

# **Office of Medicaid Language Access Plan**

May 2017 – May 2019

## **I. Introduction**

The Office of Medicaid within the Executive Office of Health and Human Services (the Agency or MassHealth) has prepared this Language Access Plan (LAP or Plan), which defines the actions to be taken by the Agency to ensure meaningful access to agency services, programs and activities on the part of persons who have limited English proficiency (LEP). The Agency will review and update, on a biennial basis, this LAP in order to ensure continued responsiveness to community needs and compliance with the Executive Office for Administration and Finance (ANF) Administrative Bulletin #16.

## **II. Purpose**

The purpose of this plan is to ensure clients of the Agency meaningful access to services, programs, and activities although they may be limited in their English language proficiency.

The Agency is committed to this Plan as the appropriate response to meeting our clients' needs. The Plan is consistent with the requirements of Administrative Bulletin #16 as promulgated by ANF.

Consistent with the guidance of ANF Administrative Bulletin #16, a Limited English Proficient (LEP) person is someone who is not able to speak, read, write, or understand the English language at a level that allows him or her to interact effectively with Agency staff. A client maintains the right to self-identify as an LEP person.

## **III. Agency Description**

The Executive Office of Health and Human Services (EOHHS) is the single state agency for the administration of the Medicaid program. The Office of Medicaid is the entity within EOHHS that is responsible for the administration of the state Medicaid program, called MassHealth. In Massachusetts, the federally cost-shared State Children's Health Insurance Program (CHIP, Title XXI) is included within MassHealth. In addition, the Office of Medicaid administers the fully state-funded Children's Medical Security Program (CMSP) as well as the Health Safety Net (HSN), successor to the Uncompensated Care Pool which was managed by the now defunct Division of Health Care Finance and Policy (DHCFP).

MassHealth provides health care benefits to certain low- and medium-income people living in Massachusetts and offers these benefits directly or by the member paying part or all of their health insurance premiums. MassHealth Member and Provider Services manage member eligibility and enrollment services for approximately 1.6 million members. Member support is provided at the local offices through the five MassHealth Enrollment Centers (MECs), the Central Office, and its customer service vendor, MAXIMUS Inc.

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

#### **IV. Language Access Plan**

Approach: The Plan will be fully implemented subject to the availability of fiscal resources to implement it. This Plan has been developed to adhere to the Language Access Guidelines of ANF Administrative Bulletin #16. This Language Access Plan represents the Agency's administrative blueprint to provide meaningful access to Agency services, programs, and activities on the part of LEP individuals and outlines the tasks the Agency will undertake to meet this objective.

#### **Language Access Plan**

**(1) Agency Language Access Coordinator**

Patricia Grant  
Chief Operating Officer, MassHealth  
Executive Office of Health and Human Services, 6th floor  
100 Hancock Street  
Quincy, MA 02171  
1-617-847-1291 (TTY: 1-617-847-3788 for people who are deaf, hard of hearing, or speech disabled)  
[Patricia.Grant@state.ma.us](mailto:Patricia.Grant@state.ma.us)

**(2) Agency Language Access Needs Assessment**

a. Spanish is the predominant non-English language that is spoken by 7% of the total MassHealth population. To serve these members, all eligibility materials are translated into Spanish. Eligibility materials include, but are not limited to, application and redetermination of eligibility forms, system-generated eligibility notices, and publications describing member rights and responsibilities. Pursuant to § 1557 of the ACA, MassHealth includes multilanguage taglines and a nondiscrimination statement with every significant communication or publication sent to its members and applicants. The multilanguage taglines and a nondiscrimination statement also posted on the MassHealth website and in physical locations where MassHealth interacts with the public. The multilanguage taglines provide the following statement in English, Spanish, Arabic, Brazilian Portuguese, Cambodian/Khmer, Chinese, French, Greek, Gujarati, Haitian Creole, Hindi, Italian, Korean, Laotian, Polish, Russian, and Vietnamese.

This information is important. It should be translated right away.  
We can translate it for you free of charge. Call us at 1-800-841-2900 (TTY: 1-800 497-4648).

