> <td>Medi-Cal</td> <td>1.888.839.9909 TTY 711</td> <td>Anthem Blue</td> <td>1.888.285.7801</td> </tr> <tr> <td>CMC</td> <td>1.888.522.1298</td> <td>Care 1st</td> <td>1.800.605.2556</td> </tr> <tr> <td>LA Care Covered</td> <td>1.855.270.2327</td> <td>Kaiser Permanent e</td> <td>1800.464.4000</td> </tr> <tr> <td>PASC – SEIU</td> <td>1.844.854.7272</td> <td></td> <td></td> </tr> </tbody> </table> <p>Provide the following Information</p> <ul style="list-style-type: none"> • Patient’s name • LA CARE member ID number • Language Requested • Preferred gender of interpreter <p>Appointment Information</p> <ul style="list-style-type: none"> • Date, time, and duration of appointment • Doctor’s name • Address and phone number • Purpose of appointment 	LA CARE		PLAN PARTNERS		Medi-Cal	1.888.839.9909 TTY 711	Anthem Blue	1.888.285.7801	CMC	1.888.522.1298	Care 1st	1.800.605.2556	LA Care Covered	1.855.270.2327	Kaiser Permanent e	1800.464.4000	PASC – SEIU	1.844.854.7272							
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Molina	Arabic Chinese Hmong Russian Spanish Vietnamese Tagalog	<p>Molina offers the following on-site interpretation:</p> <p>Qualified face-to-face interpreter services at medical appointments for complex care including: some medical or surgical procedures or tests, end of-life care, cancer care, organ transplants, behavioral health appointments, initial physical therapy, hearing loss appointments, and other appointments as directed by a medical director.</p> <p>Qualified sign language interpreter services at medical appointments to all deaf and hard of hearing members.</p> <ul style="list-style-type: none"> ▪ Molina needs 3-5 working days’ notice to identify a qualified sign language or face-to-face preferred language interpreter. 	<p>Call Molina Healthcare Member Services: 1888-665-4621</p> <p>Translation of Written Documents</p> <ul style="list-style-type: none"> ▪ Written member-informing documents that provide information regarding access to and usage of plan services are translated into appropriate threshold languages in Molina’s counties of operation. ▪ Molina also offers vital documents in large print, Braille and in audio format. For more information please call the Member and Provider Contact Center. 	Victoria Luong, 562-901-1032	<p>Cultural and Linguistic Consultation and Training</p> <ul style="list-style-type: none"> ▪ For cultural and linguistic consultations, questions regarding cultural beliefs and practices that may affect patient care, or to request cultural competency trainings, contact Molina at 		2/3/2020																				



2020 HERITAGE PROVIDER NETWORK

Health Plan Language Assistance

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Molina		<ul style="list-style-type: none"> Molina cannot guarantee the availability of an interpreter at all times, however we will try our best to have an interpreter at the member's appointment. <p>24 hours Access to Interpreters Please call Molina's Member Services Department to arrange for this service: Medi-Cal members contact Member Services at (888) 665-4621 (Monday-Friday, 7am-7pm) Covered California (Marketplace) members contact Member Services at:(888) 858-2150 (Monday-Friday, 8am-6pm) Medicare members contact Members Services at (800) 665-0898 (Monday-Friday, 8am-8pm) Cal Medi Connect (Duals) members contact Member Services at (855) 665-4627 (Monday-Friday, 8am-8pm)</p> <p>For after-hours and weekends, please call Molina's Nurse Advice Line English (888) 275-8750 or Spanish (866) 648-3537] to arrange for this service.</p> <p>Sign Language Interpretation To speak to members who are deaf, hard of hearing, or have a speech difficulty, Providers may use the California Relay Service. Dial 711 and give the Relay Operator (RO)/Communication Assistant (CA) the member's area code and telephone number. The RO/CA will connect and communicate via the member's preferred type of communication (TTY, VCO, Internet, ASCII, etc.).</p>	<ul style="list-style-type: none"> Molina offers a variety of low literacy health education materials in English and Spanish at no cost to Providers or members. These materials can be accessed online at: http://www.molinahealthcare.com/providers/ca/medicaid/comm/Pages/Health-EducationMaterials.aspx. Upon request, Molina will translate existing health education materials into members' preferred language. Please call the Member and Provider Contact Center. <p><i>Please also log these request on your PPG LAP log</i></p>		<p>(888) 562-5442 ext.121306.</p> <ul style="list-style-type: none"> Molina also offers "Ask the Cultural and Linguistics Specialist," an interactive web-based question and answer forum on providing culturally appropriate care. <p>All inquiries receive a response within 72 hours from Molina's Cultural Anthropologist.</p> <p>To access, go to our provider website: http://molinahealthcare.com/providers/ca/medicaid/resource/Pages/ask_cultural.aspx</p>		
Scan	Spanish (all counties) Chinese (San Francisco)	<p>Telephonic and In – Person Interpreters SCAN provides over-the-phone and in-person interpreter services for our members' appointments. These services can be requested by calling Member Services at (800) 559-3500 (TTY User: 711)</p>	<p>Please call our Member Services number at 1-800-559-3500</p> <p>October 1 to February 14, 8am-8pm 7 days a week</p>		<p>www.scanhealthplan.com Provider Information Line 1(877) 778-7226</p>	<p>Kirsten Jorgensen, Regulated & Member Communications KJorgensen@scanhealthplan.com</p>	1/16/2020



