

Maine Behavioral Health Organization

# **MAINE BEHAVIORAL HEALTH ORGANIZATION**

**Policies & Procedures for Limited, Non-English Speaking Members and/or Deaf/Hard of  
Hearing Members**

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# Maine Behavioral Health Organization

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## Policy

### General

**A. Purpose.** Maine Behavioral Health Organization (MBHO) provides interpreters to comply with State and Federal law as well as the provisions of the MaineCare Benefits Manual, Chapter I, Section 1.03-3.

1. Interpreting organizations that request supplementary payment for services outside of this policy shall be considered to be in violation of the organization's policy which may delay payment. A request for reimbursement on supplementary services, shall include, but is not limited to, the referral process, appointment setting, authorization processes, administrative components of services, or anything not covered by the MaineCare Benefits Manual or state and federal law, that is considered supplementary, unless authorized by MBHO's CEO.

2. Title 42 U.S.C. §1320a-7(b) specifically provides, in part, for criminal penalties, for organizations billing MaineCare/Medicaid, as follows: "Whoever knowingly and willfully; (1) charges, for any services provided to a patient under a State Plan approved under subchapter XIX of this title, money or other consideration at a rate in excess of the rates established by the State shall be guilty of a felony and upon conviction thereof shall be fined not more than twenty-five thousand dollars \$25,000 or imprisoned for not more than five (5) years, or both." (MCBM, 2016). MBHO will not reimburse more than what is allowable in the current publication of the *MaineCare Benefits Manual* in order to comply with the above statement.

Payment may be made by the Maine Department of Health and Human Services, to MBHO, only for MaineCare covered services provided to individuals who are eligible for services on the date the services are actually provided unless otherwise specified in the *MaineCare Benefits Manual*, or who have been granted retroactive MaineCare eligibility after services have been provided.

Recipients of services will not be charged for covered services provided during any period of MaineCare eligibility unless a member has knowingly misrepresented, in writing, his or her MaineCare or other insurance coverage status. MBHO will bill the Department/insurance for covered services provided to recipients during any period of eligibility for which MBHO expects to be reimbursed.

3. MBHO will only reimburse what is reimbursed by MaineCare and other insurances, unless other arrangements have been made, as authorized by the CEO. MBHO will not reimburse interpreting services that are not covered in this policy or by law.

4. MBHO has designated interpreters and schedules appointments (see procedure). Interpreters hired outside of what MBHO has set up or authorized for payment will be the responsibility of the individual accessing interpreting services. MBHO will reimburse outside interpreting agencies when interpreting required is not available through MBHO.

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In order to bill MBHO for interpreting services, the interpreting agency must be bonded. Additional requirements are noted later in this policy.

**B. Covered Services.** All covered services reimbursable must meet MaineCare's definition and have received prior authorization for medically necessary care as described in the most current version of the *MaineCare Benefits Manual*. MaineCare members may be eligible for as many covered services that are medically necessary and within the limitations outlined in applicable sections of the *MaineCare Benefits Manual*. Recipients of services must provide proof of coverage when using other insurances.

1. Family members or personal friends may be used as interpreters, but will not be paid by MBHO. "Family" means any of the following: husband or wife, natural or adoptive parent, child, or sibling, stepparent, stepchild, stepbrother, stepsister, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent or grandchild, spouse of grandparent or grandchild or any person sharing a common abode as part of a single family unit. Family members or friends, with the exception of those individuals under the age of 18, may be used as non-paid interpreters if:

i. requested by the recipient of services; and

ii. the use of this friend or family member does not compromise the effectiveness of services or violate the recipient's confidentiality; and

iii. the member is advised, by MBHO staff, that an interpreter is available at no charge to the recipient.

