



THE NATIONAL BOARD OF CERTIFICATION  
FOR MEDICAL INTERPRETERS

**Certified Medical Interpreter**

**Candidate Handbook**

**2018**

**National Board of Certification for Medical Interpreters**  
**[www.certifiedmedicalinterpreters.org](http://www.certifiedmedicalinterpreters.org)**

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## Introduction

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The mission of the National Board is to foster improved healthcare outcomes, patient safety and patient/provider communication, by elevating the standards for and quality of medical interpreting through a nationally recognized and accepted certification for medical interpreters.

The CMI certification program is governed by the National Board of Certification for Medical Interpreters (National Board), an independent division of the International Medical Interpreters Association (IMIA).

### Statement of Purpose and Scope

The National Board of Certification for Medical Interpreters is a nationally recognized certifying body in the United States that offers a Certified Medical Interpreter (CMI) credential to medical interpreters. The CMI credential is the most prestigious credential offered in the industry. As demand for certification grows and becomes an industry standard, the National Board's CMI credential will open career and professional development opportunities that no other credential can.

The purpose of the CMI certification program is to ensure that the standards met are those necessary for safe and ethical practice of the medical interpreter profession.

The careful vetting process and high standards held by the National Board are just some of the reasons employers and care providers prefer working with CMIs-- knowing they will be compliant with regulatory guidelines, provide complete and accurate interpretation, and promote patient safety.

According to the Bureau of Labor Statistics, in 2014 there were approximately 7,000 interpreters and translators employed in health care industries in the United States: 5,100 worked in hospitals and nursing care facilities, and 1,900 worked in ambulatory healthcare services (offices of physicians and other health practitioners, home healthcare services, and outpatient care centers). The combined fields of health care and social assistance employ 15.7% of the interpreters and translators in the US, and the occupation of interpreter/translator was projected to grow at a rate of 29% between 2014 and 2024. Based on the NBCMI national Job Task Analysis conducted in 2017, medical interpreters are employed in many settings, including: health departments, hospitals and urgent care facilities, medical and teaching/research centers, community clinics, medical private practices, pharmacies, testing and diagnostic centers, health fairs and related events, laboratories, video and telephonic interpretation call centers.

Medical Interpreters work for translation/interpretation companies or individual organizations, and many interpreters also work from home. Self-employed

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interpreters frequently have variable work schedules. Most interpreters and translators work full time during regular hours.

The CMI certification program provides a valid and reliable credential for entry-level medical interpreters to recognize their education, knowledge, and professional expertise. The program also continues to uphold the same high standards by requiring professional development (continuing education) toward re-certification after 5 years of obtaining the CMI credential.

The CMI certification provides a national credential that crosses state lines in case of national disasters and ensures compliance with many state requirements that demand that services are provided by competent individuals.

The purposes of the National Board are to:

- Develop, organize, oversee and promote a national medical interpreter certification program in all languages.
- Promote patients and providers working with credentialed medical interpreters who have met minimal national standards to provide accurate and safe interpretation.
- Ensure credibility of national certification by meeting or exceeding nationally accepted standards including transparency, inclusion, and access.

The Board of Directors of the National Board consists of voting members that include medical interpreters, a health care provider, industry representatives, and a public member. Initial Board members were selected by a public process and independent selection committee. Subsequently, Board members are recruited through a Nominating Committee process and are elected by the members of the National Board.

### **Earning the CMI Credential**

Certification is available in six languages: Spanish, Russian, Mandarin, Cantonese, Korean, and Vietnamese. The CMI credential is awarded in the specific languages for which the oral exam is passed (for example: CMI-Spanish, CMI-Korean).

The National Board only awards the CMI credential to individuals who meet all of the eligibility criteria and earn a passing score on both the written and oral examinations.

## Applying for Certification

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### Application Requirements

To apply for certification, submit the application online at [www.certifiedmedicalinterpreters.org](http://www.certifiedmedicalinterpreters.org).

You will upload your prerequisite documentation as part of the application form. The non-refundable registration fee is \$35, and it is valid for one (1) year.

After you submit your application, you will hear from your program advisor in about two weeks to let you know your application status. Your application status will be kept confidential.

***Note:** You must register using the name(s) printed on your picture ID (such as a driver's license or passport). You must present your ID in order to take the tests, and the name(s) on your ID MUST MATCH the name(s) in our records.*

To apply for certification, a candidate must submit the National Board CMI program application on the National Board website. As part of the application form, the candidate must submit prerequisite documentation. The candidate must register using the name(s) printed on their photo ID.

### CMI Prerequisites

All candidates for the CMI certification must meet the following prerequisites:

**1) Minimum Age:** All candidates must submit proof of being at least 18 years old (the age of majority as defined by the federal government). A driver's license or a birth certificate or passport copy are acceptable proofs of age.

**2) General Education:** All candidates must submit proof of having at least a high school education level. A high school diploma, a GED, or any degree from an institution of higher education are acceptable proofs of general education.

**3) Medical Interpreter Education:** All candidates must submit proof of training specific to medical interpreting.

- Medical interpreter training that was taken at a college or university must be at least 3 credit hours; a transcript is the only acceptable proof.
- Medical interpreter training courses must be at least 40 hours; a Certificate of Completion from an approved medical interpreter training course is the only acceptable proof. These are IMIA's accredited trainings: <http://www.imiaweb.org/education/accreditationhistory.asp>. The National Board cannot recommend one course over another and is not responsible for the content of any course listed. Neither NBCMI nor IMIA is

involved in the development of these training courses. No NBCMI staff is involved in the approval of training courses.

