

Payment Policies for Healthcare Services Provided to Injured Workers and Crime Victims

Chapter 14: Language Access Services

Effective October 1, 2020



Link: Look for possible **updates and corrections** to these payment policies at:

<https://lni.wa.gov/patient-care/billing-payments/fee-schedules-and-payment-policies/policy-2020>



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Definitions

- ▶ **Authorized interpreter:** Interpreter who has passed a screening test from one or more of the organizations below. Since the scope of the screening test is not as comprehensive as a conventional certified test, those who meet the minimum proficiency requirements are issued an authorization letter in lieu of a certificate. Interpreters must hold an active, up-to-date credential in good standing (not revoked) from one or more of the following organizations:

If the agency or organization is...	Then the credential is a:
Washington State Department of Social and Health Services (DSHS)	Letter of authorization as a qualified social and/or medical services interpreter
Federal Court Interpreter Certification Examination (FCICE)	Letter of designation or authorization

- ▶ **Certified interpreter:** Interpreter who holds active, up-to-date credentials in good standing (not revoked) from one or more of the following organizations.

If the agency or organization is...	Then the credential is a:
Washington State Department of Social and Health Services (DSHS)	Social or Medical Certificate
Washington State Administrative Office for the Courts (AOC)	Certificate
Registry of Interpreters for the Deaf (RID)	<ul style="list-style-type: none"> • Certified Deaf Interpreter (CDI), <i>or</i> • National Interpreter Certification (NIC), <i>or</i> • Provisional Deaf Interpreter Certification (PDIC), up to the 12 months the certificate is allowed by RID. Interpreter must submit certification from the RID following the 12-months in order to continue providing services.
National Board of Certification for Medical Interpreter	Certified Medical Interpreter (CMI)
Certification Commission for Healthcare Interpreters (CCHI)	Certified Healthcare Interpreter
Federal Court Interpreter Certification Test (FCICE)	Certificate
US State Department Office of Language Services	Verification letter or Certificate

- ▶ **Client:** A worker, an individual, or a group of people that uses the professional services of an interpreter. May also be known as a patient or worker.

- ▶ **Independent medical examination (IME):** An objective medical legal examination requested by the department or self-insurer to establish medical facts about a worker's physical condition. Only department-approved examiners may conduct these exams.



Link: For more information, see: [WAC 296-23-302](#).

- ▶ **Initial visit:** The first visit to a healthcare provider during which the Report of Industrial Injury or Occupational Disease is completed and the worker files a claim for workers compensation.
- ▶ **On-demand appointment:** Appointments that do not have a pre-scheduled time. This includes emergency, urgent care, and walk-in appointments.
- ▶ **Sight translation:** Oral rendition of text written from one language into another language, usually done in the moment, by the interpreter.
- ▶ **Wait time:** The time between the scheduled start time and the actual start time of an appointment. No other covered services are performed during this time.



Payment policy: All interpreter services

Workers or crime victims who have limited English proficiency or sensory impairments may need interpreter services to communicate effectively with healthcare or vocational providers.

► Requirements for prior authorization

Required

Document translation services require prior authorization and must be requested by the insurer.

Only translation agencies with a current Department of Enterprise contract may perform translation. See **Payment Policy: Translation Services** for more information.

Not required

Interpreter services don't require prior authorization on open claims.



Note: Prior to service delivery, providers and interpreters should check claim status with the insurer. Call 1-800-831-5227 for automated updates on claim status.

► Who must perform interpreter services to qualify for payment

This policy applies to interpreter services provided:

- For healthcare, independent medical examinations (IMEs), and vocational services,
- In all geographic locations,
- To workers and crime victims having limited English proficiency or sensory impairment, and receiving benefits from:
 - The State Fund, *or*
 - Self-insured employers, *or*
 - The Crime Victims Compensation Program.

Credentials required for L&I provider account number

Interpreters must have an active L&I provider account, unless the interpreter is part of the scheduling system. All interpreters are required to have a National Provider Identification (NPI) number. NPIs are unique, 10-digit numbers use for identifying specific providers.

