Cultural Competence and Language Assistance
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Welcome to the course on Cultural Competence and Language Assistance! I am Neha, and I will be your guide through this training.

This course defines culture as it relates to consumers and highlights the importance of cultural and linguistic competence when you assist them with eligibility, enrollment, and post-enrollment issues.
You need to be aware of these training disclaimers.

**Assister Training Content:**
The information provided in this training course is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This course summarizes current policy and operations as of the date it was uploaded to the Marketplace Learning Management System. Links to certain source documents have been provided for your reference. We encourage persons taking the course to refer to the applicable statutes, regulations, CMS assister webinars, and other interpretive materials for complete and current information.

This course includes references and links to nongovernmental third-party websites. CMS offers these links for informational purposes only, and inclusion of these websites should not be construed as an endorsement of any third-party organization's programs or activities.

**Individual Shared Responsibility Payment, Exemptions, and Catastrophic Coverage:**
This course includes numerous references to the Patient Protection and Affordable Care Act's individual shared responsibility provision and exemptions from it. Under the Tax Cuts and Jobs Act, taxpayers must continue to report minimum essential coverage, qualify for an exemption, or pay an individual shared responsibility payment for tax years prior to 2019.

**For tax year 2018 only** (for which consumers generally filed taxes by April 2019), consumers do not have to fill out an application to get a hardship exemption certificate number (ECN). Consumers can claim the exemption without having to submit documentation about the hardship on their 2018 federal tax returns.

**Beginning with tax year 2019**, consumers do not need to make an individual shared responsibility payment or file Form 8965, Health Coverage Exemptions, with their tax returns if they don't have minimum essential coverage for part or all of the tax year.

**For all tax years**, as set forth in §155.305(h), individuals age 30 and above must continue to apply for, obtain, and report an exemption certificate number (ECN) for a Marketplace affordability or hardship exemption if they wish to purchase Catastrophic health coverage.
This training does not address COVID-19-related guidance or related requirements for assisters. CMS will communicate applicable information to assisters and assister organizations through separate channels.

- To learn more about how we’re responding to coronavirus, visit [HealthCare.gov/blog/coronavirus-marketplace-coverage/](http://HealthCare.gov/blog/coronavirus-marketplace-coverage/).
- For preventive practices and applicable state/local guidance, visit [CDC.gov/coronavirus](http://CDC.gov/coronavirus).

**Remote Application Assistance:**
Effective June 18, 2018, Navigators in FFMs are not required to maintain a physical presence in their Marketplace service area. In some cases, Navigators may provide remote application assistance (e.g., online or by phone), provided that such assistance is permissible under their organization's contract, grant terms and conditions, or agreement with CMS and/or their organization.

Certified application counselors in FFMs may also provide remote application assistance if such assistance is permissible with their certified application counselor designated organization (CDO).


**FFM Navigator Duties:**
Beginning with Navigator grants awarded in 2019, FFM Navigators may but are no longer required to provide information on or assist consumers with the following topics:

1. Understanding the process of filing Marketplace eligibility appeals;
2. Understanding and applying for exemptions from the individual shared responsibility provision granted through the Marketplace and/or claimed through the tax filing process;
3. Marketplace-related components of the premium tax credit reconciliation process;
4. Understanding basic concepts and rights related to health coverage and how to use it; and
5. Referrals to licensed tax advisers, tax preparers, or other resources for assistance with tax preparation and tax advice related to consumer questions about the Marketplace application and enrollment process, exemptions from the requirement to maintain minimum essential coverage and from the individual shared responsibility payment (for tax years prior to 2019), and premium tax credit reconciliations.

**Section 1557 of the Patient Protection and Affordable Care Act:**
This training content reflects the requirements of the Section 1557 Final Rule published on June 19, 2020 (85 FR 37160). Some of these requirements may change pending the outcome of lawsuits brought against HHS seeking declaratory and injunctive relief from the Final Rule, and are also affected by previous court orders dating back to December 2016 that continue to be litigated.
In this lesson, the terms "you" and "assister" refer to the following types of assisters:

- **Navigators** in Federally-facilitated Marketplaces
- **Certified application counselors** in Federally-facilitated Marketplaces

Note: In some cases, "you" is also used to refer to a consumer but it should be clear when this is the intended meaning.

The terms "Federally-facilitated Marketplace" and "FFM," as used in these training courses, include FFMs where the state performs plan management functions. The terms "Marketplace" or "Marketplaces," standing alone, often (but not always) refer to FFMs.
Perception and Impressions

Image on the page contains black boxes intersected with white lines. It produces an optical illusion with gray dots.

Are they really there?

This is an example of how we often interpret things that are not really there.

Have you ever had a wrong first impression of someone?

Has someone from a different background or another culture ever had a wrong first impression of you?

When you meet someone for the first time, what are some of the things you might "see" that aren't really there?

What things can you do to move past your first impression of a person to avoid interpreting things that might not really be there (like the gray dots)?
If you're a Navigator in an FFM, you're responsible for providing fair, accurate, and impartial information and services in a manner that is culturally and linguistically appropriate to meet the needs of consumers, including those with disabilities and limited English proficiency (LEP) in accordance with all applicable Federal laws. For example, you are required to follow Culturally and Linguistically Appropriate Services (CLAS) standards set forth in Centers for Medicare & Medicaid Services (CMS) regulations (i.e., 45 CFR 155.215(c)). These regulations are consistent with National CLAS Standards, and their application to various assister types will be discussed throughout this course.

Certified application counselors (CACs) in FFMs are encouraged but not required to utilize CLAS standards in this course as a resource. Additionally, CACs are expected to provide referrals to geographically accessible Navigators subject to the requirements of this course or to the FFM Call Center if they are not able to assist a consumer with LEP.*

Being respectful of and responsive to the health beliefs, practices, and the cultural and linguistic needs of diverse consumers will help you provide optimal assistance to every consumer you help. In this course, you will learn the most appropriate ways to help consumers with different backgrounds understand the coverage options available through the Marketplaces.

This course covers cultural competence and language assistance so that you can provide the best possible assistance to consumers from all cultures and backgrounds.

This course includes information on:

- How to follow CLAS standards to provide effective assistance
- How to communicate effectively with consumers using appropriate language services
- How to recognize cultural implications of language and common linguistic miscommunications

*As a result, not all standards in this training apply to CACs in FFMs. Navigators can be great resources for CACs who wish to provide referrals when they are not able to provide the assistance consumers require.
Understanding Cultural and Linguistic Competence

Introduction

Being respectful of and responsive to the health beliefs, practices, and the cultural and linguistic needs of diverse consumers will help you make sure that you provide appropriate services to every consumer you help.

In this course, you will learn the most appropriate ways to help these diverse consumers learn about their coverage options and insurance affordability programs through the Marketplaces.

