



**Behavioral Health
Department**
Alameda County Health

Signed by:

By: BAT67CA0C0D444A...
Karyn L. Tribble, PsyD, LCSW, Director

POLICY TITLE

24/7 Language Assistance to Members

Policy No: 100-2-2

Date of Original Approval: 10/18/19

Date(s) of Revision(s): 01/27/20;³/26/2026

PURPOSE

This policy establishes the requirements and methods for providers of behavioral health services to utilize language assistance for Alameda County Behavioral Health Department (ACBHD) members and potential members in the members’ preferred language, twenty-four hours per day, seven (7) days per week to meet members’ requests and needs.

AUTHORITY

- [Centers for Medicare and Medicaid Services \(CMS\) Medicaid and Children's Health Insurance Program \(CHIP\) Managed Care Final Rule \(Final Rule\)](#)
- [Title 42, Code of Federal Regulations \(CFR\), Part 438.68: Network Adequacy Standards](#)
- [Alameda County's Mental Health Plan \(MHP\) Contract #17-94572 with the California Department of Health Care Services \(DHCS\)](#)
- [Alameda County's Intergovernmental Agreement \(IA\) #17-94062 \(G\)\(2-8\) with DHCS](#)
- [MHSUDS Information Notice No: 18-011. Federal Network Adequacy Standards For MHPs and Drug Medi-Cal Organized Delivery System \(DMC-ODS\) Pilot Counties](#)
- [ACBHD Exhibit A-1: Standard Requirements for Mental Health \(MH\) Contracts](#)
- [ACBHD Exhibit A-1: Standard Requirements for Substance Use Disorder \(SUD\) Contracts](#)

SCOPE

This policy applies to all ACBHD County-Operated programs in addition to entities, individuals and programs providing Medi-Cal specialty mental health services (SMHS) or SUD treatment services to Medi-Cal members under a contract or subcontract with ACBHD. ACBHD and ACBHD-contractors are collectively referred to as the Behavioral Health Plan (BHP).

POLICY

Providers of behavioral health services shall ensure that language assistance is available to ACBHD members and potential members in the members’ preferred language and will inform members that language assistance is available twenty-four hours per day, seven (7) days per week through the provider's own staff who speak the members’ preferred language, an interpreter, or

ACBHD's language line vendor. ACBHD will track language line encounters for required reporting to the Department of Health Care Services (DHCS).

Contractors shall comply with policies, procedures, and adherence guidelines pertaining to the distribution of the [ACBHD Informing Materials](#) and the posting of the ACBHD grievance and appeal poster in each of the Alameda County threshold languages. Contractors shall ensure that ACBHD grievance and appeals materials are accessible to members without having to make a request (such as by placing hard copies in the reception area of service location).

PROCEDURE

- A. Providers shall utilize language assistance: 1) in person by way of staff who speak a member's preferred language; 2) by way of an interpreter who speaks or signs (American Sign Language) the member's preferred language; or 3) by way of [Language Line Services](#) offered through ACBHD.
- B. Providers shall document the method used for language assistance as well as the language used in an existing member's chart.
- C. ACBHD-contracted providers will train all provider staff about the requirements of this policy, how to arrange for the services of an interpreter, and how to access available ACBHD translation and interpretation services.
- D. All providers will inform members of language assistance via the following methods:
 - 1) The [Integrated Member Handbook](#), which includes information about the member's right to language assistance, must be made available to members at the start of services. The Integrated Member Handbook refers to Alameda County's handbook describing available mental health services known as SMHS, and the DMC-ODS known as SUD services. Together, these services define Alameda County's behavioral health care services.
 - 2) The provider shall post the Language Assistance poster at all provider sites, informing members that language assistance is available and how to access this service. (See **Appendix: Language Assistance Poster**)

The Office of Ethnic Services (OES) Team liaises Language Interpretation Translation (LIT) job-request processes between **ACBHD Staff**, **ACBHD Providers**, and **ACBHD LIT Vendors** to ensure that all incoming requests are organized, clearly communicated, and efficiently and timely processed.

Over The Phone Services – Provided by an ACBHD-Contracted Provider

Contact is made directly with the vendor:

- Access to Over the Phone services requires a 3-digit PIN.
- Providers are to ensure that only authorized personnel use the assigned PIN code.

ACBHD Portal Login is needed to access the ACBHD Intranet Portal

- ACBHD Intranet Portal must be granted by ACBHD by completing the Network Access Form.
- Each organization has designated staff assigned to use the ACBHD Intranet Portal.
- Once the form is submitted, the requester will receive confirmation that the form was received.
- ACBHD Language Team will process the request and communicate any changes or updates to the language vendors until job is completed.

