

**JOINT COMMITTEE ON FINANCIAL SERVICES
2025-2026 (194th) BILL SUMMARY**

Bill No: H1289

Title: AN ACT REQUIRING REIMBURSEMENT FOR THE COSTS OF PROVIDING COMPETENT INTERPRETER SERVICES

Sponsor: Rep. Bridget Plouffe (*Brockton*)

Hearing Date: April 29, 2025

Reporting Deadline: June 28, 2025

Prior History:

2023-24 (H968): Reported favorably; Referred to Health Care Financing; Ordered to a House Study

2021-22 (H1217): Reported favorably; Referred to Health Care Financing; Ordered to a House Study

2019-20 (H929): Ordered to a House Study

2017-18 (H502): Ordered to a House Study

2015-16 (S514): Ordered to a House Study

Similar Matters: None

CURRENT LAW:

M.G.L. c. 19 Department of Mental Health § 19 Inpatient psychiatric, residential or day care services; licenses

M.G.L. c. 111 Public Health § 51 Hospitals, institutions for care of unwed mothers, or clinics; licensing

M.G.L. c. 118E § 13F Contracts between acute and non-acute hospital service providers and office of Medicaid: All payment rates to acute hospitals and non-acute hospitals under Title XIX (Medicaid) must include reimbursement for the reasonable cost of providing competent interpreter services under Chapter 111 Public Health § 25J: Competent interpreter services in acute-care hospitals or Chapter 123 Mental Health § Section 23A: Competent interpreter services in hospitals which provide acute psychiatric services.

M.G.L. c. 176O Health Insurance Consumer Protections § 1 Definitions

"Behavioral health manager", a company, organized under the law of the commonwealth or organized under the laws of another state and qualified to do business in the commonwealth, that has entered into a contractual arrangement with a carrier to provide or arrange for the provision of behavioral, substance use disorder and mental health services to voluntarily enrolled member of the carrier.

'Carrier", an insurer licensed or otherwise authorized to transact accident or health insurance under *chapter 175*; a nonprofit hospital service corporation organized under *chapter 176A*; a

nonprofit medical service corporation organized under *chapter 176B*; a health maintenance organization organized under *chapter 176G*; and an organization entering into a preferred provider arrangement under *chapter 176I*, but not including an employer purchasing coverage or acting on behalf of its employees or the employees of one or more subsidiaries or affiliated corporations of the employer. Unless otherwise noted, the term "carrier" does not include any entity to the extent it offers a policy, certificate or contract that is not a health benefit plan, as defined in *section 1 of chapter 176J*.

Chapter 66 of the Acts of 2000, An Act Requiring Competent Interpreter Services in the Delivery of Certain Acute Health Care Services (Emergency Room Interpreters Law or ERIL) §§ 1,2,3,4,5

This law mandates that hospitals that provide acute care, including acute psychiatric services, must also provide competent interpreter services at no cost to all non-English speaking patients who seek emergency care or treatment. "Non-English speakers" are defined as persons who cannot speak or understand or have difficulty with speaking or understanding the English language because the speaker primarily or only uses a spoken language other than English. The law directs the Division of Medical Assistance (DMA) to recognize the costs of providing these services as an operating expense.

SUMMARY:

This bill applies to situations where a hospital patient requires an interpreter to communicate with a health care provider. The bill requires MassHealth, and its contracted health insurers, health plans, health maintenance organizations, behavioral health management firms and third-party contractors under contract to a division managed care organization or primary care clinician program, to recognize and separately reimburse hospitals for the costs of providing interpreter services both for spoken and sign language rather than funding them, if at all, through overall provider payment negotiated rates.