**4) Oral proficiency in English:** All candidates must submit proof of oral proficiency in English by submitting one of the following:

- Bachelor's, Master's, PhD, or any other degree from an institution of higher education in the U.S. or other English language country.
- High school diploma from a high school in the U.S. or other English language country or from an American School abroad.
- One of the following tests (subject to change)
  - TOEFL (Test of English as a Foreign Language): 570+ on paper; 230+ on computer version; 90+ on iBT.
  - ELPT (English Language Proficiency Test): 950+
  - MELAB (Michigan English Language Assessment Battery) 80+
  - ECPE (Examination for the Certificate of Proficiency in English): PASS
  - FCE (First Certificate in English, Level 3): A
  - CAE (Certificate in Advanced English, Level 4): B
  - CPE (Certificate of Proficiency in English, Level 5): B .
  - IELTS (International English Language Testing System) 7.0

**5) Oral proficiency in target language:** All candidates must submit proof of oral proficiency in the target language by submitting one of the following:

- Bachelor's, Master's, PhD, or any other degree from an institution of higher education where the target language is spoken.
- High school diploma from a high school in a country where the target language is spoken
- 24+ semester college credit hours for the target language
- ACTFL Oral Exams (American Council on the Teaching of Foreign Languages): Advanced Mid Level (follow this link: <https://www.languagetesting.com/oral-proficiency-interview-by-computer-opic>) both the OPI (telephonic) and OPIc (computer recording) are acceptable.

### Eligibility Appeals

If an applicant is informed during the registration process of the denial of proof of prerequisites or ability to sit for the oral or written exams, they may appeal this decision. The appeal should include:

- An appeal letter from the applicant clearly stating why they believe the decision was wrong. Specific information based on facts to show that the

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exam should be administered should be included

- A letter from the candidate's supervisor addressing specifics regarding the candidate's experience and why they believe they should sit for the exam (if applicable).
- Any other pertinent information from the candidate's employer/professor.

The appeal should be sent to [staff@certifiedmedicalinterpreters.org](mailto:staff@certifiedmedicalinterpreters.org) within 30 days of receipt of notification of the adverse decision. The National Board reviews exam appeals by email within thirty (30) days of receipt of the appeal. Notice of the final determination shall be provided to the appellant within ten (10) business days of the decision. The determination of the Board of Directors of the National Board will be final.

## Preparing for the Exams

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### How the Exams Were Developed

The written and oral examinations were developed based on a Job Analysis Study conducted by PSI (a nationally recognized independent testing company) with support from numerous medical interpreters, the International Medical Interpreters Association, and Language Line University.

The Job Analysis and subsequent development of the written and oral exams were conducted in accordance with the *Standards for Educational and Psychological Testing* (AERA, APA, NCME, 1999). The process included a national Job Analysis, creating detailed examination specifications, development of exam items, pilot testing, and psychometric analysis.

#### ***Job Analysis***

The examinations were founded upon a national job analysis conducted in January 2009. The job analysis study used a multiple-method approach, incorporating expert judgments of an advisory committee, focus groups with participants from across the country, and a national survey of practicing professionals.

The advisory committee was comprised of 44 experienced medical interpreting professionals representing every region of the United States, including active medical interpreters, medical interpreting program managers, and medical interpreter trainers and advocates for healthcare interpreting.

The expert committee defined professional activities and knowledge requirements to be included in a job analysis survey and the survey was administered online to a national sample of practicing professionals. It was completed by 1,506 respondents, who were representative of the population of the medical interpreting profession.

#### ***Examination Specifications***

A statistical analysis of the responses to the job analysis survey was conducted by PSI to determine which of the professional activities and knowledge statements qualified for testing on the medical interpreter certification exams. An expert panel was convened to review and confirm the survey results. The panel developed examination content specifications for the written and oral exams from the job analysis data through a combination of empirical and rational methods.

#### ***Test Item Development and Review***

With PSI's guidance and training a panel of experts was convened to write, review and formally evaluate test items for the oral exam measuring sight translation and consecutive interpreting skills. Additional experts participated in writing, reviewing



and formally evaluating written exam items based on the exam content specifications.

Following a rigorous training process on test item writing and standard setting, each panel of experts began the test item writing process, based on the test specifications established by the job analysis. Subject Matter Experts (SMEs) evaluated each item with respect to relevance to occupational requirements and the need for competence upon certification; and estimated difficulty for practicing professional interpreters.

Following extensive pilot testing of both the written and oral exams, final exam forms were developed and administered. No credentials were granted for taking the pilot exams; the data was used to finalize both exams.

### Studying for the Exams

Candidates are encouraged to be familiar with the recognized Interpreter Standards of Practice, Codes of Ethics, and the CLAS Standards:

- CHIA Standard of Practice ([www.chiaonline.org](http://www.chiaonline.org))
- IMIA Standards of Practice ([www.imiaweb.org/standards/](http://www.imiaweb.org/standards/))
- IMIA Code of Ethics ([www.imiaweb.org/code/](http://www.imiaweb.org/code/))
- NCIHC Ethics and Standards of Practice ([www.ncihc.org/ethics-and-standards-of-practice](http://www.ncihc.org/ethics-and-standards-of-practice))
- CLAS Standards (<https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>)

In addition, candidates should review the exam content outlines below.