**2. MBHO has its own organizations used to provide interpreting services; if the recipient of services wishes to use interpreters outside of what the organization has provided, the recipient of services is responsible for coordinating and paying for those interpreting services.**

3. Should the interpreter provide transportation to the recipient of services (whether contracted by MBHO or the recipient), MBHO will not reimburse the interpreter for transporting the member while concurrently billing for interpreter services. All interpreter services will be provided in accordance with the *Americans with Disabilities Act*.

4. Interpreting agencies requesting reimbursement from MBHO will provide an invoice that contains, at a minimum: interpreter name and qualifications, date, time and duration of service (which will coincide with the MaineCare or other insurance reimbursable service provided), language used, verification of having reviewed and followed the Interpreter Code of Ethics (see Appendix C).

i. Invoices will be sent directly to MBHO's CEO for verification and approval prior to payment. MBHO will only pay for what is reimbursable under MaineCare or other insurance regulations/policies. Costs outside of the service, unless authorized by

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MBHO's CEO, will be the responsibility of the recipient of services and the interpreting agency.

ii. Excessive billing, beyond what is covered, will be reported to the appropriate authorities.

5. Interpreters must maintain confidentiality of the recipient of services. Before payment is provided by MBHO, interpreters must sign or provide proof of having read the interpreter code of ethics and/or complete MBHO's receipt/confirmation of services form (see Appendix B and C). Completing the form shall be deemed as compliance with this policy requirement.

**C. Interpreters for Deaf/Hard of Hearing Recipients of Services.** MBHO will make interpreters available; interpreters hired outside of MBHO's authorization practices will not be reimbursed/paid. Interpreters must be licensed by the Maine Department of Professional and Financial Regulation as: Certified Interpreters/Transliterators, Certified Deaf Interpreters, Limited Interpreters/Transliterators, or as Limited Deaf Interpreters. MBHO will pay for two interpreters for deaf recipients of services who utilize non-standard signing and request a relay interpreting team including a deaf interpreter, for whom signing is in his/her native language, working with a hearing interpreter.

MBHO will reimburse actual appointment time and travel time. Interpreter wait time will not be reimbursed.

**D. Language Interpreters.** MBHO will make interpreters available; interpreters hired outside of MBHO's authorization practices/policy will not be reimbursed/paid. MBHO only uses interpreters that meet state/federal reimbursement requirements, unless otherwise authorized by the CEO.

MBHO will reimburse actual appointment time and travel time. Interpreter wait time will not be reimbursed.

**E. Documentation.** In all cases, MBHO staff will place documentation of interpreting services provided, in the client chart. This documentation will include the date and time of the interpreter service, language used, and the name of the interpreter. A copy of the invoice must also be filed in the chart.

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## Procedures.

**A. Phone Calls.** When a recipient of services or interpreter calls an MBHO office, to include the med clinic, staff will take down all the client contact information, language spoken, and inform the recipient or interpreter that MBHO provides interpreting services through a designated interpreting agency, and inform the recipient or interpreter that the organization will call back to provide required information for scheduling an appointment with the designated interpreting agency. The recipient and/or interpreter will be informed that MBHO will not reimburse for interpreting services not scheduled by MBHO.

i. MBHO staff will call the designated interpreting agency and set up a time to use an interpreter to call the recipient of services back and schedule an appointment.

ii. If the recipient of services does not answer the phone, the staff, through the interpreting agency, will leave a voice mail stating when the scheduled appointment is. Staff will coordinate with the designated interpreting agency to ensure that interpreters are available for the appointment.

**B. Walk-ins.** When a recipient of services walks into any of MBHO's offices, to include the Med Clinic, staff will use the chart in Appendix A to determine, with the recipient, what language an interpreter is needed for. Once the language has been identified, the recipient of services will be directed to wait in the waiting room until an interpreter is available. MBHO staff will call the designated interpreting agency and obtain the appropriate interpreter.

i. Walk-ins that enter any of MBHO's offices, including the Med Clinic, with an interpreter that they obtained themselves will be provided a copy of this policy and immediately informed that MBHO coordinates for interpreters and that interpreters not specifically set up by MBHO will not be reimbursed/paid.

ii. Interpreting confirmations and invoices will not be signed by anyone other than the CEO. Staff will not accept these invoices, and will redirect the recipients of services and their interpreter, to mail the invoices directly to MBHO's CEO, Jason R. White, 49 Oak Street, Augusta, ME 04330.

