



STATE OF DELAWARE

**DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID & MEDICAL ASSISTANCE
POLICY & PLANNING UNIT**

ADMINISTRATIVE NOTICE A-02-2025

TO: All DMMA & DSS Staff

DATE: January 9, 2025

PROGRAM(S): MAGI, Non-MAGI, Long Term Care (LTC) Medicaid, and Delaware Healthy Children Program (DHCP)

SUBJECT: Communication and Language Accessibility Services

BACKGROUND

The [Office for Civil Rights \(OCR\) at the U.S. Dept. of Health and Human Services \(HHS\)](#) complies with and enforces federal civil rights laws that prohibit discrimination based on race, color, national origin age, disability, religion, or sex (including pregnancy, sexual orientation, gender identity), in covered health programs. [Delaware’s Equal Accommodations Law](#) in compliance with federal laws extends rights to all people without regard to race, age, marital status, creed, religion, color, sex, disability, sexual orientation, gender identity, or national origin. HHS requires health programs that receive federal funding to provide meaningful access to benefits, services, and information equally to all individuals.

DISCUSSION

The Division of Medicaid & Medical Assistance (DMMA) strives to provide equal access to all applicants and members requesting services. This includes the communication and accessibility needs of the vulnerable populations we serve. Communication accessibility services include accommodations for individuals with speech and developmental disabilities who are deaf or hard of hearing, blind or have low vision, and for non-English-speaking or limited-English proficiency (LEP) persons.

DMMA provides communication and language accessibility services, including interpretation and translation for all verbal and written applicant/member communications when deemed necessary. Interpretation and translation services are free to Delaware Medicaid applicants and members. Services should be provided promptly and should not delay benefits for eligible members.

If an applicant/member requests interpretation services, those services must be provided even if staff believe the applicant/member is sufficiently proficient in speaking and understanding English.

DMMA provides the following Communication and Language Accessibility Services:

Interpretation Services

Interpretation services can be provided to non-English-speaking or LEP persons. For telephonic interpretation on-demand services, staff will need to schedule a conference call. Telephonic interpretation services can be provided to an applicant/member over the phone by conferencing with an interpreter or by calling the interpreter on speaker phone when in the office. When telephonic interpretation services are not adequate, an on-site appointment can be scheduled with the applicant/member and the interpreter attending in person.

Interpretation services can also be provided to individuals who need an American Sign Language (ASL) interpreter. This appointment **must** be scheduled at least two hours in advance for services provided through video chat, or at least three days in advance for on-site services with the applicant/member and the interpreter attending in person.

Example 1:

The member receives a notice from Delaware Medicaid regarding their benefits. The member who speaks Mandarin goes to a local Medicaid office to speak to a case worker. Staff can ask the member to identify their language using the I Speak Statements (Attachment B). Staff will choose a vendor that offers Mandarin interpretation from Quick Glance by Language (Attachment C). Using the Interpretation and Translation Vendor Information (Attachment A), staff will conference call the chosen vendor, following the vendor service procedure for over-the-phone services. Staff will provide their department/location code, call back number, and select the program code for either Medicaid or Food Benefits. Staff will be connected to an interpreter and after the call, the staff will need to comment on the use of Language Access Services in the member's case.

Example 2:

The applicant communicates using sign language. The applicant wishes to make an appointment to discuss their Medicaid application. Using the Interpretation & Translation Vendor Information (Attachment A), staff should follow the Vendor Service Procedures for Sign Language to schedule an appointment with a sign language interpreter. The interpretation service may be provided either virtually or in person. Staff will need to write a case comment on the use of language access services in the applicant's case.

Delaware Relay Services

Provides services to individuals who use assistive devices for communication. These services can be provided in English and Spanish in the following manner:

- English/English
- Spanish/Spanish
- English/Spanish

Supports the following assistive technology devices:

- Text Telephone/Teletypewriter (TTY)
- Hearing Carry Over (HCO)
- Voice Carry Over (VCO)
- Speech to Speech (STS)
- TeleBraille Relay Service

Example 1:

The member is English-speaking and has hearing difficulties. Staff has established that the member uses a Captioned Telephone (CapTel) to make and receive calls. The staff received a voice message and needed to return the member's call, by using the Interpretation & Translation Vendor Information (Attachment A), staff should follow the Vendor Service Procedures for Hearing Impaired Services through Delaware Relay Service to return the member's call. Staff will write a case comment on the use of language access services in the applicant's case.

Written Translation Services

Written Translation Services are available for LEP applicants/ members through eligibility system notices, letters, emails, and text messages from ASSIST Worker Web (AWW) and DE ASSIST Self-Service in English or Spanish.

In addition, Medicaid applications are readily available in English, Spanish, Arabic, Haitian Creole, and Mandarin on the DMMA website and at the DMMA and DSS offices.

Translations for other languages can be requested for all written and/or printed member correspondences when a member's preferred language is not English or Spanish. Requests for translation services should be made available as soon as possible to avoid delay in the member's eligibility determination.