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

The nondiscrimination statement provides the following information:

MassHealth complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, religion, creed, sexual orientation, or sex (including gender identity and gender stereotyping). MassHealth does not exclude people or treat them differently because of race, color, national origin, age, disability, religion, creed, sexual orientation or sex (including gender identity and gender stereotyping).

MassHealth provides

- free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, braille, accessible electronic formats, and other formats)
- free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact us at 1-800-841-2900, (TTY: 1-800-497-4648).

If you believe that MassHealth has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, religion, creed, sexual orientation, or sex (including gender identity and gender stereotyping), you can file a grievance with: Section 1557 Compliance Coordinator, 1 Ashburton Place, 11th Floor, Boston, Massachusetts 02108, Phone: (617) 573-1704, TTY: (617) 573-1696, Fax: (617) 889-7862, or e-mail at: [Section1557Coordinator@state.ma.us](mailto:Section1557Coordinator@state.ma.us). You can file a grievance in person or by mail, fax, or e-mail. If you need help filing a grievance, the Section 1557 Compliance Coordinator can help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, by mail at U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or by phone at 1-800-368-1019, 1-800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

The MassHealth Customer Service Center (CSC) has bilingual staff available on site to handle calls from LEP individuals. For languages for which there is no on-site bilingual staff, a MAXIMUS service called Language Line Services is used for three-party translations via telephone.

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

All members who request fair hearings are offered the opportunity to request on site (or by phone, if a telephonic hearing is requested) an interpreter for their primary language. The Agency contracts with Catholic Charities for this service.

The Agency operates five regional MassHealth Enrollment Centers (MECs) located in Charlestown, Chelsea, Springfield, Taunton, and Tewksbury. Each of the other four MECS is set up to service walk-in members. At all walk-in sites, the Agency has contracted with Qwest Communications d/b/a Century Link QCC to provide scheduled and unscheduled interpretation services for non-English speaking individuals over the phone in 150 languages and various dialects.

b. Language Makeup of Client Population

Language data for the MassHealth population is collected on the initial application for benefits, at the Head of Household level. The method of collection is self-declaration. Eligibility notifications are mailed in English and Spanish. The language field is used to determine which notices to pull in Spanish. As a result, when an applicant does not self-declare, the MassHealth eligibility system defaults the language field to English. The table below represents the language preferences reported by MassHealth members as of September 2015 in our new hCentive eligibility system and in the legacy MA21 system, which will eventually be phased out.

**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

<b>Lang Description</b>	<b>From h-Centive</b>	<b>From MA21</b>	<b>Spoken Count</b>	<b>Percentage</b>
ENGLISH (PACES 1)	750,002	713,512	1,463,514	89.15369072
SPANISH (PACES 2)	47,371	71,930	119,301	7.267524914
PORTUGUESE (PACES D)	10,596	20,903	31,499	1.918841982
CHINESE/CANTONESE/MANDARIN/TOISAN	5,877	10,814	16,691	1.016774866
Albanian	0	889	889	0.054155704
AMHARIC (PACES H)	0	166	166	0.010112314
ARABIC (PACES M)	1,311	2,873	4,184	0.254879039
ARMENIAN (PACES 4)	0	155	155	0.009442221
AMERICAN SIGN LANGAUGE USER (PACE	0	212	212	0.012914521
BENGLI	0	243	243	0.014802965
BOSNIAN	0	29	29	0.001766609
CAMBODIAN/KHMER (PACES 5)	503	1,506	2,009	0.122383363
CAPE VERDEAN	1,766	3,272	5,038	0.306902629
Creole French	0	1,025	1,025	0.062440491
CROATIAN (PACES I)	0	37	37	0.002253949
ETHIOPIAN	0	197	197	0.012000758
Farsi, Iranian, Persian	0	168	168	0.010234149
FRENCH (PACES 7)	476	1,097	1,573	0.09582331
GERMAN	0	14	14	0.000852846
GREEK (PACES 8)	133	581	714	0.043495132
GUJARATI	0	283	283	0.017239667
HAITIAN/CREOLE (PACES 9)	2,384	4,740	7,124	0.433976643
HEBREW	0	13	13	0.000791928
HINDI	320	507	827	0.050378816
HMONG	0	18	18	0.001096516
ITALIAN (PACES A)	61	511	572	0.03484484
JAPANESE	0	58	58	0.003533218
KOREAN	313	450	763	0.046480092
LAOTIAN (PACES B)	57	121	178	0.010843324
LITHUANIAN	0	25	25	0.001522939
OTHER (PACES 3)	0	3,113	3,113	0.18963634
POLISH (PACES C)	0	425	425	0.02588996
RUSSIAN (PACES E)	840	2,251	3,091	0.188296154
SERBIAN-CYRILLIC (PACES L)	0	23	23	0.001401104
SLOVENIAN (PACES J)	0	4	4	0.00024367
SOMALI (PACES N)	205	308	513	0.031250704
SWAHILI	0	159	159	0.009685891
SWEDISH	0	2	2	0.000121835
TAGALOG (PACES K)	0	51	51	0.003106795
THAI	0	290	290	0.01766609
VIETNAMESE (PACES F)	2,807	4,430	7,237	0.440860326
	5			
	825,022	847,405	1,672,427	