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## Appendix A. Language Card.

### Europe

<b>Albanian</b> Tregoni me gisht gjuhën tuaj. Do të thërrasim një përkthyes. Përkthyesi do të merret falas për ju.	Shqip 🗣️
<b>Armenian</b> Յոյց տու՛ւք ո՛ր մէկ լեզու՛ն կը խօսիք՝ Թարգմանիչը մը կանչել կը տանք. Թարգմանիչը կը տրամադրուի անվճար.	Հայերէն 🗣️
<b>Basque</b> Euskara seinalatu. Jarraian itzultzaile bati deituko diogu. Itzultzaileak doako zerbitzua eskeinito dizu.	Euskara 🗣️
<b>Bosnian</b> Pokažite svoj jezik. Prevodilac će biti pozvan. Prevodilac je obezbijeden bez troškova za vas.	Bosanski 🗣️
<b>Bulgarian</b> Посочете вашият език. Ще бъде извикан преводач. Преводачът е осигурен безплатно за вас.	Български 🗣️
<b>Croatian</b> Pokažite svoj jezik. Prevoditelj će biti pozvan. Prevoditelj je obezbijeden bez troškova po vas.	Hrvatski 🗣️
<b>Czech</b> Ukažte na váš jazyk. Bude zavolán tlumočník. Tlumočení je pro vás bezplatné.	Čeština 🗣️
<b>Danish</b> Peg på dit sprog. En tolk vil blive tilkaldt. Tolken tilbydes uden omkostninger for dig.	Dansk 🗣️
<b>Dutch</b> Wijs uw taal aan. Wij zullen u een tolk geven. De service van de tolk is geheel gratis.	Nederlands 🗣️
<b>Estonian</b> Osutage oma keelel. Vastava tõlgiga võetakse ühendust. Tõlgi teenused on teie jaoks tasuta.	Eesti keel 🗣️
<b>Finnish</b> Osoita maasi kieltä. Kutsumme tulkin paikalle. Tulkin käyttö on sinulle ilmaista.	Suomi 🗣️
<b>French</b> Pointez vers votre langue et on appellera un interprète qui vous sera fourni gratuitement.	Français 🗣️
<b>German</b> Zeigen Sie auf Ihre Sprache. Ein Dolmetscher wird gerufen. Der Dolmetscher ist für Sie kostenlos.	Deutsch 🗣️
<b>Greek</b> Δειξτε τη γλώσσα σας και θα καλέσουμε ένα διερμηνέα. Ο διερμηνέας σας παρέχεται δωρεάν.	Ελληνικά 🗣️
<b>Hungarian</b> Mutasson rá erre a nyelvre. Tolmácsot fogunk hívni. A tolmács az Ön számára díjtalán.	Magyar 🗣️

