The Connecticut Hospital Association (CHA) appreciates the opportunity to submit testimony in support of SB 416, An Act Concerning Health Insurance Coverage For Interpreter Services, which would require that health insurers provide coverage for interpreter services for hearing impaired individuals who are receiving care covered by an insurance policy. “Hearing impaired” is not defined in the proposed bill, and CHA respectfully recommends that the bill be amended to clarify that it includes persons who are deaf or hard of hearing.

Effective communication with health care providers is essential in order to obtain appropriate treatment. It is critical for patients to be able to inform clinicians of their current problems and medical histories in order for clinicians to make appropriate diagnoses and treatment recommendations. It is equally important for the healthcare providers to be able to communicate the recommended treatment to the patient, obtain informed consent, and give the patient detailed instructions about the treatment regimen, possible side effects, circumstances under which to call the provider immediately, and follow-up care.

For deaf and hard of hearing patients, effective communication may require the use of auxiliary aids or services, including interpreters. Currently, federal and state anti-discrimination laws require that healthcare providers provide the necessary auxiliary aids or services to ensure effective communication with patients who are deaf or hard of hearing. The expense for interpreter services is borne entirely by the healthcare provider.

Through a contract with Family Services Woodfield, Connecticut hospitals routinely obtain and pay for interpreter services for hundreds of deaf and hard of hearing patients per month. Providers in non-hospital settings may not be as familiar with their obligations to provide interpreter services and may not be aware of how to access such services. In these settings, patients may be relying on other methods to communicate and foregoing the use an interpreter for fear that the cost may be passed on to them. By making interpreter services part of deaf and hard of hearing patients’ insurance coverage, this bill would highlight healthcare providers’ obligations to arrange for such services in any healthcare setting and would reinforce for patients that they will not be charged for such services, thereby facilitating the availability of interpreters to deaf and hard of hearing patients as they seek medical treatment in any setting.

Hospitals and other healthcare providers currently bear the entire expense of interpreter services for any patient who needs such services, and receive no reimbursement from the patient’s insurance. In many cases, the cost of the interpreter alone exceeds the reimbursement to the provider for provision of medical services. As hospitals continue to face rising costs and declining reimbursements, insurance companies are in a better position than healthcare providers to manage the cost of interpreters over their entire insured population.

Thank you for your consideration of our position.

JJR:CCB:mb