### *Additional Study Tips*

- Review medical terminology using medical glossaries and dictionaries
- Review basic medical information and human anatomy.
- Review interpreter training manuals such as CCCS and ACEBO.
- Attend workshops, conferences, and other training opportunities.
- Review regulations and guidelines, including:
  - The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule ([www.hhs.gov/ocr/privacy/](http://www.hhs.gov/ocr/privacy/))
  - Title VI and the Civil Rights Act of 1964 ([www.LEP.gov](http://www.LEP.gov))
  - HHS Office of Civil Rights ([www.hhs.gov/ocr/](http://www.hhs.gov/ocr/))
- Review resources on cultural awareness
  - The Cross Cultural Health Program ([www.xculture.org](http://www.xculture.org))

- Diversity RX ([www.diversityrx.org](http://www.diversityrx.org))
- HHS Office of Minority Health Cultural Competency ([minorityhealth.hhs.gov](http://minorityhealth.hhs.gov))
- EthnoMed ([ethnomed.org](http://ethnomed.org))

The above references are just a sample of the information that is available on the Internet; these citations do not indicate endorsement.

### Written Exam Content Outline

The written exam is offered only in English. The written exam is a multiple choice, computerized exam, containing 51 questions. The written exam evaluates:

<b>8%</b>	<b>Topic 1: Roles of the Medical Interpreter</b> <ul style="list-style-type: none"><li>&gt; Role of Conduit</li><li>&gt; Role of Clarifier</li><li>&gt; Role of Culture Broker</li><li>&gt; Role of Patient Advocate</li></ul>
<b>15%</b>	<b>Topic 2: Medical Interpreter Ethics</b> <ul style="list-style-type: none"><li>&gt; Confidentiality</li><li>&gt; Accuracy and completeness</li><li>&gt; Impartiality</li><li>&gt; Conflict of Interest</li><li>&gt; Scope of Practice</li><li>&gt; Disqualification/Impediments to Performance</li><li>&gt; Professional Courtesy</li><li>&gt; Professional Development</li></ul>
<b>8%</b>	<b>Topic 3: Cultural Competence</b> <ul style="list-style-type: none"><li>&gt; Cultural practices related to healthcare</li><li>&gt; Familial and relational structures</li></ul>
<b>38%</b>	<b>Topic 4: Medical Terminology in Working Languages</b> <ul style="list-style-type: none"><li>&gt; Medical Tests and Diagnostic Procedures</li><li>&gt; Medical Apparatus</li><li>&gt; Pharmacology</li><li>&gt; Pathologies</li><li>&gt; Symptomatology</li><li>&gt; Anatomy</li><li>&gt; Musculoskeletal System</li><li>&gt; Endocrine System</li><li>&gt; Cardiovascular System</li><li>&gt; Respiratory System</li><li>&gt; Urinary System</li><li>&gt; Nervous System</li><li>&gt; Digestive System</li><li>&gt; Reproductive Systems</li></ul>

- > Integumentary System
- > Treatments
- > Acronyms and Abbreviations (e.g., MRI, CAT scan, etc.)

**23% Topic 5: Medical Specialties in Working Languages**

- > Obstetrics and Gynecology/Genetic Counseling
- > Organ Transplant
- > Pharmacy
- > Ear, Nose and Throat (ENT)
- > Pediatrics
- > Emergency Medicine
- > Oncology
- > Surgery
- > Orthopedics
- > Radiology
- > Nutrition Counseling
- > Physical, Speech and Occupational Therapy
- > Urology and Nephrology
- > Endocrinology
- > Ophthalmology
- > Cardiology
- > Neurology
- > Hematology
- > Dermatology
- > Psychiatry
- > Respiratory Illness

**5% Topic 6: Interpreter Standards of Practice**

- > IMIA (International Medical Interpreters Association) Standards
- > NCIHC (National Council on Interpreting in Healthcare) Standards
- > CHIA (California Healthcare Interpreters Association) Standards

**3% Topic 7: Legislation and Regulations**

- > Health Insurance Portability and Accountability Act (HIPAA)
- > CLAS (Culturally and Linguistically Appropriate Services) Standards

**Note:** *In addition to the number of examination items specified, a small number (five to ten) “pretest” questions may be administered to candidates during the examinations. These questions will not be scored and the time taken to answer them will not count against examination time. The administration of such non-scored experimental questions is an essential step in developing future examinations.*

## Oral Exam Content Outline

The oral exam is a computerized exam that is 45-60 minutes in length. Candidates have 10 minutes to complete 2 sight translation passages and 30 minutes to complete 12 mini-scenarios. The oral exam evaluates:

15%	<b>Topic 1: Mastery of Linguistic Knowledge of English</b>
15%	<b>Topic 2: Mastery of Linguistic Knowledge of the other language</b>
25%	<b>Topic 3: Interpreting Knowledge and Skills</b>
10%	<b>Topic 4: Cultural Competence</b>
25%	<b>Topic 5: Medical Terminology in Working Languages</b>
10%	<b>Topic 6: Medical Specialties in Working Languages</b>

*To assist you with the oral exam format, a Candidate Preparation Document with detailed information on the exam format is available on the NBCMI website.*

Simultaneous interpreting, written translation, and sight translation into English are not tested. The job analysis showed that while medical interpreters sometimes perform these tasks, the frequency was not statistically significant.

## Taking the Exams

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The oral and written exams are offered via computer based testing (CBT) at professional testing centers through contracted test administration vendors. The written exam must be taken and passed before the oral exam may be scheduled.

### Written Exam

Candidates are eligible to take the written exam after their application, with documentation of prerequisites, has been approved by the National Board. The written exam is offered only in English, and any candidate who meets the prerequisites may take the exam, regardless of language.

After receiving approval to take the written exam from the National Board, candidates will receive detailed instructions on how to schedule their exam. The cost is \$175. and exams are given year-round. The exam must be scheduled within 6 months from the date of approval.

