

STATEWIDE STANDARDS FOR HEALTH CARE**INTERPRETING**

2008 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Rebecca Chavez-Houck

Senate Sponsor: _____

LONG TITLE**General Description:**

This bill requires the Department of Health to evaluate the effectiveness of its health care interpreter services and report to the Legislature.

Highlighted Provisions:

This bill:

- ▶ establishes an advisory committee within the Department of Health;
- ▶ specifies the membership of the advisory committee;
- ▶ establishes the duties of the advisory committee; and
- ▶ requires the advisory committee to report to the legislative Health and Human

Services Interim Committee by October 15, 2008 with specific recommendations for:

- creating health care interpreter standards; and
- implementing effective outreach for health care interpreter services.

Monies Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:



28 **26-1-38**, Utah Code Annotated 1953

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30 *Be it enacted by the Legislature of the state of Utah:*

31 Section 1. Section **26-1-38** is enacted to read:

32 **26-1-38. Duty to evaluate health care interpreter services and to establish**
33 **standards for effective health care interpreter services.**

34 (1) For purposes of this section:

35 (a) "Health care" includes medical, surgical, hospital, and mental health care.

36 (b) "Person with limited English proficiency (LEP)" means an individual who:

37 (i) speaks a primary language other than English; and

38 (ii) cannot speak, read, write, or understand the English language at a level that permits
39 the person to effectively communicate with clinical or nonclinical staff of an entity that
40 provides health care or health care related services.

41 (c) "Qualified health care interpreter" means a person who:

42 (i) can provide a trans-language rendition of a spoken message in which the person
43 comprehends the source language and can speak comprehensively in the target language to
44 convey the meaning intended in the source language;

45 (ii) knows health and health-related terminology; and

46 (iii) can provide an accurate interpretation by choosing equivalent expressions that:

47 (A) convey the best matching and meaning to the source language; and

48 (B) capture, to the greatest possible extent, all nuances intended in the source message.

49 (2) In addition to the duties listed in Section 26-1-30, the department shall create an
50 advisory committee to conduct a two year evaluation and plan of action to:

51 (a) assess the effectiveness of current standards used by the department to provide
52 qualified health care interpreters for health care providers and recipients of health care services
53 in the state, with particular emphasis on the state Medicaid program and the Children's Health
54 Insurance Program; and

55 (b) determine how to:

56 (i) develop effective standards for qualified health care interpreters in the state;

57 (ii) enforce and encourage the appropriate use of qualified health care interpreters in
58 the state;

59 (iii) provide notice to persons with limited English proficiency of the availability of
60 qualified health care interpreters in the state; and

61 (iv) increase the use of qualified health care interpreters by the Department of
62 Workforce Services and the department when processing applications for the state Medicaid
63 program, and the Children's Health Insurance Program.

64 (3) The advisory committee:

65 (a) shall include members from:

66 (i) the department;

67 (ii) the Center for Multicultural Health;

68 (iii) the Utah Multicultural Health Network;

69 (iv) the Department of Workforce Services;

70 (v) the State Office of Ethnic Affairs;

71 (vi) the Ethnic Health Advisory Committee; and

72 (vii) other members appointed by the department; and

73 (b) shall consult the following before developing standards for qualified health care
74 interpreters:

75 (i) the National Council on Interpreting in Health Care;

76 (ii) the National Health Law Program; and

77 (iii) national standards and code of ethics for qualified health care interpreters.

78 (4) (a) The department shall report to the legislative Health and Human Services
79 Interim Committee no later than October 15, 2008 and November 1, 2009.

80 (b) The report required by October 15, 2008 shall include:

81 (i) the current standards used by the department and Workforce Services to provide
82 qualified health care interpreter services for the state Medicaid program, Children's Health
83 Insurance Program, and health care providers in the state;

84 (ii) current outreach programs used by the state to reach persons with limited English
85 proficiency when they apply for and receive health care services;

86 (iii) how the state policies and procedures compare with national standards for
87 qualified health care interpreter services; and

88 (iv) department recommendations to improve;

89 (A) qualified health care interpreter standards; and

- 90 (B) outreach efforts for qualified health care interpreter services.
91 (c) The report required before November 1, 2009 shall include:
92 (i) steps the department has taken, or will take to increase the effective use of qualified
93 health care interpreter services in the state Medicaid program, in the Children's Health
94 Insurance Program, and with health care providers in the state; and
95 (ii) a final cumulative analysis of the measurable effectiveness of the department's
96 qualified health care interpreter services in the state.
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Legislative Review Note
as of 2-4-08 4:52 PM

Office of Legislative Research and General Counsel

H.B. 428 - Statewide Standards for Health Care Interpreting

Fiscal Note

2008 General Session

State of Utah

State Impact

Enactment of this bill will require an estimated \$188,200 ongoing from the General Fund to pay salaries and current expenses associated with the committee and reporting requirements established by the bill.

	<u>FY 2008 Approp.</u>	<u>FY 2009 Approp.</u>	<u>FY 2010 Approp.</u>	<u>FY 2008 Revenue</u>	<u>FY 2009 Revenue</u>	<u>FY 2010 Revenue</u>
General Fund	\$0	\$188,200	\$188,200	\$0	\$0	\$0
Total	\$0	\$188,200	\$188,200	\$0	\$0	\$0

Individual, Business and/or Local Impact

Enactment of this bill likely will not result in direct, measurable costs and/or benefits for individuals, businesses, or local governments.