Culturally and Linguistically Appropriate Services (CLAS)
Provider Cultural Competency
The CLAS Standards are national standards and guidelines established in 2000 (and enhanced in 2013) by the U.S. Department of Health and Human Services, Office of Minority Health, to advance health equity, improve quality, and help eliminate health disparities by providing a blueprint for individuals and health care organizations to implement culturally and linguistically appropriate care.

• Principal standard:
  - 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.

• Governance, leadership and workforce
• Communication and language assistance
• Engagement, continuous improvement and accountability
What is CLAS?

Communication

Cultural competency training
Language services
Culturally competent care

Member engagement
Community education
Member services
Why CLAS?

Legal Requirements
Local Need
Business Consideration
Membership Diversity
Legal Requirements – why providers should be culturally competent

**Federal regulations**
- Civil Rights Act of 1964
  - Title VI, 42 U.S.C. § 2000d
    - No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

**Training and education**
- CLAS is a state-required annual cultural competency training
Local Need – Total Health Care provider language demographics

- **5,400** Providers
- **62%** English only
- **38%** Second Language
  - Top 5 Non-English Languages:
    - Arabic – 433
    - Hindi – 318
    - Spanish – 233
    - French – 141
    - Urdu - 126
Providers who administer health care services responsive to the health beliefs and practices, and cultural and linguistic needs of diverse patient populations:

- Decrease liability
- Meet regulatory standards
- Gain competitive edge
The Cost of Health Disparities

- Lost wages
- Premature death
- Lost productivity
- Family leave
- Absenteeism
The Cost of Health Disparities

- Indirect costs associated with premature death: $1 trillion
- Annual direct losses: $230 billion
- Annual excess medical costs due to health disparities: 30%

We can do better.
Membership Diversity
Michigan’s Historic Cultural Landscape

- Canadian
- English
- French
- Native American
  - Eight indigenous tribes that were present before the arrival of Europeans, include:
    - Ojibwa
    - Menominee
    - Miami
    - Ottawa
    - Potawatomi
    - Wyandot
    - Fox and Sauk
    - Kickapoo
Race and Ethnicity — Michigan Census State Information

2016 Michigan Census Race and Ethnicity by Percentage

- White: 79.6%
- Black or African American: 2.4%
- Asian: 14.2%
- Two or More Races: 1.1%
- American Indian and Alaska Native: 0.7%
- Native Hawaiian and Other Pacific Islander: < 0.1%
## Race and Ethnicity — Membership Portrait

### Membership Count by Race and Ethnicity 2017

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Provided</td>
<td>37,602</td>
</tr>
<tr>
<td>Black (Non-Hispanic)</td>
<td>31,190</td>
</tr>
<tr>
<td>White (Non-Hispanic)</td>
<td>18,255</td>
</tr>
<tr>
<td>Hispanic</td>
<td>1,488</td>
</tr>
<tr>
<td>Caucasian</td>
<td>938</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>708</td>
</tr>
<tr>
<td>Black</td>
<td>504</td>
</tr>
<tr>
<td>American Indian or Alaskan Native</td>
<td>139</td>
</tr>
<tr>
<td>Other Race/Ethnicity</td>
<td>86</td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>35</td>
</tr>
<tr>
<td>Asian Pacific Amer</td>
<td>15</td>
</tr>
<tr>
<td>Multiracial</td>
<td>6</td>
</tr>
<tr>
<td>Native Hawaiian</td>
<td>1</td>
</tr>
</tbody>
</table>
Member Languages — Top Five Non-English Languages

Top 5 Non-English Languages 2017

- ARA: 52%
- SPA: 23%
- NG: 14%
- ELX: 6%
- BEN: 5%
Tribal Awareness — Federally Recognized Tribes

There are 12 federally recognized tribes of Michigan:

• Bay Mills Chippewa Indian Community
• Grand Traverse Bay Band of Ottawa and Chippewa Indians
• Hannahville Indian Community
• Keweenaw Bay Indian Community
• Lac Vieux Desert Band of Lake Superior Chippewa Indians
• Little River Band of Ottawa Indians
• Little Travers Bay Bands of Odawa Indians
• Match-e-be-nash-she-wish Band of Potawatomi Indians of Michigan (Gun Lake)
• Nottawaseppi Huron Band of the Potawatomi Indians
• Pokagon Band of Potawatomi Indians
• Saginaw Chippewa Indian Tribe
• Sault Ste. Marie Tribe of Chippewa Indians
Tribal Awareness — Michigan Map
Your CLAS

Provider tips for assisting non-English and limited-English speaking patients
Provider CLAS Tools — Interpretation tips

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

Additional Training Resources

The Office of Minority Health culturally competent care programs

Providers can take the first step in serving diverse populations by completing accredited continuing education programs offered by The Office of Minority Health, part of the U.S. Department of Health and Human Services:

• **A Physician’s Guide to Culturally Competent Care** (accredited for physicians, nurses, nurse practitioners and pharmacists)
• **Culturally Competent Nursing Care: A Cornerstone of Caring** (accredited for nurses and social workers)

Both programs are accredited for continuing education credits and available online at no cost to participants.

Visit [www.minorityhealth.hhs.gov](http://www.minorityhealth.hhs.gov) or [www.thinkculturalhealth.org](http://www.thinkculturalhealth.org) for more information on these programs and for more resources to bring cultural competency to your health care practice.
CLAS Training Attestation

Please complete and print the attestation and email it to:
Training Attestation: Total Health Care

fax attestation to 313-748-1390 or email to Providerupdate@thcmi.com

I, __________________________ certify on behalf of myself or my agency that I have received materials from and undergone cultural competency training by Total Health Care in accordance with state requirements, including:

- The Civil Rights Act of 1964
  - Michigan federally recognized Indian tribes
  - Member race, ethnicity and language for my region
  - State training requirements
- Availability of on-site training
  - Cultural awareness in patient relationships
  - Assessment of my experience with interpretation service

I further certify that all newly hired staff will receive and review the cultural competency materials and resources that I received today, within 30 days of hire, and documentation confirming the same will be maintained in each employee’s personnel file and be available upon request.

_________________________  __________________________
Signature                  Date

Please provide one attestation per provider location

<table>
<thead>
<tr>
<th>Provider or company name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact name and NPI:</td>
</tr>
<tr>
<td>Contact title and department:</td>
</tr>
<tr>
<td>Contact email:</td>
</tr>
<tr>
<td>Contact phone:</td>
</tr>
</tbody>
</table>

By submitting, you certify that your responses above are accurate, truthful and complete to the best of your knowledge.