The written exam is a multiple choice, computerized exam, containing 51 questions. All candidates will have up to 75 minutes to complete the exam.

### Oral Exam

Once a candidate successfully passes the written exam, that candidate will receive information on how to schedule their oral exam. The cost is \$275. and the exam is given year-round. Candidates are eligible to take the oral exam within 6 months of the date they pass the written exam. Once the oral exam has been scheduled, candidates are sent additional information with confirmation of their testing appointment and test center policies.

*Note: If the oral exam is not available for the candidate's language, and the oral exam for their language is developed later, they will have six months from the time the oral exam in their language is launched in order to take the exam.*

Candidates are allowed 45-60 minutes to complete the oral exam; 30 minutes for 12 mini-scenarios and 10 minutes for 2 sight translation passages. The exam is computer-based and candidate's oral responses will be recorded.

Detailed information on taking the oral exam is available online at [www.certifiedmedicalinterpreters.org](http://www.certifiedmedicalinterpreters.org).

Candidates should review carefully the Candidate Preparation Document, which contains the Examination Security policy. This document is available on the National Board website. Failure to follow candidate instructions will result in the application being voided and forfeiture of the fee for the exam.

All tests are recorded and kept on file in a secure location for quality assurance purposes, as well as to ensure the reliability and validity of the assessment.

## What to Expect on Exam Day (Oral & Written Exams)

The written and oral exams are offered via computer based testing (CBT) and are supervised by designated proctors at professional testing centers. To provide a fair and consistent environment for all candidates, the exams are delivered using standardized procedures and following strict security protocols.

Candidates are required to follow all exam rules at all times. Failure to follow these rules may result in termination of a candidate's testing session and/or invalidation of the candidate's exam score.

### Testing Center Procedures:

- Candidates must arrive at least 10 minutes prior to the scheduled start of the exam. Late arrivals cannot be accommodated.
- Candidates must have two forms of identification (the name on the identification provided must match the name with which the candidate registered on the National Board website):
  1. A valid form of government-issued identification bearing the candidate's SIGNATURE and PHOTOGRAPH. Accepted forms of photo ID include: driver's license, state ID, passport, military ID card; no other forms of photo identification will be accepted.
  2. An additional form of identification bearing the candidate's signature and a preprinted legal name.
- No food or beverage is permitted in the examination area. Tobacco products and chewing gum may not be used by candidates or proctors during exams.
- Personal Items: Please be advised that cell phones, pagers, cameras, programmable electronic devices and recording devices of any kind are NOT allowed. No desk accessories (e.g., family photos, "good luck" articles) or personal items (such as handbags) are permitted in the exam area. No weapons or instruments that may reasonably be used as weapons may be brought into the examination area.
- Authorized Materials: One non-electronic dictionary is allowed in the testing room *for the oral exam only*. Blank white paper for note taking is allowed but all paper must be given to the proctor at the end of the exam for shredding. Please bring at least two pens or pencils with you for note taking.
- You are not allowed to take breaks, stand up or move around during the exam. You will not be allowed to leave the testing area until you finish and submit the exam.
- If you experience any problems during the testing, you must document these problems with the testing center personnel BEFORE you leave the testing site

and contact the National Board via email notifying us of the issue within 24 hours.

**Exam Security:**

- You will be observed at all times during testing and should be aware that security procedures are in place and will be enforced. Failure to follow instructions will result in your application being voided and forfeiture of your application fee. Conduct that results in violation of security will result in the disqualification of examination results and may lead to legal action. Examples of misconduct include, but are not limited to, the following: writing on anything other than the authorized scratch paper provided to you, looking at another computer monitor, or talking with others at any time during the entire examination period.
- Please be advised that all examination content is strictly confidential. You may not copy any portion of the examination for any reason. No exam materials, documents, or notes of any sort are to be taken from the examination room under any circumstances.
- You may not communicate with anyone except the proctor during the exam. No questions concerning the content of the examination may be asked in the examination room before, during, or after the exam. Proctors are not allowed to answer any questions about the content of the examination. Proctors may answer questions about processes (e.g. time limit), but cannot interpret or explain any words or information on the exam. At no other time, before, during or after the examination, may you communicate orally, electronically or in writing with any person or entity about the content of the examination or individual examination questions.
- In most cases, those taking the oral exam will be in a room by themselves. Cell phones are not permitted in testing areas. No unauthorized persons will be admitted into the testing area. All candidates are expected to answer the exam questions independently. There is to be no sharing of information, teamwork, or any other collaborative relationship with another candidate during the exam. Any violation of this policy is considered to be cheating. Any candidate engaged in this behavior may be subject to score cancellation and not be allowed to sit for future administrations of the exam.
- You may use blank white paper on which to take notes using a pencil or pen. Any scratch paper or other exam materials must be shown to the proctor at the end of the exam for proper disposal.

**Cheating**

Individuals suspected of cheating will be subject to the National Board disciplinary policies and procedures.

## After the Exams

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### Written Exam Results

Whether testing online or at a testing center, candidates receive their written exam results right away. After a CMI program candidate passes the written exam, they are sent instructions on how to schedule their oral exam. Candidates who interpret languages for which there is no CMI program will receive an official letter on National Board letterhead, stating that the candidate has passed the National Board written exam, that the National Board does not currently offer an oral exam in that language, and that should the National Board offer an oral exam in that language at some time in the future, the candidate is approved to take that oral exam.

### Oral Exam Results

Candidates will receive pass/fail notification, their score, and general feedback on their performance by email from the National Board approximately 8-10 weeks following their test session.

