



CULTURAL COMPETENCY PLAN

2016 – 2017

Florida Long Term Care

Florida MMA Comprehensive Plan

Florida Healthy Kids



SMMC APPROVED
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A handwritten signature in black ink, appearing to read 'Maurice A. Patterson'.

Maurice A. Patterson
SMMC Contract Manager

*Spanish and other language versions of approved materials are deemed approved provided they are exact translations.

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UnitedHealthcare Community Plan - Florida (UHCCP-FL) has a comprehensive written cultural competency plan (CCP) which describes how we ensure that services are provided in a culturally competent manner to all enrollees, including all services and settings, and including those limited English proficiency. Moreover, the CCP describes how providers, employees, and systems will effectively provide services to people of all cultures, races, ethnic backgrounds and religions in a manner that recognizes, values, affirms, and respects the worth of the individual enrollees and protects and preserves the dignity of each.

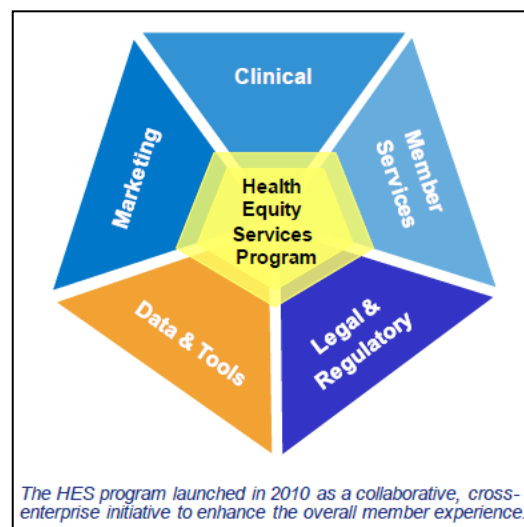
The purpose of the UHCCP-FL CCP is to make certain that the Plan meets the individual, culturally and linguistically diverse needs of all members; to ascertain that the providers of the Plan value diversity within the organization; meet the needs of the members that are in need of linguistic services; and enable members to obtain adequate communication support.

The Plan, by extension as the tenants of the CCP, will ensure that development of systems, policies, and procedures will reflect the needs of our culturally disparate membership, provider network, and include additional regard for the cultural blend of our staff.

UnitedHealthcare Community Plan – Florida’s (UHCCP-FL) CCP is modeled after the National Health Equity Services Program.

The mission of our *Health Equity Services Program* is to collaborate across benefit businesses and shared services to improve the member experience through enhanced culturally and linguistically appropriate programs, services and materials. The goals of the program are to:

- Support infrastructure and process developments to identify, track and reduce health disparities to improve the quality of health of consumers and communities.
- Embrace diversity by creating a continuum of culturally sensitive initiatives that promote health and prevent avoidable health care cost.



Cultural Competence in health care describes the ability to provide care to patients with diverse values, beliefs and behaviors, including tailoring delivery to meet patients’ social, cultural and linguistic needs.

Specific efforts to acknowledge and support the impact culturally competent care has on improving health outcomes include:

- **Analytics:** Integrating member Age, Gender, Address, Race/Ethnicity and Language data with clinical data to identify any disparities in care that are associated with the aforementioned member demographics.
- **Cultural Competence:** Providing clinical and non-clinical Cultural Competency training to staff to create an awareness of the unique needs of members from various cultures resulting in the delivery of more personalized service.

- **Outreach:** Customizing member materials and engagement strategies based on identified unique cultural needs and gaps in care.
- **Providers:** Fostering culturally competent care by our contracted providers

There are several drivers that are critical factors in our commitment to enhance cultural sensitivity among network providers and our staff:

- Better opportunities to meet the needs of our increasingly diverse membership
- Increase collaborative opportunities with state partners to reduce health disparities in their population
- Proactively meet current and anticipated regulatory requirements and standards and accreditation agency requirements of recommendations
- Amplify our other efforts to effectively collect and use race, ethnicity and language data to improve health equity

We currently provide health care to a more culturally and linguistically diverse population and we are preparing our workforce now to understand the unique challenges and opportunities of multicultural care management.

