

1 Language Access Laws

Table 1: Language Access Laws

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Alabama	AL Admin Code r.560-X-37-0.1(6)(e)(f)(g)	Regarding Medicaid Managed Care Programs, the state must establish a methodology for identifying the prevalent non-English language spoken by a significant number of potential enrollees in the state. The state and each managed care entity must make available written information in the prevalent non-English languages. The state must notify enrollees and potential enrollees and require each managed care entity to notify its enrollees that oral interpretation is available for any language and written information is available in prevalent languages.	2003	AL Admin Code r.560-X-37-0.1(6)(e)(f)(g)
	AL Admin Code r.560-X-37-0.2(3)(t)	Primary Medical Providers in PCCMs will make oral interpretation services available free of charge to each potential enrollee and enrollee. This requirement applies to all non-English languages	2003	
Arkansas	016-20-001 Ark Code Regs 16070	Applications for medical services must be available in both English and Spanish at DJS county offices, local health units, or by mail, if requested.	2004	016-20-001 Ark Code Regs 16070
California	CA Gov't Code §§7290-7299.8	Dymally-Alatorre Bilingual Services Act	1973 ^[1]	CA Gov't Code §§7290-7299.8
	Cal Welf & Inst Code §14067(d)(2)(C)(i)	The DHS, in conjunction with the Managed Risk Medical Insurance Board, must develop and conduct a community outreach and education campaign to help families learn about and apply for Medicaid and the Healthy Families Program.	1999	Cal Welf & Inst Code §14067(d)(2)(C)(i)
	Cal Welf & Inst Code §18925(e)	The county welfare department shall develop a notice, written in culturally and linguistically appropriate language and at an appropriate literacy level, informing individuals who reside in food stamp households who are not enrolled in Medicaid or Healthy Families that they may be entitled to receive benefits under Medicaid or Healthy Families	2001	Cal Welf & Inst Code §18925(e)
	Cal Ins Code §12693.29(b)	The State DHS in conjunction with the board shall conduct a community outreach and education campaign in accordance with Section 14067 of the Welf. & Inst. Code to assist in notifying families of the availability of health coverage for their children	1997	Cal Ins Code §12693.29(b)

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^[1]In a 1999 audit, it was shown that the DHS does a poor job of complying with the Dymally-Alatorre Bilingual Services Act in the sense that the department failed to periodically assess its bilingual services; however, the audit noted that the DHS did have certified and non-certified bilingual staff, translated documents, and contracted interpreters

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Colorado	Colo Rev Stat 10-16-704(9)(e)	Beginning Jan 1, 1998, a carrier shall maintain and make available upon request... an access plan for each managed care network. The carrier's efforts to address the needs of covered persons with limited English proficiency and illiteracy, with diverse cultural and ethnic backgrounds, and with physical and mental disabilities	1998 ^[2]	Colo Rev Stat 10-16-704(9)(e)
D.C.	D.C. Stat §2-1931-1935	Language Access Act of 2004: Any District government agency, department, or program that furnishes information or renders services, programs, or activities directly to the public or contracts with other entities, either directly or indirectly, to conduct programs, services, or activities shall provide oral language services to a person with limited or no-English proficiency who seeks to access or participate in the services, programs, or activities offered by the covered entity. It shall determine annually what types of oral language services are needed and shall hire the necessary bilingual personnel into existing budgeted vacant public contact positions.	2004	D.C. Stat §2-1935
Hawai'i	Haw Rev Stat Ann §371-33	Each state agency and all covered entities shall take reasonable steps to ensure meaningful access to services, programs, and activities by limited English proficient persons, which will be determined by a totality of circumstances.	2006	HRS §321C-3
Illinois	305 Ill Comp Stat 5/5-19(g)(3)	With regards to the Healthy Kids Program, the Illinois Dept shall utilize accepted methods for informing persons who... cannot understand the English language, including but not limited to public services announcements and advertisements in the foreign language media of radio, television and newspapers	1992	305 Ill Comp Stat 5/5-19(g)(3)
	210 Ill Comp Stat 87/15	To ensure access to health care information and services for limited-English-speaking or non-English-speaking residents. . .	2007	210 Ill Comp Stat 87/15
Indiana	Ind Code Ann §27-13-36-10	Each health maintenance organization shall demonstrate to the commissioner that the health maintenance organization has developed an access plan to meet the needs of the health maintenance organization's enrollees, including... enrollees from major population groups who speak a primary language other than English	1998 ^[3]	Ind Code Ann 27-13-36-10