2020 HERITAGE PROVIDER NETWORK

Health Plan Language Assistance

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Scan		<p>October 1 to February 14, 8am-8pm 7 days a week February 15 to September 30, 8am – 8pm M-F</p> <ul style="list-style-type: none"> For over-the-phone translation, SCAN has Spanish-speaking Member Service Advocates on-staff. To connect the member to an interpreter for other languages, press 2 for a list of available languages. For in-person appointments, SCAN offers free translation services for members in several languages, including American Sign Language. Members should call to request this service at least 72 hours before the scheduled appointment <p>TTY: Dial 711. The representative will provide access to telephonic interpreters or schedule an appt. requiring a face to face interpreter.</p> <p>Providers To access free interpreter services for Members, call the Provider Information Line, 24 hours a day at (877) 778-7226 and select the Interpreter Services option when prompted on the menu.</p>	February 15 to September 30, 8am – 8pm M-F				
United	Spanish Chinese (Traditional Chinese Characters)	<p>United Healthcare of California members who have limited English proficiency have access to translated written materials and oral interpretation services, free of charge, to help them get covered services. For more program information, call 800-752-6096.</p> <p>Verbal Interpreter/Written Translation Services The United Healthcare West Call Center is a central resource for both care providers and members. The following information and services are accessible through the call center:</p> <ul style="list-style-type: none"> How to access and facilitate oral interpretation services for members needing language assistance in any language, or Request for an in-person interpreter for a member by selecting the appropriate phone number (based on 	1-800-730-7270 Spanish; 1-800-938-2300 Chinese; 1-800-624-8822 English (and All Other Languages)	1-800-730-7270 Spanish; 1-800-938-2300 Chinese; 1-800-624-8822 English (and All Other Languages)	www.myuhc.com www.uhclatino.com www.uhcasian.com More program information: 1-800-752-6096		1/28/2020



2020 HERITAGE PROVIDER NETWORK Health Plan Language Assistance

HEALTH PLAN	LAP THRESHOLD LANGUAGE	PLAN INTERPRETER ACCESS	PLAN TRANSLATION ACCESS (Vital Non-Standard Documents)	PLAN CONTACT QUESTIONS (interpreter/translation)	ADDITIONAL RESOURCES	LANGUAGE FORM VERIFICATION SUBMITTAL	LAST UPDATE
United		<p>language preference) to speak with a customer service representative and/or to conference in an interpreter:</p> <p>United Healthcare of California Signature Value (HMO): 800-624-8822 DIAL 711 TDHI Spanish: 800-730-7270; 800-855-3000 TDHI Chinese: 800-938-2300</p> <p><u>Where to Obtain the Member's Language Preference</u> The member's preferences for spoken language, written language and eligibility for written language service is displayed in the eligibilityLink app on Link.</p> <p><u>Availability of Grievance Forms</u> California Commercial HMO members may access grievance forms online. Please direct members to myuhc.com > Find a Form. The form accessible in two places: From the California member welcome page or, Library tab page, on the left side, and click on Grievance Form. You and your staff are required to assist the member to obtain a form if the member asks. You may print a form from myuhc.com or by provide a number for the member to call Member Services to file the grievance orally. Grievance forms are available in English, Spanish and Chinese.</p>					