UnitedHealthcare's Health Equity Services Program

According to the U.S. Census Bureau, minorities are now roughly one-third of the U.S. population and are expected to become the majority in 2042, with the nation projected to be 54 percent minority in 2050. By 2023, minorities will comprise more than half of all children.

Our enterprise-wide Health Equity Services program improves the appropriateness of clinical programs and information for the multicultural populations we serve. This program drives leadership collaboration and promotes health equity solutions across the entire organization that comprises UnitedHealth Group.

Culturally and linguistically appropriate programs and services must be provided to better serve members' diverse needs and reduce health disparities. One of the key starting points for the health equity services team is collecting and understanding the race, ethnicity and language of our members. Progress made to date includes:

The Importance of Cultural Sensitivity in Supporting Members

Cultural sensitivity is a vital part of realizing our goal of supporting member recovery and resiliency in ways that are meaningful for individuals and relevant to their unique cultural experiences. We develop and continually improve culturally relevant and linguistically appropriate services as part of our integrated service delivery model. This requires foresight and a willingness to tackle complex service delivery problems, while respecting the integrity of the cultures and populations with whom we work. It also requires continued reference to our organizational mission – *to help people live healthier lives* -- and a clear sense of the operational resources needed to manage a health care program that serves unique populations.

Cultural norms, values, beliefs, customs, histories and behaviors influence how individuals approach care delivery, the course of treatment and the attainment of positive outcomes. This is especially true for those members requiring behavioral health support. Accordingly, we validate that our approach to member service emphasizes cultural sensitivity at every part of health plan operations.

Health Programming Based Upon Race, Ethnicity, Language (REL)

Studies show that racial and ethnic minorities often receive lower-quality care than their Caucasian counterparts, even after controlling for factors, e.g., disease stage. To determine the need for changes/additions to verbal and written member services and tools, we collect data on race, ethnicity and preferred written and spoken languages for members. Analysis of this data are used to perform a cultural and linguistic assessment for Florida, including grievances/appeals, requests for translation services, requests for member information in alternate languages, requests for providers who speak specific languages or requests for special services for hearing impaired, etc.

We have the capability to collect REL information directly from members (provided via state eligibility files). We use race, ethnicity and language information in various clinical programs to help us better identify, measure and reduce disparities.

We track the number of incoming calls to the Member Services Center requesting the use of an interpreter via interpretive services and the number of requests for materials written in languages other than English. When we identify a predominant language in more than five percent of members or potential enrollment base, we translate core marketing and health information materials into that language using CMS, state requirements, special needs issues and best-practice standards from professional organizations. We will translate materials for members to make sure their needs are met. Each clinician is trained in cultural competency.

Cultural Competency Training

We train our staff to improve understanding of and sensitivity to our culturally diverse population and increase competency in serving those members through the availability of LearnSource.

Consistent with existing Florida program guidelines, each new employee (including subcontractors) serving Florida members participate in cultural competency training. In addition, all employees complete required training upon hire on valuing diversity and inclusion. These trainings address important considerations for care planning for members of various cultures, such as recognizing that religion and other beliefs may influence how members and families respond to illnesses, disease and death; respecting and allowing for inclusion of complementary or alternative healing practices and accepting that family is defined differently by different cultures and the family needs to be involved in a culturally appropriate way. All employees take mandatory courses on cultural diversity and voluntary programs on cultural awareness/diversity and inclusion.

Staff training related to cultural competency sensitizes our employees to the cultural and linguistic characteristics and special health care needs of our member population we serve. Trainings are focused on a wide range of issues, including:

- Use of the member's primary language
- Cultural awareness and understanding of health disparities among different cultural groups
- Cultural beliefs related to health, illness, medical care and end-of-life issues
- The need to treat each person with dignity and respect
- How to avoid stereotypes
- Communication protocols for members with limited English proficiency
- Characteristics of and barriers facing individuals with special health care needs
- Cultural sensitivity training through LearnSource

LearnSource is an online educational system with numerous up-to-the-minute self-study, webinar classes and business book summaries (through *getAbstract*) on cultural competency, proficiency and adaptability which are available to all employees. All employees, including telecommuter employees take mandatory courses on cultural diversity and voluntary programs on cultural awareness/diversity and inclusion.