**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

In addition, MassHealth collects and assesses on a monthly basis, the number of member calls that require use of telephonic or other interpreter services and which languages are most commonly requested.

The most requested languages, identified as of April 2016, are as follows:

Language	Count
Spanish	2,624
Portuguese	148
Portuguese-Brazilian	33
Mandarin	26

c. Points of Contact between Agency and Client Population

MassHealth Customer Service Center  
1-800-841-2900 (TTY: 1-800-497-4648)

MassHealth Central Office  
100 Hancock Street  
Quincy, MA 02171  
1-617-847-3700

Central Processing Unit  
P.O. Box 290794  
Charlestown, MA 02129-0214

Chelsea MEC  
45 Spruce Street  
Chelsea, MA 02150

Springfield MEC  
88 Industry Avenue, Suite D  
Springfield, MA 01104

Taunton MEC  
21 Spring Street, Suite 4  
Taunton, MA 02780

Tewksbury MEC  
367 East Street  
Tewksbury, MA 01876

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

Board of Hearings  
100 Hancock Street, 6th Floor  
Quincy, MA 02171  
1-800-655-0338 (TTY: 1-800 798-2644)

MassHealth Website  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)

d. Additional Points of Contact & Language Services offered

All units listed below have Spanish interpreters and a language line available. The ERU, LVRU, CRU, and ECOB all have Spanish speaking interpreters to assist with Spanish language calls. If a Spanish speaking representative is not available, or if the member requests a language other than Spanish, these units use Qwest interpretation services at 1-800-798-2644. Program representatives call the interpretation service with the member on the line and inform the service line of the language needed. The service line provides interpreting in over 150 languages.

Premium Assistance and TPL ID and Recovery use the Language Line services at 1-866-874-3972 and also provide interpretation services in over 200 languages.

Estate Recovery Unit (ERU)

This unit is responsible for the identification of assets and the recovery of medical services paid by MassHealth on behalf of Medicaid recipients.

- E-mail address: [ERU@umassmed.edu](mailto:ERU@umassmed.edu)
- Unit phone number: 1-800-754-1864

Lifetime Lien and Verification Unit (LLVU)

This unit is responsible for annuity and lifetime lien collections and asset verification for applicants applying for long-term care benefits.

- E-mail address: [AnnuityUnit@umassmed.edu](mailto:AnnuityUnit@umassmed.edu)
- Unit phone number: 1-800-754-1864

Casualty Recovery Unit (CRU)

This unit is responsible for identifying legally liable third parties that are responsible for payment as a result of a claimant/recipient's loss. Types of losses include automotive accidents, medical malpractice, workers compensation, and general liability.

- E-mail address: [CasualtyRecoveryUnit@umassmed.edu](mailto:CasualtyRecoveryUnit@umassmed.edu)
- Unit phone number: 1-800-754-1864

Premium Assistance Unit (PAU)

This unit is responsible for the investigation of potential access to qualified employer or group sponsored health insurance for eligible MassHealth members.