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^[2] There is no indication that carriers had to address the needs of covered persons, merely that the plan would need to include the carrier's efforts to address to needs; in other words, the plan could include that limited to no efforts were being made to address the needs of covered persons

^[3] Uncertain whether Medicaid is supplied through HMOs. There is some evidence that Indiana's Medicaid is supplied primarily through HMOs (Hoosier Healthwise). Considered treated after this date.

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Iowa	Iowa Admin Code r.191-74.4(3)	The employer shall contact a health insurance agent, health insurance carrier, or other health care organization which agrees with the employer to provide information to the eligible employee about health care or health insurance and possible purchase or health insurance. In the event that an eligible employee cannot read or understand English, the employer shall offer assistance to the eligible employee in understanding the written referral	1995 ^[4]	Iow Admin Code r.191-74.4(3)
	Iowa Admin Code r.441.86.15(6)(c)(2)	All Medicaid managed care plan literature and brochures shall be available in English and any other language when enrollment in the plan by enrollees who speak the same non-English language equals or exceeds 10 percent of all enrollees in the plan and shall be made available to the third-party administrator for distribution.	1999	
Kentucky	907 Ky Admin Regs 1:610(2)(6)	For Medicaid applications, interpreter services shall be provided for persons who do not speak English	1995	907 KAR 20:015(2)(5)
	907 Ky Admin Regs 1:705(17)(5)	For Medicaid managed care, managed care organizations and subcontractors must prepare and distribute marketing materials which factually represent the partnership and which shall be available in appropriate foreign languages if more than 10 of the members speak a particular language	1997	907 KAR 17:010(6)(3)(a)
Maine ^[5]	Code Me. R. §02-031-850(7)(a)(5)	A carrier's application for approval of a managed care plan, application for an HMO certificate of authority, or application for a PPA registration shall include an access plan which must include a description of the carrier's strategy to identify and address language and literacy barriers to accessing needed services		
Maryland	Md Code Regs 10.09.64.06(K)(1), 10.09.66.01(A)(2), 10.09.62.01(B)(190)	For Medicaid managed care, the managed care plan must document access provision to address the needs of enrollees who do not speak English and provide all documents in enrollee's native language for enrollees who are members of a substantial minority (ethnic or linguistic group that comprises 5% or more of the Medicaid population in the county to be served)	1997 ^[6]	Md Code Regs 10.09.64.06(K)(1), 10.09.66.01(A)(2), 10.09.62.01(B)(190)
	Md Code Ann, State Gov't §10-1101 - §10-1105	Equal access to public services for individuals with limited English proficiency	2003 ^[7]	Md Code Ann, State Gov't §10-1101 - §10-1105

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^[4] Unsure about interaction of IAC r.191.74.4(3) and public health insurance; did employers get involved with public health insurance? This date is ignored for this analysis

^[5] There is no indication that carriers had to address the needs of covered persons, merely that the plan would need to include the carrier's efforts to address to needs; in other words, the plan could include that limited to no efforts were being made to address the needs of covered persons. Contacted the Maine State Law and Legislative Reference Library, unable to trace history.

