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3 **Title: Cost of Interpretive Services for Hearing Impaired Patients**
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5 **Introduced by: Domenic R. Federico, MD, for the Kent County Delegation**
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7 **Original Author: Donald P. Condit, MD**
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9 **Referred to: Reference Committee B**
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11 **House Action: Adopted**
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14 **Whereas, the Americans with Disabilities Act (ADA)¹ requires physicians**
15 **to “reasonably accommodate” hearing impaired patients, and**
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17 **Whereas, MSMS legal counsel notes “interpreters should be used when**
18 **the matter involves more complexity, such as in communication of medical**
19 **history or diagnosis, in conversations about medical procedures or treatment**
20 **decisions, or in communications or instructions for care at home or**
21 **elsewhere,”² and**
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23 **Whereas, courts have found an ADA violation where the health care**
24 **professional decides not to use an interpreter and there is evidence that the**
25 **method used did not result in effective communication³, and**
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27 **Whereas, the health care professional or facility responsible for the care**
28 **must pay for the cost of an interpreter, and**
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30 **Whereas, health care professionals or facilities cannot impose a**
31 **surcharge on an individual with a disability directly or indirectly to offset the**
32 **cost of the interpreter⁴, and**
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34 **Whereas, third-party reimbursement for office visits, particularly for**
35 **Medicaid patients, is unlikely to cover the costs of interpretive services, which**
36 **can include charges for time and travel, and**
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38 **Whereas, these ADA policies could have the unintended consequence of**
39 **jeopardizing access to medical and surgical services by hearing impaired**
40 **patients, and**
41

42 **Whereas, the 2006 MSMS House of Delegates adopted Action Report #10**
43 **of the Board of Directors regarding Resolutions 49-05A “Cost of Translator**
44 **Services” and 81-05A “Interpreters by Phone” by combining the Resolutions**
45 **and amending the first resolved to read, “That MSMS pursue policies, including**
46 **legislation, if necessary, to minimize the cost to physicians providing translator**
47 **services to patients with limited English proficiency,” and**

48 Whereas, Michigan Public Act 204, the “Deaf Persons' Interpreters Act” of
49 1982 section 393.503 states, “In any action before a court or a grand jury where
50 a deaf or deaf-blind person is a participant in the action, either as a plaintiff,
51 defendant, or witness, the court shall appoint a qualified interpreter to interpret
52 the proceedings to the deaf or deaf-blind person, to interpret the deaf or deaf-
53 blind person's testimony or statements, and to assist in preparation of the
54 action with the deaf or deaf-blind person's counsel.” Furthermore, section
55 393.507 states, “A court appointed interpreter, qualified interpreter,
56 intermediary interpreter, or deaf interpreter shall be paid a fee by the court that
57 it determines to be reasonable;” therefore be it

58
59 **RESOLVED:** That MSMS advocate for an amendment to Michigan law,
60 seeking reimbursement for physicians for the cost of interpretive services for
61 hearing impaired patients.
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64 **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**

¹ 42 USC §12101 et seq.

² “Legal Issues for Physicians Treating Patients with a Hearing Impairment or Limited English Proficiency.” Patrick J. Haddad, JD, and Daniel J. Schulte, JD. MSMS Legal Update. August 2012

³ <http://www.ama-assn.org/ama/pub/physician-resources/legal-topics/regulatory-compliance-topics/the-americans-disabilities-act-hearing-interpreters.page>

⁴ 28 CFR Sec.36.301