Federal Regulatory Standards
Describe six CLAS standards that Navigators in FFMs must follow under CMS regulations

Key Terms
Define key terms including culture, linguistics, and cultural and linguistic competence

Cultural Characteristics
List cultural characteristics to consider when working with consumers

Competency
Explain the importance of a culturally and linguistically competent approach to working with consumers
Federal Regulatory Standards Applicable to Assisters

CMS regulations at 45 CFR 155.215(c) require Navigators in FFMs to follow six steps consistent with National CLAS standards. Their application to various assister types will be discussed throughout this course.

Note: These CMS regulations don't apply to CACs in FFMs.

**Step 1**
Developing and maintaining general knowledge about the racial, ethnic, and cultural groups in your service area, including each group’s diverse cultural health beliefs and practices, preferred languages, health literacy, and other needs.

**Step 2**
Collecting and maintaining updated information to help understand the composition of the communities in the service area where you'll be working, including the primary spoken languages.

**Step 3**
Providing oral and written notice to consumers with LEP in their preferred language informing them of their right to receive language assistance services and how to get them.

Note: Use of a consumer's family or friends as oral interpreters can satisfy the requirement to provide linguistically appropriate services; however, you must offer interpretation services at no cost first and the consumer must request the use of family or friends as a preferred alternative to that offer.

**Step 4**
Providing consumers with information and assistance in their preferred language, at no cost to the consumers, including oral interpretation and written translation when necessary or requested.*

*Note: Use of a consumer’s family or friends as oral interpreters can satisfy the requirement to provide linguistically appropriate services; however, you must offer interpretation services at no cost first and the consumer must request the use of family or friends as a preferred alternative to that offer. For consumers requesting to use family or friends as oral interpreters, the National CLAS standards state you should ensure the competence of the individual providing language assistance and avoid using unqualified individuals or minors as interpreters.
Step 5
Receiving ongoing education and training in culturally and linguistically appropriate service delivery.

Step 6
Implementing strategies to recruit support and promote a staff that's representative of the demographic characteristics, including primary spoken languages, of the communities in your service area.
Definition of Culture

The Department of Health & Human Services (HHS) Office of Minority Health (OMH) defines **culture** as "the integrated patterns of thoughts, communications, actions, customs, beliefs, values, and institutions associated, wholly or partially, with racial, ethnic, or linguistic groups, as well as religious, spiritual, biological, geographical, or sociological characteristics. Culture is dynamic in nature, and individuals may identify with multiple cultures over the course of their lifetimes."

**Definition Source**

To follow CLAS standards set forth in CMS regulations, consider how culture affects the way consumers communicate their preferences. Culture can shape or determine:

- How consumers understand and process health care information
- How consumers express concerns about their health conditions
- What health coverage consumers need
It's important to take a consumer's culture into account when providing assistance, yet culture may be difficult to determine for each individual. To better understand consumers' cultures, consider, but don't make assumptions, based on their:

- Age
- Color
- Education level
- Ethnicity
- Disability
- Family structure
- Sex
- Health practices
- Language and dialect
- National origin
- Occupation
- Perspective on diet and nutrition
- Perspective on family and community
- Physical ability and limitations
- Political beliefs
- Race
- Religious beliefs and practices
- Socioeconomic status
Since you will work with consumers who are culturally diverse, you should also be able to recognize linguistic barriers they might face when discussing health coverage options. **Linguistic** refers to language. Effective use of language is important to understanding consumers’ needs and to making sure consumers understand you.

Before you help consumers, you should identify the common languages spoken in the community you serve. If you’re unable to communicate in those languages, you should locate language assistance services, including interpretation and translation services, before you meet with consumers.

Note: Never assume that consumers have specific language preferences based only on their races or ethnicities.

Remember, Navigators in FFMs are required to follow CLAS standards set forth in CMS regulations at 45 CFR 155.215(c).
You work for an organization with an office in a rural area where the population includes religious missionaries from other countries. Consumers in the area speak nine languages in addition to English and Spanish. You want to be ready to serve this population effectively by making consumers feel comfortable and well informed about their choices.

How do you prepare to best serve this population?

A. Research the languages spoken in this community and locate language assistance services, including interpretation and translation services at no charge to the customer with limited English proficiency.

B. Provide materials in English because consumers who live in the United States (U.S.) should be able to read the English language.

C. Be sure your office has materials in the languages spoken in this community.

D. Offer language services in English and Spanish, the most common foreign language in the U.S.; other consumers should bring family members to interpret.

The correct answers are A and C. The correct answers are A and C. Research the languages spoken in the community and locate language assistance services, including both interpretation and translation services. Ensure the individuals providing language assistance are qualified to do so and avoid the use of unqualified individuals, including family members and minors, as interpreters. Be sure your center has materials available in the languages spoken in the community.
Together, **cultural and linguistic competence** can be defined as behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. It implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.

To be culturally and linguistically competent, you should be able to:
- Identify, understand, and respect differences in consumers’ cultural beliefs, behaviors, and needs.
- Respond appropriately to consumers based on their culture and language needs, which may include making referrals or asking for help (e.g., getting interpretation and translation services).
- Acknowledge, respect, and accept cultural differences among consumers.

Regardless of your assister type, you're encouraged to review and follow [National CLAS Standards on the OMH website](https://www.omh.state.ny.us/), which will help you provide culturally and linguistically appropriate services to consumers.
Which of the statements below are true about cultural and linguistic competence?

A. Linguistic competence is the ability to speak all languages that consumers speak in your service area.
B. Being culturally competent means that, when you're working with different cultures, what you do is more important than how you do it.
C. Linguistic competence is the ability to speak consumers' preferred languages or offer language assistance services when needed.
D. Cultural competence means being able to identify, respect, and understand differences in cultural beliefs, behaviors, and needs of consumers.

The correct answers are C and D. Linguistic competence is the ability to speak consumers' preferred languages or offer interpreter services when needed. Cultural competence is the capacity to identify, respect, and understand differences in cultural beliefs, behaviors, and needs of consumers.
Cultural beliefs can affect how consumers think about their health, their bodies, and the health care coverage and services they need.

Understanding and respecting specific cultural backgrounds will help you assist consumers in choosing appropriate coverage.

For example, some American Indians and Alaska Natives (AI/ANs) may believe health and wellness are not just about the physical body; they are closely related to spirituality and how they behave toward one another. This belief differs from Western medicine, which generally focuses on treating only the physical symptoms of an illness.
As the U.S. population becomes more racially and ethnically diverse, it's important to consider the different languages and cultural traits that influence consumers' health care decisions.

A first step toward developing cultural competence is to examine your own health-related values, and then make sure what you believe doesn't affect how you respond to consumers' beliefs. As much as possible, think about how you'd feel or respond if you were the consumer.

