



*For A Healthy Life*



## **Section A:** What You Need to Know

## Section A: What You Need to Know

Under Title VI of the Civil Rights Act of 1964, any agency, program, or activity that receives federal financial funding may not discriminate on the basis of race, color, or national origin. The mission of L.A. Care's Health Education, Cultural and Linguistic Services Department (HECLS) is to improve patients' health status by ensuring equal access to culturally and linguistically appropriate resources and health care, and by providing wellness and disease prevention programs.

### Provider Responsibilities – How Can L.A. Care Help You?

L.A. Care Health Plan provides:

- Free aids and services to patients with disabilities to communicate effectively, such as:
  - Qualified sign language interpreters
  - Written information in large print, audio, accessible electronic and other formats
- Free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Documents translated into other languages

Below is more information on what you are required to do and the various ways that can help you better provide equal access to health care for all patients.

#### *Provider Network Linguistic Capabilities*

L.A. Care providers are required to have a system in place to identify the language proficiency of all practitioners and staff who are bilingual, and to communicate with patients in a language other than English. This includes maintaining documentation of staff's bilingual qualifications on file, and updating this information at least annually.

The evidence of the language proficiency assessment must include the following:

- Employee name
- Position and department
- Spoken and written language
- Proficiency level for spoken and written language (I.C.E. Employee Language Skills Assessment Tool or any other language proficiency assessment results)
- Assessment date

**AND** one or more of the following (if any):

- Number of years of employment the individual has as an interpreter (e.g., resume)
- Certification of medical interpreters (e.g., National Board of Certification for Medical Interpreters, Certification Commission for Healthcare Interpreters)
- Documentation of successful completion of education and training in interpreting ethics, conduct and confidentiality that are promulgated by the California Healthcare Interpreters Association or the National Council on Interpreting in Healthcare
- Other reasonable alternative documentation of interpreter capability

Furthermore, providers' offices should submit updates to the Provider Network Management Department ([ProviderRelations@lacare.org](mailto:ProviderRelations@lacare.org)) regarding any changes. L.A. Care Health Plan (L.A. Care) monitors disclosure forms signed by bilingual providers and/or office staff, attesting to their fluency in languages other than English through the credentialing process and the facility site review process. Submission of the language capabilities of your office staff is important as this information is included in the L.A. Care Health Plan provider directory which is distributed to patients and made available online at [www.lacare.org](http://www.lacare.org).

## Employee Language Skills Self-Assessment Tool

L.A. Care Health Plan along with Plan Partners and the I.C.E. Collaborative Team joined forces to develop an Employee Language Skills Self-Assessment tool that can be used to document bilingual skills of all practitioners and staff members.

The tool serves as the first step to improving communication with a diverse patient base, and provides a basic idea of bilingual capabilities of staff members.

### How to Use the Self-Assessment Tool?

- Complete the enclosed survey for each member of your staff:
  - Document each language other than English spoken by your staff.
  - Use the evaluation guidelines on the form to determine the fluency level for each language in the following areas: speaking, reading, and writing.

OR

- Distribute the tool to **all your clinical and non-clinical employees** who use their non-English language skills in the workplace, and ask to complete the survey.
- Attach the qualifications of all bilingual staff to the completed survey, and keep them on file. Please refer to the list of qualifications in the “*Provider Network Linguistic Capabilities*” section.
- Once bilingual staff members are identified, **they should be referred to a professional language assessment agency** to evaluate their level of language proficiency.

This survey will not affect your performance evaluation. It is just a way for us to improve our customer service and to make you part of such efforts.

# Employee Language Skills Self-Assessment Tool

Dear Physician,

The attached prescreening tool is provided as a resource to assist you in identifying employees that may be eligible for formal language proficiency testing. The tool is not meant to serve as an assessment for qualified medical interpreters or meet the California Language Assistance Program law or any other regulatory requirements.

It is important that all bilingual practitioners and their staff who speak with patients in a language other than English complete this form. Those who rate themselves with speaking, reading, or writing at 3 or above, should take a professional language assessment before using their bilingual skills with patients.