<b>Icelandic</b> Bentu á þitt tungumál. Það verður hringt í túlk. Túlkurinn er þér að kostnaðarlausu.	Íslenska 🗣️
<b>Italian</b> Puntare sulla propria lingua. Un interprete sarà chiamato. Il servizio è gratuito.	Italiano 🗣️
<b>Lithuanian</b> Nurodykite savo kalbą. Bus pakviestas vertėjas. Vertėjas jums bus suteiktas nemokamai.	Lietuvių 🗣️
<b>Macedonian</b> Покажете на јазикот на кој зборувате. Ке повикаме преведувач. Услугите на преведувачот се бесплатни.	Македонски 🗣️
<b>Norwegian</b> Pek på ditt språk. Vi tilkaller en tolk. Tolken arbeider uten at det koster deg noe.	Norsk 🗣️
<b>Polish</b> Proszę wskazać swój język i wezwijemy tłumacza. Tłumacza zapewnimy bezpłatnie.	Polski 🗣️
<b>Portuguese</b> Indique o seu idioma. Um intérprete será chamado. A interpretação é fornecida sem qualquer custo para você.	Português 🗣️
<b>Romanian</b> Indicați limba pe care o vorbiți. Vi se va face legătura cu un interpret care va este asigurat gratuit.	Română 🗣️
<b>Russian</b> Укажите язык, на котором вы говорите. Вам вызовут переводчика. Услуги переводчика предоставляются бесплатно.	Русский 🗣️
<b>Serbian</b> Покажите свой jezik. Prevodilac ће бити позван. Prevodilac је обезбеђен без трошкова за вас.	Српски 🗣️
<b>Slovak</b> Ukážte na vašu reč. Zavoláme tlmočníka. Tlmočenie je pre vás bezplatné.	Slovenčina 🗣️
<b>Spanish</b> Señale su idioma y llamaremos a un intérprete. El servicio es gratuito.	Español 🗣️
<b>Swedish</b> Peka på ditt språk. En tolk kommer att tillkallas. Tolken erbjuds utan kostnad för dig.	Svenska 🗣️
<b>Ukrainian</b> Вкажіть вашу мову. Вам викличуть перекладача. Послуги перекладача надаються безкоштовно.	Українська 🗣️
<b>Yiddish</b> ווייזט אן אויף איינער שפראך און מ'זעט רופן א דאלמעטשער. דער דאלמעטשער ווערט צוגעשטעלט אויסט, עס וועט אייך גארנישט קאסטן.	אײִדיש 🗣️

### Pacific Islands

<b>Fijian</b> Dusia na nomu vosa. Ni na vakarautaki mai e dua na dau vakadewa vosa. Na dau vakadewa vosa e sega ni saumi.	Vosa Vakaviti 🗣️
<b>Ilocano</b> Itudo yo ti sao yo. Maawagan ti maysa nga mangipatpatarus. Iti mangipatpatarus ket tumulong kadakayo nga saan yo a bayadan.	Ilokano 🗣️
<b>Indonesian</b> Tunjukkan bahasa Anda. Jurubahasa akan diadakan. Jurubahasa diadakan tanpa Anda dibebani biaya.	Bahasa Indonesia 🗣️
<b>Malay</b> Tunjukkan bahasa anda. Jurubahasa akan dihubungi. Jurubahasa akan disediakan tanpa anda dikenakan bayaran.	Bahasa Melayu 🗣️
<b>Marshallese</b> Kwalok Kajin Eo Am. Im Renaj Kir Ri-ukokok Eo. R-ukok Eo Enaj Ejelok Wönen Ilo An Jibañ Eok.	Kajin Majöl 🗣️
<b>Samoan</b> Fa'asino lau gagana. O le a vala'au se fa'amatala'upu. Ua saunia se fa'amatala'upu e aunoa ma se tau e te togotiina.	Fa'asamoa 🗣️
<b>Tagalog</b> Ituro po ang inyong wika. Isang tagasalin ang ipagkakaloob nang libre sa inyo.	Tagalog 🗣️
<b>Tongan</b> Tuhu'i mai ho'o lea fakafonua. 'E ui ha fakatonulea. 'Oki ta'etotongi kia koe 'a e fakatonulea.	Lea Faka-Tonga 🗣️

### North America, South America, and Caribbean

<b>French</b> Pointez vers votre langue et on appellera un interprète qui vous sera fourni gratuitement.	Français 🗣️
<b>Haitian Creole</b> Lonje dwèt ou sou lang ou pale a epi n ap rele yon entèprèt pou ou. Nou ba ou sèvis entèprèt la gratis.	Kreyòl 🗣️
<b>Portuguese</b> Indique o seu idioma. Um intérprete será chamado. A interpretação é fornecida sem qualquer custo para você.	Português 🗣️
<b>Spanish</b> Señale su idioma y llamaremos a un intérprete. El servicio es gratuito.	Español 🗣️

See next page for more options.