Think to yourself:

Is the advice or information I'm providing useful to a consumer who may have a completely different culture, belief system, or language than my own?
Knowledge Check

Which of the following statements help explain how culture relates to helping consumers with their health coverage options?

A. Consumers from culturally and ethnically diverse groups may base their thoughts and feelings about their health and bodies on their cultural beliefs, which could affect how they feel about mandatory health care coverage and the services that might benefit them.

B. Racially and ethnically diverse communities are dwindling in the U.S., so the need to understand different languages and cultural traits is decreasing.

C. Some consumers' cultural beliefs about health and wellness may differ from your beliefs and could influence the consumers to make coverage choices you may question.

D. It's important for you to examine and understand your own health-related values, and then make sure what you believe doesn't affect how you respond to consumers' beliefs.

The correct answers are A, C, and D. Cultural beliefs can affect how consumers think about their health, their bodies, and the health care coverage and services they need. A first step toward developing cultural competence is to examine your own health-related values, and then make sure what you believe doesn't affect how you respond to consumers' beliefs. As racial and ethnic communities continue to grow in the U.S., it is important to consider the different languages and cultural traits that influence consumers' health care decisions.
A culturally and linguistically competent approach can help you improve your outreach and education efforts when you discuss coverage options with consumers. This is especially important when you work with consumers who:

- Come from a country with a different (or minimal) health care system.
- Lack awareness about coverage available through the FFMs.
- You hope to build trust with so you can help them find coverage that fits their budgets and specific needs.

Keeping cultural and linguistic competence in mind will help you provide more effective assistance so consumers are more likely to:

- Have an appropriate understanding of the Marketplaces.
- Make timely and informed decisions about health coverage.

Following CMS CLAS standards can help you meet consumers' needs. Always assess consumers' needs and tailor your approach to them.
• Culture affects the way groups of consumers express their beliefs, values, and preferences through their communications and actions.

• Cultural and linguistic competence involves the ability to understand and respond effectively to consumers' cultural and linguistic needs.

• It's important to not let your personal feelings and beliefs affect the support you provide to consumers. As a best practice, put yourself in their shoes and consider consumers' needs and options from their points of view.
Understanding the Diversity of Consumer Groups

Introduction

Consumers can be different from one another in many ways, including race, color, national origin, disability, age, sex, religion, and other aspects of culture. This training will help you learn about different consumer groups so you can provide friendly, objective, and impartial customer service.

Consumer Groups
Identify major diverse consumer groups in the U.S.

Cultural Beliefs
Explain how cultural beliefs may affect consumer health care preferences

Discrimination & Stereotypes
List examples of discrimination and stereotypes

Prevention
Describe ways you can prevent and remedy discrimination and stereotyping
Respecting consumers’ racial and ethnic differences can help you understand their unique needs when you help them choose and access coverage.

The Federal Government defines the major racial and ethnic groups in the U.S. as:

- **Black, not of Hispanic origin**: A person having origins in any of the Black racial groups of Africa.
- **Hispanic**: A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture origin, regardless of race.
- **Asian**: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **Native Hawaiian or Other Pacific Islander**: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **American Indian or Alaska Native (AI/AN)**: A person having origins in any of the original peoples of North America who maintains cultural identification to tribal affiliation or community recognition.
- **White, not of Hispanic Origin**: A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

To learn about these groups in your community, visit the [American FactFinder tool](https://factfinder.census.gov) from the United States Census Bureau.
It is important to recognize and be sensitive to consumer differences based on race, color, national origin, disability, age, sex, and religion. Certain laws protect consumers in these groups that you may encounter when performing your assisting duties.

- Together, Section 1557 of the Patient Protection and Affordable Care Act (PPACA), Title VI of the Civil Rights Act of 1964, and Executive Order 13160 prohibit discrimination on the grounds of race, color, national origin, sex, age, or disability.
- The Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and other laws protect consumers against discrimination based on disability.
- The Age Discrimination Act of 1975 and other laws protect consumers against age discrimination.
- Title IX of the Education Amendments of 1972 and other laws protect consumers against sex discrimination.
- Multiple laws protect consumers against religious discrimination.

**Section 1557 of the PPACA**

The HHS Office for Civil Rights Final Rule implementing Section 1557 of the PPACA (45 CFR Part 92) applies to:

1. HHS federally administered Health programs and activities, any part of which receives Federal financial assistance (FFA) provided by HHS;
2. Programs and activities administered by HHS under Title I of the PPACA; and
3. Health programs and activities administered by an entity established under Title I of the PPACA, such as an FFM or SBM.

Under Section 1557 of the PPACA:

- Navigators must take reasonable steps to ensure meaningful access by consumers with limited English proficiency. This could include providing written and/or oral language assistance services through qualified interpreters.
- Navigators must also take appropriate steps to ensure effective communication for individuals with disabilities. This may include providing auxiliary aids and services to individuals who are deaf, hard of hearing, blind, have low vision, speech disabilities, or who have cognitive or intellectual disabilities.
- CAC organizations that receive federal funds to provide services to a specific population, such as a Ryan White HIV/AIDS Program or an Indian health provider, may limit their provision of CAC services to that population, as long as they do not discriminate within that specific population. If CACs providing these limited services are approached by consumers outside of this specific population, they must refer these consumers to Marketplace-approved resources, such as Navigators or other CACs who can provide assistance.

For more information on each of these topics, visit the [HHS Office for Civil Rights (OCR) website](https://www.hhs.gov/ocr/).

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- Navigators must also take appropriate steps to ensure effective communication for individuals with disabilities. This may include providing auxiliary aids and services to individuals who are deaf, hard of hearing, blind, have low vision, speech disabilities, or who have cognitive or intellectual disabilities.

- CAC organizations that receive federal funds to provide services to a specific population, such as a Ryan White HIV/AIDS program or an Indian health provider, may limit their provision of CAC services to that population, as long as they do not discriminate within that specific population. If CACs providing these limited services are approached by consumers outside of this specific population, they must refer these consumers to Marketplace-approved resources, such as Navigators or other CACs who can provide assistance.

For more information on each of these topics, visit the HHS Office for Civil Rights (OCR) website.
Aisha, 21 years old, was born abroad and is now a U.S. citizen. She's meeting with you to learn about health coverage through the FFM in her state. She's very interested in options for people with disabilities because she uses a wheelchair.

Which of the following is a culturally appropriate way to assist her?

A. You prepare visual aids to help Aisha remember your conversation because you are concerned that Aisha may not speak or understand English well.

B. You ask Aisha to return with a parent or guardian who can help her better understand coverage information next time to make sure that your assistance takes into account Aisha's culture.

C. You assume her disability was a result of improper care abroad and explain to Aisha that, because she was born abroad, she won't be able to get coverage through the FFM.

