

Recommendations

- Identify counties that have distinguishable/higher census of minorities that are held accountable to specific federal standards.
- Hospitals should be encouraged to use the recommended assessment tool, determine the needs of LEP populations in their service area, assess their current programs and services targeted to the LEP patients they serve and identify their service gaps.
- Hospitals should be encouraged to establish administrative policies and protocols regarding provision of language and communication services following laws, regulations and recommended guidelines.
- Hospitals should be encouraged to establish a process for collecting information on the patient's language needs at registration, storing this information in an electronic format and recording it in patient's chart, making appropriate language and interpreter services and technologies available to patients who need them and training the staff on use of the available technologies and services.
- Hospitals should be encouraged to obtain feedback from patients on their use of language/communication services as well as their perceived satisfaction with these services and their effectiveness.
- DHSS should work in collaboration with UMDNJ (and other organizations as deemed appropriate) to develop a standard training program where representatives from hospitals can participate and receive certification to serve as medical interpreters within a hospital or healthcare setting.
- Funding should be identified and provided to hospitals to encourage and, if appropriate, facilitate the establishment of regional collaboratives among hospitals with the objective being to share trained and certified interpreters among participating hospitals.
- New Jersey's Department of Human Services should ensure that it is securing federal Medicaid dollars to cover costs associated with interpreter services as they relate to the provision of healthcare.
- A bill should be drafted that ultimately will result in a statute requiring that health plans licensed in the state of New Jersey must provide reimbursement for interpreter services (be it for the deaf or those with LEP). Following passage of the law, HMO regulations should be amended accordingly.

- The New Jersey Department of Human Services, Office of Medicaid Managed Care, should incorporate language into their contracts with participating managed care organizations (MCOs) requiring the MCOs to negotiate a separate and distinct reimbursement for interpreter services provided to their members. This fee can not be rolled into a negotiated rate for a particular service. A unique billing code should be developed that applies to charges related to interpreter services provided in a hospital and/or healthcare setting.
- A Web site should be established in collaboration with DHSS, but housed on NJHA's Web site. The Web site will be devoted to the identification and availability of resources, services and programs that will support healthcare providers better serve their LEP patients. The priority will be making resources available to healthcare providers to prevent a duplication of effort and to provide resources in such a way that they can be customized to the unique needs of a healthcare setting.
- NJHA to offer educational program.