SCMG Language Assistance Program (LAP) & Cultural Competency Training

2019

For Sharp Community Medical Group Providers only

SHARP Community Medical Group

Overview

The California Health Care Language Assistance Act, also known as the California Senate Bill SB 853 requires all California managed care health plans to provide language assistance and culturally sensitive services to members who are Limited English Proficient (LEP). In addition, federal law requires that healthcare providers who see Medicare members, including Medicare Advantage members provide free language assistance to LEP and hard-of-hearing or deaf members (Title VI of the Civil Rights Act of 1964).

Why Do I Need Training?

The law requires all health plans to ensure that its staff and any staff the health plan contracts or delegates as part of the provision of its LAP services, or who interact with LEP enrollees be trained on the health plan's Language Assistance Program.

Therefore, Sharp Community Medical Group (SCMG), as a delegated provider organization, will cooperate and comply with all contracted health plans in the health plan's obligation to provide language assistance services to LEP HMO members in accordance with Title 28, California Code of Regulations, 1300.67.04 and applicable revisions to the Knox Keene Act.

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Key Terms and Acronyms

➢ **Language Assistance Program (LAP) Law**: The California Law Effective 1/1/2009 (SB 853) require health plans to establish and support a Language Assistance Program (LAP) for members who are limited in English proficiency (inability/limited ability to speak English)

➢ **Limited English Proficient (LEP)**: LEP member is "a member who has an inability or a limited ability to speak, read, write or understand the English language on a level that permits that individual to interact effectively with health care providers or health plan employees." (Section 1300.67.04 and 1300.67.8 of Title 28 California Code of Regulations)

Key Terms and Acronyms

> **Diversity/Diverse**: Differences in the population that includes such things as educational levels, social conditions, economic factors, cultural background, spiritual traditions, age, sex, race, national origin.

➤ **Threshold Language(s)**: The most common language(s) used by patients in a health plan, medical group, or geographic area.
  - Health plans determine their threshold languages by using calculations specified by CA SB853.

  (See Language Assistance Program (LAP) P&P for Threshold Language Grid)

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Key Terms and Acronyms

➢ **Vital Documents**: Documents that provide health plan enrollees with important information on how to access benefits such as applications, consent forms, letters, denial notices, free language assistance notices and explanation of benefits.

➢ **Vital Standard Documents**: General documents that are not specific to a particular enrollee. They are generic and repeatable. They must be proactively translated and sent by the health plan in threshold languages to participants who have a threshold language preference on file with the health plan.

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Key Terms and Acronyms

- ➢ **Vital Non-Standard Documents**: A document containing enrollee-specific information, such as a service authorization or claim denial.
  - ■ Examples:
    - · Notices pertaining to the denial, reduction, modification, or termination of services, benefits, and the right to file a grievance or appeal.
    - · An explanation of benefits (EOB) or similar claim processing document that is sent to the participant if the document requires a response from the enrollee
  - · **Vital Non-Standard Documents administrated to LEP members by SCMG include**:
    - · UM denial, modification or delay in service letters
    - · UM delay letters
    - · Claims denial letters (e.g. member liability letters or those that require a response from the member)
    - · Specialty Care Provider termination letters

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Key Terms and Acronyms

➢ **Language Assistance Program (LAP) Notice of Translation**: Written notice of the availability of translation services, free of charge, must accompany all vital documents. Medical groups delegated for utilization management (UM) or claims must send the LAP notice with all vital documents. Examples of vital documents include utilization management denials, and claim denials or notices requiring a response from the enrollee.

· LAP Notice of Translation

Key Health Plan LAP Requirements

➤ **In order to comply with CA Senate Bill 853, health plans must meet key Language Assistance Program (LAP) requirements:**

- Determine threshold languages
- Collect and store members' preferred languages
- Ensure access to interpreter services free of charge
- Provide timely translation (written) of vital documents into threshold languages
- Provide timely interpreter services (spoken) at each point of member contact
- Ensure plan and contracted provider compliance with LAP requirements
- Monitor and regularly report compliance with CA Senate Bill 853

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SCMG LAP Responsibilities

How can SCMG help implement the Language Assistance Program?