To obtain an L&I interpreter services provider account number, interpreters must submit credentials using the **Submission of Provider Credentials for Interpreter Services** form ([F245-055-000](#)). Also, note that:

- Credentials accepted include those listed under definitions for certified interpreter and authorized interpreter (see **Definitions** at the beginning of this chapter), *and*
- Provisional certification isn't accepted, except for sign language interpreters. See **Definitions** at the beginning of this chapter



Note: Interpreters can only be paid for services in the languages for which they have provided credentials.

Interpreters located outside of Washington State must submit credentials from their:

- State Medicaid programs, *or*
- State or national court systems, *or*
- Other nationally recognized programs.

Maintaining credentials

Interpreters are responsible for maintaining their credentials as required by the credentialing agency or organization.

If the interpreter's credentials expire or are removed for any reason, the interpreter must immediately notify the insurer. Billing after an interpreter's credentials expire or are removed will be denied.

Credentialed employees of healthcare and vocational providers

Credentialed employees of healthcare and vocational providers are eligible to receive payment for interpreter services under the following circumstances:

- The individual's sole responsibility is to assist patients or clients with language or sensory limitations, *and*
- The individual is a credentialed interpreter, *and*
- The individual has an L&I provider account number for interpreter services.

▶ **Services that are covered**

These services are covered and are reimbursable for open and allowed claims:

- The **initial visit**, *and*
- Services related to the reopening application are payable. Only services to assist in completing the reopening application are payable unless or until a decision is made by the insurer on the status of the claim. If a claim is reopened, the insurer will determine which services are reimbursable, *and*
- Interpreter services which facilitate language communication between the worker and a healthcare or vocational provider, *and*
- Time spent waiting for an appointment that doesn't begin at time scheduled (when no other covered services are being delivered during the **wait time**), *and*
- Interpreters for family members or guardians of workers who are under 18 years old, *and*
- Assisting the worker to complete forms required by the insurer and/or healthcare or vocational provider using sight translation.

► Services that aren't covered

As a last resort, if the medical or vocational provider can't find an L&I interpreter, they may use non-certified or unapproved interpreters. L&I won't pay for these services and strongly discourages their use.

In addition, the following aren't covered:

- Interpreter services exceeding **480 minutes** (8 hours) per day per interpreter, *and*
- Interpretation for services that aren't covered by the insurer (see [WAC 296-20-03002](#)), *and*
- Interpreter services provided for a denied or closed claim (except services associated with the **initial visit**, or the visit for the worker's application to reopen a claim, or for a worker receiving a pension with a treatment order), *and*
- Bills for rejected claims are not reimbursable, except for the reopening application, *and*
- No show fee for any service other than an insurer requested IME *and*
- Personal assistance on behalf of the worker (for example, scheduling appointments, translating correspondence or making phone calls), *and*
- Interpreter services provided for communication not related to the worker's communications with healthcare or vocational providers, *and*
- Overhead costs (for example, phone calls, photocopying, and preparation of bills), *and*

- Document translation unless requested or authorized by the insurer, *and*
- Interpreters who have had their certification revoked by a certifying authority, *and*
- Mileage, *and*
- Employee(s) of the healthcare or vocational provider whose primary job is interpretation but who isn't a credentialed interpreter, *and*
- Employee(s) of the healthcare or vocational provider whose primary job isn't interpretation, *and*
- Family members, or friends or acquaintances, of the worker who provide interpretation, *and*
- Interpreter services for workers or crime victims for legal purposes, including but not limited to:
 - Attorney appointments, *or*
 - Legal conferences, *or*
 - Testimony at the Board of Industrial Insurance Appeals or any court, *or*
 - Depositions at any level.



Note: Payment for interpreter services for legal purposes is the responsibility of the attorney or other requesting party. Don't bill L&I or the self-insured employer for these services.