^[6] There is no indication that carriers had to address the needs of covered persons, merely that the plan would need to include the carrier's efforts to address to needs; in other words, the plan could include that limited to no efforts were being made to address the needs of covered persons

^[7] Different implementation dates for different departments; Dept. of Health and Mental Hygiene has July 1, 2003 implementation date

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Massachusetts	130 Mass Code Regs 515.001, 515.007(1)	The Medicaid agency will inform applicants and members of the availability of interpreter services. Unless the applicant or member chooses to provide his or her own interpreter services, Medicaid will provide either telephonic or other interpreter services whenever the applicant or member who is seeking assistance has limited English proficiency and requests interpreter services; or the agency determines such services are necessary.	1997	
	211 Mass Code Regs 52.13(3)(p)	Insurance carriers must deliver, upon enrollment, evidence of coverage which includes a statement detailing what interpreter and interpretation services are available to assist insureds, including that the carrier will provide, upon request, interpreter and translation services related to administrative procedures.	2006	
Minnesota	Min Stat §15.441	Every state agency that is directly involved in furnishing information or rendering services to the public and that serves a substantial number of non-English-speaking people shall employ enough qualified bilingual persons in public contact positions, or enough interpreters to assist those in these position, to ensure provision of information and services int he language spoken by a substantial number of non-English-speaking people	1985	Min Stat §15.441
Mississippi ^[8]	13-000-003 Miss Code R §6.4(b)	HMO must maintain adequate staffing including appropriate foreign language interpreters and member materials printed in each language spoken by 5% or more of the Members in each service area		Miss Admin Code 23-1-9:6.4(b)
	13-000-023 Miss Code R §2002-04	Limited English Proficiency Plan for Medicaid includes information on forms, signage, interpreters, language line services, outreach, and other issues related to services for LEP individuals		Miss Admin Code 23-101:1.3(B)(4), 1.4
Montana	Mont Code Ann §33-36-201(6)(d)	An access plan for each managed care plan offered in the state must describe or contain the health carrier's efforts to address the needs of LEP persons	1997 ^[9]	Mont Code Ann §33-36-201(6)(d)
	Mont Admin R 37.108.207(1)(d), 357.108.236(1)a()	Managed care plans' access plan must include the policy to address the needs of enrollees with limited English proficiency and/or illiteracy and those with diverse cultural and ethnic backgrounds to insure that these characteristics do not pose barriers to gaining access to services	1999	Mont Admin R 37.108.207(1)(d), 357.108.236(1)a()

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^[8]Uncertain whether Medicaid is supplied through HMOs. Organization of Mississippi Administrative Code overhauled in 2005, nearly impossible to track history. Does not appear that HMO is used by all Medicaid recipients. According to Mississippi Secretary of State, numbering for codes changed in 2005 and no records before 2005; cannot easily track versions between 2005-present

^[9]There is no indication that carriers had to address the needs of covered persons, merely that the plan would need to include the carrier's efforts to address to needs; in other words, the plan could include that limited to no efforts were being made to address the needs of covered persons

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Nebraska ^[10]	482 Neb Admin Code §§3-001, 3-002(1), (3), 3-003(k)(5), 3-003.01, 3-005	Enrollment brokers for Medicaid managed care shall provide access to translation and interpreter services throughout the enrollment process and including outreach		482 Neb Admin Code §§3-001, 3-002(2), 3-005(4)
New Jersey	NJ Stat Ann §34:9A-7.2	The Commissioner of the Department of Labor and Industry shall provide for and establish a permanent staff of certified Spanish language interpreters and other personnel as necessary to aid and assist seasonal workers in interpreting language in connection with matters involving any Federal, State, county, or local governmental agency and shall maintain a roster of certified Spanish language interpreters	1971 ^[11]	NJ Stat Ann §34:9A-7.2
	NJ Admin Code tit 10 §46D-2.1(k)	Medicaid eligibility written material shall be provided in the individual's primary language as needed to the extent practicable and in accord with the guidance of language access provided by the US DHHS	2003	NJ Admin Code tit 10 §46D-2.1(k)
	NJ Admin Code tit 10, §69-1.4(c)	Medicaid shall have information, applications and staff agency personnel available to assist non-English speaking applicants for AFDC-related Medicaid income maintenance. Minority program materials in languages other than Spanish may be prepared based on knowledge of the population served.	2001	NJ Admin Code tit 10, §69-1.4(c)
	NJ Admin Code tit 10, §90-1.7(f)	All recipients of Federal financial assistance, such any public or private individual in health or social services, must ensure that LEP persons are given meaningful opportunities to participate in their programs, services and benefits. Where language differences prevent meaningful access on the basis of national origin, the OCR Guidance requires that recipient agencies provide oral and written language assistance at no cost to the LEP person.	2003	NJ Admin Code tit 10, §90-1.7(f)