**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

- E-mail address: [masspa@hms.com](mailto:masspa@hms.com)
- Unit phone number: 1-800-862-4840
- Mailing address:

Premium Assistance Unit  
519 Somerville Ave, Box 372  
Somerville, MA 02143

Enhanced Coordination of Benefits Unit (ECOB)

This unit helps MassHealth members and their families with care coordination by identifying all benefits from MassHealth and private insurances and helping with application process for MassHealth, Premium Assistance, and COBRA.

- E-mail address: [ECOB@umassmed.edu](mailto:ECOB@umassmed.edu)
- Unit phone number: 1-800-462-1120 Option 5
- Mailing address:

Enhanced Coordination of Benefits  
Commonwealth Medicine–Center for Health Care Financing  
529 Main Street, 3rd Floor  
Schraffts Center, Suite 320  
Charlestown, MA 02129-1125

Third-Party Liability Unit (TPL ID and Recovery)

This unit identifies and verifies third-party liability resources for MassHealth members. Responsible for maintaining MassHealth databases with current, up-to-date commercial insurance coverage information for all MassHealth members.

- E-mail address: [matpr@hms.com](mailto:matpr@hms.com)
- Unit phone number: 1-888-628-7526
- Mailing address:

MassHealth Third Party Liability  
P.O. Box 9212  
Chelsea, MA 02150

UMass Disability Evaluation Services

This unit provides language services to MassHealth applicants who apply for a MassHealth disability determination.

- Main toll-free number: 1-800-888-3420
- TTY number: 1-866-693-1390
- Primary point of contact for applicant services:

Kathleen Nichols, Client Services Manager  
333 South Street  
Shrewsbury, MA 01545  
1-774-455-8293  
[Kathleen.Nichols@umassmed.edu](mailto:Kathleen.Nichols@umassmed.edu)



**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

MassHealth-Contracted Managed Care Organizations (MCOs and CarePlus MCOs)

Boston Medical Center HealthNet Plan ([www.bmchp.org](http://www.bmchp.org))  
Customer Service Department: 1-888-566-0010 (TTY: 1-800-421-1220)  
Mental Health and Substance Use Disorder Services: 1-888-217-3501  
(TTY: 1-888-727-9441)

CeltiCare Health Plan ([www.CeltiCareHealthPlan.com](http://www.CeltiCareHealthPlan.com)) (CarePlus MCO only)  
Customer Service Department: 1-855-678-6975 (TTY: 1-866-614-1949)  
Mental Health and Substance Use Disorder Services: 1-866-896-5053

Fallon Community Health Plan ([www.fchp.org](http://www.fchp.org))  
Customer Service Department: 1-800-868-5200 (TTY: 1-877-608-7677)  
Mental Health and Substance Use Disorder Services: 1-888-421-8861  
(TTY: 1-781-994-7660)

Neighborhood Health Plan ([www.nhp.org](http://www.nhp.org))  
Customer Service Department: 1-800-462-5449 (TTY: 1-800-655-1761)  
Mental Health and Substance Use Disorder Services: 1-800-414-2820  
(TTY: 1-781-994-7660)

Tufts Health Plan ([www.tuftshealthplan.com](http://www.tuftshealthplan.com))  
Customer Service Department: 1-855-393-3154 (TTY: 1-888-391-5535)  
Mental Health and Substance Use Disorder Services: 1-855-393-3154  
(TTY: 1-888-391-5535)

Health New England (MCO only)

MassHealth-Contracted One Care Plans

Commonwealth Care Alliance ([www.commonwealthonecare.org/](http://www.commonwealthonecare.org/))  
Customer Service: 1-866-610-2273

MassRelay (TRS): 711 (for people who are deaf, hard of hearing, or speech disabled)

Tufts Health Unify  
Customer Service: 1-855-393-3154 (TTY: 1-888-391-5535)

MassHealth Primary Care Clinician (PCC) Plan

- Member Services Department: 1-800-841-2900 (TTY: 1-800-497-4648)  
Mental Health and Substance Use Disorder Services: 1-800-495-0086  
(TTY: 1-617-790-4130)