No-cost qualified interpreting services are available through patients' health plans. This includes faceto face, telephonic, and American Sign Language interpreting services. To receive immediate assistance or to schedule a face-to-face interpreter, call the patient's health plan.

**If a patient belongs to Medi-Cal, please call the number listed next to the patient's health plan to request a face-to-face interpreter:**

|  |                |                       |                |
|--|----------------|-----------------------|----------------|
| Anthem Blue Cross  | 1.888.285.7801 | Kaiser Permanente     | 1.800.464.4000 |
| Blue Shield of California Promise Health Plan ( <i>previously known as Care1st</i> ) | 1.800.605.2556 | L.A. Care Health Plan | 1.888.839.9909 |
| Health Net   | 1.800.675.6110 | Molina Healthcare     | 1.888.665.4621 |

*Thank you for your assistance.*

The Cultural & Linguistics Collaborative of Los Angeles County



*(Modifications from the approved I.C.E. Collaborative document were made for this page only).*

**Approved on 06/20/2018 by the C&L Collaborative of Los Angeles**

# Employee Language Prescreening Tool Key

| Key | Spoken Language   |
|-----|---|
| (1) | Satisfies elementary needs and minimum courtesy requirements. Able to understand and respond to 2-3 word entry-level questions. May require slow speech and repetition.   |
| (2) | Meets basic conversational needs. Able to understand and respond to simple questions. Can handle casual conversation about work, school, and family. Has difficulty with vocabulary and grammar.  |
| (3) | Able to speak the language with sufficient accuracy and vocabulary to have effective formal and informal conversations on most familiar topics related to health care.  |
| (4) | Able to use the language fluently and accurately on all levels related to health care work needs. Can understand and participate in any conversation within the range of his/her experience with a high degree of fluency and precision of vocabulary. Unaffected by rate of speech.  |
| (5) | Speaks proficiently equivalent to that of an educated native speaker. Has complete fluency in the language, including health care topics, such that speech in all levels is fully accepted by educated native speakers in all its features, including breadth of vocabulary and idioms, colloquialisms, and pertinent cultural preferences. Usually has received formal education in target language. |

| Key | Reading   |
|-----|---|
| (1) | No functional ability to read. Able to understand and read only a few key words.  |
| (2) | Limited to simple vocabulary and sentence structure.  |
| (3) | Understands conventional topics, non-technical terms and health care terms.   |
| (4) | Understands materials that contain idioms and specialized health care terminology; understands a broad range of literature. |
| (5) | Understands sophisticated materials, including those related to academic, medical and technical vocabulary.                 |

| Key | Writing  |
|-----|--|
| (1) | No functional ability to write the language and is only able to write single elementary words.   |
| (2) | Able to write simple sentences. Requires major editing.  |
| (3) | Writes on conventional and simple health care topics with few errors in spelling and structure. Requires minor editing.  |
| (4) | Writes on academic, technical, and most health care and medical topics with few errors in structure and spelling.  |
| (5) | Writes proficiently equivalent to that of an educated native speaker/writer. Writes with idiomatic ease of expression and feeling for the style of language. Proficient in medical, healthcare, academic and technical vocabulary. |

## Interpretation

vs.

## Translation

**Interpretation:** Involves spoken communication between two parties, such as between a patient and a pharmacist, or between a family member and doctor.

**Translation:** Involves very different skills from interpretation. A translator takes a written document in one language and changes it into a document in another language, preserving the tone and meaning of the original.

*Source: University of Washington Medical Center*

# EMPLOYEE LANGUAGE PRESCREENING TOOL (For Clinical and Non-Clinical Employees)



This prescreening tool is intended for clinical and non-clinical employees who are bilingual and are being considered for formal language proficiency testing.