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^[10]Law only applies to enrollment brokers; it does not appear that all Medicaid is distributed via enrollment brokers. E-mailed Nebraska Secretary of State, no way to track history.

^[11]Unsure of this law's interaction with public health insurance. Spanish interpreters for seasonal workers could only apply to a very small population, plus adults must be legal residents to receive benefits, of which seasonal workers are most likely not. This date is ignored for the purpose of this analysis.

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
New Mexico	NM Stat Ann §59A-57-4(B)(3)(e)	A managed health care plan shall insure that the plan, through provider selection, provider education, the provision of additional resources or other means, reasonably addresses the cultural and linguistic diversity of its enrollee population.	1998	NM Stat Ann §59A-57-4(B)(3)(e)
	NM Code R §8.305.12.10(C)	The Medicaid MCO/SE shall have available reasonable assistance in completing forms and taking other procedural steps. This includes, but is not limited to, providing interpreter services and toll-free numbers that have adequate interpreter capability.	1998	repealed 2014
	NM Code R §13.10.13.29	The Managed Health Care Plan (MHCP) must ensure that information and services are available in languages other than English and that services area provided in a manner that takes into account cultural aspects of the enrollee population. Each MHCP shall develop, implement, and maintain a plan that reasonably addresses the cultural and linguistic diversity of its enrollee population.	1998	repealed 2014; §13.10.22.11
New York	NY Soc Serv Law §369-ee(3)(d)(iv)	Family health insurance plans participating in Family Health Plus program must implement procedures to communicate appropriately with participants who have difficulty communicating in English.	2000	
	NY Comp Code R & Regs tit 10, §732-2.6(e)(10)	Preferred Provider Organization handbooks must include a description of how the PPO addresses the needs of non-English speaking claimants.	1997	
	NY Comp Code R & Regs tit 18, §360-10.8(f)	A Medicaid managed care plan (MCP) must demonstrate that recipients who are eligible to participate in an MCP will be fully informed of how an MCP provides services, and provide enough information, in a form which is reasonably understandable to persons of the varying cultural backgrounds represented in the Medicaid recipient population, to assure that such recipients can make informed choices of managed care providers and primary care providers.	1989	
North Carolina	10A NC Admin Code 48B.0401(b)(6)	The local health department shall assure that information disseminated reflects the cultural and linguistic character of the local population as required by Title VI of the Civil Rights Act.	2006	10A NC Admin Code 48B.0401(b)(6)
Ohio ^[12]	Ohio Admin Code §5101:1-2-01(J)(3), 1-2-10(B)(1)(d)	During application and reapplication for Medicaid, an interpreter must be provided at no cost to LEP individuals.		Ohio Admin Code §5101:1-2-01(J)(2), 1-2-10(C)(1)(d)

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^[12] According to Ohio State University Law Library reference desk, no way to digitally look for changes in law at this time.