Oral exams are evaluated based on:

1. Accuracy – conveying the meaning without omissions, additions, summarizing or editorializing any information and retaining the original register
2. Listening and information retention skills – following instructions and retaining in memory the most important information to recall when providing the interpreted rendition
3. Grammar – using correct syntax and usage, and avoiding the use of false cognates (words that sound like they should be correct, but are not), like *constipado* (in Spanish this means *having a cold*) for constipated
4. Interpreting style – displaying consistently good enunciation, intonation and pronunciation, as well as a courteous and professional demeanor
5. Knowledge of terminology and specialties – demonstrating knowledge of a wide range of health care specialties and medical terminology

### Understanding Your Score Reports

The passing scores for the written and oral exams were established through a standard setting study for each of the exams. Subject matter experts rated each item using a modified Angoff procedure. After the pilot testing phase, PSI's professional testing staff conducted psychometric analyses of the resulting item bank to derive a recommended passing score for the oral and written exams, designed to ensure safe and competent practice as a medical interpreter. This means that each candidate's performance on the exam is measured against a predetermined standard.



Candidates are not graded on a curve and do not compete against each other or against a quota. Receiving a higher than passing score is not an indication of more advanced knowledge or a predictor of better job performance. All individuals who pass the exam, regardless of their score, have demonstrated an acceptable level of knowledge.

### Retesting

Candidates who do not pass the written or the oral exam may re-take the respective exam after a 3 month waiting period. The initial exam and re-test fees and application procedures are the same. There is no upper limit on the time period for re-testing. For the written and the oral exam the candidate may test three times. If a candidate wants to test more than three times, there is a waiting period of one year after the third unsuccessful attempt.

### Examination Appeals

PSI and the National Board consistently evaluate the examinations to ensure they accurately measure competency in the required knowledge areas. While taking the exams, candidates had the opportunity to provide comments on any questions. All substantive comments will be reviewed.

Candidates who fail the oral and/or written exam may file an appeal if they believe the exam failure is a result of:

- Examination scoring/grading errors;
- Inappropriate exam administration procedures that violate National Board policy; or
- Testing conditions severe enough to cause a significant disruption of the examination process (including environmental conditions, disruptions caused by other candidates).

Examination appeals must be submitted in writing within 30 days of receipt of notification of an adverse exam decision. Any incident occurring during exam administration should be reported to the proctor immediately and to the program advisor, or directly at [staff@certifiedmedicalinterpreters.org](mailto:staff@certifiedmedicalinterpreters.org) within 24hrs hours of the test.

The National Board reviews exam appeals by email within thirty (30) days of receipt of the appeal. All appeals should be sent to [staff@certifiedmedicalinterpreters.org](mailto:staff@certifiedmedicalinterpreters.org). The examination appeal must provide the candidate's name, testing location information, and date of the exam.

Notice of the final determination shall be provided to the appellant within ten (10) business days of the decision. The determination of the Board of Directors of the National Board will be final.

## Maintaining Certification

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The National Board requires recertification every 5 years to promote professional development for Certified Medical Interpreters. The recertification requirements have been developed to promote maintenance of the skills and knowledge required for competent medical interpretation and to provide an opportunity for interpreters to strengthen and expand their knowledge and skills. To achieve this purpose continuing education units are only accepted for training directly related to medical interpretation.

By requiring recertification, the National Board protects patient's safety, honors patient's right to obtain services of a competent interpreter, and prevents interpreters certified in the past to lag on field experience.

In establishing a recertification time period, the National Board considered the need for ongoing professional development in terms of skill maintenance and knowledge expansion, while also considering the relative stability of medical terminology as well as the constancy of language skills over time. The National Board determined that while continual professional development is essential, the pace of change in the field of medical interpreting is relatively slow. Based on these factors the National Board has determined that a 5-year recertification cycle will best promote continuing professional development.

### Recertification Requirements

To maintain certification all CMIs must recertify every 5 years by participating in education directly related to medical interpretation.

- CMIs must recertify by completing 3 CEUs (Continuing Education Units), equivalent to 30 contact hours of approved training before the credential's expiration date (5 years from initial CMI date of certification).
- Each CEU is equal to 10 contact hours of training (not counting meals, breaks, etc.) by most organizations. For example, a typical conference day is 0.6 CEUs.
- Individuals who fulfill this requirement will not need to retake the medical certification exams to maintain their CMI credential (see Failure to Recertify section below).

Certificants are strongly encouraged to earn CEUs throughout the 5-year period.

***All continuing education must be related to interpreting skills/ability and medical knowledge.***

### Fees & Deadlines

The recertification application fee of \$300 with all documentation must be submitted at least 45 days before the expiration date of one's CMI credential.

## Extensions

National Board allows CMIs to request a recertification extension for no more than 6 months. The request must include the time frame for which the extension is being requested and a plan describing the courses of study that will be taken to fulfill the requirement. Extension requests should be submitted 30 days prior to the CMI expiration date to the National Board staff email account (staff@certifiedmedicalinterpreters.org).

A National Board staff member will contact the CMI within 10 business days with a determination. If the extension is approved, the CMI will be required to pay the recertification fee and the expiration date will be extended. Once the CEUs are approved, the new expiration date will be set for 5 years from the original expiration date (not the extension date).

If the CMI fails to meet the CEU requirements during the extension time granted, the CMI credential will expire and he/she will be required to retake the written and oral exams to reinstate the CMI credential. The recertification fee is non-refundable.

## Documentation Required

Certificants are responsible for obtaining and retaining appropriate documentation for all CEU activities. The following documentation will be required along with the recertification application:

1. Confirmation of attendance signed by the instructor or host/sponsoring organization.
2. Event registration confirmation (or copy of event registration).

