

LANGUAGE ACCESS ADVOCACY GUIDE



WHAT ARE A PATIENT'S RIGHTS IN REGARDS TO LANGUAGE ACCESS?

Title VI of the U. S. Civil Rights Act of 1964 prohibits health care providers who receive funds from the federal government from discriminating against individuals on the basis of national origin. This includes policies or practices that prevent or inhibit equal access to a recipient's programs and activities for patients of limited English proficiency. In short, health care providers are required to provide language services for patients who need them.

IN WHAT SETTINGS MUST HEALTH CARE PROVIDERS SUPPLY INTERPRETATION?

Title VI applies to any provider that accepts federal funding in any way. This is true for all providers who accept Medicare or Medicaid, and they must provide language access to all patients, even if the individual patient has private insurance. In addition, these services must be offered at all points during the visit (i.e. check-in, discharge) in order to create an experience that would be identical if the patient spoke English.

WHAT IF A PROVIDER ACCEPTS MEDICARE OR MEDICARE BUT REFUSES TO PROVIDE INTERPRETATION?

Although the medical practice is legally obligated to provide interpretation services, the provider may not be aware of the law. It is sometimes helpful to inform the physician or office manager of these laws, especially if continued follow-up for the patient is required. To assist with this task, you can download and print the the RHP Medical Office Letter, which provides various interpretation & translation services for providers in the Greater Philadelphia Area. In addition, a patient's insurance company may provide interpretation and we recommend that advocates or medical offices check with the patient's insurance to see if these services are available. The Medicaid HMO Keystone First provides in-person interpreters for medical visits. See our Keystone First Interpreter-Scheduling Guide for step-by-step instruction on how to use this service.

WHAT IF A PROVIDER PROVIDES ONLY SPANISH, OR ONLY A FEW DIFFERENT LANGUAGES?

Some medical offices believe that having Spanish-speaking medical staff fulfills their requirement for providing interpretation services. In reality, these offices must still make all languages available if needed. These offices can benefit from having a language line service in addition to their bilingual staff, of which a few examples are listed in the RHP Medical Office Letter.

CAN A PROVIDER ASK A PATIENT TO BRING THEIR OWN INTERPRETER (I.E. A FAMILY MEMBER OR FRIEND?)

No. Using family or friends as interpreters is both illegal and potentially harmful in a healthcare setting. Please ask to speak with an office manager to clarify that language services are not available, and if not, inform the office of their Title VI requirements.

WHAT IF THE OFFICE HAS INTERPRETATION SERVICES, BUT THEY WERE NOT UTILIZED FOR ONE OR MORE POINTS DURING THE APPOINTMENT?

Most commonly, medical offices provide interpretation to a patient during the medical interview, but fail to provide proper interpretation during check-in, scheduling, and at other non-clinical points. According to Title VI, offices must provide interpretations at all points in the clinical setting. If you are having trouble with a particular office, try speaking with the office manager of physician to see how these processes could be adapted for your client.