Welfare and Institutions Code section 14029.91

(a) The department shall require all managed care plans contracting with the department to provide Medi-Cal services to provide language assistance services to limited-English-proficient (LEP) Medi-Cal beneficiaries who are mandatorily enrolled in managed care in the following manner:

(1) (A)Oral interpretation services shall be provided in any language on a 24-hour basis at key points of contact.

(B) Oral interpretation services shall be provided by an interpreter that, at a minimum, meets all of the following qualifications:

(i) Demonstrated proficiency in speaking and understanding both spoken English and the language spoken by the LEP beneficiary.

(ii) The ability to interpret effectively, accurately, and impartially, both receptively and expressly, to and from the language spoken by the LEP beneficiary and English, using any necessary specialized vocabulary, terminology, and phraseology.

(iii)Adherence to generally accepted interpreter ethics principles, including client confidentiality.

(C) A managed care plan shall not require an LEP beneficiary to provide the beneficiary's own interpreter or rely on a staff member who does not meet the qualifications described in subparagraph (B) to communicate directly with the LEP beneficiary.

(D) A managed care plan shall not rely on an adult or minor child accompanying the LEP beneficiary to interpret or facilitate communication except under either of the following circumstances:

(i) In an emergency, as defined by the department, and an interpreter who meets the qualifications described in subparagraph (A) is not immediately available for the LEP beneficiary.

(ii) If the LEP beneficiary specifically requests that the accompanying adult interpret or facilitate communication, the accompanying adult agrees to provide that

assistance, and reliance on that accompanying adult for that assistance is appropriate under the circumstances.

(2) Translation services shall be provided to the language groups identified by the department.

(3) Written notice of the availability of free language assistance services shall be provided in English and in the top 15 languages spoken by LEP individuals in California, as determined by the department, and consistent with the requirements identified in Part 92 of Title 45 of the Code of Federal Regulations and Section 1557 of the federal Patient Protection and Affordable Care Act (42 U.S.C. Sec. 18116).

(b) The department shall determine when an LEP population meets the requirement for translation services using one of the following numeric thresholds:

(1) A population group of at least 3,000 or 5 percent of the beneficiary population, whichever is fewer, mandatory managed care Medi-Cal beneficiaries, residing in the service area, who indicate their primary language as other than English.

(2) A population group of mandatory managed care Medi-Cal beneficiaries, residing in the service area, who indicate their primary language as other than English, and that meet a concentration standard of 1,000 beneficiaries in a single ZIP Code or 1,500 beneficiaries in two contiguous ZIP Codes.

(c) The department shall make this determination if any of the following occurs:

(1) A nonmanaged care county becomes a new managed care county.

(2) A new population group becomes a mandatory Medi-Cal managed care beneficiary population.

(3) A period of three years has passed since the last determination.

(d) The department shall instruct managed care plans, by means of incorporating the requirement into plan contracts, all-plan letters, or similar instructions, of the language groups that meet the numeric thresholds.

(e) A managed care plan shall notify beneficiaries, prospective beneficiaries, and members of the public of all of the following information:

(1) The availability of language assistance services, including oral interpretation and translated written materials, free of charge and in a timely manner, when those services are necessary to provide meaningful access to health care programs or activities to LEP beneficiaries.

(2) The availability of appropriate auxiliary aids and services, including qualified interpreters for individuals with disabilities and information in alternate formats, free of charge and in a timely manner, when those aids and services are necessary to ensure an equal opportunity to participate for individuals with disabilities.

(3) A managed care plan does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability.

(4) The availability of a grievance procedure and how to file a grievance, including identification of, and contact information for, the designated managed care plan representative.

(5) How to file a discrimination complaint with the United States Department of Health and Human Services Office for Civil Rights if there is a concern of discrimination based on race, color, national origin, age, disability, or sex.

(f) (1)The information described in paragraph (3) of subdivision (a) and subdivision (e) shall be provided in the following manner:

(A) In the evidence of coverage.

(B) Posted in conspicuous physical locations where the managed care plan interacts with the public.

(C) On the internet website published and maintained by the managed care plan in a manner that allows a beneficiary, prospective beneficiary, and members of the public to easily locate the information.

(2) To the extent the information described in paragraph (3) of subdivision (a) and subdivision (e) is not included in existing informational notices, a managed care plan shall add this information at the time of the next regularly scheduled update of the applicable publication.

(g) The amendments made to this section by the act that added this subdivision shall be implemented by the department only to the extent that federal financial participation is available and is not otherwise jeopardized.

(h) This section does not apply to mental health plans contracting with the department pursuant to Section 14712.

(i) For purposes of this section, a person is “limited-English-proficient” if the person speaks English less than very well.

Location:
`https://california.public.law/codes/welfare_and_institutions_code_section_14029.91`

Original Source: Section 14029.91, `https://leginfo.-legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC§ionNum=14029.91.` (last accessed May 12, 2025).

Welfare and Institutions Code section 14029.92

(a) The department shall notify Medi-Cal beneficiaries, prospective beneficiaries, and members of the public of all of the following information:

(1) The availability of language assistance services, including oral interpretation and translated written materials, free of charge and in a timely manner, when those services are necessary to provide meaningful access to individuals with limited English proficiency.

(2) The availability of appropriate auxiliary aids and services, including qualified interpreters for individuals with disabilities and information in alternate formats, free of charge and in a timely manner, when those aids and services are necessary to ensure an equal opportunity to participate for individuals with disabilities.

(3) The department does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability.

(4) The availability of the grievance procedure and how to file a grievance, including identification of, and contact information for, the designated department representative.

(5) How to file a discrimination complaint with the United States Department of Health and Human Services Office for Civil Rights if there is a concern of discrimination based on race, color, national origin, age, disability, or sex.

(b) Written notice of the availability of free language assistance services shall be provided in English and in the top 15 languages spoken by limited-English-proficient individuals in California, as determined by the department, and consistent with the requirements identified in Part 92 of Title 45 of the Code of Federal Regulations and Section 1557 of the federal Patient Protection and Affordable Care Act (42 U.S.C. Sec. 18116).

(c) (1)The information described in subdivisions (a) and (b) shall be provided in the following manner:

(A) In the department’s Medi-Cal informational publications.

(B) Posted in conspicuous physical locations where the department interacts with the public.

(C) On the department's Internet Web site, in a manner that allows beneficiaries, prospective beneficiaries, and members of the public to easily locate the information.

(2) To the extent the information described in subdivisions (a) and (b) is not included in existing informational notices, the department shall add this information at the time of the next regularly scheduled update of the applicable publication.

(d) This section shall be implemented only to the extent that federal financial participation is available and is not otherwise jeopardized.

Location:
https://california.public.law/codes/welfare_and_institutions_code_section_14029.92

Original Source: Section 14029.92, https://leginfo.-legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC§ionNum=14029.92. (last accessed May 12, 2025).