Language Access Report Frequently Asked Questions

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Language Access Reporting

1. What is the Language Access Report?

The Language Access Report is a contract requirement that was introduced in 2020. It asks CCOs to report on each patient encounter that required an interpreter, or an encounter where an interpreter was requested, but the patient denied language (interpretation) services. The report allows for clinics to record details such as EOCCO Member ID, type of appointment and visit setting, type of language services used, and whether the interpreter was recognized by the Oregon Health Authority as a qualified or certified health care interpreter (qualified and certified program requirements are listed here) by selecting from a list of predetermined criteria. See the Language Access Reporting form for Clinics for more details.



2. Is the Language Access Report related to the Language Access incentive measure?

In 2022 completion of the Language Access Report will not affect the *Meaningful Language Access to Culturally Responsive Health Care Services* incentive measure. 2022 is a report only/must pass year for the incentive measure. As part of the report only process for 2022, OHA will send a sample of approximately 400 patients for EOCCO to verify whether these patients used interpreter services during each of their appointments. This Language Access Report will be used to help validate which members used interpreters. The quality team will work to validate as many patients as possible through Language Access Reports and will reach out to clinics for help validating the remaining patients.

In 2023 there will be a target and a benchmark set for this incentive measure. EOCCO's performance on this measure will be determined by the percentage of interpreter need visits that used an OHA qualified or certified interpreter.

2021-2023 Incentive Measure Overview

2022 2021 2023 Contract Requirement Contract Requirement Contract Requirement Collect quarterly Collect quarterly Collect quarterly Language Access Language Access Language Access Reports Reports Reports Incentive Measure Incentive Measure Performance is rated on OHA will send a sample Incentive Measure the overall use of of patients to review. No additional qualified/certified EOCCO will need to components interpreters measured confirm if these patients from the Language used language services. Access Report data

Report Only

Target & Benchmark set





How does this all fit together?



3. Who needs to complete this report?

EOCCO is reaching out to all PCP and mental/behavioral health administrators to help collect the data for these reports.

4. When are these reports due?

Due date for completing these reports are approximately 3 months after the end of the previous quarter (see below for complete dates). Reports can be emailed securely to EOCCOmetrics@modahealth.com.

2022/2023 Reporting Cycles and Due Dates:

Reporting Cycle	Dates Included	Report Due Date to EOCCO	EOCCO to Submit Final Report to OHA
Q3 2022	7/1/22 – 9/30/22	12/7/2022*	1/1/2023
Q4 2022	10/1/22 -12/31/22	3/15/2023	4/1/2023
Q1 2023	1/1/23-3/31/23	6/14/2023	7/1/2023
Q2 2023	4/1/23-6/30/23	9/13/2022	10/1/2023
Q3 2023	7/1/22 – 9/30/22	12/06/23*	1/1/2024

^{*} EOCCO is requesting the Q3 report early to accommodate those who will be out of the office in December



5. What if our clinic is unable to complete the report?

If you are struggling to pull data, EOCCO can pull a pre-filled report to send to your clinic. This will rely on claims data to identify all members with an interpreter needs flag who had at least one visit at your facility within the last three months. Clinics will be responsible for filling out the type of interpreter used, OHA interpreter registry number (if applicable), or whether the member declined interpreter services. To request a pre-filled claims report, please contact EOCCOmetrics@modahealth.com.

We encourage clinics to invest time refining this process as this will become an incentivized measure in 2023.

Language Access Report Components

6. Questions around using certain types of language services

Passport to Languages

EOCCO has a contract with Passport to Languages and can pull information for any visits where services were used and billed to the EOCCO account. If a clinic does not indicate that they are working with an EOCCO member when they call Passport to Languages, the EOCCO metrics team will not be sent that information. For more information on how to request a phone interpreter see Connecting to a Phone Interpreter on the EOCCO website.

Linguava

In addition to Passport to Languages, EOCCO will soon offer language (interpretation) services through Linguava. Linguava is an Oregon-based company that provides pre-scheduled and ondemand phone and video interpretation services. Having multiple contracted language service platforms available will help increase interpreter accessibility and availability.

Before clinics can use Linguava's services they will need to sign a service agreement with Linguava. This is a one-time agreement that will provide you with an access code to request services for EOCCO members, and bill the CCO directly for these services. Be on the lookout for more information coming about Linguava soon.

Bilingual Staff and In-house Interpreters

The modality of interpreter service delivery (In-Person, Telephonic, or Video) is documented in Language Access Report template columns 'E-G'. Interpretation provided by bilingual staff members should be recorded in the Language Access Report under column J (*Was the Interpreter a Bilingual Staff Member*). Be sure to include the staff member's OHA registry number if they are a qualified or certified interpreter.

