

Subject Spoken language health care interpreter registry

Authors Morrison and others

Analyst Elisabeth Klarqvist

Date February 28, 2020

Overview

This bill establishes a spoken language health care interpreter registry administered by the commissioner of health.

Summary

Section	Description
---------	-------------

- | | |
|---|--|
| 1 | <p>Definitions.</p> <p>Adds § 146C.01. Defines terms for the spoken language health care interpreter registry in a new chapter 146C: advisory council, certified interpreter, code of ethics, commissioner, common languages, core interpreter, interpreting standards of practice, proficient interpreter, registry, remote interpretation, spoken language health care interpreter or interpreter, and spoken language interpreting services.</p> |
| 2 | <p>Registry.</p> <p>Adds § 146C.02. Establishes a spoken language health care interpreter registry, and specifies duties of the commissioner of health to maintain the registry.</p> <p>Subd. 1. Establishment. Paragraph (a) directs the commissioner to establish a registry for spoken language health care interpreters by July 1, 2021, and establishes eligibility requirements for persons to be listed on the registry.</p> <p>Paragraph (b) requires an individual who chooses to be listed on the registry to submit an application, and lists what the application must include. Also requires registry applicants to submit evidence of meeting the requirements to be a core interpreter, trained interpreter or certified interpreter.</p> <p>Paragraph (c) specifies what the commissioner must do upon receipt of an application, and requires the commissioner to notify an applicant of action taken on the application and grounds on which the application is denied.</p> <p>Paragraph (d) allows an applicant whose application is denied to request reconsideration.</p> |

Section	Description
---------	-------------

Paragraph (e) provides that if an application is denied, an applicant may reapply for the same category or for another category.

Paragraph (f) provides that an applicant who qualifies for different categories for different languages is only required to submit one application and one fee.

Paragraph (g) allows the commissioner to request additional information as necessary to determine qualifications or manage the registry.

Subd. 2. Requirements for core interpreter. To be listed on the registry as a core interpreter, requires an applicant to either: (1) pass a written or oral exam on interpreter ethics, standards of practice, and basic medical terminology; or (2) provide written proof of successfully completing a medical interpreter training program.

Subd. 3. Requirements for proficient interpreter. To be listed on the registry as a proficient interpreter, requires an applicant to complete a medical interpreter training program at least 40 hours in duration and show oral proficiency in English and the non-English language for which the applicant will be listed on the registry.

Subd. 4. Requirements for certified interpreter. To be listed on the registry as a certified interpreter, requires an applicant to have full or partial certification by one of the listed organizations or meet specified oral proficiency requirements for trained interpreters.

Subd. 5. Registry website. Requires the commissioner to maintain the registry on the department's website, and lists information that must also be included on the website.

Subd. 6. Change of name and address. Requires interpreters listed in the registry to notify the commissioner of health of any change in name or contact information within 30 days, and provides that information sent to the address or email address on file with the commissioner shall be considered as having been received by the interpreter.

Subd. 7. Data. Provides that data on applicants and interpreters held by the commissioner is classified under section 13.41.

3	Renewal.
---	-----------------

Adds § 146C.03. Establishes a process for interpreters to renew listing on the registry.

Subd. 1. Registry period. Provides that a registry listing is valid for one year, and lists what must be submitted to renew inclusion on the registry.

Section	Description
---------	-------------

Subd. 2. Notice. Establishes timelines for the commissioner to send out renewal notices and lists what the renewal notices must include. Requires an application for renewal to be received by the commissioner or postmarked at least 30 days before the date on which the registry listing is set to expire.

Subd. 3. Late fee. Requires payment of a late fee for renewal applications submitted late.

Subd. 4. Lapse in renewal. Requires an interpreter whose registry listing has been expired for one year or more, to submit a new application instead of an application for renewal.

4 **Disciplinary actions; oversight of complaints.**

Adds § 146C.04. Establishes grounds for disciplinary action against interpreters on the registry, and lists disciplinary and corrective actions that may be imposed.