Language Assistance: Provider & Staff Responsibility

The following guide summarizes key regulatory agency requirements including;

Section 1557 Final Rules of Affordable Care Act;
Title VI of the Civil Rights Acts of 1964;
Department of Health Care Services (DHCS) contractual requirements;
Medi-Cal Managed Care Division (MMCD) Policy Letters;
Centers for Medicare and Medicaid Services (CMS); and
National Committee for Quality Assurance (NCQA).

Provider Responsibilities - Important Regulatory Things to Remember

- ❖ **Inform and offer no-cost interpreting services to patients**
- ❖ **Interpreter Services Poster**
 - Post the “Free Interpretation Services including American Sign Language” sign at key points of contact. This sign informs patients who are Limited English Proficient (LEP), hard-of-hearing or deaf that free interpreter services are available to them.
- ❖ **Language Preference**
 - Document the patient’s preferred language preference in his/her medical record.
- ❖ **Request or Refusal of interpreter Services**
 - Discourage patients from using friends and family members as interpreters.
 - Do not use minors to interpret unless there is an emergency.
 - If a patient requests or refuses interpreter services after being informed of his or her right to free interpreter services – document the refusal in the patient’s medical record.



❖ **Bilingual Providers and Staff**

- Providers and staff who communicate with patients in a language other than English or who act as interpreters must maintain appropriate qualifications on file, i.e. Certification of language proficiency or interpretation training.

❖ **Cultural and Language Related Complaints and Grievances**

- Your patients have the right to file a complaint and grievance if they feel their cultural or language needs are not met in your office.

Free Telephonic and Face – Face Interpreter Services

We provide over-the-phone, face-to-face and American Sign Language interpreter services for patients who are LEP hard-of-hearing or deaf. These services are free to you and your patients.

❖ **Patients who are LEP**

Applicable workflow for each Health Plan - *HPN Language Assistance Sheet*

- **Over the phone interpreter services:** These services are available 24 hours a day, 7 days a week. Please see the *HPN Language Assistance Sheet* at:
 - www.Regalmed.com/provider-resources/ under Provider Resources or Provider Educational Resources. <http://www.regalmed.com/provider-resources/provider-educational-resources/>
- **Face-to-Face interpreter services:** Please see the *HPN Language Assistance Sheet*

**After- Hours Access: Answering machines should inform patients who are LEP about accessing interpreting services after-hours*

❖ **Communication for Deaf and Hard-of-Hearing**

- To communicate over the phone: You can place a calls and receive calls from patients using the California Relay Service(CRS) It is a no-cost relay services provided by the Federal Communications Commission.
- Dial 1(800) 735-2922 or 711(MCI) or 1(888) 877-5379 (SPRINT)
- The CSR is free and available 24 Hours a day, 7 days a week.



- ❖ Cal Optima Centralized call center phone number that is available 24/7 for Providers & and Members: (877)-225-6784

When You Identify a Limited English Proficient Patient

- ✓ Offer interpreting services to a patient in a respectful manner when you notice:
- ✓ Patient is quiet or does not respond to questions.
- ✓ Patient simply says yes or no, or gives inappropriate or inconsistent answers to your questions.
- ✓ Patient may have trouble communicating in English or you may have a very difficult time understanding what they are trying to communicate.
- ✓ Patient self identifies as LEP by requesting language assistance.

How to Work Effectively with Interpreters

Speaking to patients using interpreters is slightly different from speaking to patients directly. Here are useful tips to make your interpreted encounters go smoothly:

- ✓ Expect and allow more time for interpreted medical appointments.
- ✓ Talk directly to a patient.
- ✓ Speak in a normal voice, not too fast or too loud.
- ✓ Be brief and use plain language.
- ✓ Avoid acronyms, medical jargon, and technical terms.
- ✓ Pause after a short sentence for an interpreter to interpret.
- ✓ Don't say anything you don't want a patient to hear.

C&L Trainings

The following trainings are offered to our network providers and staff at no cost.