► **Interpreter services fee schedule, effective October 1, 2020**

Code	Description	L&I limit and authorization information	1 unit of service equals...	Maximum fee
9978M	Sign Language interpretation Direct services time between worker and healthcare or vocational provider, includes wait and form completion time, per minute.	Limited to 480 minutes (8 hours) per day per interpreter. Doesn't require prior authorization.	1 minute	\$1.99 per minute
9988M	Group interpretation Direct services time between more than one client and	Limited to 480 minutes (8 hours)	1 minute	\$1.01 per minute

Code	Description	L&I limit and authorization information	1 unit of service equals...	Maximum fee
	healthcare or vocational provider, includes wait and form completion time, time divided between all clients participating in group, per minute.	per day per interpreter. Doesn't require prior authorization.		
9989M	Individual interpretation Direct services time between worker and healthcare or vocational provider, includes wait and form completion time, per minute.	Limited to 480 minutes (8 hours) per day per interpreter. Doesn't require prior authorization.	1 minute	\$1.01 per minute
9996M	Interpreter "IME no show" Wait time when worker doesn't attend the insurer requested IME, flat fee.	Only 1 no show per worker per day. Payment requires prior authorization. Contact the SIE/TPA after no show occurs.	1 worker no show at IME	Flat fee \$58.98
9997M	Document translation, at insurer request	Over \$500.00 per claim will be reviewed. Authorization will be documented on translation request packet. Only payable to agencies with a Department of Enterprise Services contract.	1 page	By report

► Requirements for billing

Interpreters must use the miscellaneous bill form and billing instructions, unless their services were scheduled through the scheduling system.



Note: The vendor, interpretingWorks, bills all scheduling system appointments. Interpreters do not submit an ISAR when working with this vendor.

How to Identify State Fund, Self-Insurer, or Crime Victim Claims

State Fund claims begin with the letters **A, B, C, F, G, H, J, K, L, M, N, P, X, Y, or Z** followed by six digits, or **double alpha letters** (example AA) followed by five digits.

Self-insured claims begin with an **S, T, or W** followed by six digits, or **double alpha letters** (example SA) followed by five digits. Department of Energy (DOE) claims are now self-insured.

Crime Victims claims begin with a **V** followed by six digits, or double alpha letters (example **VA**) followed by five digits.

► Documentation for billing

For paid interpreters, healthcare or vocational providers or their staff must verify services through the scheduling system or on the **Interpreter Services Appointment Record (ISAR)** ([F245-056-000](#)) if the appointment was requested outside the scheduling system.



Links: The ISAR form ([F245-056-000](#)) can be ordered from the warehouse. Also, see [Common Errors on the Interpreter Services Appointment Record \(ISAR\)](#) for assistance in completing the form.

If the appointment involves multiple claims, a separate ISAR must be submitted for each claim and the healthcare or vocational providers or their staff must verify services on each ISAR.

All services provided to a worker on the same date for the **same claim** must be billed together.



Note: If corrections to the ISAR form are necessary, see “Changes to medical records” in Chapter 2: [Information for All Providers](#) for information on how to make corrections appropriately. (See definition of **Medical records** in Definitions at the beginning of Chapter 2.)

- When multiple claims are involved, the billable minutes must be prorated between the claims. The “Total Billable Minutes” on each ISAR submitted must match the amounts billed for that claim.
- If the appointment is a group of clients, include on the form:
 - The total number of clients (not healthcare or vocational providers) participating in the appointment, *and*
 - Verification of appointment by healthcare or vocational provider (printed name and signature of person verifying services), *and*
 - Date signed.

Interpreter service appointment must be submitted to the insurer when services are billed (**at the same time**). Fax State Fund documentation to **360-902-4567**.

Don't staple documentation to bill forms.

Send **documentation separately from bills** for State Fund or Crime Victims Compensation Program claims, and:

Send State Fund bills to:

Department of Labor & Industries
PO Box 44269
Olympia, WA 98504-4269
Or call **360-902-6500** or **1-800-848-0811**

For information on electronic billing for State Fund claims:

- Go to <https://lni.wa.gov/patient-care/billing-payments/billing-li/provider-express-billing>, *or*
- Contact the Electronic Billing Unit at:

Phone: **360-902-6511**
Fax: **360-902-6192**
Email: ebulni@lni.wa.gov

Fax documentation (ISAR) to 360-902-4567 when billing electronically. ISARs may not be submitted electronically.