Employee's Name: \_\_\_\_\_ Department/Job Title: \_\_\_\_\_

Work Days: Mon / Tues/ Wed/ Thurs/ Fri/ Sat/ Sun      Work Hours (Please Specify): \_\_\_\_\_

- Directions:** (1) List any/all language(s) or dialects you know.  
(2) Indicate how fluently you speak, read and/or write each language

| Language | Dialect, region, or country | Fluency: see attached key (Circle) |           |           | I would like to use my language skills to speak with patients (Circle) | I would like to use my reading language skills to communicate with patients (Circle) | I would like to use my language skills to write patient communications (Circle) |
|----------|-----------------------------|------------------------------------|-----------|-----------|--|--|---|
|          |                             | Speaking                           | Reading   | Writing   |  |  |   |
|          |                             | 1 2 3 4 5                          | 1 2 3 4 5 | 1 2 3 4 5 | Yes No   | Yes No   | Yes No  |
|          |                             | 1 2 3 4 5                          | 1 2 3 4 5 | 1 2 3 4 5 | Yes No   | Yes No   | Yes No  |
|          |                             | 1 2 3 4 5                          | 1 2 3 4 5 | 1 2 3 4 5 | Yes No   | Yes No   | Yes No  |
|          |                             | 1 2 3 4 5                          | 1 2 3 4 5 | 1 2 3 4 5 | Yes No   | Yes No   | Yes No  |

**TO BE SIGNED BY THE PERSON COMPLETING THIS FORM**

I, \_\_\_\_\_, attest that the information provided above is accurate.

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

# Language Services Requirements

**Health plans can provide no-cost qualified interpreters for their members. Members should call their health plan for assistance.**

The federal guidance, published as Section 1557 of the Affordable Care Act, provides specific limitations on the use of certain individuals as interpreters as described below. The limitations include the use of:

- Bilingual staff
- Adults and minors that accompany a patient

Health plans appreciate your efforts to comply with these important regulations. Non-compliance may expose providers to the risk of violating consumers' civil rights.

**If bilingual staff is used as interpreters, the following Section 1557 guidelines apply:**

*A qualified interpreter for an individual with limited English proficiency* as defined in Section 1557 means an interpreter who via a remote interpreting service or an on-site appearance:

- (1) Adheres to generally accepted code of ethics for interpreters, including client confidentiality;
- (2) Has demonstrated proficiency in speaking and understanding both English and at least one other spoken language;
- (3) Is able to interpret effectively, accurately, and impartially, both receptively and expressly, to and from such language(s) and English, using any necessary specialized vocabulary, terminology and phraseology.

**Section 1557 guidelines on use of accompanying adult or minor:**

*Restricted use of certain persons to interpret or facilitate communication.* A covered entity shall not:

- (1) Require an individual with limited English proficiency to provide his or her own interpreter;
- (2) Rely on an adult accompanying an individual with limited English proficiency to interpret or facilitate communication, except:
  - (i) In an emergency involving an imminent threat to the safety or welfare of an individual or the public where there is no qualified interpreter for the individual with limited English proficiency immediately available;
  - (ii) Where the individual with limited English proficiency specifically requests that the accompanying adult interprets or facilitates communication, the accompanying adult agrees to provide such assistance, and reliance on that adult for such assistance is appropriate under the circumstances;
- (3) Rely on a child to interpret or facilitate communication, except in an emergency involving an imminent threat to the safety or welfare of an individual or the public where there is no qualified interpreter for the individual with limited English proficiency immediately available;
- (4) Rely on staff other than qualified bilingual/multilingual staff to communicate directly with individuals with limited English proficiency.



Patients are mailed a Language Card which include their spoken language and the phone number to request an interpreter when they make a medical appointment or during their doctor visit. Ensure that your front office staff is familiar with this card and knows how to request an interpreter. Below is a sample of the Language Card:



## Accessing Interpreting Services

Provider offices are encouraged to access L.A. Care’s face-to-face, American Sign Language, and telephonic interpreting services for all L.A. Care direct line of business patients.

### Face-to-Face Interpreting Services

Face-to-face interpreting services, including American Sign Language, can be obtained through L.A. Care Health Plan. If you need to request an interpreter on patient’s behalf, please call Member Services Department at **1.888.839.9909** when scheduling the next appointment but at least ten (10) business days prior to the appointment date.

Important: If there are any changes to a patient’s appointment, please call Member Services Department immediately at **1.888.839.9909**.