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## India, Pakistan, and Southwest Asia

**Bengali** বাংলা  
আপনার ভাষার দিকে নির্দেশ করুন। একজন দোভাষীকে ডাকা হবে।  
দোভাষী আপনি নিখরচায় পাবেন।

**Gujarati** ગુજરાતી  
તમારી ભાષાનો ઉલ્લેખ કરો. હુ ભાષિયાને બોલાવી શકાશે.  
દોભાષિયાને બોલવવામાં તમારે અર્થ આપવો જરૂરી પડે.

**Hindi** हिंदी  
अपनी भाषा पर इंगित करें और एक दुभाषिया बुलाया जाएगा।  
दुभाषिये का प्रबंध आप पर बिना किसी खर्च के किया जाता है।

**Malayalam** മലയാളം  
നിങ്ങളുടെ ഭാഷ ചുണ്ടിക്കാണിക്കുക.  
ഒരു പരിഭാഷകനെ വിളിക്കുന്നതായിരിക്കും.  
നിങ്ങളുടെ ചെലവില്ലാതെ പരിഭാഷകനെ ലഭ്യമാക്കുന്നതായിരിക്കും.

**Nepali** नेपाली  
आपको भाषातर्फ आँल्याउनुहोस्। एक दोभाषेलाई बोलाइनेछ।  
तपाईंको बिना कुनै खर्चको, एकजना दोभाषे उपलब्ध गराइनेछ।

**Punjabi** ਪੰਜਾਬੀ  
ਅਪਣੀ ਭਾਸ਼ਾ 'ਤੇ ਇਸ਼ਾਰਾ ਕਰੋ ਅਤੇ ਇਕ ਦੁਬਾਸ਼ੀਆ ਬੁਲਾਇਆ ਜਾਵੇਗਾ।  
ਦੁਬਾਸ਼ੀਆ ਤੁਹਾਡੇ ਬਿਨਾਂ ਕਿਸੇ ਖਰਚ ਦੇ ਬਿਨਾਂ ਮਿਲੇਗਾ।

**Sinhalese** සිංහල  
ඔබේ භාෂාව පෙන්වන්න. භාෂා පරිවර්තකයෙකු කැඳවනු ඇත.  
භාෂා පරිවර්තකය ඔබට නොමිලයේ කැඳවනු ඇත.

**Tamil** தமிழ்  
உங்கள் மொழியை சுட்டிக்காட்டுங்கள்.  
உரைபெயர்ப்பாளர் ஒருவர் அணுகக்கூடப்படுவார்.  
உரைபெயர்ப்பாளருக்காக நீங்கள் செலவு செய்யத் தேவையில்லை.

**Telugu** తెలుగు  
మీ భాషను గుర్తించండి. మీ భాషను వాడకులను పిలువబడును.  
మీకు ఎటువంటి ఖర్చు లేకుండా భాషను వాడకులను సమకూర్చబడును.

