

Language access services.

AmeriHealth Caritas Louisiana offers language services to facilitate better communication between AmeriHealth Caritas Louisiana members and their doctors.

Translation.

AmeriHealth Caritas Louisiana translates all of its materials into almost any language for its members. Commonly used materials are automatically translated into Spanish and Vietnamese. Other materials are translated upon request. Translations can be done in over 75 other languages.

Interpretation.

AmeriHealth Caritas Louisiana provides telephonic interpretation services, free of charge, to any AmeriHealth Caritas Louisiana member through Language Access Services associates.

Steps to use a telephonic interpreter:

1. Inform the AmeriHealth Caritas Louisiana member of his or her right to free telephonic interpretation services through AmeriHealth Caritas Louisiana.
2. If the member wishes to have an interpreter, use a certified medical interpreter. A friend or family member is not a good idea, because misinterpretations and editing may occur.
3. Make sure a phone is in the room or use a cell phone.
4. Call the AmeriHealth Caritas Louisiana Member Services line at 1-888-756-0004 with the Member ID number, and Member Services will connect you to the necessary interpreter.
5. Conduct the exam with interpreter over the phone using the “speakerphone” function.

Please visit AmeriHealth Caritas Louisiana’s website for more information on interpretation services and for a flow chart of this process. If the patient’s language is not readily identifiable, you can also access a Language Identification Selection form at www.amerhealthcaritasla.com/provider/resources/interpretation-services.

Translation tips:

- Speak directly to the patient, not the translator.
- Do not rush. Pause every sentence or two for interpretation.
- Use plain language. Avoid slang and sayings. Jokes do not always translate well.
- Check for understanding occasionally by asking the patient to repeat back what you said. This is better than asking, “Do you understand?”



AmeriHealth Caritas Louisiana’s Culturally and Linguistically Appropriate Services (CLAS) Program and Language Access Services

A patient’s right, a provider’s responsibility.

In this brochure:

- Cultural Competency—What is it? Why is it important?
- AmeriHealth Caritas Louisiana’s cultural competency program.
- AmeriHealth Caritas Louisiana’s demographics.
- AmeriHealth Caritas Louisiana’s language access services.

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Louisiana

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Cultural competency

What is it?

- Having the ability to interact effectively with people of another culture.
- Being mindful of people with different beliefs, customs and ways of acting.
- Accommodating different cultural ways of understanding the same medical issue.
- Being aware of your own world view.

Why is cultural competency important?

Cultural competency enables us to provide better medical care to our patients and reduce health disparities. For instance:

- Studies indicate that the African-American population in Louisiana has a death rate that is 1.3 times higher than Caucasian residents. [The Kaiser Family Foundation, statehealthfacts.org. Data source: United States Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics. Compressed Mortality File 1999-2009. CDC WONDER On-line Database, compiled from Multiple Cause of Death File 2009, Series 20 No. 2O, 2012. Accessed at <http://wonder.cdc.gov/ucd-icd10.html> on Sept. 11, 2012.]
- Latinos in the United States are 1.7 times more likely than non-Hispanic Caucasians to be diagnosed with diabetes, and 1.4 times more likely die from the disease. [National Center for Health Statistics, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, Vital and Health Statistics, Series 10, Number 252, “Summary of Health Statistics for U.S. Adults: National Health Interview Survey, 2010.” January 2012. http://www.cdc.gov/nchs/data/series/sr_10/sr10_252.pdf. Accessed October 11, 2012.]
- Poor communication between providers and their patients may yield poor results, higher expenses and increased health problems. A review from the Commonwealth fund found that patients who are culturally different from their providers may have less understanding, trust and communication with their providers. [The Commonwealth Fund, Quyen Ngo-Metzger, Joseph Telfair, Dara H. Sorkin, Beverly Weidmer, Robert Weech-Maldonado, Margarita Hurtado and Ron D. Hays, “Cultural Competency and Quality of Care: Obtaining the Patient’s Perspective.” October 2006. http://www.commonwealthfund.org/usr_doc/Ngo-Metzger_cultcompqualitycareobtainpatientperspect_963.pdf. Accessed October 11, 2012.]

AmeriHealth Caritas Louisiana’s mission is to help people get care, stay well and build healthy communities. This includes people of all backgrounds.

- We abide by the CLAS Standards of the United States Department of Health and Human Services’ Office of Minority Health. Standards five through eight are mandates, or federal requirements for all recipients of federal funds. Title VI of the Civil Rights Act of 1964 also prevents discrimination by any agency that receives federal funds.

What is AmeriHealth Caritas Louisiana’s cultural competency program?

AmeriHealth Caritas Louisiana’s Cultural Competency Program exists to:

- Ensure that all AmeriHealth Caritas Louisiana members are served in a way that is responsive to their cultural and linguistic needs.
- Monitor for health disparities among AmeriHealth Caritas Louisiana members, such as varying rates of diabetes or lack of certain health screenings among populations of different races, ethnicity or primary language.
- Carry out corrective actions to resolve health disparities. This may include targeting specific populations for health education and screenings, or educating providers on our interpretation services.
- The program uses the 15 national CLAS Standards, developed by the United States Department of Health and Human Services’ Office of Minority Health.

The office of minority health’s CLAS standards.

www.minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=15

Standard 1: Health care organizations should provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.

Standard 2: Health care organizations should advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices and allocated resources.

Standard 3: Health care organizations should recruit, promote and support a culturally and linguistically diverse governance, leadership and workforce that are responsive to the population in the service area.

Standard 4: Health care organizations should educate and train governance, leadership and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

Standard 5: Health care organizations must offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.

Standard 6: Health care organizations must inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.

Standard 7: Health care organizations must ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.

Standard 8: Health care organizations must provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Standard 9: Health care organizations should establish culturally and linguistically appropriate goals, policies and management accountability, and infuse them throughout the organizations’ planning and operations.

Standard 10: Health care organizations should conduct ongoing assessments of the organization’s CLAS-related activities and integrate CLAS-related measures into assessment measurement and continuous quality improvement activities.

Standard 11: Health care organizations should collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

Standard 12: Health care organizations should conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

Standard 13: Health care organizations should partner with the community to design, implement and evaluate policies, practices and services to ensure cultural and linguistic appropriateness.

Standard 14: Health care organizations are encouraged to create conflict and grievance-resolution processes that are culturally and linguistically appropriate to identify, prevent and resolve conflicts or complaints.

Standard 15: Health care organizations should communicate the organization’s progress in implementing and sustaining CLAS to all stakeholders, constituents and the general public.

AmeriHealth Caritas Louisiana demographics

Race or ethnicity:	Percentage:
African-American	56.9%
Caucasian	34.4%
Unknown	3.8%
Hispanic or Latino	2.5%
Asian or Pacific Islander	.9%
Two or more races or ethnicity	.9%
No response	.62%
American Indian or Alaska Native	.3%
Other race	.3%
Native Hawaiian	.1%

Data as of November 2013

Language:	Percentage:
English	97.86%
Spanish	1.72%
Vietnamese	.18%
Unknown	.12%
Arabic	.08%
Portuguese	.01%
French	.01%
Laotian	.01%
Total	100%

Data as of November 2013

Please contact the cultural competency coordinator for your parish-specific AmeriHealth Caritas Louisiana member demographic information, or for cultural competency training.