Example 1:

The member has a renewal due, information is needed, and the preferred language is Arabic. Staff using the Interpretation & Translation Vendor Information (Attachment A), must follow the Vendor Service Procedures for Written Translation to send the completed Request for Information letter to the DHSS_DMMA_PPU@delaware.gov mailbox. Once the letter has been translated it will be sent back to the staff member. Staff must send the

letter to the member and write a case comment on the use of the language access services in the member's case.

The Use of Family Members, Friends, Community Volunteers, or Agency Representatives as Interpreters

All applicants/members who need language assistance **must** be offered services through a state-contracted language vendor. At the applicant/member's request, they may choose a family member, friend, or community volunteer 18 years or older to serve as the interpreter or translator.

ACTION REQUIRED

- Staff **must** provide accurate, timely, and effective language access services to all applicants and members. Staff who identify individuals requiring language services will arrange services by using the approved language vendors (see Attachment A) for the following forms of language services:
 - Over-the-phone interpretation
 - On-site interpretation
 - Sign language interpretation
 - Hearing/Vision/Speech Impaired interpretation
 - Written translation
- When an LEP member calls and requires an interpreter for over-the-phone direct dial services, staff will need to utilize the conference call function on their phone to call and connect to the language services vendor.
- When interpretation services require that the interpreter have medical or legal knowledge, staff must indicate this in their service request.
 - *Example 1:* Pre-Admission Screening (PAS) Team has an on-site home visit with a member that requires interpretation. PAS staff will pre-schedule the service request and inform the vendor that the appointment will be medical.
 - *Example 2:* A member who requires interpretation services and their legal representative wishes to have a conference call with the eligibility staff. The member wants to discuss an eligibility determination that the member disagrees with and has requested a fair hearing. Staff will pre-schedule the service request and inform the vendor that the appointment may include legal representation on the member's behalf.
- Staff **must** write a case comment on the use of the vendor services and include the following:
 - Date and time
 - Type of vendor service used
 - Vendor used

- Cancellation of pre-scheduled services.
 - If staff become aware of a member cancellation for a pre-scheduled service, staff should try to cancel the appointment, giving the vendor as much notice as possible:
 - On-site interpretation: 24 hours prior, or at least before 5 pm the day before the scheduled service, *if possible*.
 - Sign Language interpretation: 48 hours prior, *if possible*.
 - If the member is a no-show, staff may be unable to provide the vendor with any notice.
- Any questions or problems identified with the access or delivery of language services **must** be immediately forwarded to the DMMA Policy and Planning Unit Mailbox: DHSS_DMMA_PPU@delaware.gov.
- When an LEP applicant/member chooses a family member, friend, or representative to serve as their interpreter, instead of free language assistance through a DMMA contracted vendor, staff **must** case comment that the applicant/member elected to have a family member, friend or representative provide translation services. With the consent of the family member, friend or representative staff **must** document in case comments the interpreter's name, age, relationship, *and* member's acknowledgment and decline of free interpretation services. In addition, staff **must** also schedule an interpreter to assist DMMA/DSS with interpretation and write a case comment to include the vendor's name, vendor's representative, date, time of interview, and type of vendor services utilized.
- **For Spanish Speaking LEP Members:**

When an applicant/member indicates that their primary language is Spanish, staff **must** ensure the appropriate fields in AWW are completed so the correct notices, and letters, will automatically be sent to the applicant/member in Spanish.

All other correspondence **must** be sent to the member in Spanish. If a document needs to be translated, staff **must** send the correspondence to the DMMA Policy Mailbox (see Attachment A).

- **For Other LEP Members:**

When an applicant/member requests translation of a DMMA notice, letter, form, or other correspondence in their preferred language, staff **must** send the translation request to the DMMA policy mailbox (see Attachment A).
- **For Members who are Blind, have Low Vision, Deaf, Hard of Hearing, Deafblind, or have Speech Impairments:**

If staff are aware that the applicant/member has a functional, medical, or communication need, staff **must** ensure that appropriate fields in AWW are completed. Staff should refer to their division's procedure for entering disability information in AWW.

Staff **must** pin the case comment for visual, hearing, and/or speech impairments (when aware) and have received a request for communication or language assistance. This documentation will help staff identify when communication and language accessibility services may be needed. Remember staff **must** defer to the applicants'/members' preference for how they wish to receive communication from Delaware Medicaid.

DIRECT INQUIRIES TO:

DHSS_DMMA_PPU@delaware.gov

1/9/2025 | 9:03 AM EST

Date

DocuSigned by:
Andrew Wilson
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Andrew Wilson, Director
Division of Medicaid & Medical Assistance

ATTACHMENTS

- Attachment A: Language Vendor Contact Information
- Attachment B: USDA, I Speak Statements
- Attachment C: Quick Glance by Language for Over-the-Phone and On-Site Services
- Attachment D: Delaware Relay Service
- Attachment E: Written Translation Vendor Information