At least one of the items above must include the title and date of the training event. If the title does not clearly indicate the subject matter of the training, the certificant should also retain a syllabus, outline, handouts, or other similar documents.

## Acceptable Continuing Education

The National Board automatically accepts IMIA CEUs. The IMIA CEUs must be for workshops, conferences, and events that are related to medical interpreting knowledge and skills enhancement.

Education opportunities other than those provided by IMIA may be reviewed and evaluated by the National Board upon request. Conference workshops can be accepted as long as the schedule has been signed or initialed by the presenter with dates and the CMI's name being visible on the page. The conference attendance certificate must also be presented.

In order for a learning activity to be quantified as Continuing Education, there must be a demonstrated benefit for the successful attendee that enhances their skills as a

medical interpreter. The CMI should (within the 5-year credentialing period) accumulate at least 1 CEU (10 hours) of the required 3 CEUs (30 hours) through activities focusing on standards of practice, the code of ethics for the certified medical interpreter, etc. and at least 1 CEU (10 hours) focusing on skill development (memory enhancement, note taking, sight translation). This last requirement helps minimize the limitation of just counting conference hours of attendance to suffice as continuing competence in the medical interpreting field.

Acceptable Continuing Educational opportunities for the CMI may include but are not limited to:

- activities designed to increase the skills and/or knowledge of practicing certified medical interpreters such as online self-paced learning activities, webinars (live and recorded) workshops, and conference events
- college courses which contribute to the increased knowledge of the interpreter (terminology, anatomy, etc.)

The following activities cannot be accepted:

- beginning level courses that would be taken by individuals seeking to become a CMI
- mandatory policy trainings by hospitals or clinics that are part of employment
- court and legal interpreting
- translating

CMIs should be taking advanced trainings that are more in line with their skill set than just a beginner's training. Since the National Board gives a credential for medical interpreting, the only court, legal and translation activities that can be accepted MUST relate directly to medical interpreting.

### Recertification Procedures

The first step for the CMI is to go is to visit the National Board website and review information about paying the \$300 recertification fee and how to submit CEUs.

When a payment is received, the website generates a receipt which is forwarded to the registrar, who finds the online profile of the CMI and reviews the CEUs. The CMI will receive a reply in about two weeks, depending on the number of certificates to be reviewed in the file.

If approved, the registrar updates the CMI's online profile with the new expiration date and sends a congratulatory email with instructions on how to order a badge and receive your electronic certificate.

If the CEU review by the registrar is not complete, the CMI receives a message with instructions on what steps are needed to finalize the process.

All CMI questions about recertification should go to the staff email account (staff@certifiedmedicalinterpreters.org).

### **Appeals Process for Recertification CEUs**

CMIs whose CEUs are not accepted toward recertification may appeal this decision by sending a message to staff@certifiedmedicalinterpreters.org. The appeal should include an appeal letter from the applicant clearly stating why they believe the decision was wrong.

The appeal should be sent to staff@certifiedmedicalinterpreters.org within 30 days of receipt of notification of the adverse decision. The National Board reviews exam appeals by email within thirty (30) days of receipt of the appeal. Notice of the final determination shall be provided to the appellant within ten (10) business days of the decision. The determination of the Board of Directors of the National Board will be final.

### **Failure to Recertify**

Credentialed interpreters who do not comply with the recertification requirements before the established deadline every fifth year will lose their credential(s) and will be removed from the registry of CMIs. To regain certification, lapsed individuals must re-apply for certification, meet the prerequisite requirements in effect at the time, and pass the examination requirements.

## Policies

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### Special Accommodations

The National Board is committed to equal access for all certification candidates and complies with the Americans with Disabilities Act. Reasonable examination accommodations will be made at no extra charge to individuals with documented disabilities.

Appropriate accommodations will be provided to qualified candidates with disabilities to the extent that such accommodation does not fundamentally alter the examination, or cause an undue burden to the NBCMI or the agency administering the examination. Information regarding a disability will be considered strictly confidential and will only be shared with the testing sites who will administer the test.

### Requesting Accommodations

The National Board is not required to provide accommodations if unaware of a candidate's needs. It is the responsibility of candidates with disabilities to notify NBCMI in writing of the applicant's need for an accommodation.

There are two ways to notify the National Board of the ADA accommodation request:

- If a special need or disability is present at the time of submitting the registration, the candidate should add the pertinent information under "Special Accommodations" on the registration form. If accepted to the program, the candidate will be directed to explain the nature of their request and to upload necessary documentation. It is the candidate's responsibility to submit the pertinent supporting documentation in electronic format.
- If a special need or disability arises after the applicant has already been approved to take an exam, the candidate must submit the Special Accommodation Request Form (Appendix A) to their program advisor or [staff@certifiedmedicalinterpreters.org](mailto:staff@certifiedmedicalinterpreters.org), or complete the form on the National Board website, along with the supporting documentation.

All accommodation determinations will be made by the NBCMI at its discretion. Failure to notify NBCMI of needed accommodation(s) at the registration or at least 30 days before scheduling an exam may result in the accommodations not being available at the time of the examination.

Candidates shall not hold the NBCMI accountable for any lack of appropriate accommodation deriving from the applicant's/candidate's own failure to notify the NBCMI of their needs on a timely basis. Once special accommodations have been granted, they may not be altered during the examination.

