

Multicultural Health Care Distinction:



A Roadmap for Addressing Health Care Disparities

Efficient, high-quality health care requires health plans and providers to understand, respect and meet different language and cultural needs. Communication that people understand and respect for their differing values increases appropriate screenings, treatments and preventive care and decreases costs for preventable complications.

Failure to address language needs or to take racial, ethnic and cultural differences into account leads to worse health outcomes and higher health care spending. All too often, however, health plans and providers do not meet differing language and cultural needs. The result is widespread, harmful and costly health care disparities.

That is why reducing disparities is in the National Strategy for Quality Improvement, a recognized quality improvement activity under medical loss ratios, and cited in statute for quality improvement efforts in state Health Insurance Exchanges.

To help meet this growing need, the National Committee for Quality Assurance (NCQA) developed the Multicultural Health Care (MHC) Distinction Program. MHC Distinction is a voluntary program that aligns with NCQA's Health Plan Accreditation Program for insurers and other health care organizations. MHC Distinction includes rigorous and practical requirements for assessing and improving efforts to meet linguistic and cultural needs.

Roadmap for Addressing Disparities: The MHC standards address Office of Minority Health (OMH) culturally and linguistically appropriate services (CLAS) standards. In fact, federal and state entities could require plans to obtain MHC Distinction as part of a general initiative targeting disparities, or encourage it through pay-for-performance initiatives. MHC Distinction also helps establish benchmarks for tracking improvement and measuring what works.

Through initiatives to earn MHC Distinction “we can drill down by race, ethnicity, language – even zip code on disparities we want to improve,” says Mary K Stom, MD, chief medical officer and senior vice president, Health Partners of Philadelphia, the first organization to receive MHC Distinction. This helped Health Partners identify cultural barriers inhibiting good perinatal care in inner city African American neighborhoods.

“We learned that women in these communities trust relatives and neighbors more than our nurses and education. So now we’re educating entire neighborhoods, not just pregnant women on that block,” says Stom.

©2018 National Committee for Quality Assurance. All rights reserved.

Race/Ethnicity & Language Data

- Collect members' ethnicity/language data in Office of Management and Budget categories
- Use a validated methodology to extrapolate or estimate ethnic population percentages based on reported data
- Use a system of effective data storage and retrieval for ethnic and linguistic information
- Report the HEDIS diversity of membership measure
- Identify "threshold languages" spoken by 5% of membership or 1,000 members, whichever population is smaller

Language Services

- Demonstrate use of competent translators, provide timely, high-quality translation
- Provide practitioners with individual data on the language preferences of the patients they treat, training on the provision of language services, and language assistance resources
- Regularly notify members of the availability of language services

Practitioner Network Cultural Responsiveness

- Collect and publish information on the languages contracted providers speak fluently, or languages for which they offer translation services
- Collect and disclose upon request provider race/ethnicity data
- Analyze the provider network's ability to serve members' language needs and develop ways to address gaps

CLAS Services Program

- Adopt a program description or work plan listing measurable goals for reducing disparities that ethnic and linguistic minorities experience, and include plans to monitor and evaluate services against measurable goals
- Conduct an annual accounting of activities meant to achieve performance improvement in reducing disparities, and evaluation of progress and trending in measurable outcomes

Reducing Health Care Disparities

- Collect, report and analyze clinical quality and patient experience measures by race, ethnicity and primary language and compare outcomes
- Make targeted interventions to improve disparities in relevant care measures, and continually evaluate their effectiveness.

More information on our Multicultural Healthcare Distinction program is at [this webpage](#).