

### CCO Annual Language Self-Assessment: Meaningful Language Access to Culturally Responsive Health Care Services

#### Introduction

As required by OAR <u>410-141-3515(12)(g)(A)</u>, each Coordinated Care Organization (CCO) must conduct an annual self-assessment on language services available in its organization to meet member needs. The CCO's responses to the self-assessment must be submitted to OHA through an online survey. Your responses will be analyzed to determine whether your CCO has met the following requirements:

- The intent of OAR 410-141-3515 12(g)(A)
- The <u>Health Equity Measure</u> requirements for **2021** CCO incentives which entail:
  - Answering all survey questions;
  - Passing the required questions for the 2021 measurement year; and
  - Meeting the minimum points required for the 2021 measurement year (46 points).
  - Please note that the evaluation of CCO performance for incentives, including the must pass questions will be based on the 2021-2023 measurement specifications published on the <u>CCO Quality Incentive Program webpage</u>.

<u>Completion of the online survey does not guarantee that your CCO has met the metric or</u> <u>intent of the administrative rules.</u> Questions are organized in four domains, and in general, each statement is worth one point and some questions have multiple statements so are worth more than one point. Please note that the order and details of some questions have changed based on feedback from CCOs. However, evaluation of CCO performance for 2021 incentives will be based on the questions, scoring guidelines and point distribution published in the 2021-2023 Health Equity metric specifications on the CCO Quality Incentive Program webpage referenced above.

# <u>Responses to all assessment questions should be based on language services in place on the final day of the measurement year (December 31, 2021).</u>

The CCO Contracts Administrator will send the link for the online survey by December 15, 2021. All online survey responses are due on January 17, 2022. (Consistent with ORS 187.010(3), survey responses received on January 18, 2022, are considered timely.) Only online responses will be accepted; this PDF version of the survey is provided for reference only.

The self-assessment is designed to guide your CCO to progressively higher quality and a more robust infrastructure for providing language services to members.

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#### **Additional Information**

OHA reserves the right to request additional or clarifying information to support responses provided through the online survey, including but not limited to further detail on language access plans, data collected, examples of policies, or translated materials.

For questions about this survey or the CCO incentive metric, please contact <u>metrics.questions@dhsoha.state.or.us</u>.

#### **Contact Information**

The contact person is the one completing the survey and the first point of contact if OHA has any follow-up or clarifying questions about survey responses. If multiple individuals for the same CCO submit survey responses, OHA will follow-up with the CCO as to which of the respondents should be the primary contact.

Name: \_\_\_\_\_

CCO Name: \_\_\_\_\_\_

Email Address: \_\_\_\_\_

#### Domain 1: Identification and assessment for communication needs

Questions in this domain assess **how well your CCO identifies and tracks services** to limited English proficient (LEP), and Deaf and hard of hearing populations you serve.

**CCOs should answer questions based on language services in place on December 31, 2021.** Your responses will help OHA to evaluate how well your CCO is performing these critical and meaningful language access functions.

1) Please answer **yes or no** for each of the following statements on how your CCO identifies members needing communication access (e.g. LEP, sign language users).

	Yes	No
The CCO has a <b>process to respond to individual requests</b> for language assistance services (including sign language).	()	()
The CCO has a <b>process for self-identification</b> by the Deaf or hard of hearing person, non-English speaker or LEP individual.	()	()
The CCO has a <b>process for using open-ended questions</b> to determine language proficiency on the telephone or in person.	()	()
The CCO customer service staff are <b>trained to use video relay or TTY</b> for patient services.	()	()
The CCO uses "I Speak" language identification cards or posters.	()	()
The CCO has a <b>process for responding to member complaints</b> about language access and clearly communicates this process to all members.	()	()
The CCO uses MMIS/ enrollment data from OHA about primary language.	()	()

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2) Please answer **yes or no** for each of the following statements about collecting data.

