

Medicaid Managed Care Rule

42 CFR part 438.10(h)

Agenda

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The Centers for Medicare & Medicaid Services (CMS) established the Medicaid Managed Care Rule to:

- Promote quality of care
- Strengthen efforts to reform the delivery of care to individuals covered under Medicaid and Children's Health Insurance Plans (CHIP)
- Strengthen program integrity by improving accountability and transparency
- Enhance policies related to program integrity

With the Medicaid Managed Care Rule, CMS updated the type of information managed care organizations are required to include in their care provider directories.

Requirements for Changes in Provider Directories

In addition to the name, address, phone number and other demographic information, the following new information will need to be listed in our paper and online provider directories:

- Web URL, if applicable
- Disability access for patients, including:
 - Open access to building and parking
 - Accessible equipment such as exam tables, weight scales and diagnostic equipment
 - Individual assistance with the examination process
 - Accommodations for the member's family, friends or attendants to assist

Requirements for Changes in Provider Directories (cont.)

- Additional languages spoken, including sign language
- Availability of a medical interpreter to help members with language translation
- Cultural competency training acknowledgment
- Indication by medical practices if new patients are being accepted

Note: Certain states may have additional requirements for information included in our provider directory.

Types of Providers Affected

The types of providers and other health care professionals whose information will need to be updated include:

- Physicians and specialists
- Hospitals
- Pharmacies
- Behavioral health providers
- Long-term services and supports providers

This requirement is specific to Medicaid Managed Care plans and **doesn't** affect Medicare plans. The rule doesn't apply to vendors that offer transportation services.

We may contact you regularly to updated information:

- By phone, email and fax

UnitedHealthcare Community Plan and providers are expected to comply with the Americans with Disabilities Act (ADA). This includes making sure members have safe and appropriate physical access to buildings, services and equipment, such as:

- Open access to building and parking
- Accessible equipment such as exam tables, weight scales and diagnostic equipment
- Individual assistance with the examination process
- Accommodations for the member's family, friends or attendants to assist
- Signage that follows ADA guidelines

The Medicaid Managed Care Rule requires you to disclose:

- Any languages you and your staff speak in addition to English
- Whether providers who render care have a medical interpreter available to patients
- Language assistance services you offer including:
 - Interpreters or translators for members who are deaf, hard of hearing, or do not speak English
- Other language assistance through:
 - American Sign Language
 - Access to community resources for interpreters or translators
 - Providing accommodations for family or friends who accompany members to appointments
 - Allowing for written communications and materials for information after the appointment
 - Considering cultural and social differences of the member

Cultural Competency Definition

- **Cultural competency** is a set of behaviors, and attitudes that enable positive interactions in cross-cultural situations.
- **Culture** refers to patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values and institutions of racial, ethnic, religious or social groups.
- **Competence** is the capacity to function effectively as an individual or organization within the context of the cultural beliefs, behaviors and needs presented by people and their communities.
- **Health care services** that are respectful of and responsive to the beliefs, practices, and cultural and linguistic needs of patients can help improve health outcomes.
- **Culture and language** may influence health, healing, and wellness belief systems including perception of illness, disease, and their causes.

Cultural Competency Requirements

The Medicaid Managed Care Rule now requires that provider directories list whether you have knowledge about cultural competency. In addition to this acknowledgment, UnitedHealthcare Community Plan also requires providers who participate with us to:

- Treat UnitedHealthcare Community Plan members the same way they'd treat any other benefit plan members.
- Not discriminate in the treatment of or quality of services provided to UnitedHealthcare Community Plan members.
- Be willing and able to:
 - Make distinctions between treatment methods consistent with the member's cultural background
 - Maintain consistency in providing quality care across a variety of cultures

To learn more about the Medicaid Managed Care Rule, go to:

- UHCCommunityPlan.com > For Health Care Professionals > Select Your State > Provider Information

To learn more about cultural competency, go to:

- UHCCommunityPlan.com > For Health Care Professionals > Select Your State > Cultural Competency Library

OR

- <https://cccm.thinkculturalhealth.hhs.gov>

If we can assist you further, please call Provider Services at 877-842-3210.

Thank you!