D. You treat Aisha with the same respect that you offer all consumers by offering her complete and accurate information about coverage through the FFM.

The correct answer is D. It's not appropriate to assume that Aisha does not speak English due to her national origin. Likewise, it's inappropriate to assume her age or disability will impact her ability to understand coverage information. Finally, Aisha is a U.S. citizen and her national origin doesn't affect her eligibility for coverage. It's important to treat all consumers with respect and offer complete and accurate information on coverage, and to provide language assistance services and/or auxiliary aids and services as necessary to ensure meaningful access and effective communication.
Cultural beliefs may affect the type of medical treatments or practices a consumer prefers.

For example, cultural beliefs may affect whether consumers use Western medical practices when they're sick. Different cultural groups, including some minority and immigrant groups, may prefer folk or traditional treatments. Consumers can come from very different cultures, and all consumers are unique in their preferences.

Folk or traditional treatments are defined as medicine practiced by someone other than a doctor or other formally trained health professional, especially by people isolated from modern medical services and usually involving the use of plant-based remedies.
Osman, a consumer from Eritrea, tells you he doesn't think he needs health coverage as he has always relied on the traditional healing practices in his country.

How should you advise Osman?

A. Osman may believe that only Eritreans understand his health coverage needs. You tell him that, unfortunately, your office doesn't have an Eritrean employee but he should feel free to bring in a friend or family member who can help him explain his views.

B. Osman may not understand English well and what coverage means for him and his family. You offer Osman an interpreter to assist him.

C. Osman may believe in Eritrean traditional healing. You respect his beliefs but explain that coverage can help prevent serious illness and avoid major emergency room expenses. You also explain that all individuals in the U.S. are required to have coverage, with certain exceptions.

D. Osman may believe he shouldn't get coverage until he regains balance between mind, body, spirit, and the environment. Being culturally sensitive, you respect his wishes.

The correct answer is C. Osman may believe in the traditional healing practices in Eritrea. You should help Osman understand some of the consequences that he could face without coverage, such as serious illness because of a late diagnosis and expensive emergency room bills. You should also explain that all individuals in the U.S. are required to maintain minimum essential coverage, with certain exceptions. It's important not to simply assume that consumers with racial or ethnic backgrounds associated with non-English languages don't speak or understand English well.
Examples of Discrimination

You should be mindful of discrimination in your work to make sure that your actions don't deter, delay, or prevent any consumers from applying for coverage.

Examples of discrimination include:

- Refusing to provide assistance, providing inadequate assistance, or communicating with consumers in a way that makes them feel inferior because of their race, color, national origin, language, disability, age, sex, or religion.
- Creating a hostile environment for consumers through harassment or disrespectful treatment.
- Refusing to provide appropriate language assistance services when necessary to ensure meaningful access by persons with LEP or auxiliary aids and services requested by persons with disabilities, such as translation or sign-language interpretation services.
- Neglecting to tailor and conduct appropriate outreach and education activities in your organization's service area.
- Requesting immigration-related documents that aren't required for enrollment, which may deter eligible consumers from applying.

You can help prevent and remedy discrimination by:

- Identifying and supporting staff who have special expertise or experience working with the diverse groups represented in the area you serve.
- Identifying an individual in your organization directly accountable to leadership to oversee organizational efforts to promote diversity and provide nondiscriminatory assistance to consumers.
- Developing clear mechanisms for consumers to report discrimination or disrespectful treatment.
- Explaining to consumers who think their rights have been violated how to file a complaint with the Office for Civil Rights (OCR).
- Implementing disciplinary processes in your organization that address intimidating, disrespectful, and discriminatory behavior.
In your work, you should be conscious of stereotypes and avoid them. Stereotypes are images or ideas of a particular type of person or thing that may be widely held but aren’t necessarily accurate and represent an overly simplified view (e.g., a statement that in a traditional family the man is the main financial provider).

It’s important to understand that what applies to one person in a particular culture may not apply to someone else in that same culture. Knowing this will help you avoid stereotypes when interacting with consumers.
You should keep the following in mind to make sure you avoid stereotypes:

**Personal Story**
Consumers may have their own personal stories, beliefs, ways to communicate, and health histories.

**Education and Income**
Consumers may have different incomes and education levels, and these backgrounds can affect their beliefs and opinions about health and coverage.

**Country or Region**
Consumers from the same country, even from the same region, may differ greatly in their traditions, customs, and opinions about health and coverage.

Although it's important and helpful to understand basic information about specific cultures, be sure to ask questions—when appropriate—to learn about the specific characteristics of each consumer. You should also become familiar with your own biases and how they may affect the service you provide.
Key Points

• You are not permitted to discriminate against consumers because of their race, color, national origin, disability, age, sex under requirements set forth in 45 CFR 155.120.

• Each of these cultural factors can affect how consumers think about health and the coverage choices they make.

• All consumers are different and you should avoid stereotyping.
CMS regulations at 45 CFR 155.215(c) set forth the CLAS standards that apply to Navigators in FFMs. These regulations address the importance of cultural and linguistic understanding and awareness.

**CMS CLAS & LEP Standards**
Recognize applicable CMS CLAS standards when serving consumers, including consumers with LEP

**Consumer Assistance**
Explain how CMS CLAS standards relate to the consumer assistance that you provide

**Implementation**
Describe ways that you and your organization can implement CMS CLAS standards and a LEP assessment
Culturally and linguistically diverse groups include consumers with a wide variety of backgrounds, such as:

- Racial or ethnic communities, immigrants, and people who don't speak English as their primary language and who have a limited ability to read, write, speak, or understand English, referred to as consumers with Limited English Proficiency (LEP).
- People who communicate through American Sign Language (ASL).
- People with different socioeconomic statuses.
- Religious minorities.

These groups may have a more difficult time getting health care, may get a lower quality of care, and may have poorer health than the general population. To help overcome these disparities, HHS OMH published the enhanced National CLAS Standards in Health and Health Care. OMH's National CLAS Standards include ways to make health care services more responsive to the individual needs of all consumers. CMS encourages all entities providing Marketplace outreach and enrollment assistance to refer to OMH National CLAS Standards as a resource when implementing CMS CLAS standards.
There are many reasons why CMS regulations implementing CLAS standards for assisters are important. They require you to:

- Help consumers from diverse racial, ethnic, and cultural backgrounds, access health coverage that's equal to the level of coverage other consumers receive.
- Offer consumers a greater chance to get equal access to coverage, which decreases the likelihood of consumer complaints.
- Comply with applicable laws and regulations.

When consumers don't get services that meet these guidelines, they may not get coverage that suits their needs. This affects their quality of life, which in turn affects neighborhoods, communities, and public health in general.
Knowledge Check

Elice, the leader of a local community, has complained that your Navigator organization didn't meet the language needs of several people in his community. Which of the activities below corresponds with standards you're required to follow to help your organization better serve the needs of Elice and his community members?