❖ **Cultural Competency and Disability & Sensitivity Training**

Cultural and Linguistic Contact

For more information or any questions about C&L services, please contact

Jessica Olivas (818) 654-3400 ext. 1111246 or Sarineh Sepani ext. 1104541 or Lorie Santos at ext. 1104850 or please reach out to your Network Manager

Referrals to Culturally Appropriate Community Resources and Services

If a patient needs services from a community based organization or social service agency, please reference the *Culturally & Linguistically Appropriate Community Resources Directory*. Please document the referral in the patient's record.

Availability of Member Materials in Threshold Languages and Alternative Formats

Patients may request materials in their preferred language and in an alternative formats. Alternative formats include Audio, Braille, and Large Print.

Cultural Competency Training

We encourage you and your staff to attend disability sensitivity and cultural awareness competency training programs. These trainings can enhance your interpersonal and intra-cultural skills, which can improve communication with your culturally diverse patients including seniors and People with Disabilities. Programs are available through the Office of Minority Health and other agencies.

For Provider questions or concerns, please contact **(866) 654-3471** and ask for **Network Management**.

For Compliance or HIPAA related services or to report suspected Fraud/Abuse/Non-Compliance, Please call 24/7 to the Compliance & FWA Hotline at 844-752-3921 (Toll Free)

Translation & Alternative Formats

PPG Responsibilities

Members have the right to receive written informing materials in their preferred threshold language and format.

- PPGs must provide written informing materials in member’s preferred language and format on a routine basis.
- PPGs are responsible for translating any written informing materials that they generate, including member specific information in form letters (e.g., Notice of Adverse Benefit Determination letters, denial letters, etc.)
- Written informing materials and other significant publications should also include a tagline and a non-discrimination notice.
- PPGs are responsible for making these materials available in alternative formats, such as large print and audio.

Threshold Languages

Member written informing materials should be made available in the below threshold languages depending on the line of business. Threshold languages are the primary languages spoken by limited English proficient (LEP) population.

Medi-Cal	Cal MediConnect	PASC-SIEU	L.A. Care Covered*
English Spanish Arabic Armenian Chinese Farsi Khmer Korean Russian Tagalog Vietnamese	English Spanish Arabic Armenian Chinese Farsi Khmer Korean Russian Tagalog Vietnamese	English Spanish Armenian Chinese Korean Russian	English Spanish

*Includes L.A. Care Covered and L.A. Care Covered Direct



Translation Process

Per MMCD Policy Letter 99-04, a standardized process should be used to produce well-translated member informing materials. PPG may contract with a translation vendor or use in-house qualified bilingual staff to accomplish it. Translation must be offered in all the threshold languages, and follow the same process for all these languages.

- 1) Three-step process (Translation, Editing and Proofreading, or TEP) completed by at least two separate qualified translators.
- 2) Definition of a qualified translator:
 - Adheres to generally accepted translator ethics principles, including client confidentiality;
 - Has a formal education in the written target language;
 - Demonstrates proficiency in reading, writing, and understanding both English and the target language;
 - Is able to translate effectively, accurately, and impartially using necessary specialized vocabulary, terminology, and phraseology;
 - Has knowledge and experience with culture(s) of the target audience.

Recommended Practices

To ensure compliance, here are the recommended practices:

- Contract with a translation vendor for all threshold languages.
 - Add language related to qualifications of translators and quality assurance process in the translation vendor contract which meets all regulatory requirements.
- Obtain an attestation for each translated document from the translation vendor attesting to:
 - Qualifications of translators;
 - Three-step process by at least two qualified translators;
 - Accuracy and integrity of a translated document.

Cultural & Linguistic Resources

Various C&L tools and resources are available to providers, such as the C&L Toolkit for Serving Diverse Populations. Order them through the Online Tool Order Form: <https://external.lacare.org/HealthForm/>

To receive more information about the L.A. Care's Cultural & Linguistic services, email us at CulturalandLinguisticServices@lacare.org



Interpreting Services (Practitioners)

No-cost interpreting services including American Sign Language are available to L.A. Care members 24 hours a day, 7 days a week.