Send Crime Victims Compensation Program bills to:

Department of Labor & Industries
PO Box 44520
Olympia, WA 98504-4520
Or call **360-902-5377** or **1-800-762-3716**

For self-insurer bills:

To determine insurer, see the SIE/TPA list at: <https://lni.wa.gov/insurance/self-insurance/look-up-self-insured-employers-tpas/index>

Or call 360-902-6901

Before payment is made for **on-demand appointments** arranged outside of the scheduling system:

- All **Interpreter Services Appointment Record (ISAR)** forms must be signed by the healthcare or vocational provider or the provider's staff to verify services, *and*
- All **ISAR** forms must be in the claim file. All **ISAR** forms must be in the file without crossed out information, comments, or notes in margins, *and*
- If the appointment involves multiple claims, a separate **ISAR** must be submitted for each claim and the healthcare or vocational providers or their staff must verify services on each **ISAR**, *and*
- All services provided to a worker on the same date for the same claim must be billed together, *and*
- You must send a completed **ISAR** form, including the healthcare or vocational provider's signature, at the same time as bill submittal.



Links: Additional information on interpreter billing is available at: <https://lni.wa.gov/patient-care/treating-patients/interpreter-services/>

For more information about billing, see the:

- **General Provider Billing Manual (F248-100-000)**.

Additional information on adjustments is available at:

<https://lni.wa.gov/patient-care/billing-payments/billing-li/getting-a-payment-adjusted>

When billing for individual interpretation services:

- Only the time actually spent delivering those services may be billed, *and*
- To avoid bill denial, you must bill all services for the same worker, for the same date of service, on one bill form, *and*
- Time is counted from when the appointment is scheduled to begin or when the interpreter arrives, whichever is later, to when the services end, *and*
- **Exception:** If the appointment starts early, time is counted from when the appointment actually begins. For example, the appointment is scheduled to start at 8:30 a.m. but interpreter arrives at 8:00 a.m. and appointment starts early at 8:15 a.m. Time is counted from 8:15 a.m. when the appointment actually started, *and*
- Time spent providing sight translation isn't counted separately.

▶ Payment limits

Daily time limit

The combined total is limited to **480 minutes** (8 hours) per day per interpreter, for both **on-demand** and scheduled appointments.

▶ L&I's Interpreter scheduling system

As of September 2020, L&I has a contract with interpretingWorks for the scheduling of most interpreter appointments. Providers should use this scheduling portal for their interpreter needs, except for some on-demand appointments.



Links: Sign up for interpretingWorks: <https://interpreting.works/login>

Interpreters are encouraged to join this scheduling system. A limited number of **on-demand appointments** will be available for interpreters who have provider accounts with L&I. See the **Payment Policy: Scheduling System** below for additional information.

▶ Standards and responsibilities for interpreter services provider conduct

L&I is responsible for ensuring workers and crime victims receive proper and necessary services. Interpreters are expected to adhere to the ethics requirements set forth by their certification, or the Department of Social and Health Services [WAC 388-03-050](#), if the certification the interpreter holds doesn't have an ethics component.

The DSHS WAC is the insurer's reference for interpreter expectations. L&I adopts a modified version of this WAC and refers to this as the ethics expectation standard for interpreters.



Note: Modification of [WAC 388-03-050](#) is referring to L&I instead of DSHS clients.

▶ Who chooses both the interpreter services provider and when the services are needed

[Title VI of the Civil Rights Acts of 1964](#) prohibits discrimination on the basis of race, color, or national origin in any program or activity that receives Federal funds or other Federal financial assistance. This includes discrimination based on limited English proficiency (LEP) persons. As a result, recipients and sub recipients of Federal financial assistance are responsible for taking reasonable steps to ensure meaningful access by LEP

persons to the recipients' and sub recipient's programs or activities, including the use of an interpreter. Failure to do so constitutes illegal discrimination and is a violation of an individual's civil rights.

The [American with Disabilities Act \(ADA\)](#) encourages healthcare or vocational providers serving L&I workers or crime victims to consult with the patient to identify appropriate aid or service necessary to treat them effectively. L&I covers the cost of interpretation services, however the healthcare or vocational provider is responsible for following the ADA guidance for interacting with individuals with communication challenges.

The healthcare or vocational provider will determine, with the worker, if the assistance of an interpreter is needed for effective communication to occur.

If **assistance is needed**, the healthcare or vocational provider will schedule an interpreter to provide medical interpretation during an appointment.