Have the following patient information ready:

- Provider name
- Language needed (including American Sign Language)
- L.A. Care patient’s name and ID number
- Date of birth
- Requestor name and contact number
- Date, time, and duration of appointment
- Location of appointment (i.e. address, suite #, major cross streets)
- Type of appointment (i.e. consultation, specialist, OB/GYN, etc.)
- Purpose of appointment (i.e. well visit, medical visit, follow-up, lab, etc.)
- Contact person at appointment site
- Other special instructions (i.e. gender of interpreter, patient has disabilities, driving directions, parking, etc.)

It is important that patients have access to after-hours interpreting services. At a minimum, provider sites should ensure that their answering machine informs patients on how to access interpreting services.

If a patient belongs to Medi-Cal, please call the number listed next to the patient’s health plan to request a face-to-face interpreter:

**Anthem Blue Cross: 1.888.285.7801**

**Blue Shield of California Promise Health Plan  
 (previously known as Care1st): 1.800.605.2556**

**Kaiser Permanente: 1.800.464.4000**

**L.A. Care Health Plan: 1.888.839.9909**

### **Required Documentation**

It is necessary to document the following patient's information in their medical chart:

- Patient's preferred spoken and written language
- Patient's request for an interpreter
- Patient's refusal of an interpreter, and
  - Patient's request to use family or friends to interpret for them  
(*after being informed of their right to a free interpreter*)

Use the below methods to document patients' request or refusal of interpreting services:

- Intake form/registration
- Stamp
- Medical chart (use of colored labels)
- Request/refusal form

L.A. Care has several forms in place that can be used by your office. Please go on the L.A. Care website to download them: [www.lacare.org/providers/resources/downloadableforms](http://www.lacare.org/providers/resources/downloadableforms).

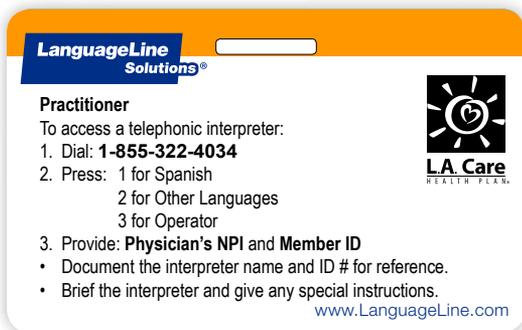
### **24-Hour Telephonic Interpreting Services**

Telephonic interpreting services are available in over 200 languages 24 hours a day, 7 days a week, including holidays, and can serve as a back-up for face-to-face interpreting.

To access telephonic interpreting services, please call the appropriate number:

- Providers (Practitioners): **1.855.322.4034**
- Participating Physician Groups (PPGs): **1.855.322.4022**

L.A. Care has wallet-sized telephonic interpreting cards for providers to keep on hand. Providers can dial the indicated number at any time to request an over-the-phone interpreter by providing the above information.



To request your copy of the telephonic interpreting card, email us at [CulturalandLinguisticServices@lacare.org](mailto:CulturalandLinguisticServices@lacare.org)

or call at **1.213.694.1250 ext. 4523**. Please have the following information ready in order to receive these services:

- Language needed
- L.A. Care member ID number
- Physician's NPI (practitioner) **OR** Name of IPA (PPG)

### **Assistance for The Deaf and Hard of Hearing**

L.A. Care Health Plan ensures equal access to health care services for patients with hearing, speech and visual loss through the coordination of interpreting services and the provision of auxiliary aids during business-hours, after-hours, and in emergency situations. This includes:

#### **American Sign Language Interpreting Services (ASL)**

- L.A. Care Health Plan provides ASL services at no cost to patients. Simply call Member Services Department at **1.888.8399.909** and follow the directions listed in the *FacetoFace Interpreting Services* section of this tool kit.

#### **California Relay Service (CRS)**

- The California Relay Service allows to communicate with patients who have a hearing or speech impairment through a relay operator by calling **711**.

## Translation Services

Quality translations provide limited English proficient (LEP) patients with equal access to health information and help providers deliver better health care to improve health outcomes. L.A. Care routinely sends written member informing materials in patient’s preferred language and/or alternative format.

### **Materials in Threshold Languages**

Patient materials are available in the below threshold languages depending on the line of business. Threshold languages are the primary languages spoken by LEP population.