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Oklahoma ^[13]	Okla Admin Code §340:1-11-10(a), (c)(1)	The Department provides, at no charge, interpreter services for DHS clients, applicants, and employees with limited English proficiency to overcome language barriers and provide equal access and equal opportunity to participate in DHS services and employment. In areas where the client population served by a program is 5% or more non-English speaking, a formalized procedure for bilingual services and literature in the respective language must be provided.		
Oregon ^[14]	Or Rev Stat §743.804 (5)(o)	All insurers offering a health benefit plan must furnish to all enrollees either directly or, in the case of a group policy, to the employer or other policyholder for distribution to enrollees written general information including description of any assistance provided to non-English-speaking enrollees.		
	Or Admin R 410-141-0220(1)(b)(A), (7)(a-c)	Medicaid prepaid health plans (PHPs) must develop an access plan that identifies populations in need of interpreter services. Plans must also have written policies to communicate with and provide care to Medicaid recipients where no adult communicates in English and provide or ensure the provision of qualified interpreter services for medical, mental health, or dental visits, including home health.		
	Or Admin R 410-141-0300(3)(b)(I)	Information in the Medicaid PHP member handbook must include information on how to access interpreter services.		
	Or Admin R 410-141-0320(2)(w)	Medicaid PHP members have the right to receive interpreter services as defined in OAR 410-141-0220.		
Tennessee	Tenn Comp R & Regs 1200-13-13-.02 (6)(a)(1)(iii), (6)(a)(2)(iv), (7)(b)(3), (7)(b)(4), (7)(c)(4)	LEP Medicaid enrollees will have the opportunity to request interpretation assistance for responding to the certain requests and notices. A “good cause” extension after date of termination is available for certain enrollees, including those with limited English proficiency. LEP enrollees will have the opportunity to request translation assistance for their appeal.	2005 ^[15]	Tenn Comp R & Regs 1200-13-13-.02 (6)(b)(3), (7)(e), (8)(b)(3), (8)(c)(4)
Texas	Tex Health & Safety Code Ann §62.103(c)	Applications for Child Health Plan shall, to the extent possible, be made available in languages other than English.	1999	Tex Health & Safety Code Ann §62.103(c)

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^[13] Contacted University of Oklahoma Law Library, unable to find date of enactment.

^[14] According to University of Oregon Law Library, need to visit State of Oregon archives.

^[15] Only applies to those already enrolled, not for new applicants. Uncertain about the interaction between this law and Medicaid take-up rates. Considered treated for this analysis.

State	Provision(s) via NHeLP	Description via NHeLP	Year Enacted	Current Provision(s) if Renumbered
Washington	Wash Admin Code 284-43-210(4)	All health carriers shall file with the State commissioner an access plan that includes a description of the health carrier's efforts to address the needs of covered LEP persons and persons with diverse cultural background.	1998 ^[16]	repealed in 2000
	Wash Admin Code 388-271	Limited English Proficient Services	2003	Wash Admin Code 388-271
Wisconsin	Wis Stat Ann §609.22(8)	If a significant number of enrollees of the defined network plan customarily use languages other than English, the plan shall provide access to translation services fluent in those languages to the greatest extent possible. ^[17]	1997	Wis Stat Ann §609.22(8)
	Wis Admin Code HFS §102.01(4)	In administering state Medicaid program, agencies that serve substantial non-English speaking or limited-English speaking populations must take whatever steps are necessary to communicate with them in their primary language.	1986	Wis Admin Code DHS §102.01(4)
	Wis Admin Code Ins §9.21(e)(4)	Defined network plans, preferred provider plans and limited service health organizations shall provide access to translation services for the purpose of providing information concerning benefits, to the greatest extent possible, if a significant number of enrollees of the plan customarily use languages other than English.	2000	Wis Admin Code Ins §9.21(e)(4)

^[16] Law was quickly repealed after enactment, due to conflict with another law. This law and its enactment date are ignored for the purpose of this analysis.

^[17] A defined network plan is the term used in Wisconsin insurance law to refer to any health benefit plan that creates incentives for its enrollees to use network providers. Some defined network plans will provide coverage only if the enrollee uses network providers and other plans will pay a larger portion of the charges if the enrollee uses network providers. HMOs, point-of-service plans and preferred provider plans are examples of defined network plans. This type of plan is sometimes referred to as a managed care plan.