Massachusetts Behavioral Health Partnership (MBHP)

- Member Engagement Center phone number: 1-800-495-0086

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

Program of All-Inclusive Care for the Elderly (PACE)

Elder Service Plan of Cambridge Health Alliance ([www.challiance.org/esp/elder-service-plan.aspx](http://www.challiance.org/esp/elder-service-plan.aspx))

Customer Service: 617-575-5850 (TTY: 1-800-439-2370)

Elder Service Plan of the East Boston/Neighborhood Health Center

([www.ebnhc.org/en/elder-service-plan.html](http://www.ebnhc.org/en/elder-service-plan.html))

Customer Service: 617-568-6377 (TTY: 1-800-739-0183)

Elder Service Plan of Harbor Health Services, Inc. ([www.elderserviceplan.org/](http://www.elderserviceplan.org/))

Customer Service: 617-533-2400 (TTY: 617-533-2404)

Element Care ([www.elementcare.org/](http://www.elementcare.org/))

Customer Service: 877-803-5564 (TTY: 1-877-752-2388)

Fallon Health-Summit ElderCare ([www.summiteldercare.org/](http://www.summiteldercare.org/))

Customer Service: 1-877-837-9009 (TTY: 1-800-889-4106)

Mercy LIFE (<http://mymercy.life.com/>)

Customer Service: 413-748-7223 (TTY: 1-800-439-2370)

Serenity Care ([www.serenitypace.org/](http://www.serenitypace.org/))

Customer Service: 413-241-6321 (TTY: 413-734-5440)

Upham's Corner Health Center Elder Service Plan

(<http://uphamscornerhealthcenter.org/uesp/>)

Customer Service: 617-288-0970 (TTY: 617-287-8000, Ext. 8225)

Senior Care Options (SCO) Programs

Commonwealth Care Alliance SCO (<http://commonwealthcaresco.org/>)

Customer Service: 866-610-2273 (TTY: 711)

Fallon Health NaviCare (<http://fchp.org/find-insurance/navicare.aspx>)

Customer Service: 1-877-255-7108 (TTY uses TRS Relay 711)

Senior Whole Health (<https://www.seniorwholehealth.com/>)

Customer Service: 1-888-566-3526 (TTY: 711)

Tufts Health Plan Senior Care Options

(<https://www.tuftsmedicarepreferred.org/plans/senior-care-options-plan>)

Customer Service: 855-670-5927 (TTY: 855-670-5940)

**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

UnitedHealthcare Senior Care Options  
([www.uhcommunityplan.com/ma/medicare/2017/senior-care-options-hmo-snp.html](http://www.uhcommunityplan.com/ma/medicare/2017/senior-care-options-hmo-snp.html))  
Customer Service: 1-855-611-4112 (TTY: 711)

BMC HealthNet Plan Senior Care Options ([www.seniorsgetmore.org/](http://www.seniorsgetmore.org/))  
Customer Service: 1-855-833-8124 (TTY: 711)

MassHealth Dental Program

- Customer Service: 1-800-207-5019
- TTY: 1-800-466-7566
- Address:  
MassHealth  
P.O. Box 2906  
Milwaukee, WI 53201-2906

**(3) Language Resources Assessment**

- a. Pursuant to current collective bargaining agreement between the Commonwealth of Massachusetts and the Service Employees International Union (SEIU) Local 509, no non-English languages are officially supported by the staff at the regional MassHealth Enrollment Centers or the Quincy Central Office.

The table below lists the languages supported by staff at the MassHealth Customer Service Center located in Boston.

Language	Number of Customer Service Center Staff
Arabic	2
Farsi	1
French	4
Haitian Creole	4
Portuguese	2
Somali	1
Spanish	71

- b. Additionally, the Agency schedules community-based events across Massachusetts and works with Certified Application Counselors (CACs) to assist consumers in applying for MassHealth. Interpreters are scheduled based on language needs of the community as recommended by the Community Health Centers (CHCs) in that area. The Agency also has a diversity officer who is a highly placed full-time employee. The diversity officer's role includes compliance with Executive Order 526 ("Order regarding non-discrimination, diversity, equal opportunity, and affirmative action"), and all federal and state laws that mandate equal opportunity compliance. The diversity officer is responsible for working with MassHealth employees to foster and promote a diverse and inclusive

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

work environment that delivers appropriate cultural and linguistic service to our internal and external customers.

