IEHP

We heal and inspire the human spirit.

To: Provider Network

From: IEHP – Health Equity Operations

Date: September 10, 2026

Subject: **2026 Member Language Demographics Survey Results: Free Interpreter Services Available**

We conduct an annual **Member Language Demographics Survey** to inform our providers and community about our members' language needs as a best practice to remove linguistic barriers, health inequities, and anticipate potential needs for interpreter services.

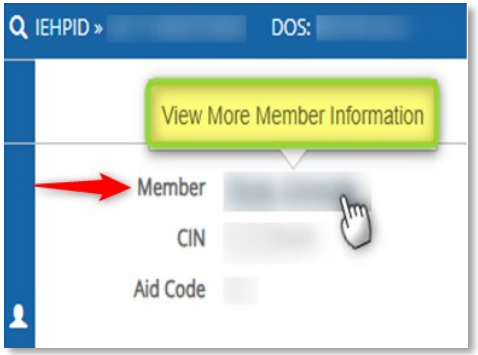
Member Language Demographics Survey Results:

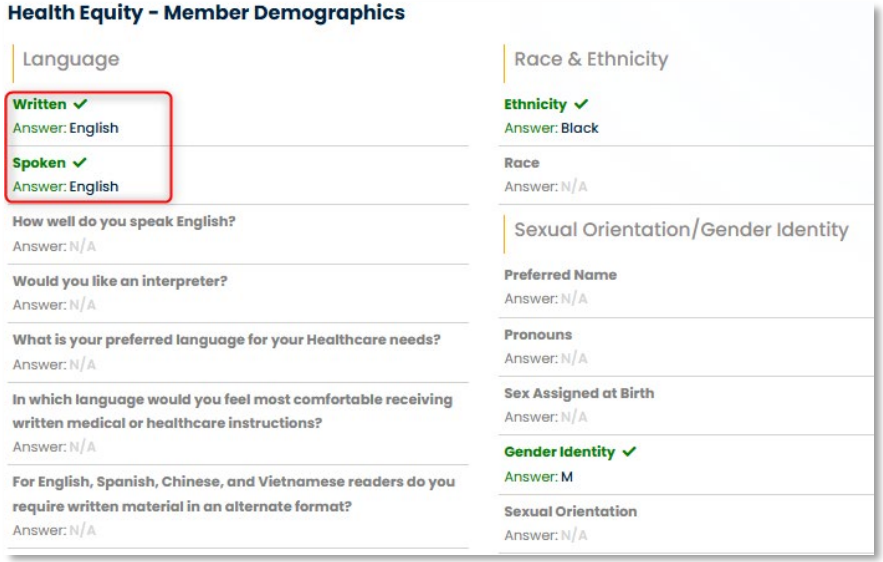
Member Region	English	Spanish	Vietnamese	Mandarin Chinese	Cantonese	Other
Corona / Temecula / Hemet	81.32%	17.24%	0.38%	0.88%	0.14%	0.04%
High Desert	83.80%	15.99%	0.11%	0.06%	0.02%	0.02%
Low Desert	68.11%	31.63%	0.17%	0.06%	0.01%	0.01%
Mohave Valley	98.16%	1.80%	0.00%	0.00%	0.00%	0.04%
Out of Area	88.33%	10.28%	0.33%	0.93%	0.13%	0.00%
Palo Verde Valley	86.29%	13.56%	0.03%	0.10%	0.00%	0.02%
Riverside	72.19%	27.21%	0.36%	0.19%	0.04%	0.02%
San Bernardino Proper	74.60%	24.68%	0.37%	0.28%	0.04%	0.02%
West San Bernardino	75.44%	19.29%	0.69%	3.98%	0.56%	0.05%

A global view of our member language demographics emphasizes the importance of your response to our bi-annual network verification form, where you can update the languages spoken by your staff and their fluency. The accuracy of spoken languages at your office is vital for our members!

How to verify the Primary Language of Members

When verifying member eligibility, click on the member's name to open their Health Equity Demographics, including sexual orientation, gender identity data.





How to Request an Interpreter

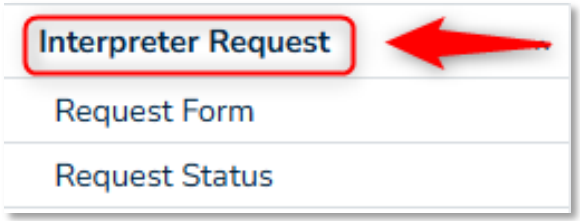
Please remember that FREE Interpreter Services are a benefit for all IEHP member appointments. If you do not have qualified interpreters on staff who speak the member's preferred language, request an interpreter via the Provider Portal, preferably five days prior to the appointment. If an interpreter is needed and no request has been made, call IEHP Member Services **to request an immediate, telephonic interpreter**.

For Medi-Cal, dial (800) 440-IEHP (4347) or (800) 718-4347 for TTY.

For DualChoice, dial (877) 273-4347 or (800) 718-4347 for TTY.

For IEHP Covered, dial (855) 433-4347 or 711 for TTY.

- **In-Person Interpreter Requests**: Please ask IEHP a minimum of **five (5) working days** in advance for an interpreter for a routine appointment.
- All requests for interpretation services must be scheduled and authorized by IEHP.
- **Members are NOT required nor encouraged to use family members or friends** as interpreters during medical appointments, unless specifically requested.



- **Minors should NOT be used as interpreters** (unless it is a medical emergency, and no one else is available to interpret).
- For **after-hours** telephone interpreter services, call IEHP 24-Hour Nurse Advice Line at (888) 244-IEHP (4347) or 711 for TTY.

If you have any questions, please contact the IEHP Provider Call Center at (909) 890-2054, (866) 223-4347, or email ProviderServices@iehp.org
All IEHP communications can be found at: www.providerservices.iehp.org > News and Updates > Notices