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FOR IMMEDIATE RELEASE

**Providing Medical Interpreter Services to Patients with
Limited English Proficiency**

Wallingford, Connecticut, October 25, 2006 – At a press conference today, the Connecticut Hospital Association (CHA) voiced support for the Connecticut Health Foundation's (CHF) proposal to enhance hospitals' ability to serve patients with limited English proficiency (LEP).

“Connecticut hospitals are committed to meeting the needs of patients with limited English proficiency,” said Jennifer Jackson, President and CEO of CHA. “We applaud the work of the Connecticut Health Foundation in this area.”

Each year the need for LEP services, as well as other healthcare services, increases significantly, further challenging our healthcare system. To provide optimal service to LEP patients, CHA recommends that the state should contract for language interpretation services and administer a statewide program through which Connecticut hospitals and other healthcare providers could access medical interpreters. This would enable healthcare providers to focus on taking care of patients while having access to more efficient and consistent interpreter services.

CHA also supports the CHF proposal to track service utilization by LEP patients in order to improve patient care, and suggests that such a tracking service be part of the statewide program administered by the state. CHA would look forward to working with the state to facilitate the development of a uniform, coordinated, and efficient tracking system.

The CHF proposal seeks reimbursement to help defray the cost of providing LEP services to Medicaid patients; however, it would not apply to the rest of the LEP community. While this is a step in the right direction, more needs to be done to assist hospitals in providing this service to a broader LEP population.

“We would welcome the opportunity to participate in a work group to identify obstacles to and successful approaches for providing LEP services and possible education and outreach activities to increase the use of existing services,” concluded Jackson.

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