

SUBJECT Language & Technical Requirements for Informational Materials		CHAPTER 05	SECTION 03	SUBJECT 04
CHAPTER Clinical Practice Guidelines		SECTION Care Delivery		
WRITTEN BY Kelly VanWormer		REVIEWED BY		AUTHORIZED BY PIHP Board

I. APPLICATION:

- PIHP Board
 CMH Providers
 SUD Providers
 PIHP Staff
 CMH Subcontractors

II. POLICY STATEMENT:

It shall be the policy of Region 10 PIHP to accommodate all limited English proficiency and prevalent non-English languages within the PIHP’s service area, by ensuring all enrollment notices, informational materials, and instruction materials relating to service beneficiaries (and potential beneficiaries of specialty services) are written and communicated in a manner and format that may be easily understood.

III. DEFINITIONS: N/A

IV. STANDARDS:

- A. The PIHP and its provider network through a “gap analysis” of the service area, conducted not less than bi-annually, shall identify the prevalent non-English languages spoken by beneficiaries and potential beneficiaries.
- B. The PIHP and its provider network shall ensure its written information is made available in the prevalent non-English languages spoken in its service area.
- C. The PIHP and its provider network shall make “oral interpretation” services available free of charge to any non-English speaking applicant/service beneficiary.
- D. The PIHP and its provider network shall notify beneficiaries and potential beneficiaries:
 - 1. That oral interpretation is available for any language and written information is available in prevalent languages; and
 - 2. How to access specialty benefit plan services.
 - 3. That information is available in alternative formats, and how to access those formats.
- E. The PIHP and its network providers shall ensure that materials are:
 - 1. Written in easily understood language (4th grade reading level) and format;
 - 2. Available in alternative formats and in an appropriate manner that takes into consideration the special needs of those who, for example, are visually limited or have limited reading proficiency.

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- F. The PIHP and/or its network providers shall make the following information available for potential beneficiaries of specialty benefit plan(s) at the time of access into the service system, or upon request. For any active service beneficiary, the provider shall make all the above information available annually or upon request:
1. Basic features of managed care;
 2. PIHP and CMH/SUD Provider responsibilities for coordination of care;
 3. Information specific to each program operating in the beneficiary's service area;
 4. A summary of the following information:
 - a. Covered Benefits (i.e. Benefits that are available under the State Plan, and MDHHS Contracts);
 - b. Any covered benefit not available in the catchment area, or for which an off-panel provider may be procured;
 - c. Cost sharing (including deductibles and co-pays);
 - d. Service Area Description;
 - e. Local Network providers, including Names, locations, telephone numbers of, and non-English language spoken by current contracted network providers;
 - f. Any restrictions on the beneficiary's freedom of choice among network providers;
 - g. How transportation is provided, and under what conditions;
 - h. Any providers that are not accepting new patients;
 - i. Beneficiary rights and protections, including grievance and appeal procedures;
 - j. Procedures for obtaining benefits, including authorization requirements;
 - k. The extent to which, and how, beneficiaries may obtain benefits, from out-of-area providers;
 - l. The extent to which, and how, after-hours and emergency coverage's are provided, including:
 - i. What constitutes emergency medical condition, emergency services, and post-stabilization services;
 - ii. The fact that prior-authorization is not required for emergency services;
 - iii. The process and procedures for obtaining emergency services, including the use of the 800-telephone system or its local equivalent;
 - iv. The locations of emergency settings and other locations at which providers and hospitals may furnish emergency services, and post-stabilization services covered under the PIHP contract;
 - v. The fact that, subject to the provisions of this section, the beneficiary (or potential beneficiary) has the right to use any hospital or other setting for emergency specialty benefit care.
 5. Grievance, appeal and fair hearing procedures and timeframes, including the right to request an expedited review and the following information in English and prevalent non-English:
 - a. The right to grievance and appeal;
 - b. The right to a State Fair Hearing (Medicaid Only);
 - c. The method of obtaining a Hearing;

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- d. The rules that govern representation at a Hearing;
 - e. The right to file grievances and appeals;
 - f. The requirements and timeframes for filing a grievance or appeal;
 - g. The availability of obtaining assistance in filing a grievance or appeal;
 - h. The toll-free numbers that the beneficiary can use to file a grievance or appeal by phone;
 - i. The fact that, when requested by the beneficiary:
 - i. Benefits will continue if the beneficiary files a grievance, appeal or requests a State Hearing within the stated timeframes specified for filing;
 - ii. The beneficiary may be required to pay any deductibles or co-pays of services furnished while the appeal is pending, if the final decision is adverse to the beneficiary.
 - j. Any appeal rights the State chooses to make available to challenge the failure of the organization to cover a required service.
- G. The PIHP and its network providers shall ensure that all information booklets and educational materials are developed in such a manner that takes into consideration an individual's language proficiency, ethnicity, cultural differences, communication method, and physical limitations.
- H. The PIHP and its provider network shall create an atmosphere and service delivery system that ensures staff sensitivity to diversity, and recognition of the need for accommodation. This may require the availability of special communication accommodations, including alternative language options, and alternative communication means (video tapes; audio tapes; etc.).
- I. The PIHP and its provider network shall comply with the PIHP policy on Limited English Proficiency. Each CMH shall develop and implement a policy for its sub-network that ensures access by and accommodation of persons with limited-English proficiency.
- J. All PIHP network providers will use means to notify all consumers of their right to have services provided in a language they understand at no cost to themselves. This notice will be provided in the most prevalent languages and will be posted near the front reception area of all provider sites.
- V. PROCEDURES: N/A
- VI. EXHIBITS: N/A