Services Provided from [Contracted Vendors](#)

- 1) Face-to-Face Interpretation
- 2) Remote/Video Interpretation
- 3) Braille Services
- 4) ASL including Certified Deaf Interpreters
- 5) Document Translation
- 6) In-person Events Equipment
- 7) PHONE ONLY - Language Interpretation Services is provided by one vendor

NON-COMPLIANCE

- I. Contractors not in compliance with contract provisions, or with State or Federal law and/or regulations, shall be immediately responsible for remedy.
- II. ACBHD may, at its discretion, issue a Corrective Action Plan (CAP) or Contract Compliance Plan (CCP), as appropriate.
- III. The cost to implement the CAP or CCP shall be borne by the Contractor.
- IV. Staff shall report incidents of non-compliance to their department manager, who shall submit those incidents of non-compliance to ACBHD Quality Management (QM).
- V. Incidents of non-compliance shall be submitted within 15 days of reasonable awareness of the non-compliance.
- VI. Failure to address identified issues may result in further action by ACBHD up to and including program termination, as specified in ACBHD policy # 1302-1-1, [Contract Compliance and Sanctions for ACBHD Contracted Providers](#).
- VII. Staff shall not face retribution for submitting incidents of non-compliance.
- VIII. Any communication that contains protected health information (PHI) or otherwise confidential information (e.g., as defined by the Health Insurance Portability and Accountability Act (HIPAA), 42 CFR, Part 2, etc.) shall be sent through secure methods such as email with secure encryption.

CONTACT

ACBHD Office	Current As Of	Email
Office of Ethnic Services	1/8/2026	OfficeofEthnicServices@acgov.org Languages@acgov.org

DISTRIBUTION

This policy will be distributed to the following:

- ACBHD Staff and Interns
- ACBHD Contract Providers
- Public

ISSUANCE AND REVISION HISTORY

Original Authors: Tiffany Lynch, Quality Assurance; Donna Fone, Quality Assurance

Original Date of Approval: 10/18/2019 by Karyn Tribble, Behavioral Health Director

Revision Author	Reason for Revision	Date of Approval by (Name, Title)
Kim Coady	Added a provision prohibiting the use of minors as interpreters.	01/27/2020 by Karyn Tribble, Behavioral Health Director
Clyde Lewis, Administrator, Office of Ethnic Services Rita Robinson, Program Specialist, Office of Ethnic Services Lola Atienza, Administrative Assistant, Office of Ethnic Services	Updated policy to align with current DHCS regulations.	3/26/2026 by Karyn Tribble, Behavioral Health Director

DEFINITIONS

Term	Definition
Behavioral Health Plan (BHP)	ACBHD and ACBHD-contracted providers are collectively referred to as the Behavioral Health Plan (BHP). BHP providers and services are inclusive of both delivery systems: SMHS and DMC-ODS.
Language Assistance	Services, including oral interpretation services and translation services, to limited-English-proficient (LEP) Medi-Cal members (Senate Bill 223, 10/13/2017)
Medi-Cal	The name of California's Medicaid program which provides health coverage to people with low-income, the aged or disabled and those with asset levels who meet certain eligibility requirements.

Medical Necessity	Per Medi-Cal, a service is medically necessary if it is needed to address a particular health condition and the following criteria are met: 1) the diagnosis is included/covered, 2) the condition results in a functional impairment, 3) the proposed intervention addresses the impairment, and 4) the condition would not be responsive to treatment by a physical health care provider.
Member	Anyone currently receiving ACBHD care or services, or who has received ACBHD care or services in the last 12 months by the BHP. The term 'member' is also synonymous with 'consumer,' 'patient,' or 'client'.
Specialty Mental Health Services (SMHS)	Medi-Cal services provided under county MHPs by mental health specialists, both licensed and unlicensed, such as psychiatrists, psychologists, licensed clinical social workers, licensed marriage and family therapists, licensed professional clinical counselors, and peer support providers.
Substance Use Disorder (SUD) Treatment Services	Medi-Cal services provided under county DMC-ODS IA by SUD treatment specialists, both licensed and unlicensed, such as Licensed Practitioners of the Healing Arts (LPHA) and SUD counselors.
Threshold Language	"Threshold Language" means a language identified as the primary language, as indicated on the Medi-Cal Eligibility Data System (MEDS), of 3,000 members or five percent of the members population, whichever is lower, in an identified geographic area, per Title 9, CCR Section 1810.410 (a)(3) .

APPENDICES

- [Language Assistance Poster](#)