A. Receiving ongoing education and training in CLAS delivery.
B. Assisting consumers in their preferred language at no cost, including oral interpretation and written translation when necessary or when requested by the consumer.
C. Developing and maintaining general knowledge about the racial, ethnic, and cultural groups in your service area, including their diverse cultural health beliefs and practices, preferred languages, health literacy, and other needs.
D. Distributing surveys to local consumer groups to collect and evaluate feedback on the service they received from your organization.

The correct answers are A, B, and C. The CMS CLAS standards that you're required to adhere to include receiving ongoing education in CLAS delivery, providing consumers with information and assistance in their preferred language, and developing and maintaining knowledge about groups in your area. You're not required to conduct surveys to collect and evaluate feedback on the services local consumer groups receive from your organization.
Increasingly, more people in the U.S. speak languages other than English. If the organization you work for receives federal financial assistance (FFA), you’re prohibited by law from discriminating against consumers based on their national origin. Accordingly, recipients of FFA are required to take reasonable steps to ensure meaningful access to their programs and services by persons with limited English proficiency. Individuals who do not speak English as their primary language and who have a limited ability to read, write, speak, or understand English may be limited English proficient (LEP), and may be eligible to receive language assistance with respect to a particular type of service, benefit, or encounter. If a recipient does not provide language assistance services to LEP customers, and such practice or policy results in a delay or denial of services, the recipient of FFA might be violating federal laws that prohibit national origin discrimination.

Language assistance services are very important because language barriers can cause poor communication or miscommunication between you and consumers. These barriers could lead to coverage decisions that are based on misunderstanding and/or incorrect information.
Certain laws and regulations require recipients of FFA to take reasonable steps to ensure meaningful access by persons with LEP, which can include providing linguistically appropriate services to consumers with LEP, such as providing translation and oral interpretation services by qualified persons free of charge to customers.

**CMS Marketplace Regulations**

CMS Marketplace regulations provide specific language access standards applicable to all types of Marketplaces, including FFMs. For example, Navigators are subject to Title 45 of the Code of Federal Regulations (CFR) §155.205(c), which (among other things) requires the provision of oral interpretation and written translation assistance by qualified persons free of charge for LEP consumers.

**Section 1557 of the PPACA**

Remember, this nondiscrimination provision applies to:

- Health programs and activities, any part of which receives Federal financial assistance (FFA) provided by HHS;
- Programs and activities administered by HHS under Title I of the PPACA; and
- Health programs and activities administered by an entity established under Title I of the PPACA, such as an FFM or SBM.

**Title VI of the Civil Rights Act of 1964**

Together, Section 1557 of the PPACA and Title VI of the Civil Rights Act of 1964 require covered entities to take reasonable steps to provide meaningful access to their language assistance services and to their programs and activities by individuals with LEP. A recipient that does not provide language assistance services to LEP customers, and such practice or policy results in a delay or denial of services to persons with LEP, might be violating the Title VI and Section 1557 prohibition against national origin discrimination. Recipients should adopt policies and practices that make sure language assistance services are provided to consumers with LEP when necessary to ensure meaningful access to their programs and activities.

**Additional LEP Guidance**

- HHS LEP guidance provides a framework for recipients of federal funding to determine how best to comply with statutory and regulatory LEP obligations.
• Section 1557 of the PPACA and its implementing regulation requires that Navigators in all Marketplaces must take reasonable steps to ensure meaningful access to their programs and activities by individuals with LEP. Section 1557 of the PPACA extends the enforcement mechanisms of Title VI of the Civil Rights Act of 1964 to all Marketplaces, including FFMs.

• State and local regulations may require additional measures in your service area. It's your responsibility to be aware of and follow all applicable state and local laws and regulations when you provide assistance related to the Marketplaces, unless those laws and regulations would prevent the application of the provisions of Title I of the PPACA.
When determining how to provide services for consumers with LEP, you should begin with an assessment to review your situation and determine how you can balance the following factors:

- The laws and regulations that apply to you
- The number or proportion of consumers with LEP eligible to be served or likely to be encountered in your service area
- The frequency with which LEP consumers come in contact with your health program, activity or service
- The nature and importance of your health program, activity or service
- The resources available to you and costs

There’s no one-size-fits-all solution, but considering these factors will help you determine the appropriate language assistance services for consumers with LEP in your service area.

When your organization has taken all reasonable steps to assist consumers with LEP, you may still need to refer them to other FFM resources. Available resources include already translated FFM documents and job aids at HealthCare.gov, the toll-free FFM Call Center, the Spanish language version of HealthCare.gov (CuidadoDeSalud.gov), and other FFM assisters that can better serve specific groups of consumers.

It’s important not to delay providing services to consumers with LEP while you look for additional assistance. For example, if you receive FFA, you should contact your funding agency to make sure that you’re complying with any applicable program requirements related to language assistance services.
Phase Two: LEP Plan

After you've assessed your situation, you or your organization should develop a plan of action, or LEP plan, as a best practice for providing language assistance services consistent with applicable laws and regulations. This plan need not be intricate in all situations but should adequately address the language access needs of the community being served, including how translation and interpretation services will be provided by qualified individuals at no cost to the customer.

If you're the person responsible for developing your organization's LEP plan, one way to develop this plan is to follow the steps below:

1. **Identify consumers with LEP who need language assistance**: Look at local education and population data and language maps in your area.

2. **Determine how you'll provide language assistance at no cost to consumers with LEP**: Include a description of the laws and regulations that apply to you, the types of language assistance services available, how staff can access them, how to respond to consumers with LEP, and how to use appropriate interpretation and translation services, including best practices for using taglines.

3. **Train staff**: Identify staff who need to be trained on the LEP plan, develop a process for training them, and track training results.

4. **Inform consumers with LEP about language services**: Provide information in plain language and in the non-English languages prevalent in your area through all forms of media, including online, television, or social media, and through targeted outreach to community and faith-based organizations that can reach individuals with LEP. Be sure to let LEP consumers know that language assistance services are provided at no cost to them.

5. **Regularly monitor and update the LEP plan**: Record any changes in the number of consumers with LEP in your area by language, figure out how often you assist consumers with LEP, evaluate resources and budget for the provision of cost-effective language access services, reach out to stakeholder communities for feedback, and regularly update your plan to meet the needs of consumers with LEP.
Many consumers in your community are immigrants from countries in Asia and have LEP. You don't speak the foreign languages of this community, and you know very little about Asian cultures. You need to be able to provide language services to these consumers and you want to be sensitive to their cultural differences. Below are steps you should take to meet the cultural and linguistic needs of these consumers. Which item is not one of the recommended steps?

