

New York Medicaid Coverage of Medical Language Interpreter Services

Joint IMIA/NYSDOH webinar

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Coverage of Medical Language Interpreter Services

- Effective October 1, 2012, Medicaid Fee-for-Service implemented coverage of medical language interpreter services for Medicaid recipients with limited English proficiency (LEP) and communication services for recipients who are deaf and hard of hearing.
- Effective December 1, 2012, these services are reimbursed by Medicaid Managed Care and Family Health Plus plans in accordance with rates established in provider agreements or, for out-of-state network providers, at negotiated rates.

Who can provide Medical Language Interpreter Services

- Article 28, 31, 32 and 16 Outpatient Departments that bill with APGs
- Hospital Emergency Rooms (HER)
- Diagnostic & Treatment Centers (D&TCs)
- Federally Qualified Health Centers (FQHCs)
- Office-based Practitioners

Medical Language Interpreter Services

Must be provided by a third party interpreter who is:

- employed by or
- contracts with the Medicaid provider

Modality:

- face-to-face or
- by telephone

The interpreter must demonstrate competency and skills in medical interpretation techniques, ethics and terminology. It is recommended, but not required, that such individuals be recognized by the National Board of Certification for Medical Interpreters (NBCMI).

Who Qualifies for Medical Language Interpreter Services

- **Medicaid recipients with limited English proficiency**
 - Defined as patients whose primary language is not English and who cannot speak, read, write or understand the English language at a level sufficient to permit such patients to interact effectively with health care providers and their staff.
- **Medicaid recipients who are deaf and hard of hearing**

Compensation

- Reimbursement of medical language interpreter services is payable with HCPCS (Healthcare Common Procedure Coding System) procedure code T1013 (sign language and oral interpretation services) and is billable when provided by a third party interpreter during a medical visit.
- **HCPCS Code T1013:**
 - One unit : includes a minimum of 8 and up to 22 minutes of medical language interpreter services at **\$11.00**
 - Two units: include 23 or more minutes of medical language interpreter services at **\$22.00**
- Medical language interpreter services are reflected in the prospective payment system rate for those FQHCs that do not participate in APG reimbursement.
- The need for these services must be documented in the medical record.

Q&A

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