

WHY NORTH CAROLINA SHOULD HAVE A “CAF”

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Basic Problem

- **Doctor's Offices and Hospitals do not provide interpreters**
- **If provided, issues with qualifications**
- **VRI usage excessive and detrimental**
- **Low incidence of Deaf patients and high medical staff turnovers make trainings an unrealistic solution**

Impact on Doctor-Patient Relationship

- **Deaf individuals seeking interpreters encounter resistance**
- **Doctor-Patient relationship starts off already soured**
- **Medical care is delayed and/or provided without proper communications**



Optimal Solutions?

- Remove upfront cost considerations from doctor-patient relationship
- Eliminate confusion about interpreter qualifications
- Eliminate need to worry about missed appointments
- Retain legal responsibility for provision of effective communications



Can Insurance Solve This Problem?

- **Medicaid approach:**
 - some states now require interpreter coverage
 - Only covers those who are on Medicaid
 - Currently rejects reimbursement for missed appointments
- **Private insurance coverage – would require new state law**
- **Will not resolve interpreter qualification and coordination issue**



Hospitals & Doctor's Offices

- **Hospitals and doctor's offices require different approaches**
 - **Hospitals tend to have funds, but are 24/7 and need to be able to provide effective communication at any time**
 - **Doctor's offices tend to resist finding truly qualified interpreters and paying the necessary cost**
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Hospital Models

- **Certain hospital networks have a centralized funding model to cover interpreters for all departments**
 - **Some have staff to coordinate**
 - **Requires protocol including interpreter contracts**
- **Twin Cities Hospital Consortium**
 - **Joint funding from area hospitals to retain on-call interpreters 24/7**



Doctor's Offices - CAF

- **Communication Access Funds – removes the barrier between patient and doctor**
- **Perpetual funding by doctors' license fees**
- **Oversight/coverage of quality assurance, travel costs, & missed appointments**
- **Cost-benefit analysis:**

Now: 1 appointment for 1 patient \approx \$200

CAF: Unlimited appts/patients \approx \$50/year



QUESTIONS?

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