Provider Responsibilities - Important Regulatory Things to Remember

- Post translated signage (interpret poster) about no-cost interpreting services at all key points of contact.
- Offer no-cost face-to-face and telephonic interpreting services to patients.
- Never imply, request, or require patients to provide their own interpreters.
- Strongly discourage using friends, family members, and especially minors as interpreters, except in emergency situations.
- Document patient's preferred spoken and written language as well as request or refusal of interpreting services in their medical record.
- Maintain appropriate documentation on file for bilingual practitioners and office staff who communicate with limited English proficient (LEP) patients in a language other than English.
 - Use the no-cost interpreting services offered by L.A. Care if their language proficiency is not assessed, and they are not qualified.
- Ensure that the answering machine informs patients on how to access interpreting services after-hours.

Telephonic Interpreting Services

1. Dial **1.855.322.4034**
2. Press:
 - 1 for Spanish
 - 2 for Other Languages
 - 3 for Operator
3. Provide:
 - Physician's National Provider Identifier (NPI)
 - L.A. Care member ID number
4. Document the interpreter name and ID # for reference.
5. Brief the interpreter, and give any special instructions.
6. Dial the patient into the call.



Face-to-Face Interpreting Services

1. Call the phone numbers below to request an interpreter at least 10 business days prior to a patient's medical appointment. American Sign Language is also available for deaf and hard of hearing patients.

IMPORTANT: Call L.A. Care immediately if there are any changes to a patient's appointment.

L.A. Care		Plan Partners	
Medi-Cal, PASC-SEIU	1.888.839.9909	Anthem Blue Cross	1.888.285.7801
Cal MediConnect	1.888.522.1298	Care1st	1.800.605.2556
L.A. Care Covered	1.855.270.2327	Kaiser Permanente	1.800.464.4000

2. Provide the following information:

Patient Information

- Patient's name
- L.A. Care member ID number
- Language requested
- Preferred gender of interpreter

Appointment Information

- Date, time, and duration of appointment
- Doctor's name
- Address and phone number
- Purpose of appointment

Limited English Proficient (LEP) Patients

Offer no-cost interpreting services to the patient in a respectful manner when you notice:

- Patient is quiet or does not respond to questions.
- Patient simply says "yes" or "no", or gives inappropriate or inconsistent answers to your questions.
- Patient may have trouble communicating in English or you may have a very difficult time understanding what they are trying to communicate.
- Patient self identifies as LEP by requesting language assistance.

How to Work Effectively with Interpreters

- Plan more time for a medical appointment or a call that will require an interpreter.
- Brief the interpreter on the purpose of the appointment or call.
- Talk directly to the patient. Speak in the first person.
- Speak in a normal voice, not too fast or too loud.
- Pause after a short sentence for the interpreter to interpret.
- Give information in small chunks and verify comprehension before you continue.
- Use plain language. Avoid acronyms, medical jargon, and technical terms.
- Do not say anything you don't want the patient to hear. It is the interpreter's job to interpret everything.



Communicating with Deaf and Hard of Hearing Patients

- Dial **711** to access the California Relay Services. It is a no-cost relay services provided by the Federal Communications Commission.
- American Sign Language interpreters are available for medical appointments. Please call L.A. Care Customer Solution Center to request an interpreter.

Tools and Resources

You can *order* the below tools through the Online Tool Order Form:

<https://external.lacare.org/HealtheForm/>

- Interpreting services poster
- Telephonic interpreting card
- C&L provider toolkit

Additional materials are also available for *download* from the L.A. Care's website:

<http://www.lacare.org/providers/provider-resources/tools-toolkits>

- Go to *Manuals and Forms* to download:
 - ICE employee language skills assessment tool
 - Health Education referral form (C&L appropriate community services)
 - Preferred language labels
 - Interpreting request/refusal labels
- Go to *Toolkits* to download:
 - C&L provider toolkit

C&L Trainings

The following trainings are available to L.A. Care network providers at no cost:

- Communicating through Healthcare Interpreters (CME)
- Cultural Competency
- Disability Sensitivity

To receive more information about upcoming trainings or to schedule an on-site training session, contact us at CLStrainings@lacare.org.

Contact Information

For more information about the L.A. Care's Cultural & Linguistic services, email us at CulturalandLinguisticServices@lacare.org.