**(4) Language Service Protocols**

- a. In ensuring that the Agency meets the language needs of its membership, the Agency currently provides the following services:

**In-person interpretation:** For walk-in applicants and members, language interpretation in 150 languages and various dialects is provided upon request at the Agency's local offices through the Agency's vendor Qwest Communications: Maximus, our customer service vendor can also provide walk-in applicants and member's language interpretation through their Language line vendor or an in-person interpreter if one is available. In addition, for administrative hearings, in-person interpreters are provided upon request under a contract with Catholic Charities.

Additionally, MassHealth prominently displays the multilanguage taglines to inform individuals of their right to a free interpreter in MassHealth physical locations where it interacts with the public, including each of MassHealth's MECs, the Quincy office, and on each of the appropriate floors in the One Ashburton building (5<sup>th</sup>, 10<sup>th</sup>, and 11<sup>th</sup> floors) in Boston.

**Phone interpretation:** MassHealth Customer Service Center provides phone interpretation services to callers, primarily through the use of the Maximus Language Line service, and secondarily through using its existing staff for the language listed in Section IV(3). In addition, interpretation services for callers to the Agency's local offices are provided through Qwest.

When a MassHealth member initially calls customer service, a recorded message on the IVR automatically informs members about access to free interpreter services. This recorded message is designed to let callers know about the availability of free interpreters, which is confidential, and will not affect member eligibility. LEP individuals will be then granted access to the language line as a first response. To the extent possible, in-house staff may be used to supplement language line resources; however, MassHealth stresses offering real-time interpretation instead of a call-back.

Finally, MassHealth has added up front messaging to the MEC IVR to inform members of the availability option for other less prevalent languages (in the appropriate language that the call) to be taken either by a CSR in their language or through an interpreter.

**Community-based resources:** please refer to Section IV(3)(b).

**Document translation:** Agency publications are translated under a contract with Language Link, a service of the Central Massachusetts Area Health Education Counsel.

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

- a. Customer Service Representatives (CSRs) are trained to inform members up front that they are entitled to receive free interpreter services and to grant access when the need arises. During a call, if a CSR determines that an LEP caller would be better served by using the language line, the CSR will take steps to provide “real-time” access to the language line. Individuals requesting an American Sign Language (ASL) interpreter can contact the MassHealth Disability Accommodation Ombudsman at [masshealthhelp@ehs.state.ma.us](mailto:masshealthhelp@ehs.state.ma.us) or 1-617-847-3468 (TTY: 1-617-847-3788) for assistance.
  
- b. Interpreter services are provided in person or on the phone upon request. For example, when a member or applicant requests interpretation services at a local MassHealth office, an Agency worker will dial the toll-free Qwest number assigned to the Agency. The call will be answered either by an automated IVR or live agent who will assist in the identification of the non-English speaker’s language, and then conference in the correct interpreter in accordance with the language request within an average of fifteen (15) seconds. Average Speed to Answer (ASA) time begins upon receipt of in-bound call at the switch level and ends upon delivery to the live agent. When connected, the interpreter will ask the applicant or member, “If you need assistance we are an outside service that helps interpret for people. Would you like us to proceed? Yes or no.” If the applicant or member says “yes,” then the call will proceed with the interpreter and the Agency worker. If the member or applicant answers no, the interpreter will inform the applicant or member in their language that the Agency can continue in English if the applicant or member wishes, or would be available for another call if the applicant or member wishes to call back with a family member, friend, or other interpreter of the applicant or member to assist with interpretation. If applicant or member wishes to proceed in English, the Qwest interpreter will be disconnected from the call.

Additionally, since Spanish is defined as a prevalent language in the Commonwealth, MassHealth Customer Service has CSRs who are trained to take calls from Spanish-speaking members. Members who speak a language other than Spanish can get assistance from the language line. Bilingual workers are identified during the training and informed that they may be able to assist members who speak a language in which they demonstrate proficiency. A supervisor assesses the fluency of workers who want to assist members in non-prevalent languages.