A. Conduct an individualized assessment to determine the LEP needs, costs, and available resources in your service area.

B. Determine the appropriate mix of LEP services to meet the needs of consumers in your service area, including but not limited to: (1) notifying consumers about the availability of LEP services and (2) providing oral interpretation and written translation in consumers' preferred language(s) in your service area.

C. Recruit, train, and support staff who are representative of the languages spoken in your service area and able to carry out the services described in your LEP plan.

D. Identify an organization that's more familiar with the immigrant populations in your community and always refer all consumers from those groups to that organization.

The correct answer is D. You should conduct an individualized assessment to determine your LEP needs and develop plans for how you'll provide language assistance services at no cost to consumers with LEP. Once you have identified your LEP needs, you can recruit, train, and support staff who speak the foreign languages found in the community. While establishing contacts with organizations familiar with consumers with certain cultures could be a good idea, it's not appropriate to simply refer all consumers from those cultures to other organizations.
While different LEP services will best meet the needs of different consumers, here are some helpful tips:

- Apply a "LEP lens" in decision making to begin any action (e.g., budgeting, information technology, marketing, and data collection) to appropriately address the needs of consumers with LEP.
- Assess consumers with LEP through United States Census and community data sources.
- Create a one-page document for each commonly used language, displaying a list of materials available in that language.
- Tell consumers about laws and policies that protect them against unfair treatment (e.g., post applicable nondiscrimination laws and policies in registration, waiting, or other high-traffic areas).
- Engage with local community-based groups to learn more about the different cultural and linguistic communities you are serving.
- Check official FFM resources like HealthCare.gov or CuidadoDeSalud.gov to see if materials are already translated.

Additional helpful tips for implementing CMS CLAS standards include:

- Involving community members as you develop materials that meet CMS CLAS standards.
- Using newsletters, ethnic media outlets, the Internet, and other ways to let your community know about your organization's activities that satisfy CMS CLAS standards. Ethnic media is the primary source of community information for many individuals with LEP.
- Considering the best arrangement for your organization to provide oral interpretation and written translation services (i.e., qualified bilingual staff, a qualified in-person interpreter, and commercially available telephonic oral interpretation services).
- Creating a centralized web page or resource for the organization's staff that contains everything they may need to know about serving consumers with LEP (e.g., LEP policies, procedures, and instructions on how to access oral interpretation services).
• Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
  
  Note: Only the legal name that appears on documentation (e.g., Social Security card) can be used for application purposes in the Marketplaces.

• Letting consumers know they can file a complaint or grievance with state and federal agencies, such as the HHS OCR, if they think that they've faced discrimination.

• Creating audio or video translations of English-language materials and making the content available via telephone and the Internet.

• Providing translated materials in simple, understandable language at an appropriate literacy level, preferably at the fourth-grade level.

• Including diverse images and culturally sensitive language in outreach, education, and marketing materials. Measuring how well you're implementing CMS CLAS standards through surveys and/or informal feedback.
Resources to Help You Provide LEP Assistance

Below are a variety of materials that can help you provide appropriate language services to consumers. You might find it helpful to review these materials and have them on hand for additional guidance.

Other Language Resources at HealthCare.gov

Materials in Other Languages at Marketplace.cms.gov

Think Cultural Health website from the HHS OMH

Language Services Resource Guide for Health Care Providers from the National Health Law Program*


*Note: CMS doesn't endorse the information on any nongovernment websites, but assisters may find these resources helpful. You can access additional materials through the Resources section.
Knowledge Check

You want to provide the best service to all consumers, but you’re concerned that you won’t be able to provide all of the necessary language services.

What are some cost-efficient ways you can provide culturally and linguistically appropriate services to consumers?

A. Identify Marketplace-approved programs near you that assist similar groups of consumers and work together to hire a professional interpreter in the language you need if that is a reasonable step to provide meaningful access to the consumer with Limited English Proficiency (LEP). Coordinate to work out a schedule with the other program so you can meet consumers’ needs in a timely way. If you receive federal funding for your services, it is important that you claim only your organization’s costs for the shared interpretation services.

B. Refer consumers with LEP to the FFM Call Center, which can help them access interpretation services in cases where you or your organization can’t provide an appropriate referral for interpretation services.

C. Access free online translator tools to use while working with consumers with LEP.


The correct answers are A, B, and D. Coordinating and partnering with other Marketplace-approved programs that assist similar consumer groups can maximize resources and promote relationships with community members. However, you should be careful that all federal resources are appropriately accounted for and that the Federal Government doesn’t receive multiple claims for funding for the same service. You can also use the translated versions of official resource materials available at HealthCare.gov, CuidadoDeSalud.gov, and Marketplace.cms.gov. Free online translator tools aren’t a reliable translating resource and shouldn’t be used while working with consumers with LEP. You can also refer consumers with LEP to the FFM Call Center, which can help them access interpretation services in cases where you or your organization can’t provide an appropriate referral for interpretation services.
Key Points

- Providing culturally and linguistically appropriate services can:
  - Help eliminate health disparities for consumers from diverse racial, ethnic, and cultural backgrounds.
  - Improve quality of services and health care outcomes.
  - Respond to current and projected demographic changes in the U.S.
- CMS regulations implementing CLAS standards were created to make programs more responsive to the diverse needs of consumers.
- Federal laws and regulations protect consumers against national origin discrimination by requiring recipients of FFA to take reasonable steps to ensure meaningful access to their programs, services, benefits and activities by persons with LEP. National origin discrimination can occur if you administer your program in a manner that delays or denies services to persons with LEP. Failure to provide timely language assistance services at no cost to the consumer can result in a violation of federal law.
- It is recommended that you conduct an individualized assessment of your program to determine CMS CLAS standards that you're legally required to follow, as well as LEP needs in your organization's service area. You should align your resources to best meet those needs. The HHS OMH offers a library of resources to help you get started. Partnering with other Marketplace assistance programs may help maximize your resources.
In previous modules, you learned about cultural competence and language assistance. Now, you can apply what you've learned when assisting consumers applying for coverage through an FFM.

**Apply CMS Appropriate Services**
Apply CMS CLAS standards to a consumer with LEP

**Meetings**
Demonstrate how to prepare for subsequent meetings
This scenario will introduce you to a consumer, Yono, who's from a minority group and has LEP. You should assume throughout this scenario that you're a Navigator in a FFM.

This scenario covers CMS regulations implementing CLAS standards that you and the members of your organization who are directly serving consumers (e.g., the receptionist) are required to provide when assisting consumers.