- The Threshold Languages for Medi-Cal Managed Care and Cal MediConnect in Los Angeles County are determined by the Department of Health Care Services (DHCS) and were released in Medi-Cal Managed Care All Plan Letter 17-011. The numeric threshold as defined by the DHCS is 3,000 or five percent (5%), whichever is lower, of mandatory Medi-Cal beneficiaries residing in the service area who speak a language other than English.
- The Threshold Languages for L.A. Care Covered and Personal Assistance Services Council and Service Employees International Union (PASC-SEIU) are determined by the Department of Managed Health Care (DMHC). The numeric threshold as defined by the DMHC is 3,000 or five percent (5%), whichever is lower, of enrollees who speak a language other than English.

The table of the threshold languages by line of business.

| Medi-Cal   | Cal MediConnect | L.A. Care Covered* | PASC-SEIU |
|------------|-----------------|--------------------|-----------|
| English    | English         | English            | English   |
| Spanish    | Spanish         | Spanish            | Spanish   |
| Arabic     | Arabic          |                    | Armenian  |
| Armenian   | Armenian        |                    | Chinese   |
| Chinese    | Chinese         |                    | Korean    |
| Farsi      | Farsi           |                    | Russian   |
| Khmer      | Khmer           |                    |           |
| Korean     | Korean          |                    |           |
| Russian    | Russian         |                    |           |
| Tagalog    | Tagalog         |                    |           |
| Vietnamese | Vietnamese      |                    |           |

\*Includes L.A. Care Covered and L.A. Care Covered Direct

Types of materials available to patients include but are not limited to:

- evidence of coverage
- grievance forms
- notice of action letters (i.e., denial, modification, deferral, and termination)
- health education materials
- health plan information *and*
- other patient informing materials

Materials in nonthreshold languages are available upon request.

### **Materials in Alternative Formats**

L.A. Care provides written documents in other formats, such as:

- Large print - 18pt font (all threshold languages)
- Audio (English and Spanish)

Braille can be made available upon request. Some L.A. Care materials are available on the L.A. Care website ([www.lacare.org](http://www.lacare.org)) in a text-only format with the ability to adjust the font size.

To request information in another language or format, please call L.A. Care’s Member Services Department at **1.888.839.9909**.

## Referrals to Community Services

L.A. Care Health Plan maintains a closed-loop system to refer and coordinate culturally and linguistically appropriate community services for direct line of business patients. Extending beyond direct health care services, Health Education Cultural & Linguistics Services (HECLS) Department assists patients and providers in coordinating the appropriate service using online databases, such as <https://www.auntbertha.com>.

Health education, cultural and linguistic services referrals have never been easier! Just follow these three easy steps:

1. Go onto the L.A. Care Health Plan website and access the Health Education Provider Resources: [www.lacare.org/providers/provider-resources/health-education-tools](http://www.lacare.org/providers/provider-resources/health-education-tools).
2. Click on the “Refer L.A. Care members to free Health Education, Cultural and Linguistic Services” link to open up the HECLS Referral Form.
3. Complete and fax a hard copy of the HECLS Referral form to the HECLS Department. The fax information is on the form.

Class topics and services are provided by phone and in-person – please limit up to 3 topics.

The **health education** topics include:

