



**Comments of Susan Lloyd Yolen  
Vice President, Public Affairs & Communication  
Planned Parenthood of Connecticut, Inc.  
February 20, 2007 Human Services Committee Hearing**

**Testimony on Proposed Bill 198, An Act Concerning the Availability of Interpreter Services  
Under the Medicaid Program**

Thank you for the opportunity to speak to the increasingly critical need for language interpretation services in medical settings. Planned Parenthood is the largest provider of family planning and reproductive health in Connecticut. Our 65,000 patients are women, the majority of whom are ages 19 to 25. But many are also older women who have emigrated from other countries who come to us having left a condition untreated for some time. Sexual health matters are sensitive, and not easily brought to light when a woman has difficulty communicating in her new surroundings. If her cultural needs are not met by a provider, it may be impossible for her to seek life-saving treatment.

Planned Parenthood has done a reasonably good job with translation...we have a staff that includes many bilingual, Spanish-speaking individuals who are able to make the patient feel comfortable and welcome during the visit. When it comes to the medical examination, terminology, and diagnosis, however, bilingual staff is not enough. Patients require trained interpreters, who can make certain that the patient's medical questions have been stated clearly, and adequately reflect the patient's needs and concerns. An interpreter can make certain, conversely, that the provider's answers and directions are clearly understood by the patient. Translation by bilingual staff does not equal medical interpretation.

Planned Parenthood has a commitment to training our bilingual staff in proper interpretation techniques, so that they can perform this function. Training of this nature is costly—an investment by our agency in cultural sensitivity that we consider an important value. Once trained, however, our interpreters will require and will deserve additional compensation for the task.

The need for interpretation increases daily. Every health care provider in the state is finding it challenging to respond to the needs of newcomers to our state who are not English speakers, but who have pressing health care needs. Often, we resort to using the "Language Line", a service that connects a patient to a translator of any language, by telephone. While this can work well, and *must* work in certain circumstances, you can imagine how awkward it may be for a woman undergoing a pelvic exam to ask questions of an interpreter over the phone, then wait for the clinician's reply to be translated. This is a costly service, yet agencies are bearing the expense when they must.

But in large part, the day to day challenge in Connecticut is to offer our Spanish-speaking clients services that are more than merely bilingual, but are medically appropriate. In order to train and employ the staff necessary to offer adequate services to the growing number of patients who require medical Spanish, we desperately need additional reimbursement from the Medicaid program.

That is why we urge your support of Proposed Bill 198.