If your clinic is having difficulty collecting language service information you can reach out to EOCCOmetrics@modahealth.com.



7. What types of patient visits need to be included?

The report allows for the user to select from the following visit types:

- Inpatient Stay
- Emergency Department
- Outpatient Office Visit
- Home Health
- Telehealth
- Other

While we encourage clinics to follow best practices for communicating with patients with limited-English proficiency (LEP), clinics do not have to report on pharmacy encounters, telephone encounters for medical questions, front desk and scheduling activities, and lab visits. For a full list of included visit types see this <u>Language Access Reporting Resource</u> created by the OHA.

8. What if a patient refuses interpreter services?

All visits where interpreter services were refused/denied should be documented. Interpreter service refusal [Yes or No] is documented in column 'K' in the 'Language Access Reporting Form for Clinics'. In column 'L' there is an optional space to narratively document a reason for interpreter service refusal.

Some reasons for refusal might include:

- Provider conducted the visit in patient's preferred language
- Patient confirms that interpreter flag need in Oregon's Medicaid Management Information System (MMIS) is incorrect, and they do not need interpreter services
- Patient is unsatisfied with the interpreter services available
- Other reasons for refusal

Some of these refusal reasons count as denominator 'exclusions' for the Language Access measure. More information about measure exclusions can be found in OHA's 2021-2023 Specifications document.

OHA Certified/Qualified Interpreters

9. Why must CCOs and providers work with OHA qualified and certified HCls to provide interpreter services?

According to the Oregon Health Authority's <u>Language Access FAQ and Talking Points</u> document:

- The primary goals are to:
 - Provide quality services
 - Improve and protect the member experience; and



- Ensure that the individual providing interpretation services can accurately interpret health related information.
- Additional reasons include:
 - To comply with Oregon law (ORS 413.552) and the federal statutes mentioned above.
 - The quality and professionalism of OHA Qualified or Certified HCIs is nationally recognized based on their comprehensive training and recognition standards.
 - The accreditation and state registry enrollment process for OHA qualified and certified Health Care Interpreters (HCIs) provide convenient access to a state recognized and locally available quality workforce on the HCI registry. Working with OHA approved HCIs is good for the local economy.

10. How do I know if the interpreter I used was OHA qualified or certified?

At times your language service provider will be able to provide you with information on whether the interpreter was OHA qualified or certified. Alternatively, you are able to search the OHA's <u>Health Care Interpreter Registry</u> by the interpreter's name to see if they are credentialed. The EOCCO metrics team is happy to help with this as well.

While the OHA qualified and certified interpreter programs are in place to ensure patients are receiving quality interpretation, these programs are unique to Oregon. Language service providers who serve clients across the nation may not recognize these terms, even if they have similar requirements. We are working with the OHA to figure out how to address language programs that exist outside of the state of Oregon.

11. How do my bilingual staff members become OHA qualified or certified interpreters?

If your staff member has previously passed one of the following certification exams they are well on their way to becoming an OHA certified interpreter:

- National Board of Certification for Medical Interpreters
- Certification Commission for Healthcare Interpreters
- Oregon Court Interpreter Certification
- Federal Court Interpreter Certification Examination
- American Sign Language (ASL) Certification

Staff members will need to submit a <u>Health Care Interpreter Application</u> to the OHA to demonstrate that they meet the <u>Oregon Health Care Interpreter Program Requirements</u>. Those who can demonstrate they meet all program requirements through previous training should not need to undergo additional training. This is an excellent way to ensure that staff who had previously passed one of the aforementioned certification exams are recognized by Oregon interpreter program, and clinics are receiving credit for using OHA qualified or certified interpreters. At this time the \$25 qualification/certification application fee has been waived.



12. Does EOCCO offer any funding to help staff become OHA Qualified or Certified interpreters?

EOCCO has partnered with Oregon State University to host a Health Care Interpreter Training program for English-Spanish proficient individuals. This is a 64-hour training program that requires student to complete online and in-person trainings. Scholarships are available to those who qualify. For more information on the training program visit Spanish-English Health Care Interpreter Training | OSU Continuing Education (oregonstate.edu). To review the scholarship requirement and apply for a scholarship visit EOCCO Health Care Interpreter Scholarship Application.

Additional Questions

13. Who can I contact for more information or to offer feedback?

We are working to make this process easier for clinics going forward. If you have any questions or would like to provide feedback on what has worked well for your site, please contact EOCCOmetrics@modahealth.com.