If an interpreter (whether paid or unpaid) accompanying the worker does not meet the communication needs, the healthcare or vocational provider determines **a different interpreter is needed** and:

- The worker may be consulted in the selection process, *and*
- Sensitivity to the worker's cultural background and gender is encouraged when selecting an interpreter, *and*
- The ultimate decision on who does the interpreting rests with the healthcare or vocational provider.

In all cases:

- A paid interpreter must meet L&I's credentialing standards (see **Definitions** at the start of this chapter) *and*
- Persons under age 18 may not interpret for workers or crime victims.

▶ **Additional requirements of hospitals and other facilities**

Hospitals, freestanding surgery and emergency centers, nursing homes, and other facilities may have additional requirements for persons providing services within the facility. For example, a facility may require all persons delivering services to have a criminal background check, even if the provider isn't a contractor or a facility employee.

The facility is responsible for notifying the interpreter services provider of their additional requirements and managing compliance with the facilities' requirements.



Payment policy: Independent medical examination (IME) interpreter services

► Prior authorization

IME interpretation services

When an IME is scheduled, the insurer or IME provider will arrange for the interpreter services through the scheduling system. Interpreters who accompany the worker won't be paid or allowed to interpret at the IME. The IME provider will arrange interpreter services through the scheduling system, interpretingWorks.



Note: See the definition of **IME** in Definitions at the beginning of this chapter.



Link: Arranging an interpreter through interpretingWorks:

<https://interpreting.works/login>

► Who can't perform these services

Persons (including interpreters with account numbers) who can't provide interpretation or translation services at IMEs for workers or crime victims are:

- Those related to the worker or crime victim, *or*
- Those with an existing personal relationship with the worker or crime victim, *or*
- The worker's or crime victim's legal or lay representative or employees of the legal or lay representative, *or*
- The employer's legal or lay representative or employees of the legal or lay representative, *or*
- Any person who couldn't be an impartial and independent witness, *or*
- Persons under age 18.



Link: Also see: [WAC 296-23-362\(3\)](#), which states, "The worker may not bring an interpreter to the examination. If interpreter services are needed, the insurer will provide an interpreter."

▶ Services that can be billed

IME no shows

Authorization is required prior to payment for an IME no show. For questions, call the Provider Hotline at 1-800-848-0811. Only services related to no shows for insurer-requested IMEs will be paid.

The insurer will pay a flat fee for an IME no show.



Link: For more information, see: [WAC 296-20-010\(5\)](#) which states, “L&I or self-insurers will not pay for a missed appointment unless the appointment is for an examination arranged by the department or self-insurer.”



Note: After occurrence of IME no show for Self-insured claims, contact the SIE/TPA.

▶ Payment limits

Only one no-show fee per day is payable. Prior authorization is required.



Payment policy: Scheduling System

▶ L&I's Interpreter scheduling system

As of September 2020, L&I has a contract with interpretingWorks for the scheduling of most interpreter appointments. Providers should use this scheduling portal for their interpreter needs, except for some on-demand appointments.



Link: Arranging an interpreter through interpretingWorks:

<https://interpreting.works/login>

Interpreters are encouraged to join this scheduling system. A limited number of **on-demand appointments** outside of the scheduling system will be available for interpreters who have provider accounts with L&I. These are arranged by the healthcare or vocational provider.

Healthcare and vocational providers may not select the same interpreter for every appointment scheduled by the worker, unless there are extenuating circumstances.

Situations in which the same interpreter is necessary for each appointment may include:

- Continuity of care and case familiarity for a crime victim, *or*
- If the worker has authorized coverage for mental health, *or*
- Familiarity with a pain management program or a brain injury rehabilitation program where having the same interpreter is beneficial to the outcome.

On a case-by-case basis, requests for the same interpreter for languages of lesser diffusion may be allowed. Decision rests with the scheduling system and is dependent on availability of the interpreter.



Payment policy: Telephone and Video interpreter services

▶ Prior authorization

Telephone or video interpreter services don't require prior authorization on open claims.



Note: Providers should check claim status with the insurer prior to requesting interpreter services. Call 1-800-831-5227 for updated claim status.

▶ Who must perform these services to qualify for payment

Healthcare, vocational, and activity coach providers, both in and out of state, who use telephone and/or video interpreter services, must use the preapproved DES contracted vendor(s).



