

Part B Insider (Multispecialty) Coding Alert

Compliance: Don't Treat Non-English Speakers Like LEPers

Assess your patients' language needs and come up with a plan

Many physicians have trouble complying with LEP requirements, Minneapolis physician **Kevin Larsen** told a Congressional briefing Dec. 9 on behalf of the **American College of Physicians**.

Larsen usually must devote twice as much time to care for a non-English speaking patient, but he receives no extra reimbursement for these encounters. Also, research shows that physicians often order more expensive tests for limited English proficiency (LEP) patients. Hennepin County Medical Center, where Larsen works, has established a full-time staff of 40 interpreters to accommodate LEP patients.

Larsen outlined "best practices" that HCMC uses, including phone lines staffed by interpreters that any part of the health care system can access, language-specific multi-specialty clinics to organize care around interpreters, a city-wide "consortium" that shares language materials via the Internet to reduce costs, signs in multiple languages and language-specific videotapes.

There are two different federal laws governing Limited English Proficient (LEP) patients, according to the **Medical Group Management Association**. Title VI of the Civil Rights Act of 1964 says impediments to communication may be considered discrimination, and Title III of the Americans With Disabilities Act requires you to make accommodations to Americans with any type of disability.

Luckily, the **Department of Health and Human Services** put out a "revised LEP guidance" in August 2003 (www.usdoj.gov/crt/cor/lep/hhsrevisedlepguidance.html.) According to HHS, your practice is required to comply with LEP requirements if it accepts federal funds, such as Medicaid or clinical trials funds. But a physician office that merely bills Medicare Part B doesn't have to comply.

You're only required to take "reasonable steps to ensure meaningful access" to your care, HHS notes. This begins with an assessment of your particular circumstances, including the number or proportion of LEP patients you're likely to encounter, the frequency with which LEP patients come into contact with your program, the nature of your services and the resources available to your patients.

If you're having a hard time doing this assessment, you can call Medicaid or your local Medicare office to learn the demographics of your area, suggests consultant **David Levins** with Professional Billing **Inc.** in Montgomery, AL.