SAMPLE LEP POLICY STATEMENT AND ACKNOWLEDGEMENT/REFUSAL OF INTERPRETER SERVICES

LIMITED ENGLISH PROFICIENCY POLICY STATEMENT

<u>Independent Care Health Plan</u> is committed to providing equal opportunity in all programs, services and activities to individuals who do not speak English as their primary language and who have a limited ability to read, write, speak or understand English. Those individuals are referred to as limited English proficient, or "LEP." Meaningful access to Federally funded programs and activities is required by Title VI of the Civil Rights Act of 1964 and its implementing regulations.

Meaningful access to LEP individuals is provided in two ways: Oral interpretation and written translation. Oral interpretation can range from on-site interpreters for critical services provided to a high volume of LEP persons, to access through commercially-available telephonic interpretation services. Written translation can range from translation of an entire document to translation of a short description of the document.

The entity fulfills this obligation by one or more of the following: hiring bilingual staff, hiring staff interpreters/translators, contracting for interpreters/translation services, using telephone interpreter lines, and/or using community volunteers. The entity understands that the interpretation/translation must be performed in a competent, confidential, ethical, and accurate manner at no cost to the LEP individual. The entity does not rely on the LEP individual to provide an interpreter.

If an LEP person requests to use a family member, friend or other adult as an interpreter, the entity makes the LEP person aware that the entity will provide a qualified interpreter at no cost to the LEP person. The entity respects the LEP person's choice of interpreters. If the LEP person chooses a family member, friend, or other adult to interpret instead of one provided by the entity, the entity makes a record of that decision. If the entity believes the interpreter selected by the LEP person is not competent or appropriate, the entity supplements with its own qualified interpreter. Minors should not act as interpreters unless there is an emergency situation and another interpreter is not immediately available.

The entity records the number and date of instances in which interpretation was offered, what service was offered (e.g., staff, in-person contracted, telephone, etc.), whether it was accepted or whether the LEP individual selected their own interpreter, and in what language group the service was needed.

This entity monitors its changing demographics and population trends on an annual basis, to ensure awareness of the language needs in its service area.

The entity requires its subrecipients to comply with the LEP policies requirements.

is available upon request.

To assist us in complying with all applicable limited English proficiency rules, regulations and guidelines, the LEP Coordinator is:

Name	e:	A	llison Ernisse	<u> </u>						_Phone: 4	414-9	008-1440
LEP	customers	are	encouraged	to	ask	for	language	assistance	or	discuss	any	perceived
discri	mination pro	blen	ns with him/he	er. I	nform	natio	n about d	iscrimination	com	plaint res	olutio	on process

RECIPIENT CONTACT INFORMATION

Name of Recipient Independent Care Health Plants	an							
Street Address								
1555 N RiverCenter Dr Sui	te 206							
City		State	Zip Code					
Milwaukee		WI	53212					
Name of Individual Designa Jill Fisher	ted as Contact for Civil Rights	Compliance Questions						
Address 1555 N RiverCenter Dr. Su	ite 206							
Telephone Number	Email Address							
414-225-4764	jfisher@icarehealthplan	ifisher@icarehealthplan.org						
Name of Individual Designa Allison Ernisse	ted to Assist with LEP Individua	als and Individuals with Disa	bilities					
Address 1555 N RiverCenter Dr. Su	ite 206, Milwaukee, WI 53212							
Telephone Number	Email Address							
414-908-1440	aernisse@icarehealthpl	aernisse@icarehealthplan.org						
Name of Authorized Repres Jill Fisher	sentative							
Address								
	ite 206 Milwaukee, WI 53212							
Telephone Number Email Address								
jfisher@icarehealthplan.org								

Instructions for completing Recipient Contact Information

- Fill in all the blanks on this form.
- Some smaller entities may not have dedicated LEP/ADA coordinators or Civil Rights Compliance
 Officers. The individuals designated above can be (but don't have to be) same person (e.g., the
 Authorized Representative).