> SCMG is not delegated to provide LAP services, but has to address each member's need for language assistance or interpreter services by the following:

- Identifying limited English proficient patients
- Providing an LEP member or the member's representative contact information for their contracted health plan
- Send the approved contracted health plan's notice of translation services with all SCMG produced non-standard vital documents produced in English to LEP members LAP Notice of Translation
- Forward request for translation of non-standard vital documents received from members to the contracted health plan in a timely manner
- Provide copies of non-standard vital documents to the health plan upon request in a timely manner

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Documentation and Tracking

➢ **Translation Services**

   ➢ When SCMG staff receives a request from the health plan or member for a copy or translation of Non-Standardized Vital Documents, the SCMG staff member receiving the request must document the request on the log located on the SCMG network drive (N:\COMMOM\SHARED-QUALITY MGT\LAP – SB 853\LAP Translation Spreadsheet\Lap translation log.xls)

   ➢ When SCMG staff receives a member request for translation of a health plan produced vital document, the SCMG staff must document the request on the log located on the SCMG network drive (N:\COMMOM\SHARED-QUALITY MGT\LAP – SB 853\LAP Translation Spreadsheet\Lap translation log.xls

   ➢ SCMG is required to submit this information to contracted health plans upon request

   ➢ The SCMG "Language Assistance Program (LAP) Policy & Procedure" outline the procedure for SCMG staff who encounter translation services requests (click for copy of the SCMG LAP P&P)

Interpretation Services

- ➢ **Time Required to Obtain Interpretation Services**
  - Phone interpretation can be arranged the same day as the appointment
  - In-person interpretation services must be scheduled 5 business days in advance and providers must allow at least 15 minutes for the interpreter to attend the appointment

- ➢ **Identifying when to Use an Interpreter**
  An LEP member can be identified by the following:
  - Uses friend or family member to assist in understanding
  - Bilingual office staff assist on phone or in person
  - Has difficulty expressing concepts in English

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Interpretation Services

Interpreter Tips

- Inform the interpreter of the patient's age, sex, background and specific patient needs

- Hold a brief introductory discussion with the interpreter (Your name, organization and nature of the call/visit)

- Reassure the patient information will be kept confidential

- Allow enough time for the interpreted sessions

- Avoid interrupting during interpretation

- Speak in the first person

- Speak in a normal voice, try not to speak fast or too loudly

- Speak in short sentences

- Avoid acronyms, medical jargon, slang and technical terms

- Face and talk to the patient directly

- Be aware of body language in the cultural context

Interpretation Services_____

➢ **Benefit of Using a Professional Interpreter**

- · A professional interpreter is able to effectively communicate health care terminology

- · Required to complete courses in ethics and HIPAA

- · Will not offer independent information to the member

- · A professional interpreter will let you know if the member does not understand, or wants more information, and allow you to explain

➢ **Document Member Refusal to Use a Professional Interpreter** Regulations do not prohibit the member from using others as interpreters.

- · Document if any interpreter was used during the visit

- · Document if the member refused the professional interpreter

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Interpretation Services _____

- ➢ **Member Request for Translation of Non-Standard Vital Documents** (denial letters, delay/pend letters, specialist termination notices, and claims denial notices)

  - · Health Plans are required to translate certain non-standardized "vital documents," within 21 days of the member's request. If the member needs one of these documents translated, please instruct them to call their health plan at the customer service number on their member identification card or SCMG Customer Service at (858) 499-2550 or (877) 518-7264.

Interpretation Services Health Plan Contacts

➢ **Health Plan Contact Numbers You May Utilize to Obtain an Interpreter**

HEALTH PLAN	CONTACT INFORMATION
Aetna	(800) 525-3148
Anthem Blue Cross	(888) 254-2721
Blue Shield of California	(800) 541-6652 phone interpreter (800) 541-6652, "0" on-site interpreter
Care1st	(800) 544-0088 8am-6pm: Member Services Healthy Families Member Services at 1-800-605-2556 (877) 904-8195 After Hours: Pacific Interpreters
Cigna	(800) 806-2059
Health Net	Customer Contact Center number on member's identification card. (800) 546-4570 After hours and weekends. (800) 522-0088 During regular business hours
Sharp Health Plan	(800) 359-2002
United Healthcare	(800) 624-8822 English and all other languages (800) 730-7270 Spanish (800) 938-2300 Chinese

Language Assistance Services

- **Language Assistance Services for Hard-of-Hearing or Deaf Patients (Commercial or Medicare Advantage)**
  - Direct patients to call the following number: 1-877-735-2929 (TTY users) or 711
  - To make an outgoing call to hard-of-hearing or deaf patients, contact the California Relay Service:
    - English 1-888-877-5378
    - Spanish 1-888-877-5381
  - Contact Deaf Community Services of San Diego (DCSSD): (619) 398-2488, if a sign language interpreter is required during an appointment for your patient
  - Provide the member name and date of birth
  - Instruct DCSSD to send the invoice to: Sharp Community Medical Group – Claims, P.O. Box 929037, San Diego, CA 92193-9037

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Language Assistance Services

➢ **Translation Services**

- For translation services not covered by the member's health plan, SCMG has contracted with Pacific Interpreters to provide telephonic translation services
- Additional information about Pacific Interpreters is located in the SCMG "Interpretive Services and Auxiliary Aids" policy and procedure
- Case Managers at the Hospital should use the hospital's contracted interpreter service

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Diversity

The increasing diversity of San Diego's population, awareness of differences in individual belief and behavior, and new legal mandates, constantly present us with new challenges in our attempts to deliver culturally competent care and access a vast array of language services.

