

Part B Insider (Multispecialty) Coding Alert

PART B MYTHBUSTER :Responsibility Is on Your Practice to Provide Sign Language Interpreter -- Free of Charge

In some cases -- but not always -- prolonged service codes may apply.

Myth: You can collect from Medicare for your translator services if you treat a hearing-impaired patient who requires a sign language interpreter.

Reality: You must provide an interpreter for your hearing-impaired patient, but you'll need to offer that service free of charge.

You may not bill the cost of interpreters to Medicare or to a patient, says **Vicki L. Moody, CPC, CPMA**, assistant compliance officer and privacy officer with State of Franklin Healthcare Associates in Johnson City, Tenn.

The Americans with Disabilities Act states, no individual shall be discriminated against on the basis of disability in the full and equal enjoyment of the goods, services, facilities, privileges, advantages, or accommodations of any place of public accommodation.

Under the Act, all health care providers (i.e., physicians, nurses, therapists, social workers, etc.) must provide a qualified sign language interpreter at no cost to the patient, Moody says. Some states have definitions and/or requirements for what they consider a qualified interpreter.

They may require the interpreter to be certified with a national organization or to have attended a special quality assurance screening program.

Someone who only has a general knowledge of finger spelling or basic sign language should not be considered a qualified interpreter.

Medicare considers interpretive services incidental to the rendered service, such as an office visit.

Pitfall: Some practices report T1013 (Sign language or oral interpretive services, per 15 minutes) for these services, but this code is not valid for Medicare, according to the 2009 Medicare Physician Fee Schedule, which assigns the code status I (Not valid for Medicare purposes).

The Vermont Medical Society offers this tip in an FAQ on its Web site: The only way to account for this extra time is to submit one of the prolonged services codes (99354-99355), which requires that the face-to-face time spent with the patient extend at least 30 minutes beyond the typical time associated with the appropriate CPT services. Note that Medicare and most other payers will not pay for the services of the translator even if they are willing to pay for the extra visit time associated with using a translator.

Keep interpreter in mind: Hearing-impaired patients have a right to prompt medical care, Moody says. Therefore, you should have an interpreter readily available if you are aware of the patient's need for an interpreter. You also have the responsibility to make sure all personnel are aware of the patient's need. Patients should not have to inform each employee they encounter.

Limited English-Proficient: You may also be required to provide translators for your non-English-speaking patients, based on Title VI of the Civil Rights Act. Title VI, which forbids discrimination by any program that receives money from the federal government, requires that health and social service providers give their limited-English-proficient (LEP) patients meaningful access to their services, which may entail offering translation services. These services must be

provided to the patients free of charge, notes a Q&A on the American Academy of Family Physicians Web site (www.aafp.org/fpm/20010900/ask.html).

To determine your obligation to provide English translation services, visit the HHS Web site at www.hhs.gov/ocr/civilrights/resources/specialtopics/lep/policyguidancedocument.html.

Some practices may try to scrimp on translation services, using rationale such as, our receptionist knows a little bit of a foreign language from high school. But if you do provide translation services, make sure you're providing quality translations. If you do take on that obligation, you have an obligation to do it properly, says **Michael F. Schaff, Esq.**, with Wilentz, Goldman, and Spitzer in Woodbridge, N.J.

Get help: The AMA offers information on interpreter services in its brochure Office Guide to Communicating With Limited English Proficient Patients, available at

www.ama-assn.org/ama1/pub/upload/mm/433/lep_booklet.pdf.