



Requesting Sign Language Interpreters

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Provider Responsibility

- According to [Title VI of the Civil Rights Acts of 1964](#) and the [Americans with Disabilities Act \(ADA\)](#), providers are required to assure language access to Deaf, DeafBlind, and Hard of Hearing clients.
- The Health Care Authority (HCA) supports you in this effort by offering interpreter services through the Sign Language (SL) master contract. If HCA's interpreter services is unable to provide an interpreter via the SL master contract, providers are still responsible to provide an interpreter at their expense.

Sign Language Interpreter Request Process

- Effective January 01, 2020, HCA is utilizing the SL master contract in an effort to increase access to care for our Deaf, DeafBlind, and hard of hearing clients and improve fill rates.
- Requestors must completely fill out the sign language request form [Master Interpreter Request form for Medical](#) and submit their request through HCA's Prior Authorization (PA) system via ProviderOne.

Prior Authorization (PA)

- Receives, schedules, and responds to your requests for Face to Face SL interpreter services
- Screens requests for eligibility (provider, client, service type)
 - Verified at the time of request
- Streamlines the process for interpreter billing and payment

Once you access the On-line Prior Authorization Submission, you will select **530-PA- Sign Language** for the Organization Unit.

*Organization Unit:	—SELECT—
	501 - Dental Services
	502 - Durable Medical Equipment Services
	504 - Home Health Services
	505 - Hospice services
	506 - Inpatient Hospital Services
	508 - Medical services
	509 - Medical Nutrition services
	511 - Outpt Proc / Diag Services
	513 - Physical Medicine & Rehabilitation Services
	514 - ADSA Org Unit
	516 - DSHS- Miscellaneous Service Org
	518 - PA LTAC
	519 - PA Respiratory
	521 - PA Maternity Support and Infant Case Management
	524 - PA Concurrent Care
	525 - PA - ABA Therapy
	526 - PA - CRT
	527 - Chemically-Using Pregnant Women Program
	528 - PA - ERSO - Inpatient MH
	529 - PA - MH Inpatient St Contract
	530 - PA Sign Language

ProviderOne Enrollment

If you do not have current access to ProviderOne, you will need to complete the application online on our website at www.hca.wa.gov/billers-providers/apple-health-medicaid-providers/enroll-provider.

- If you have questions about Provider Enrollment, you may:
 - Call 1-800-562-3022 Ext 16137 (closed on Wednesdays)
 - Email providerenrollment@hca.wa.gov

Once you are setup in ProviderOne, you will be able to:

- Submit a PA to request a SL interpreter
- Check the status of your request
- Check client eligibility
- Receive confirmation when an interpreter has been assigned

Eligibility for Covered Sign Language Interpreter Services

Apple Health Medicaid Appointments

- Current Medicaid eligible
- Services covered in the clients' Medicaid Service benefit package
- Provided by an HCA enrolled Medicaid Provider
 - Must have current access to ProviderOne
 - For questions, contact 1-800-562-3022 Ext 16137

Interpreter services not covered by HCA:

- Administrative Services
 - e.g. Scheduling appointments, paperwork
- Inpatient hospital services (e.g. labor and delivery)
- Nursing facility services
- Public health agencies and public health hospitals (certified public expenditures)

How do I get reimbursed?

If your Sign Language request is unable to be filled at any time, you may complete the following to request reimbursement:

1. Email INTERPRETERSVCS@hca.wa.gov to cancel your request
 1. Include the reason for your cancellation
 1. E.g. could not wait, specific interpreter not available, etc.
 2. Include your PA Reference number
2. Secure your own interpreter through a private agency
3. Pay the private agency and receive a receipt/invoice
 1. Only completed appointments will be eligible for reimbursement
4. Upload the following documents to your [Prior Authorization \(PA\)](#) claim:
 1. Copy of paid invoice
 2. Copies of paid mileage, parking, ferry and toll fees
5. Submit your claim via ProviderOne PA system

Note: HCA will not issue reimbursements that exceed the SL rates determined by the [ODHH website](#). You are responsible for any remaining balance.

Resources

HCA IS Program

Contact

- INTERPRETERSVC@hca.wa.gov

Additional Information

- www.hca.wa.gov/isproviders
- www.hca.wa.gov/sli-transition

Additional Resources

Prior Authorization

- www.hca.wa.gov/billers-providers-partners/prior-authorization-claims-and-billing
- 1-800-562-3022

ProviderOne

- www.hca.wa.gov/billers-providers-partners/apple-health-medicaid-providers/enroll-provider
- 1-800-562-3022 Ext 16137

ODHH

<https://www.dshs.wa.gov/altsa/sign-language-interpreter-contractors>

- 1-800-422-3263