**(5) Vital Document Translation**

The following is a list of vital documents, translated in whole or in part, including time frames for translation.

- Application for Health Coverage and Help Paying Costs (application form) (Spanish only). Translation is available approximately three weeks after the English version is ready.
- Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (application form for seniors and individuals requiring long-term care)

**Office of Medicaid**  
**Language Access Plan**  
May 2017 – May 2019

(Spanish only). Translation is available approximately three weeks after the English version is ready.

- Member Booklet for Health Coverage and Help Paying Costs (rights and responsibilities document) (all languages listed in Sec. IV (2) (a)). Spanish translation is available approximately three weeks after the English version is ready. Other languages may take up to two months.
- Senior Guide to Health Care Coverage (rights and responsibilities document for seniors and individuals requiring long-term care) (all languages listed in Sec. IV (2) (a)). Spanish translation is available approximately three weeks after the English version is ready. Other languages may take up to two months.
- Eligibility Review Form (for families) (Spanish only). Translation is available approximately three weeks after the English version is ready.
- Senior Eligibility Review (individuals requiring long-term care) (Spanish only). Translation is available approximately three weeks after the English version is ready.
- Need help with health care coverage? (introductory brochure) (all languages listed in Sec. IV (2) (a)). Spanish translation is available approximately two weeks after the English version is ready.
- U.S. Citizenship/National Status and Identity Requirements for MassHealth (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Long-Term-Care Supplement (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Personal-Care-Attendant Handbook (Spanish only). Translation is available approximately two weeks after the English version is ready.
- MassHealth Buy-In Application (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Application for Waiver or Reduction of MassHealth Premium (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Help Getting Proof of U.S. Citizenship for Persons Born in Massachusetts (Spanish only). Translation is available approximately two weeks after the English version is ready.
- MassHealth Permission to Share Information Form (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Notice of Privacy Practices (Spanish only). Translation is available approximately two weeks after the English version is ready.
- MassHealth Adult Disability Supplement (Spanish only). Translation is available approximately two weeks after the English version is ready.
- MassHealth Child Disability Supplement (Spanish only). Translation is available approximately two weeks after the English version is ready.
- MassHealth Asset Assessment for Potential MassHealth Eligibility (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Financial Information Request (Spanish only). Translation is available approximately two weeks after the English version is ready.
- Fair Hearing Request Form (Spanish only). Translation is available approximately two weeks after the English version is ready.

**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

- Well-Child Care Claim Form (Spanish only). Translation is available approximately two weeks after the English version is ready.
- 5% Max Claim (Spanish only). Translation is available approximately two weeks after the English version is ready.

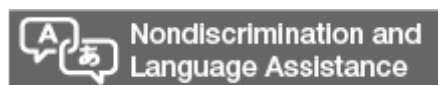
All of these publications are currently available in Spanish and other languages as noted above. All eligibility notices are sent out in Spanish to Spanish-speaking applicants and members.

MassHealth includes multilanguage taglines and a nondiscrimination statement with every significant communication or publication sent to its members and applicants. As described above, the multilanguage taglines are in English, Spanish, Arabic, Brazilian Portuguese, Cambodian/Khmer, Chinese, French, Greek, Gujarati, Haitian Creole, Hindi, Italian, Korean, Laotian, Polish, Russian, and Vietnamese. These taglines inform the speakers of those languages that MassHealth will provide free language assistance services.

**(6) MassHealth Website**

The MassHealth website, [www.mass.gov/eohhs/gov/departments/masshealth/](http://www.mass.gov/eohhs/gov/departments/masshealth/), is also a valuable tool to members for providing member information on a real-time basis. Currently, some member information, such as member notices and forms, are available in Spanish.

MassHealth has created the following icon on its webpage to assist LEP individuals:



The icon directs the member to MassHealth’s Nondiscrimination and Language Assistance page, [www.mass.gov/eohhs/consumer/insurance/nondiscrimination-and-languages/](http://www.mass.gov/eohhs/consumer/insurance/nondiscrimination-and-languages/), which provides the same information as the multilanguage taglines. Specifically, the website states:

This information is important. It should be translated right away. We can translate it for you free of charge. Call us at 1-800-841-2900 (TTY: 1-800-497-4648).