**Urdu** اُردو  
اپنی زبان پر اشارہ کریں اور ایک ترجمان بلايا جائگا۔  
کا انتظام آپ پر بغیر کسی خرچ کے کیا جاتا ہے۔

## Africa

**Acholi** Acoli  
Cim leb ma megı. Lagony lok mo gibilwongo.  
Lagony lok man gimiyi nono labongo cul mo.

**Amharic** አማርኛ  
ታንታኦትን ያመልክቱ፣ አስተርጓሚን ያጠራልሉ።  
አስተርጓሚውን በነጻ ያተርጉሙ።

**Arabic** عربي  
أشرف إلى لغتك. وسوف يتم جلب مترجم فوري لك.  
سيتم تأمين المترجم الفوري مجاناً.

## Africa - continued

**Dinka** Thok monyjang  
Nyoth thok monyjang. Bakedang wet awaric thong set.  
Turjubaanka lagu dalbayo waa bilaash.

**French** Français  
Pointez vers votre langue et on appellera un interprète  
qui vous sera fourni gratuitement.

**Hausa** Hausa  
Nuna yarenka/ki. Za a kira tafinta.  
Ana sam da maka/ki tafintar kyauta.

**Italian** Italiano  
Puntare sulla propria lingua.  
Un interprete sarà chiamato. Il servizio è gratuito.

**Nuer** Magaca luqadda  
Ku tilmaan luqaddaada. Turjubaan ayaa looyeerı-doona.  
Turjubaanka laguugu yeerayo waa bilaash.

**Oromo** Oromo  
Mallatto gara Loqoda keeti. Turjumaanni ni waamama.  
Turjumaanni beesee takka malee siif qophaawa.

**Portuguese** Português  
Indique o seu idioma. Um intérprete será chamado.  
A interpretação é fornecida sem qualquer custo para você.

**Portuguese Creole** Crioulo Português  
Nho pontá pa lingu qui nho ta papiá. No ta arranja um interprete  
pa nho. No ta rranja um interprete e nho ca ta pagá nada pa el.

**Somali** Afsoomaali  
Farta ku fiiq luqadaada... Waxa laguugu yeeri doonaa  
turjubaan. Turjubaanka wax lacagi kaaga bixi mayso.

**Swahili** Kiswahili  
Onyeshā lugha yako. Ataitishwa mkalimani.  
Utapewa mkalimani bila ya gharama yoyote kwako.

**Tigrinya** ትግርኛ  
ታንታኦትን ያመልክቱ፣ አስተርጓሚ ከአጥፊ ይኸክል ኢዩ።  
አስተርጓሚ ትኸፍልዎ ከፍለጉ የለን።

**Wolof** Wolof  
Maannal sa lakk ngir ñou bolela ak kou degg sa lakk  
mou dimbeuli leu. Ndimbeul bi do ci fey dara.

**Yoruba** Yoruba  
Jowo toka si ede abinibi re. Awa yi o pe olutumo ede.  
Ofẹ ni ipese olutumo ede yi fun o.

## Middle East

**Arabic** عربي  
أشرف إلى لغتك. وسوف يتم جلب مترجم فوري لك.  
سيتم تأمين المترجم الفوري مجاناً.

**Armenian** Հայերեն  
Ցոյց տուէք ո՞ր մէկ լեզուն կը խօսիք՝ Թարգմանիչը մը  
կանչելը կը տանք. Թարգմանիչը կը տրամադրուի անվճար.

**Azerbaijani** Azərbaycan dili  
Öz dilinizi işarə edin. Sizin üçün tərcüməçi dəvət  
olunacaq. Tərcüməçi xidmətləri Sizin üçün pulsuzdur.

**Dari** دری  
لسان خود را نشان بدهید. یک مترجم طلب کرده خواهد شد.  
برای مترجم شما پول نخواهد پرداخت.

**Farsi** فارسی  
به زبان موردنظر اشاره کنید. ما برای شما مترجم می آوریم.  
این کار هیچ هزینه ای برای شما نخواهد داشت.

**Hebrew** עברית  
הצבע לעבר השפה שלך כדי לזמן לך מתורגמן.  
שירותנו של המתורגמן ניתן ללא תשלום.

**Kurdish** كوردی  
په یوه نډی به زمانه که وه. وه رگیزیک بانگ ده کرت.  
وه رگیزه که له سهه تو میچ بوولیک ناکه وی.

**Pashto** پښتو  
خپل ژبې ته اشاره وکړئ. یو ژباړونکی به را و بللی ش  
تاسو ته ژباړونکی وپریا برابیر ولی شی.

**Turkish** Türkçe  
Konuştuğunuz dili gösterin. Size bir tercüman çağırıyoruz.  
Bu tercüman size ücretsiz olarak tedarik edilecektir.

