**WSHA Guidance on Staff Training Requirements – Charity Care and Interpreter Services**

**Background on Staff Training Requirements.** With new legislation in 2018, hospitals are required to develop and provide regular, standardized training programs to their staff regarding the hospital’s charity care policies and use of interpreter services. This document outlines basic elements to consider incorporating into a training program.

The trainings must be provided to “appropriate staff,” including staff who perform functions relating to registration, admissions or billing. The goal of these trainings is to provide staff with information about the hospital’s charity care or financial assistance policy. This includes the ability to effectively answer questions about financial assistance and charity care, direct inquiries to the appropriate department in a timely manner, and obtain any necessary interpreter services.

Hospitals also have existing obligations under federal and state laws to provide meaningful access for limited English proficiency and non-English-speaking patients. State law specifies that meaningful access obligations apply to billing and charity care.

The specifics of each training will depend on the hospital’s charity care and interpreter policies and procedures. These trainings may be provided in the medium that is most effective (web-based, in person, etc.) and at such times and places as the hospital deems appropriate to provide regular training to appropriate staff. Consider how the hospital will document that trainings were provided, the content, and the frequency. Hospitals should also plan to obtain attestations.

This information is provided as guidance. Hospitals should consult with legal counsel with specific questions.

**Training Elements – Charity Care**

NOTE: These elements assume that the staff receiving this training are not those staff who administer and make determinations regarding charity care. The below training elements are intended as a basic primer on charity care law, how to provide patients with information on applying for the hospital’s charity care program, and how to connect patients with hospital staff who can aid with specific billing and charity care questions. Administration and compliance with state charity care law and making specific charity care determinations requires a more nuanced and sophisticated understanding than the basic elements below. Again, please consult with legal counsel regarding the specific needs of your hospital.

1. Determine the appropriate staff to receive training and timing of training
   - Staff who perform functions relating to registration, admissions, or billing
   - May include other staff as the hospital deems appropriate, such as patient advocates
   - Timing could include new orientation and refresher education
2. Provide an overview of legal and regulatory obligations
   - Washington state law requires all hospitals in the state to provide free or reduced cost care to low-income patients. This obligation is referred to in state law as “charity care.”
   - Eligibility is based on a patient’s family size and income based on the federal poverty level guidelines.
   - Patients may be eligible for any medically necessary hospital health care and the hospital may not limit charity care eligibility to emergency services.
   - Patients may be eligible for charity care whether or not they have insurance.
   - Hospitals must help patients learn about charity care and make information about charity care widely available to patients.
   - Each hospital must develop a charity care policy that complies with state law. Hospitals may be more generous than state law and the details of charity care policies may vary between hospitals.
   - Patients need to fill out an application and provide supporting documentation in order to be considered for charity care.
   - The hospital has specific policies and procedures about charity care.

3. Terminology
   - If the hospital uses the term “charity care” and “financial assistance,” provide information on whether these terms are used interchangeably.
   - Educate staff that some patients may be offended by the term “charity care.”

4. How and when to provide information to patients
   - Based on the hospital’s charity care policy and procedures, educate staff on how and when to provide patients with information about the availability of charity care, including information provided in writing and verbally at the time staff requests information about the availability of any third-party coverage.
   - Provide staff with a script or other tools to use to provide patients with information about charity care in person, by phone, or by other means.
   - Educate staff on how to access translated materials and interpreter services as needed to effectively explain or answer questions about charity care.
   - Educate staff on when and where to refer patients to appropriate staff who administer the hospital’s charity care and financial assistance processes.

5. Location of hospital charity care information
   - Educate staff on where staff, patients, and the public can access the hospital’s charity care policy, a summary of the policy, the hospital’s charity care application, and any other information the hospital has prepared, such as brochures. This could include translated documents, paper and electronic versions, where documents are stored on the hospitals’ electronic health record system or intranet, and where documents are publicly posted to the hospitals’ website.
     - Note: The charity care policy, summary, and application must be available on the hospital’s website. This includes translated versions of the summary and application.
o Provide staff with copies or access to copies of relevant documents as part of the training, including the statement about free care or a discount printed on hospital billing statements.
  o Consider elements in WSHA Standard Communications Plan.

6. Where can staff refer patients who have questions?
  o Name of office, phone number, location in hospital.

**Training Elements – Use of Interpreter Services**

NOTE: The specific elements of a training program will depend on the hospital’s policies, procedures, and interpreter resources.

1. Determine the appropriate staff to receive training and timing of training
  o Staff who perform functions relating to registration, admissions, or billing.
  o May include other staff as the hospital deems appropriate, such as clinical staff.
  o Timing could include new orientation and refresher education.

2. Provide an overview of legal and regulatory obligations
  o Hospitals have legal obligations to provide interpreter services for patients and family members who have limited English proficiency, are non-English-speaking, and who are deaf or hard of hearing.
  o Brief education on the sources of legal requirements and broad applicability (for example, The Americans with Disabilities Act, Title VI of the Civil Rights Act of 1964, and Section 1557 of Affordable Care Act).
  o The hospital has specific policies and procedures regarding interpreter services.

3. Educate staff on how to assess a situation to determine whether a patient or family member needs an interpreter
  o Provide standardized tools or scripts to use to assess a person’s needs at each encounter.
  o Develop appropriate questions to ask to determine whether an interpreter is needed for effective communication and what language the patient feels most comfortable using.
  o Educate staff on where to look for an indication of language access needs in patient record (electronic health record, etc.) and how to update information (similar to confirming address or insurance).
  o Provide staff with guidance on identifying appropriate and available interpreter options.
  o Educate staff that interpreter services should be provided in a timely manner and the use of secondary options (such as telephone-based interpretation) while awaiting preferred available option (such as in-person or video remote technology).

4. Provide instructions on how staff can access interpreter services
  o Provide information on available interpreter options for qualified interpreters, including in-person, video-remote technology (VRT), and telephone options.
  o Educate staff that friends, family members and especially children should not be used except when all other options have been explored/exhausted.
Provide information on the hospital department that coordinates interpreter needs (if applicable). Provide name of office, phone number, and location in hospital.

Train staff on how to access interpreters (where video remote technology or other equipment is stored, phone number and process to access telephonic interpreters, and information on how to schedule in-person interpreters).

- NOTE: Hospitals should ensure that there is a person on each shift who is capable of setting up the necessary equipment.

5. What should staff do if there is a problem accessing interpreter services?
   - How to troubleshoot issues with each interpreter option.
   - Who to contact at the hospital for help.
   - What to do if the patient needs to speak with someone at the hospital who is not available (such as if the billing office is closed).
   - Train staff on what to do if the patient cannot be immediately connected with a service and how to schedule future needs.

Zosia Stanley, WSHA
Barbara Shickich, Fox Rothchild LLP
June 2018