	Yes	No
The CCO collects data on the <b>number of members served who are Limited</b> English Proficient (LEP).	()	()
The CCO collects data on the number of members served who are Deaf and hard of hearing.	()	()
The CCO collects data on the <b>number and prevalence of languages spoken by members</b> in your service area.	()	()

3) Please answer **yes or no** for each of the following data sources that your CCO uses to determine the needs and/or population size of the LEP and Deaf and hard of hearing members in your service area.

	Yes	No
OHA MMIS	()	()
CCO specific enrollment information on members interpreter needs.	()	()
Local community organizations and/or on-line data (example LEP.gov; census data or the American Community Survey (ACS) data).	()	()

4) How often does your CCO use any of the above-listed data sources to assess LEP and Deaf and hard of hearing member needs?

- () Monthly
- () Quarterly
- () Annually

5) Does your CCO record the primary language from LEP or Deaf and hard-of- hearing members when they first contact your CCO (for example, at intake or first encounter)?

() Yes

() No

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6) Does your CCO have a process for sharing information about members who need spoken and sign language interpretation needs with your provider network?

() Yes

( ) No

7) If yes to the previous question, please briefly describe how your CCO shares primary spoken language or hearing assistance needs with provider networks or service coordinators.

8) If yes to question 6, how frequently do you share this information?

() Weekly

() Monthly

() Quarterly

() Annually

9) Does your CCO have the capability to identify the number of members needing spoken and sign language interpretation services that were not identified in form 834 from OHA?

() Yes

( ) No

10) CCOs must rank the languages members often request language services in to meet the must pass criteria for this question.

What are the top **<u>SIX</u>** most frequently encountered spoken and sign languages by members in your CCO for the measurement year?

Write in language		

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11) Please answer **yes or no** for each of the following statements about members who refused, did not need, needed interpretation services but were not identified as needing interpreter services, or requested and received in language services from bilingual providers.

	Yes	No
The CCO collects data on members served <b>who self-identified as LEP but</b> refused interpretation services.	()	()
The CCO collects data on members served who are Deaf and hard of hearing but refused interpretation services.	()	()
The CCO collects data on members served who <b>did not have MMIS language</b> <b>flag but requested interpreter services</b> .	()	()
The CCO collects data on members served who had an MMIS language flag but did not need interpreter services.	()	()
The CCO collects data on the members served who <b>requested and received</b> <b>in- language services from bilingual providers</b> and therefore trained interpreters were not needed for the visits.		

12) Please answer **yes or no** for each of the following statements about appointment wait times.

	Yes	No
The CCO collects data on the wait times for <b>LEP members</b> that need appointments with interpreter services.	()	()
The CCO collects data on the wait times for <b>Deaf and hard of hearing members</b> that need appointments with interpreter services.	()	()

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13) Please mark the average wait time for the each of the following appointments. (choose only one answer per statement).

	Same day	1-3 days	4-7 days	More than 7 days
The average wait time for Limited English Proficient members needing interpretation services is:	()	()	()	()
The average wait time for Deaf and hard of hearing members needing interpretation services is:	()	()	()	()

14) What is the average wait time for members that do not need interpretation services?

- () Same day
- ( ) 1-3 days
- ( ) 4-7 days
- () More than 7 days
- () The CCO does not collect this information

15) How frequently do you track the average number of encounters by spoken and sign languages and share the data with provider networks or service coordinators?

- () Weekly
- () Monthly
- () Quarterly
- () Annually

16) Does your CCO have a process for identifying the total number of Deaf and hard of hearing members that prefer sign language or assistive communication devices to ensure effective communication in your CCO and provider network?

() Yes

( ) No

*17)* Does your CCO use local community organizations or on-line data source such as LEP.gov or census to determine interpretation needs or population size of the LEP and Deaf and hard of hearing members in your service area?