This information is available in alternative formats such as braille and large print. To get a copy, please call us at 1-800-841-2900 (TTY: 1-800-497-4648).

Members can then click on any of the top fifteen languages spoken in Massachusetts for a translation of the above text.

**[Español](#) | [Português](#) | [繁體中文](#) | [Kreyòl Ayisyen](#) | [Tiếng Việt](#) | [Русский](#) | [العربية](#) | [ইংরেজি](#) | [Français](#) | [Italiano](#) | [한국어](#) | [λληνικά](#) | [Polski](#) | [हिंदी](#) | [ગુજરાતી](#) | [ພາສາລາວ](#)**

**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

**(7) Stakeholder Consultations**

The Agency has consulted with stakeholders in the development of this Plan and has historically worked closely with advocates over the years regarding its LEP policies and will continue to do so. The agency has an Interagency Service Agreement (ISA) with the Massachusetts Office for Refugee and Immigrants (ORI) and has shared this LAP with them. Their comments have been incorporated.

**(8) Staff Training**

Because service to LEP populations is, and has been for many years, integral to Agency operations, all staff hired are required to attend a full day of diversity awareness training. In addition, the LAP is shared with MassHealth employees as part of new hire training. MassHealth also communicates this information to active staff through the use of MEC Weekly update newsletters. The agency's Language Access Plan is also posted on the EOHHS Intranet site: <http://eohhs-web/wp/default.aspx>.

**(9) Notice to Public**

All application packets, redetermination packets, eligibility notices, and other significant communication contain multilanguage taglines informing applicants and members of the availability of interpreter services. The Request for Fair Hearing form asks whether an interpreter is requested.

The multilanguage taglines are also posted in any MassHealth physical space where it interacts with the public including each of MassHealth's MECs, the Quincy office, and on each of the appropriate floors (5<sup>th</sup>, 10<sup>th</sup>, and 11<sup>th</sup>) in the One Ashburton building in Boston.

This Language Access Plan will also be posted on the MassHealth website.

**(10) Agency Monitoring**

The Agency reviews on an ongoing basis whether the needs of its LEP populations are being met. The Agency chiefly monitors its accessibility to the LEP population by collecting data regarding the composition of its caseload in order to 1) guide hiring decisions in reference to bilingual staffing needs, and 2) ascertain in what languages its documents need to be translated. The Agency also periodically works with legal advocates and the Office for Refugees and Immigrants (ORI) to determine what steps need to be taken to further improve its service to LEP individuals.

Going forward, the Agency Language Access Coordinator will use the above information as well as any received from other sources (e.g., complaints received through the Language Access Complaint procedure described below) to determine whether its LEP populations are continuing to receive meaningful access to the Agency's programs and services.



**Office of Medicaid  
Language Access Plan  
May 2017 – May 2019**

**(11) Complaints**

**Language Access Complaint Procedure**

A MassHealth consumer may file a complaint with the Agency Language Access Coordinator or the Office of Access and Opportunity if they believe they have been denied the benefits of this Plan. This complaint must be filed within 6 months of the alleged denial.

To file a complaint with the Language Access Coordinator, submit the written complaint to:

Patricia Grant  
Chief Operating Officer, MassHealth  
Executive Office of Health and Human Services  
100 Hancock Street 6th floor  
Quincy, MA 02171  
[Patricia.Grant@state.ma.us](mailto:Patricia.Grant@state.ma.us)

To file a complaint with the Office of Access and Opportunity, please submit the written complaint to the attention of:

Office of Access and Opportunity  
Office of the Governor  
State House, Room 373  
Boston, MA 02133  
[Jabes.Rojas@state.ma.us](mailto:Jabes.Rojas@state.ma.us)



5.16.17

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Daniel Tsai  
Assistant Secretary for MassHealth

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Date



5.17.17

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Marylou Sudders  
Secretary of the Executive Office of Health  
and Human Services

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Date