### The Role of the Human Reader/Actuator

A candidate may request a human reader and/or human actuator for a written exam or an oral exam. The human reader and/or human actuator is one person who may perform either the role of human actuator, the role of human reader, or both roles. The candidate must specify whether they are requesting a human reader, human actuator, or both. There is not an extra charge associated with providing a human reader and/or actuator.

A human reader and/or human actuator CANNOT be a current candidate for the CMI credential. A candidate CANNOT bring their own human reader and/or human actuator. The NBCMI has sole discretion to nominate an individual as a human reader and/or human actuator.

A human reader is an individual who can read, write, speak and understand English with the proficiency and command of the English language and will assist a candidate with the written exam. The role of the human reader is to read words from the computer screen to the candidate. The human reader cannot resolve, explain, or provide assistance other than the task of reading.

A human actuator is an individual who is able to operate a keyboard and mouse. This individual can read, speak, and understand English. The role of the human actuator is to navigate through a computer-based test by operating a keyboard and mouse. The human actuator cannot resolve, explain, or provide assistance other than the task of navigating throughout the test by operating a keyboard and mouse.

### The Role of the Proctor

A proctor is the individual administering the examination at the designated testing center. A proctor CANNOT also serve as the human reader and/or human actuator for the same examination administration. A testing center's proctor may serve as a human reader and/or human actuator if a second proctor is available to proctor the examination, but at no time may any person serve as proctor and also have another role (human actuator/reader) for the same exam.

### Written Exam Accommodations

Candidates taking the written exam should contact PSI and submit the "Special Arrangement Request Form" to request accommodations prior to scheduling an exam session. The form is included in the PSI candidate bulletin and is available at [www.psiexams.com](http://www.psiexams.com). Candidates may also contact the PSI ADA Services Team at 1-800-733-9267 x 6750.

The following requests may be granted if needed: Larger font, modification of seating or other physical arrangements in the examination facility, providing for the examination to be taken in an accessible location; or providing for a reasonable extension of testing time (the written exam takes approximately 45 minutes; the

NBCMI will increase 30 minutes over the total exam time, exclusive of initial instructions).

The following requests will be denied: changes of the content of the exam; providing for unlimited testing time; permitting a reader to paraphrase test material or translate the material into another language.

If requested, the NBCMI will authorize a human reader and/or human actuator and extended time as a reasonable accommodation to those individuals who otherwise meet the eligibility requirements to take the written examination. The NBCMI has sole discretion to nominate an individual as human reader and/or human actuator. There is not an extra charge associated with providing a human reader or additional time for examination administration.

### Written Examination Process

Prior to the proctor logging the candidate in to begin the examination process, a human reader/actuator, if present, will introduce him/herself to the candidate and explain what their role entails.

The human reader will inform the candidate that the candidate may, at any time during the examination administration, ask the reader to speed up or slow down, to read louder or softer. The human reader will read aloud all instructions. Questions that the candidate may have about the instructions must be directed to the attending proctor, as is the current policy for all candidates.

No candidates, either with or without a human actuator, are allowed breaks during examination.

### Oral Exam Accommodations

The following requests may be granted if needed: Larger font, modification of seating or other physical arrangements in the examination facility, providing for the examination to be taken in an accessible location.

The following requests will be denied: changes of the content of the exam; providing for unlimited testing time; permitting a reader to paraphrase test material or translate the material into another language, extension of testing time (the oral exam has a pre-set recording time).

If requested, the NBCMI will authorize a human reader and/or human actuator and extended time as a reasonable accommodation to those individuals who otherwise meet the eligibility requirements to take the oral examination. The NBCMI has sole discretion to nominate an individual as human reader and/or human actuator. There is not an extra charge associated with providing a human reader/actuator.



### Oral Examination Process

Prior to the proctor logging the candidate in to begin the examination process, a human reader/actuator, if present, will introduce him/herself to the candidate and explain what their role entails.

The human reader will inform the candidate that the candidate may, at any time during the examination administration, ask the reader to speed up or slow down, to read louder or softer. The human reader will read aloud all instructions. Questions that the candidate may have about the instructions must be directed to the attending proctor, as is the current policy for all candidates.

The candidate has the responsibility to direct the human actuator to perform any actions required to progress through and complete the examination. The candidate and the human actuator must both read the examination instructions carefully and ask the proctor any questions either of them may have. The candidate is encouraged to perform the practice test prior to the exam to be familiar with the format of the oral examination.

On the sight translation, the human actuator will first read the entire passage (90 seconds for this part), and then when the recording of the response begins, the human actuator will read it line by line giving the candidate a chance to interpret between each line – the candidate will have 4 minutes for this part.

On the mini-scenarios, the human actuator will cue the candidate when the recording automatically starts. There is an 8 second "think time" pause between the utterance that the candidate will have to interpret and when the recording automatically starts. If the candidate does not want to wait the 8 seconds, s/he may cue the human actuator to click on "Record" and begin the response immediately.

If the candidate wants a repetition, s/he will tell the proctor immediately after hearing the utterance s/he wants repeated (and during the 8 seconds of "think" time) and the human actuator will click on the play button to get the repetition. The candidate will have 6 chances to do so during the entire test.

The candidate is entirely responsible for managing the time allotted to take the examination, and must complete the examination within the allotted time. No additional time will be provided.

No candidates, either with or without a human actuator, are allowed breaks during examination.

### Nondiscrimination

The National Board prohibits discrimination on the basis of race, color, sexual orientation, gender identity or expression, age, disability, national origin or citizenship status, marital status, religion, or any other basis prohibited by law.

## Confidentiality

The National Board is committed to protecting confidential applicant and certificant information as well as confidential information regarding examination development and administration processes.

