

## Requesting Interpreter Services

At Nebraska Total Care, we value everything you do to deliver quality care to our members, your patients, and to ensure they have a positive health care experience. That's why we strive to see that members who need language services have adequate communication support. We have resources available to provide assistance when you identify members who have potential cultural or language barriers. These include:

- Interpreter services for languages other than English or members who have limited English proficiency
- Sign language interpreter services for the hearing impaired
- Telephone system technology (TTY line) for the hearing impaired

Providers can access communication support for medical appointments and encounters as follows:

### **Non-urgent:**

- If a member needs a **sign language or foreign language interpreter** for a medical appointment, providers have three (3) options for requesting these services.
  - Providers can contact our Customer Service Department who will assist in arranging for this service through a locally contracted vendor. Customer Service can be reached at 1-844-385-2192 (TTY: 711).
  - Providers can request interpreter services by completing and returning the translation request form below. Please request interpreter services at **least 5 days in advance** by completing the Interpreter Request Form and emailing it to [InterpreterRequests@centene.com](mailto:InterpreterRequests@centene.com).
- Live, in-person translation is preferred to telephonic translation in non-urgent cases. Telephonic services will only be used when an interpreter for the required language cannot be found in or near the particular area.

### **Urgent/Emergent :**

- If a member needs **language translation** at the time of an urgent or emergent encounter and the provider does not have bilingual staff, the provider should contact our Customer Service Department. The Customer Service agent will work to patch in a translator for telephonic translation. Customer Service can be reached at 1-844-385-2192 (TTY: 711).

As a general rule, Nebraska Total Care discourages the use of patients' family members, particularly minor children, as translators. Family members may not be capable of translating medical terminology. In addition, patients may hesitate to speak candidly about their health problems in the presence of young family members.

Nebraska Total Care pays all costs of commercial language services required by its members, including services rendered in a provider's office or facility, as long as the translator is not on the staff of the facility.

This includes the below lines of products:

- Medicaid
- Medicare
- Marketplace

## **Electronic Media for the Hearing Impaired**

Members have access to the TTY line for hearing impaired services. Centene's Customer Service Department is responsible for any necessary follow-up calls to the member. The toll-free TTY number can be found on the member's identification card.

### Type of Request

- New Request
- Modification to Initial Appointment Request
- Cancellation

### \*Appointment Type:

- First Available
- Face to Face / In person Interpretation
- Pre-Scheduled over the phone Interpretation
- Virtual / Video Interpretation

\*If video is preferred, which platforms does the provider use:

\*If video is preferred, please provide Meeting URL or Access Link:

### \*If the member's preference is unavailable can any of the following be provided?

- Face to Face / In person Interpretation
- Pre-Scheduled over the phone Interpretation
- Virtual / Video Interpretation

\*Which platforms does the provider use:

### \*Type of Interpreter

- American Sign Language
  - Tactile
  - PSE (Pidgin Signed English)
  - Signed English
  - Trilingual

### Type of Interpreter

- Foreign Language
  - Spanish
  - Arabic
  - French
  - Other  Dialect

### Preference of Interpreter:

- Female:  Preferred  Required (may limit availability of interpreters)
- Male:  Preferred  Required (may limit availability of interpreters)
- No Preference
- Other:

### Member Needing Interpretation Services:

\*Name:  \* Member ID:

## INITIAL Appointment Details:

\*Appointment Date:

\*Appointment Time:

\*Estimated Duration (120 min is minimum – Do not lessen)

Are there recurring appointments? Please list all dates & Times:

\*Appointment Type (e.g., annual physical, physical therapy, surgery):

If the appointment is for surgery, is the interpreter needed for an extended period?

Yes

No

Duration:

\*Does this appointment have recurring visits for the same member & provider but different dates?

No, this is the only appointment at this time

Yes, there are multiple visits for different dates

\*List dates needing Onsite Interpretation visits

\*Facility Name (Name of Hospital/Clinic):

\*Appointment Street Address:

\*Appointment Building/Suite/Room/Floor:

\*City/State/Zip:

Provider Name (Name of doctor/therapist):

Provider's NPI:

On-site Contact Name:

On-site Phone:

Please email the completed form to [InterpreterRequests@centene.com](mailto:InterpreterRequests@centene.com).

The request should be made at least 5 business days prior to the member needing an interpreter. Requests cannot be made more than 30 days in advance of the scheduled appointment date. *We cannot guarantee an interpreter if the request is received less than 72 hours before the appointment.*

Quality care is a team effort. Thank you for playing a starring role!