Therefore, SCMG is encouraging all physicians and practice staff to enhance their skills in working with a diverse population of patients, in an ongoing effort to improve patient satisfaction and outcomes.

The Industry Collaborative Effort (ICE) Toolkit was produced by a nation-wide team of healthcare professionals to provide resources that address very specific operational needs that often arise in a busy practice because of the changing service requirements and legal mandates.

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Industry Collaborative Effort Provider Toolkit

The ICE Toolkit is a comprehensive set of materials organized into four sections, each containing helpful background information and tools that can be reproduced and used as needed. Below you will find a list of the section topics and a small sample of their contents.

1. Interaction with a diverse patient base: encounter tips for providers and their clinical staff, a mnemonic to assist with patient interviews, help in identifying literacy problems, and an interview guide for hiring clinical staff who have an awareness of diversity issues.

2. Communication across language barriers: tips for locating and working with interpreters, common signs and common sentences in many languages, language identification flashcards, and language skill self-assessment tools.

3. Understanding patients from various cultural backgrounds: tips for talking with a wide range of people about sex, pain management across cultures, and information about different cultural backgrounds.

4. References and resources: some key legal requirements, a summary of the "Culturally and Linguistically Appropriate Service (CLAS) Standards," which serve as a guide on how to meet legal requirements, a bibliography of print resources, and a list of internet resources.

Click here to access the Industry Collaborative Effort (ICE) Toolkit
http://www.iceforhealth.org/library/documents/ICE C&L Provider Toolkit 7.10.pdf

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Culture, Diversity, and Language Preference

➢ **To Avoid Being Unintentionally Insulting or Patronizing, be aware of the following:**

- Styles of Speech: People vary in length of time between comment and response and the speed of the speech

- Eye Contact: People interpret various types of eye contact based on cultural background and life experience

- Body Language: The meaning of body language varies by culture, gender and age; 80% of communication is non-verbal

- Patient Conversation: Speaking English makes it easy to use a direct communication style; however other languages and cultures may differ in communication style

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California Racial and Ethnic Demographics

- **California's population:**
  - 74% White

  - 6.6% African American

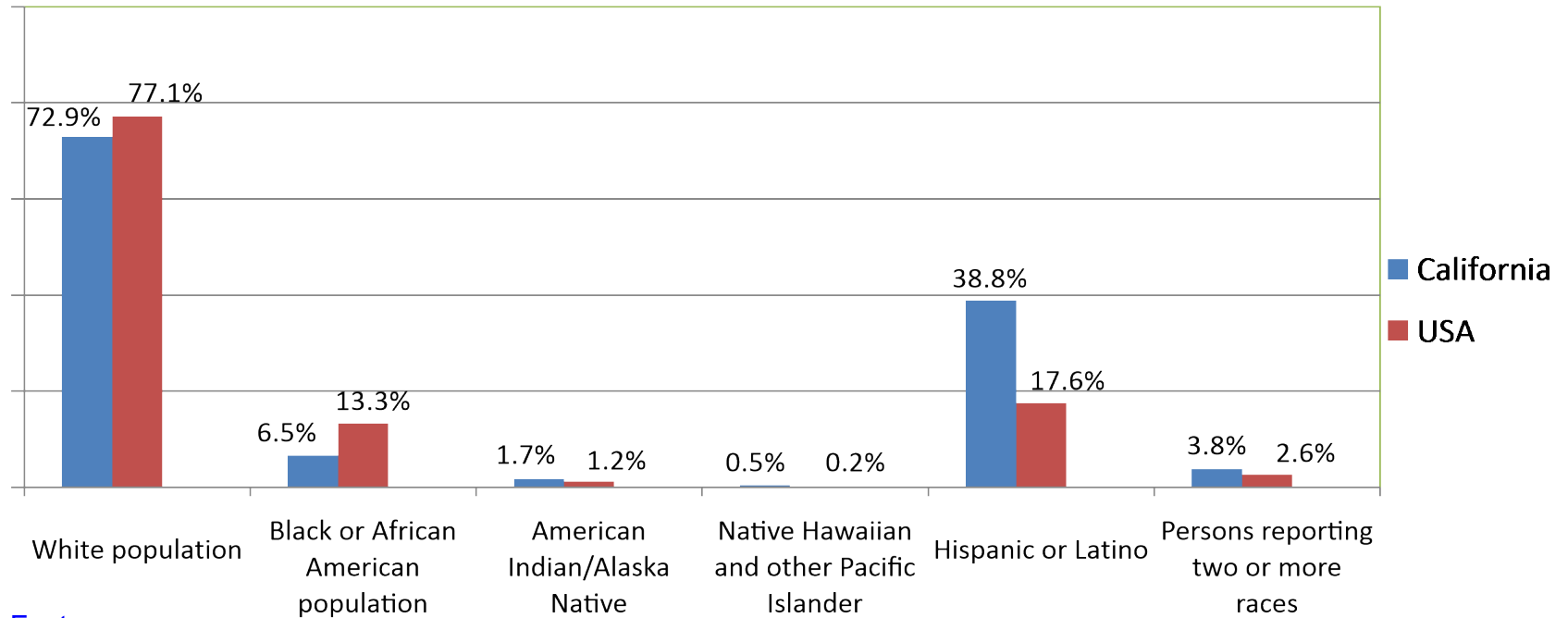 - 1.7% American Indian or Alaskan Native