Information about applicants/certificants and their examination results is confidential. Exam scores will be released only to individual candidates, unless a signed release is provided. Personal information submitted by applicants/certificants with an application for initial certification or recertification is confidential. Personal information retained within the applicant/certificant database will be kept confidential.

The National Board will not disclose confidential applicant/certificant information unless authorized in writing by the individual or as required by law.

The names of National Board certified individuals are not considered confidential and may be published by the National Board.

Aggregate exam statistics (including the number of exam candidates, pass/fail rates, and total number of certificants) will be publicly available. Aggregate exam statistics, studies, and reports concerning applicants /certificants will contain no information identifiable with any applicants/certificants, unless authorized in writing by the individuals.

## Use of the Credential

The use and/or display of the National Board or CMI name and National Board or CMI logo, except as permitted by this policy, requires the written consent of the National Board. Use of the National Board name and/or logo to state or imply approval or affiliation with the National Board is prohibited except as permitted by this policy. The CMI name and logo may only be used as permitted by this policy and in connection with a certified individual and not with a company or group of individuals.

Individuals who fail to recertify or whose certification is suspended or revoked must immediately discontinue use of the National Board name and are prohibited from stating or implying that they hold the CMI credential.

### Acceptable Use

Individuals who have earned the CMI credential may identify themselves as a National Board certified medical interpreter with the proper language designation, for example: CMI–Spanish. The individual must always specify the credentialed language along with the CMI designation. Proper specification is CMI followed by a hyphen and then the language(s) certified.

Individuals must maintain their certification in good standing to continue to use the name. The CMI name may be used only as long as the certification is valid. Certification is a non-transferable, revocable, limited, non-exclusive license to use the certification designation "CMI," and is subject to compliance with the policies and procedures of the Board, which may be revised from time to time.

### **Name**

CMI certified individuals may not make misleading, deceptive, or confusing statements regarding their certification status. For example, individuals may not suggest that they have interpreting ability or other professional expertise outside of the scope of their professional licenses, credentials, and formal education and training.

### **Certificate**

Each CMI certified individual will receive a certificate suitable for framing. Each certificate will include an expiration date. Individuals who renew their certification (recertify) will receive a new certificate. All certificates remain the sole property of National Board and must be returned if the individual's certification is suspended or revoked.

### **Complaints and Investigations**

Incidents of alleged misuse of the National Board and/or CMI name and/or logo by a certificant or applicant will be investigated by the National Board according to the complaints and disciplinary policy.

### **Disciplinary Policy & Procedure**

In order to maintain and enhance the credibility of the CMI certification program the National Board has adopted the following procedures to allow individuals to bring complaints concerning the conduct of individuals who are CMI candidates or certificants to the National Board.

In the event an individual candidate or certificant violates the CMI certification rules or the National Board's policies, the National Board may reprimand or suspend the individual or may revoke certification.

The grounds for sanctions under these procedures may include, but are not necessarily limited to:

1. Violation of recognized standards of practice and codes of ethics in the field of medical interpreting published by the International Medical Interpreter Association (IMIA), the National Council on Interpreting in Health Care (NCIHC) and the California Healthcare Interpreting Association (CHIA).
2. Violation of established National Board policies, rules and requirements.

3. Conviction of a felony or other crime of moral turpitude under federal or state law in a matter related to the practice of, or qualifications for, medical interpretation.
4. Gross negligence, willful misconduct, or other unethical conduct in the performance of services for which the individual has achieved National Board CMI certification.
5. Fraud or misrepresentation in an initial application or application for recertification.
6. Fraud or misrepresentation of the CMI credential

Information regarding the complaint process will be available to the public via the National Board web site or other published documents. A complete copy of this policy will be made available to any individual upon request.

Actions taken under this policy do not constitute enforcement of the law, although referral to appropriate federal, state, or local government agencies may be made about the conduct of the candidate or certificant in appropriate situations. Individuals initially bringing complaints are not entitled to any relief or damages by virtue of this process, although they will receive notice of the actions taken.

### **Complaints**

Complaints may be submitted by any individual or entity. Complaints should be reported to National Board in writing and should include the name of the person submitting the complaint, the name of the person the complaint is regarding along with other relevant identifying information, a detailed description of factual allegations supporting the charges, and any relevant supporting documentation. Information submitted during the complaint and investigation process is considered confidential and will be handled in accordance with National Board's confidentiality policy. Inquiries or submissions other than complaints may be reviewed and handled by the National Board or its staff members at its discretion.

A complete copy of the National Board Disciplinary Policy is contained in the National Board Policies & Procedures Manual. The full disciplinary policy is available upon request from the National Board office.

### **Appeals**

Within thirty (30) days from receipt of notice of a determination by the National Board that a candidate/certificant violated the certification program policies and/or rules, the affected candidate/certificant may submit to the National Board in writing a request for an appeal.

A complete copy of the National Board Disciplinary Policy that includes the appeal procedures is available upon request from the National Board office.

## Appendix A: Special Accommodation Request Form

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### DIRECTIONS

Please submit this form along with any required accompanying documentation, electronically to [staff@certifiedmedicalinterpreters.org](mailto:staff@certifiedmedicalinterpreters.org). If you are requesting accommodation(s), your application will not be considered complete until this form and any required accompanying documentation is submitted. Any delay in submitting this form may affect the timeline for determining your eligibility.

### CANDIDATE INFORMATION

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

### SPECIAL ACCOMMODATIONS

Please describe your disability:

Will this disability require special accommodations in order for you to take the examination? YES NO

If Yes, please describe the specific testing accommodations you are requesting:

Include separately any written documentation supporting the accommodation that you are requesting.