() Yes

( ) No

#### **Domain 2: Provision of Language Assistance Services**

#### CCOs should answer questions based on language services in place on December 31, 2021.

Questions in this domain assess **how well you use data and work processes to effectively communicate** with the Limited English Proficient (LEP), and Deaf and hard of hearing populations you serve. Your responses will help OHA to evaluate how well your CCO is performing these critical meaningful language access functions.

18) Please answer yes or no to each of the following statements about tracking language assistance services at the CCO and provider network levels.

	Yes	Νο
The CCO tracks the primary language of persons encountered or served.	()	()
The CCO tracks <b>the use of language assistance services</b> such as interpreters and translators.	()	()
The CCO tracks staff time (including bilingual providers) spent providing bilingual spoken and sign language assistance services.	()	()
The CCO tracks <b>the use of spoken and sign language assistance services by</b> <b>modality</b> (in-person; telephonic, video remote, other modalities).	()	()

19) Please select **yes or no** to the types of language assistance services that are provided by your CCO and provider network.

	Yes	No
Bilingual staff and providers	()	()
In-house interpreters (spoken and sign)	()	()
In-house translators (for documents)	()	()
Contracted in-person interpreter services	()	()
Contracted translators (for documents)	()	()

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Contracted telephonic interpreter services	()	()
Contracted video interpreter services	()	()

# 20) Please select yes or no to the following care delivery settings in which your CCO provides spoken and sign language interpretation service for member visits.

	Yes	No
Medical (in-patient)	()	()
Medical (office/out-patient)	()	()
Emergency Department	()	()
Dental	()	()
Telehealth	()	()
Home Health	()	()
Pharmacy connected to a provider network		
Lab services connected to a provider network	()	()

21) Does your CCO and provider network have policies on the use of family members or friends to provide interpretation services?

() Yes

( ) No

22) If yes to the previous question, please briefly describe your policies on when or how family members or friends can provide interpretation services.

() Yes

( ) No

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<sup>23)</sup> Does your CCO provide staff who coordinate interpreter services with information on how to access OHA approved spoken and sign language interpreters?

24) Please select yes or no to each of the following statements about the translation of vital written documents into non-English languages.

	Yes	No
Consent forms are translated into non-English languages.	()	()
Complaint forms are translated into non-English languages.	()	()
Intake forms are translated into non-English languages.	()	()
Notices of rights are translated into non-English languages.	()	()
Notice of denial, loss or decrease in benefits or services are translated into non-English languages.	()	()
Information on programs or activities to receive additional benefits or services are translated into non-English languages.	()	()

25) Are the translated documents available in alternate formats that include large prints or braille?

- () Yes
- () No

26) When your CCO updates information on its website, does it also include non-English language translation of the content?

() Yes

( ) No

27) Does your CCO track the following data regarding language assistance services provided by the CCO and provider network? Please mark yes or no for each of the following statements.

	Yes	No
The CCO validates invoices from interpreting agencies to ensure they include member level details.	()	()
The CCO <b>compares invoice information with an internal data system</b> (for example MMIS flag) to confirm member level details.	()	()

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The CCO <b>tracks invoices by service modality</b> (in-person, telephonic, video remote).	()	()
The CCO has a system for <b>tracking the unit cost of each language assistance</b> service provided.	()	()
The CCO tracks the cost of services provided by bilingual staff interpreters.	()	()
The CCO tracks the <b>cost of translation of materials into non-English</b> languages.	()	()

28) Please answer **yes or no** to each of the following statements about tracking language assistance services at the CCO and provider network levels.

	Yes	No
The CCO tracks training and OHA credentialing of contracted interpreters.	()	()
The CCO tracks training and <b>OHA credentialing of staff members who</b> <b>interpret for patients</b> (such as full-time staff interpreters or dual-role interpreters).	()	()
The CCO tracks the <b>total cost of interpreter services</b> .	()	()
The CCO tracks the <b>cost of translation of materials</b> into non-English languages.	()	()

29) Please select yes or no to the language assistance services that your CCO can provide **detailed member level information**, such as member ID, date of service, and interpreters' credentials.