Note: This scenario covers only a portion of a consumer meeting. In an actual meeting, you may be expected to provide all consumer assistance during one meeting, including an overview of the Marketplaces and support in the enrollment process.
The Scenario

You work for a small nonprofit organization that offers assistance to a specific cultural community whose primary language is not English. Your nonprofit just got a Navigator grant from HHS to assist consumers who would like to learn about the FFM in your state. Many of your coworkers speak the language of that community but you don't. Your organization has staff interpreters to help others in the organization communicate with these consumers.

Yono, a member of this community, comes into your office to learn about health coverage she may qualify for through the Marketplace. Yono wasn't born in the U.S., but she's now a U.S. citizen. She doesn't read, speak, or understand English well. Yono is a waitress at a local restaurant and a single mother with a 12-year-old son who's fluent in English. Yono is in good health and doesn't have any mental or physical disabilities. She associates very closely with her community and its traditions.

Your job is to tell Yono about the Marketplace in her state, provide information to her about the coverage that she and her son may be eligible for, and assist her with enrolling in coverage. You should help Yono in a culturally and linguistically appropriate way to meet her specific needs.
Assess Consumer Needs

Yono calls the office on Monday to schedule a follow-up meeting with you and talks to the receptionist who speaks her language.

CMS recommends that you and/or your organization:

- Ask which language Yono prefers to speak when she comes into your office. It's important not to assume which language a consumer may choose to speak. It's a best practice to ask all first-time consumers about their language preferences.

- Ask Yono if she can read and understand English. If her response is "No," the receptionist should ask if Yono can read in her own language and whether she prefers written materials. Yono tells the receptionist she can read and write in her own language. If Yono can't read well, the receptionist should note that spoken communication in her preferred language is optimal and that written materials should preferably include pictures or drawings.

If the receptionist didn't speak Yono's preferred language, she could use a commercially available telephonic oral interpretation line (which has agreed to comply with the same privacy and security standards as the Navigator entity) to help identify Yono's language and provide oral interpretation services. If Yono was at the office and the receptionist didn't speak her preferred language, the receptionist could use the web page titled Get Help in Other Languages to identify Yono's language and get an interpreter. Even if Yono indicated she could communicate in English, the receptionist should make a note for the Navigator to provide an interpreter if they determine that Yono is unable to communicate well in English.
You’re scheduled to meet with Yono next Wednesday.

You learn from the receptionist that Yono will need an interpreter for your first meeting and materials written in her preferred language. From your previous training, you remember that even when consumers are of the same nationality, each person is unique. You remind yourself that when you meet with Yono, you shouldn’t assume that she’ll be like other consumers you’ve assisted.

As an HHS Navigator grant recipient, your organization receives FFA. Therefore, remember that you must comply with Section 1557 of the PPACA and Title VI of the Civil Rights Act of 1964, which prohibit discrimination on the basis of race, color, or national origin. Failing to take reasonable steps to provide meaningful access to consumers with LEP might result in discrimination against consumers based on their national origin.
The interpreter that you scheduled for your meeting with Yono is busy on the day you originally planned to meet, so you ask the receptionist to call Yono to see if there's another date that she's available. Yono informs the receptionist that her son speaks very good English and will come in to help interpret as he often does for her. The receptionist asks you what to do.

You remember that you should not rely on a consumer's family or friends as oral interpreters except in emergencies, but you cannot prohibit a consumer from bringing their own interpreter. To ensure Yono has meaningful access to your program, you instruct the receptionist to inform Yono that professional interpreter services will be made available at no charge and the meeting will be scheduled when those services are available without undue delay. Yono informs you that she prefers coming when professional services are available. The receptionist reschedules the appointment for Friday.
When Yono calls to schedule an appointment to meet with a Navigator, it's important that the receptionist gathers information about Yono's language needs. Which of the following questions should the receptionist ask Yono to make sure her language needs are met?

A. Will Yono pay for an interpreter for her meeting with the Navigator?
B. Which language does Yono prefer to speak?
C. Can Yono read and understand English?
D. Will Yono's son interpret for her (without first offering professional interpretation services at no charge)?

The correct answers are B and C. The receptionist should ask Yono which language she prefers to speak and also whether or not she can read and understand English. By asking those two questions, adequate language resources can be made available for her meeting. It would be inappropriate to require Yono to bring and pay for her own interpreter or to ask if her son will interpret for her, recognizing that you should avoid using unqualified individuals or minors as interpreters.
It's Friday and Yono is in your office for the meeting. The receptionist scheduled a professional interpreter for you and lets you know that Yono and the interpreter are ready. After obtaining a consumer authorization from Yono, you sit down with her to start the conversation.

It's helpful to keep these steps in mind when meeting with consumers:

Step 1 – Greet Consumers
Step 2 – Assess Consumers' Knowledge
Step 3 – Assess Consumers' Needs
Step 4 – Identify Next Steps
Steps 1 and 2: Greet Consumers and Assess Consumers' Knowledge

This is part of the conversation that you have with Yono. Please assume that what the interpreter says to Yono is a correct simultaneous interpretation that's culturally respectful and uses an accurate dialect.

Note: You should have a translated version of all of your most critical documents (e.g., on eligibility, the application process, and the availability of language assistance services) to the extent that's reasonable.

You: Hello Yono, my name is Anna. I'm here to answer your questions so you can find the right coverage for you and your son.

Yono: I'm interested in what my options are, but I don't know anything about the Patient Protection and Affordable Care Act, health coverage, or what I hear is called the Marketplace.

You: OK. I'll tell you about coverage and the Marketplace. Any personal information we talk about today will be confidential. Please tell me what you think I need to know to help you decide about coverage.

You: Depending on how much you make, you may be able to get coverage that you can easily afford. But I'll talk more about that later. Are you familiar with how health insurance works? For example, do you know that when you get health insurance, you pay a certain amount every month, and then when you go to the doctor or hospital, the health insurance company pays most of your bills?

Yono: No, not really.

You: You mentioned the Patient Protection and Affordable Care Act, also known as the PPACA. Did you know that this law helps you get coverage?

Yono: Well, I didn't really know about that either.

You: OK. Let's talk about these things. You asked about the Marketplace. That's a resource that helps you look at information about all of the health plans available to you. You can look at them and decide which one is best for you. I'll tell you about the differences between each one you want to discuss to help you understand which one is best for you.

Yono: OK. Now I think I understand what the Marketplace is, and I'm glad you can help me enroll in coverage. I
still don't know much about the PPACA.

You: Well, I can help you. Here's a helpful brochure that covers some of the information we just talked about. It also covers the most important information you need to know about the PPACA. If there are words you don't understand, let the interpreter know and she can tell you what they mean. You have a right to get free interpretation and translation services from us and I'll let you know how you can get these services. I'm happy to tell you more about available resources for you to explore on your own, too.
You: If you get coverage, what's most important to you? For example, is how much you pay or the types of services you get important?

Yono: Like I said, I don't make a lot of money, so I'm not sure what I can afford.