Subd. 1. Prohibited conduct. Lists conduct that constitutes grounds for disciplinary or corrective action.

Subd. 2. Complaints. Directs the commissioner to establish procedures for receiving and investigating complaints and imposing disciplinary or corrective action.

Subd. 3. Discovery. Authorizes the commissioner to issue subpoenas and administer oaths or affirmations. Classifies information on individual medical records obtained as part of a disciplinary action, as health data.

Subd. 4. Hearings. Establishes notice and service requirements for hearings, if the commissioner proposes to discipline an interpreter.

Subd. 5. Disciplinary action. Lists disciplinary actions the commissioner may take against an interpreter listed on the registry.

Subd. 6. Reinstatement requirements after disciplinary action. Allows an interpreter who has been temporarily suspended or permanently removed from the registry to request reinstatement. Also allows interpreters with limitations or conditions on their practice while remaining on the registry to request reduction or removal of the limitation or condition.

5 **Continuing education.**

Adds § 146C.05. Establishes requirements for continuing education.

Subd. 1. Course approval. Requires all continuing education courses and training to be approved by the advisory council. Requires interpreters listed on the

Section	Description
	<p>registry to complete three hours of continuing education for each one-year period. Provides for proration of continuing education hours.</p> <p>Subd. 2. Continuing education verification. Requires interpreters to submit a continuing education report as part of their renewal application, to verify satisfaction of the continuing education requirements. Lists what the form must include.</p> <p>Subd. 3. Audit. Allows the commissioner or advisory council to audit a percentage of continuing education reports.</p>
6	<p>Spoken language health care interpreter advisory council. Adds § 146C.06. Establishes a spoken language health care interpreter advisory council of 14 members. Lists membership for the advisory council and council duties. Provides that the advisory council is organized and administered under section 15.059.</p>
7	<p>Fees. Adds § 146C.07. Establishes initial, renewal, and late fees for interpreters listed on the registry. Authorizes the commissioner to charge an examination fee for retakes of the exam. Provides that fees are nonrefundable and shall be deposited in the state government special revenue fund. Provides that fees shall not be prorated.</p>
8	<p>Access to medical services. Amends § 256B.0625, subd. 18a. Provides that beginning July 1, 2021, coverage under medical assistance for spoken language health care interpreter services will only be provided if the interpreter used by the enrolled health care provider is listed on the registry.</p>
9	<p>Initial spoken language health care interpreter advisory council meeting. Requires the commissioner of health to convene the first meeting of the advisory council by December 1, 2020.</p>
10	<p>Recommendations for the spoken language health care interpreter registry fees; stratified medical assistance reimbursement system for spoken language health care interpreters. Subd. 1. Registry fee recommendations. Directs the commissioner of health, in consultation with the advisory council, to review the fees and make recommendations on whether the fees are established at an appropriate level. Allows the commissioner to submit any necessary changes to the fees to the legislative committees with jurisdiction over health and human services policy and finance by January 15, 2022.</p>

Section **Description**

Subd. 2. Stratified medical assistance reimbursement system. Requires the commissioner of human services, in consultation with the advisory council and stakeholder representatives, to study and make recommendations for a stratified reimbursement system for public health care programs for spoken language health care interpreters.

11 Appropriations.

Makes blank appropriations in fiscal year 2021 to the commissioner of health to administer the registry, provide financial assistance to help interpreters meet testing requirements, and convene a meeting to identify ongoing sources of financial assistance to help interpreters meet training and testing requirements. Makes a blank appropriation in fiscal year 2021 to the commissioner of human services to study and submit a proposal for a stratified medical assistance reimbursement system for spoken language health care interpreters.

12 Repealer.

Repeals section 144.058, effective July 1, 2022. This section establishes a voluntary statewide roster for spoken language health care interpreters.



**MN HOUSE
RESEARCH**

Minnesota House Research Department provides nonpartisan legislative, legal, and information services to the Minnesota House of Representatives. This document can be made available in alternative formats.

www.house.mn/hrd | 651-296-6753 | 600 State Office Building | St. Paul, MN 55155