  - 0.5% Native Hawaiian and other Pacific Islander

  - 38.1% Hispanic or Latino

  - 3.6% two or more races
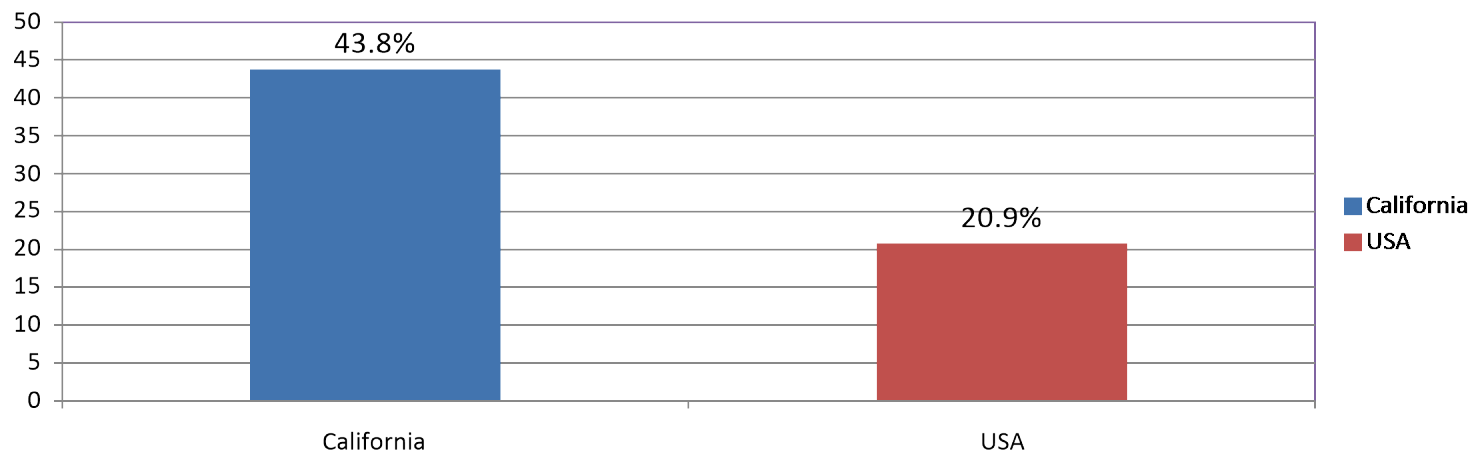
California Racial and Ethnic Demographics

Quick Facts as of 2015

Quick Facts

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California Linguistic Diversity

- 43.8% percent of the California population (over five years old) speak a language other than English

Quick Facts 2010-2014

Quick Facts

Resources

Resource	Link
California Pan-Ethnic Health Network	California Legislation | California Pan-Ethnic Health Network
Office of Administrative Law	About CCR's - Office of Administrative Law
United States Census Bureau	http://quickfacts.census.gov/qfd/states/06000.html
Department of Managed Health Care (DMHC)	**www.hmohelp.ca.gov**
ICE Approved Documents	http://ice4health.org/library.asp?sf=&scid=1618#scid1618
Interpreter Services and Cultural Diversity webpage	https://providers.scmg.org/ScmgContentPage.aspx?nd=176

Thank You

SCMG is committed to abiding by the laws, rules and regulations that govern our business.

To demonstrate that SCMG is compliant with this requirement you must complete the attestation acknowledging you have completed the SCMG Language Assistance Program & Cultural Competency Training 2019.

7/19/2018

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Attestation

Before you Log Out:

Select "Test" and complete the attestation to get credit for this training.

Select "Complete Evaluation" to provide your feedback regarding the module and print a certificate for your records.

Thank you for completing the required SCMG Language Assistance Program & Cultural Competency Training 2019.

7/19/2018

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