	Yes	No
Bilingual staff and providers	()	()
In-house interpreters (spoken and sign)	()	()
In-house translators (for documents)	()	()

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Contracted in-person interpreters	()	()
Contracted translators	()	()
Contracted telephonic interpretation services	()	()
Contracted video interpretation services	()	()

30) When spoken and sign language interpretation services are provided during member visits, can your CCO **collect detailed member level information** (such as member ID, date of service, and interpreter's credential) for appointments in each of the following care delivery settings? Please select yes or no to the following statements.

	Yes	No
Medical (inpatient)	()	()
Medical (outpatient/office)	()	()
Emergency Department	()	()
Dental		
Telehealth	()	()
Home Health	()	()
Pharmacy connected to a provider network	()	()
Lab services connected to a provider network	()	()

31) Please answer yes or no to the following statements related to standardized proficiency assessments for bilingual staff and interpreters.

	Yes	No
For Limited English Proficient (LEP) members, the CCO requires a standardized proficiency assessment for bilingual staff interpreters and bilingual providers before allowing them to interpret or translate documents.	()	()

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For Deaf and hard of hearing members, the CCO requires a standardized proficiency assessment for bilingual staff interpreters and or bilingual	()	()
providers before allowing them to interpret.		

32) If yes to either statements in the previous question, please briefly describe your proficiency assessment. (For example, online training, in person training, scored skill test).

#### Domain 3: Training of staff on policies and procedures

CCOs should answer questions based on language services in place on December 31, 2021.

Questions in this domain assess how well your staff who provide services to Limited English Proficient (LEP), and Deaf and hard of hearing populations is trained on language access

**policies and procedures.** Your responses will help OHA to evaluate how well your CCO is performing these critical meaningful language access functions.

33) Does your CCO staff procedures handbook include specific instructions on how to provide language assistance services to LEP and Deaf and hard of hearing members?

- ( ) Yes
- ( ) No

34) Please select **yes or no** to each of the following staff groups that receive training at regular intervals on working with Limited English Proficient (LEP) and Deaf and hard of hearing members.

	Yes	No
Management or senior staff	()	()
Employees who interact with or are responsible for interactions with non- English speakers or LEP members	()	()
Bilingual staff and providers	()	()
New employees	()	()

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All employees	()	()
Volunteers	()	()

35) Are <u>all</u> staff members who interpret for patients (such as full-time staff interpreters or dualrole interpreters) trained and certified or qualified by OHA?

() Yes

( ) No

36) Do staff who provide care or services to Limited English Proficient (LEP) and Deaf and hard of hearing members receive training at regular intervals on how to request the translation of written documents into other languages and alternate formats?

() Yes

() No

#### Domain 4: Providing notice of language assistance services

#### CCOs should answer questions based on language services in place on December 31, 2021.

Questions in this domain assess **how well your CCO translates outreach materials** and explains how Limited English Proficient (LEP), and Deaf and hard of hearing populations you serve may access available language assistance services. Your responses will help OHA to evaluate how well your CCO is performing these critical meaningful language access functions.

37) Does your CCO translate signs or posters announcing the availability of language assistance services?

() Yes

() No

# 38) Please answer **yes or no** to the methods that your CCO uses to inform members and communities in your service area about the availability of language assistance services.

	Yes	No
Frontline and outreach by multilingual staff	()	()
Posters in public areas in clinics	()	()
"I Speak" language identification cards distributed to frontline staff	()	()

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CCO and providers websites	()	()
Social networking websites (e.g. Facebook, Twitter, other)	()	()
E-mail to members or a list serv	()	()

39) Does your CCO inform LEP and Deaf and hard of hearing members about the availability of free language assistance services?

() Yes

( ) No

40) Does the main page of your website include non-English information that is easily accessible to LEP members?

() Yes

( ) No

Thank you for completing this year's Language Access Self-Assessment!