## Asia

**China** 請指認您的語言，以便為 請指認您的語言，以便為  
您提供免費的口譯服務。 您提供免費的口譯服務。

**Cantonese** 廣東話 广东话

**Chaochow** 潮州話 潮州话

**Fukienese** 福建話 福建话

**Mandarin** 國語 普通话

**Shanghai** 上海話 上海话

**Taiwanese** 台灣話 台湾话

**Toishanese** 台山話 台山话

Larger font may be available at: [http://www.maine.gov/dhhs/oma/Language\\_ID\\_Card.pdf](http://www.maine.gov/dhhs/oma/Language_ID_Card.pdf)

# Maine Behavioral Health Organization

Appendix B. Interpretation Documentation and Invoice.

See following page.

# Maine Behavioral Health Organization

## Interpretation Documentation and Invoice

Client Name: \_\_\_\_\_ Date: \_\_\_\_\_

On the above date, I provided interpretation services from the (state language): \_\_\_\_\_ language to the English language for Maine Behavioral Health Organization in accordance with the Americans with Disabilities Act.

I am employed by (state the interpreting agency you work for) \_\_\_\_\_ and meet the requirements for third party/Medicaid reimbursement as set forth in Maine Behavioral Health Organization's policy.

I read, understand and agree to abide by the Code of Ethics for Interpreters as provided in Appendix #1 of the most current version of the Maine Care Benefits Manual in Chapter 1 (also available in Appendix C of Maine Behavioral Health Organization's Policies & Procedures for Limited, Non-English Speaking Members and/or Deaf/Hard of Hearing Members).

Units of Interpretation: \_\_\_\_\_ (one unit is equal to 15 minutes).

Time: Appointment Start: \_\_\_\_\_, End: \_\_\_\_\_.

Units of Travel: \_\_\_\_\_ (per MBHO policy and MCBM 1.06-3, travel time is reimbursed, wait time is not).

Total Units: \_\_\_\_\_

Total Cost: \_\_\_\_\_ (payment for services will not exceed Medicaid reimbursement rates).

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Interpreter Printed Name: \_\_\_\_\_

Interpreter Phone Number: \_\_\_\_\_

MBHO Authorizing Official: \_\_\_\_\_ (must be the CEO).

# Maine Behavioral Health Organization

## Appendix C. Interpreter Code of Ethics.

### CODE OF ETHICS FOR INTERPRETERS\*

The following principles of ethical behavior are affirmed to protect and guide interpreters and transliterators, both for non-English speaking, and for hearing and deaf members. Underlying these principles is the desire to ensure for all the right to communicate.

This Code of Ethics applies to all interpreters and transliterators providing services to MaineCare members and reimbursed by MaineCare.

- Interpreters/translitterators shall keep all assignment-related information strictly confidential.
- Interpreters/translitterators shall render the message faithfully, always conveying the content and spirit of the speaker using language most readily understood by the person(s) whom they serve.
- Interpreters/translitterators shall not counsel, advise or interject personal opinions.
- Interpreters/translitterators shall accept assignments using discretion with regard to skill, setting, and the members involved.
- Interpreters/translitterators shall request compensation for services in a professional and judicious manner.
- Interpreters/translitterators shall function in a manner appropriate to the situation.
- Interpreters/translitterators shall strive to further knowledge and skills through participation in workshops, professional meetings, interaction with professional colleagues, and reading of current literature in the field.
- Interpreters/translitterators shall strive to maintain high professional standards in compliance with the Code of Ethics.

*I have read, understand and agree to abide by the Code of Ethics as stated above.*

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Printed name                      Written Signature

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Date

\* Adapted from the Code of Ethics of the Registry of Interpreters for the Deaf (RID).