| Weight Management/Nutrition-Related Topics (MD, PA, PA-C, FNP, NP, DP signature required except for Diabetes) | Wellness and Health Education Topics                             |
|---|--|
| <input type="checkbox"/> Diabetes: Type 1   | <input type="checkbox"/> Arthritis                               |
| <input type="checkbox"/> Type 2   |  |
| <input type="checkbox"/> Gestational  |  |
| <input type="checkbox"/> Gastrointestinal Disorders   | <input type="checkbox"/> Asthma                                  |
| <input type="checkbox"/> Hypertension   | <input type="checkbox"/> Chronic Disease Self-Management Program |
| <input type="checkbox"/> High Cholesterol   |  |
| <input type="checkbox"/> Hyperlipidemia   |  |
| <input type="checkbox"/> Kidney Disease   | <input type="checkbox"/> Cold and Flu Prevention                 |
| <input type="checkbox"/> Prediabetes (A1C between 5.7-6.4%)   | <input type="checkbox"/> COPD                                    |
| <input type="checkbox"/> Weight: Pediatric Underweight (BMI less than 5 <sup>th</sup> %)                      | <input type="checkbox"/> Cultural Resources                      |
| <input type="checkbox"/> Weight: Pediatric Overweight (BMI 85 <sup>th</sup> – 95 <sup>th</sup> %)             | <input type="checkbox"/> Living Well With a Disability           |
| <input type="checkbox"/> Weight: Pediatric Obesity (BMI greater than 95 <sup>th</sup> %)                      | <input type="checkbox"/> Health Care Navigation                  |
| <input type="checkbox"/> Weight: Adult Underweight (BMI < 18.5)   | <input type="checkbox"/> Medication Management                   |
| <input type="checkbox"/> Weight: Adult Overweight (BMI 25-29.9)   | <input type="checkbox"/> Physical Activity                       |
| <input type="checkbox"/> Weight: Adult Obesity (BMI 30+)  | <input type="checkbox"/> Stress and Anxiety Management           |
| <input type="checkbox"/> Other ( <i>please specify in instructions/comments below</i> )                       | <input type="checkbox"/> Tobacco Cessation                       |
|   | <input type="checkbox"/> Other                                   |

The **cultural & linguistic topics** include:

- Cultural Competency (including C&L requirements)
- Disability Sensitivity
- Communicating Through Healthcare Interpreters  
(Available only for L.A. Care Network Physicians)

You can schedule classroom training sessions or access the online CME course by emailing us at [CLStrainings@lacare.org](mailto:CLStrainings@lacare.org).

## Cultural Competency Training

Providers and office staff are encouraged to participate in the cultural competency training. Providers serving the Cal MediConnect patients are required to complete this training annually.

The following trainings are available through L.A. Care:

- **Cultural Competency**  
*1 hour, classroom or online (<https://lacareuniversity.torchlms.com>)* This course is for providers, front and back office staff. Learn how to provide care more effectively to culturally diverse patients. This course explores cultural awareness, communication style, and examines the skills and steps to achieve cultural competency as well as language assistance services and the importance of using qualified interpreters.
- **Communicating through Healthcare Interpreters**  
*2 hours, online* This CME course is for network physicians. Learn how to reduce doctor-patient language barriers and work effectively with in-person and telephonic interpreters. The first 25 physicians to register and complete the course will receive a \$100 stipend.
- **Disability Sensitivity:**  
*1 hour, classroom or online* This course is for providers, front and back office staff. Learn how to meet the unique needs of seniors and people with disabilities and ensure equal access to health care. This course explores “People First” language and examines accommodations to assist them.

To receive information about upcoming trainings or to schedule an on-site training session, check the L.A. Care website: [lacare.org](http://lacare.org), or contact L.A. Care’s Cultural & Linguistic Services Unit at [CLStrainings@lacare.org](mailto:CLStrainings@lacare.org).

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## Complaints and Grievances

Patients have the right to file a complaint when their cultural or linguistic needs are not met. Provider offices must have a process in place allowing patients to submit such a complaint. They should also inform patients on the reasons why they may file a complaint and the ways they can do it, should patients request it.

Patients may file a complaint in the following cases:

- They feel that they were denied services because they do not speak English.
- They cannot get an interpreter.
- They have a complaint about the interpreter.
- They cannot get information in their language or format.
- Their cultural needs are not met.

There are four ways for a patient to file a complaint. Patients can:

- Call Member Services Department at **1.888.839.9909 (TTY 711)**
- File Online at [www.lacare.org/members/member-rights/file-complaint/online-grievance-form](http://www.lacare.org/members/member-rights/file-complaint/online-grievance-form)
- Write to: L.A. Care Health Plan  
Member Services Department  
West 7th Street  
Los Angeles, CA 90017
- Send a Fax to **1.213.438.5748**

To receive additional information about the above services or resources, please contact Cultural & Linguistic Services Unit at **1.213.694.1250 ext. 4523** or email [CulturalandLinguisticServices@lacare.org](mailto:CulturalandLinguisticServices@lacare.org).