Link: Information is available on the L&I web site at: [How providers arrange interpreter services](#)

▶ Services that are covered

Healthcare providers' telephone and video interpreter services are covered when:

- There is face-to-face contact between the healthcare or vocational provider and the worker, *and*
- Either the healthcare or vocational providers request services. Providers may only use the DES contracted vendor(s).



Payment policy: Translation services

▶ Prior authorization

Document translation services are only paid when performed at the insurer's request. Services will be authorized before the request packet is sent to the translators.

▶ Who must perform translation services to qualify for payment

Only Department of Enterprise Services (DES) contracted translators may complete document translation requests.



Note: Sight translation is provided by interpreters during an appointment with a client and a healthcare or vocational provider. Document translation services are for written materials and are only payable when requested by the insurer.

▶ Services that are covered

Document translation is an insurer-requested service only. Payment for document translation will be made only if the service was requested by the insurer, and the translation provider is part of the DES contract.



Links: Related topics

If you're looking for more information about...	Then go here:
Administrative rules for interpreter services	Washington Administrative Code (WAC) 296-20-010(5): http://apps.leg.wa.gov/WAC/default.aspx?cite=296-20-010 WAC 296-23-362(3): http://apps.leg.wa.gov/WAC/default.aspx?cite=296-23-362 WAC 296-23-302 http://apps.leg.wa.gov/WAC/default.aspx?cite=296-23-302
Administrative rules for missed appointments	WAC 296-20-010(5): http://apps.leg.wa.gov/WAC/default.aspx?cite=296-20-010
Becoming an L&I interpreter provider	L&I's website: https://lni.wa.gov/patient-care/provider-accounts/become-a-provider/become-an-interpreter
Becoming an L&I provider	L&I's website: https://lni.wa.gov/patient-care/provider-accounts/become-a-provider/
Billing adjustments	L&I's website: https://lni.wa.gov/patient-care/billing-payments/billing-li/getting-a-payment-adjusted
Billing instructions and forms	Chapter 2: Information for All Providers
Common Errors on the Interpreter Services Appointment Record (ISAR)	L&I's website: https://lni.wa.gov/forms-publications/f245-436-000.pdf
DES Telephone and Video Interpreter Services contract	Washington State Government DES website: https://apps.des.wa.gov/DESContracts/Home/ContractSummary/02819
Ethics for Interpreters	WAC 388-03-050: http://apps.leg.wa.gov/WAC/default.aspx?cite=388-03-050

If you're looking for more information about...	Then go here:
Federal laws relevant to interpreter services	Civil Rights Act of 1964, available online at: www.eeoc.gov/laws/statutes/titlevii.cfm
Fee schedules for all healthcare professional services (including interpreter services)	L&I's website: https://lni.wa.gov/patient-care/billing-payments/fee-schedules-and-payment-policies/
How providers arrange interpreter services	L&I's website: www.lni.wa.gov/ClaimsIns/Providers/TreatingPatients/interpreters/arrangeSvc
Interpreter Lookup Service	L&I's website: https://fortress.wa.gov/lni/ils/
Interpreter Services Website	L&I's website: https://lni.wa.gov/patient-care/treating-patients/interpreter-services/
Interpreter Services Appointment Record (ISAR) form	L&I's website: https://lni.wa.gov/forms-publications/f245-056-000.pdf
interpretingWorks (L&I's contracted scheduling system)	interpretingWorks website: https://interpreting.works/login
L&I's General Provider Billing Manual	L&I's website: https://lni.wa.gov/forms-publications/F248-100-000.pdf
Language Link (DES contracted vendor)	Language Link website: https://www.language.link/
LionBridge (DES contracted vendor)	LionBridge website: https://www.lionbridge.com/
National Provider Identification number	Centers for Medicare and Medicaid Services website: https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvIdentStand?utm_medium=email&utm_source=govdelivery
Sign up for L&I provider news and updates	L&I's website: www.Lni.wa.gov/Main/Listservs/Provider
Statement for Crime Victim Miscellaneous Services form	L&I's website: https://lni.wa.gov/forms-publications/f800-076-000.pdf

► **Need more help?** Call L&I's Provider Hotline at **1-800-848-0811**