You: Well, when you're done with the application, we may find that you can get coverage that's designed for consumers in that situation. One type of this coverage for lower income consumers is called Medicaid and another, for children, is called the Children's Health Insurance Program (known as CHIP). We'll discuss these and other types of coverage later.

You: Does your employer offer health insurance?

Yono: No, the owner of the restaurant where I work said that since he only has a few of us working there he doesn't have to offer health insurance.

You: Okay, I think that I understand your needs. Let's talk about what we'll do next. (You give Yono brochures on the PPACA, Medicaid and CHIP, and insurance plans offered through the Marketplace, all written in her preferred language.) Do you have any more questions that I can help answer?

Yono: Not right now. Thanks for your help.
You’ve done a lot to provide linguistically appropriate services to Yono. Now, you’d like to look up resources in case you need to provide additional assistance to Yono. You remember from your training that there are helpful links you can reference in the Resources section.

These references might come in handy if:

- The scheduled interpreter has an emergency and you need to use an interpreter over the phone.
- You have more materials that would be helpful to Yono, but they aren’t translated into her preferred language.
- Changes were made to CMS regulations implementing CLAS standards or accommodations for LEP consumers, and you’d like to review the updates.
There are a variety of resources available to help you. You can visit these links to learn about any news or updates available:

- **Think Cultural Health**
- **The Office of Minority Health (OMH)**
- **LEP Resources Including Links to Best Practices**
- **Federal Interagency Working Group on LEP**

You can also view a very helpful guide from HHS. It's called the **Guide to Providing Effective Communication and Language Assistance Services**. You review the following sections before your meeting because they seem to be the most important:

- What is Effective Communication?
- What are Language Assistance Services?
- Why are Effective Communication and Language Assistance Services Important?

After looking at these materials, you should feel ready to give the best possible assistance to Yono when she's ready to fill out her application.
Below are some of the statements Yono made during your conversation.

Which of these statements revealed information that can affect Yono's coverage needs?

A. I'm interested in what my options are, but I don't know anything about the PPACA, coverage, or what I hear is called the Marketplace.

B. I'm a single mom and I don't make a lot of money. I'm not sure if I'm able to afford coverage.

C. The owner of the restaurant I work at does not offer health insurance since there are only a few people working there.

D. I am unsure of how health insurance works.

The correct answers are B and C. How much Yono knows about the PPACA or the Marketplaces won't affect her coverage needs. However, knowing that Yono is a single mom and doesn't make a lot of money helps you understand that cost is her main priority. Her employer does not offer health insurance due to the owner of the restaurant only employing a few individuals. She is also not sure of how health insurance works, but this does not affect her coverage needs.
Key Points

• CMS regulations implementing CLAS standards and LEP laws, regulations, and guidance may apply when you work with diverse consumers and consumers with LEP.

• It’s recommended that you follow several steps when meeting with a consumer for the first time to make sure you provide meaningful access to services and accurate information.

• Many useful resources are available to you, and you should learn to use them when assisting consumers through the Marketplaces.
Great job! You have learned about culture as it relates to consumers and the importance of cultural and linguistic competence when you perform your assister duties.

You've successfully completed this course.
Resources

Cultural Competence and Language Assistance Resources

National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care: A Blueprint for Advancing and Sustaining CLAS Policy and Practice: Offers information about complying with CLAS standards in the health and health care environment.

HHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons: Federal guidance outlining the requirements that recipients of federal assistance must adhere to (under Title IV of the Civil Rights Act) when serving and interacting with Limited English Proficient (LEP) individuals.

Getting Help in a Language Other Than English: A Center for Medicare and Medicaid Services (CMS) document that provides instructions for accessing the Marketplace Call Center written in the major languages spoken in the U.S.

Think Cultural Health: An HHS website that provides resources and information about serving diverse consumers, adhering to federal requirements and laws, and understanding cultural differences when providing health and health care related services.
http://www.thinkculturalhealth.hhs.gov/

LEP Resources Including Links to Best Practices: A set of resources providing information on federal requirements and best practices when providing services to consumers with LEP.
http://www.hhs.gov/ocr/civilrights/resources/specialtopics/lep/index.html

Federal Interagency Working Group on LEP: A federal interagency website that provides links to federal publications and releases on LEP requirements.
http://www.lep.gov/

HHS Office of Minority Health (OMH): The official HHS OMH website.
http://www.minorityhealth.hhs.gov/

Office of Management and Budget: Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity.

American FactFinder tool from the United States Census Bureau: A search tool that can be used to find facts and data about communities and geographic areas located within the U.S., Puerto Rico, and Island territories.
https://data.census.gov/cedsci/

FAQ for Agents, Brokers, and Assisters Providing Consumers with Details on Plan Coverage of Certain Abortion Services.

Office for Civil Rights (OCR): How to File a Civil Rights Complaint: Information about filing a complaint with OCR, geared toward consumers who believe a health care provider, or state or local government agency, has discriminated against them.
http://www.hhs.gov/ocr/civilrights/complaints/index.html


Marketplace Call Center: Contact information for the Marketplace Call Center, a 24 hours a day, 7 days a week resource for consumers seeking coverage through the Marketplace.
https://www.healthcare.gov/contact-us/

CuidadoDeSalud.gov: The Spanish counterpart to HealthCare.gov that serves as a resource to Spanish-
speaking consumers who want to create a Marketplace account and access information about coverage and the Marketplaces.
https://www.cuidadodesalud.gov/es/


A Patient-Centered Guide to Implementing Language Access Services in Healthcare Organizations: An HHS publication providing detailed information on providing services to consumers with LEP, including information on conducting self-assessments and planning for and implementing language access services.
http://minorityhealth.hhs.gov/Assets/pdf/Checked/HC-LSIG.pdf

Office for Civil Rights (OCR) website: Official website of HHS OCR, which contains information about federal regulations on discrimination and privacy.
http://www.hhs.gov/ocr/

Cultural Competency: A National Health Concern, Medicare Learning Network (MLN) Matters: A resource that provides information on how the Medicare Learning Network and CMS are helping to make cultural competency a priority in health care and to address health disparities across minority populations.

The Guide to Providing Effective Communication and Language Assistance Services: A tool to help your organization provide effective communication and language assistance services to the culturally and linguistically diverse individuals receiving care and services from your organization, including racial and ethnic minorities, those with LEP, and those who are deaf or hard of hearing.
https://hclsig.thinkculturalhealth.hhs.gov/

This resource introduces the HHS OCR Final Rule implementing Section 1557, the guidance does focus on Medicare assistance. It is important to note that the information on Section 1557 does apply to assistants: Guidance regarding implementation of the procedural requirements under the regulation implementing Section 1557 of the PPACA of 2010—Nondiscrimination Communication Requirements and Grievance Procedures.