Understanding Cultural Competency and the Americans with Disabilities Act

UnitedHealthcare Community Plan – Florida's (UHCCP-FL) is committed to ensuring our members have access to quality care from their care providers who participate in our network. Awareness of cultural competency and Americans with Disabilities Act (ADA) requirements has been shown to help care providers improve overall care by creating stronger personal connections with their patients.

Cultural Competency

What is Cultural Competency?

Cultural competence is a set of behaviors, attitudes and policies 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.

Why is Cultural Competency Important?

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.

Care Provider Requirements

As part of their UnitedHealthcare Community Plan – Florida’s (UHCCP-FL) participation agreement, participating care providers are required to treat UHCCP-FL members in their offices as they do non-UHCCP-FL members, and agree not to discriminate in the treatment of or quality of services provided to UHCCP-FL members.

Culture and language may influence:

- Health, healing and wellness belief systems
- How illness and disease – and their causes – are perceived
- Behaviors of members who are seeking health care and their attitudes toward care providers
- Delivery of services by care providers

Care providers should be willing and able to make distinctions between treatment methods consistent with the member’s cultural background and maintain consistency in providing quality care across a variety of cultures.

Promoting Cultural Competency

- **Support health literacy:** Communicate clearly, slow down the pace of the conversation and use simple words to explain the situation.
 - **Value diversity:** Consider the members’ cultural beliefs in terms of medical situations.
 - **Conduct a cultural self-assessment** of your practice.
 - **Be conscious** of the dynamics when people from different cultures interact.
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- **Institutionalize cultural knowledge** among your staff by making it part of your group's policies and practices.
- **Adapt service delivery** to help meet the diverse needs of patients.

Americans with Disability Act (ADA)

What is the ADA?

The ADA is a federal civil rights law for people with disabilities. It covers employment, state and local government services and public accommodations, as well as telecommunications for the deaf.

The ADA helps remove barriers that may prevent qualified individuals with disabilities from enjoying the same opportunities available to those without disabilities.

Why is the ADA Important?

Research has shown that when architectural, accessibility and/or language barriers exist for members seeking care, it has a negative impact on the member's health. The ADA helps all individuals receive the same quality health care services, regardless of disabilities.

Care Provider Requirements

UnitedHealthcare Community Plan and our care providers must comply with the ADA by:

- Delivering services that accommodate the needs of members.
- Demonstrating compliance with the ADA by conducting an independent survey or site review of facilities for both physical and programmatic accessibility.
- Reasonably accommodating members and ensuring that programs and services are as accessible to an individual with disabilities as they are to an individual without disabilities – whether through written policies and procedures or by removing barriers to covered services for individuals with disabilities.

UnitedHealthcare Community Plan Resources

- Language Interpretation Line (available for some health plans): Care providers can use this service for translation needs.
- Cultural Competency Library: Access Cultural Competency resources at UHCCommunityPlan.com > For Health Care Professionals > select a state > Cultural Competency Library
- Cultural Competency and Americans with Disabilities Act Care Provider Training: Please ask your Physician Advocate for details.

External Resources

- Agency for Healthcare Research and Quality (AHRQ)
 - Health Literacy Measurement Tools in English and Spanish: ahrq.gov > For Professionals > Quality & Patient Safety > Quality Measure Tools & Resources > Tools & Resources
 - AHRQ Cultural and Linguistic Competency: ahrq.gov/health-care-information/topics/topic-cultural-competence.html
- Americans with Disability Act: ada.gov
- Centers for Disease Control and Prevention:
 - Health Literacy for Public Health Professionals: www2a.cdc.gov/TCEOnline/registration/detailpage.asp?res_id=2074
- National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities: diversitypreparedness.org
- Think Cultural Health: thinkculturalhealth.hhs.gov
- U.S. Department of Health and Human Services Office of Minority Health
 - Center for Linguistic and Cultural Competency in Health Care: minorityhealth.hhs.gov > Cultural Competency > Center for Linguistic and Cultural Competency in Health Care
 - A Patient-Centered Guide to Implementing Language Access Services in Healthcare Organizations: minorityhealth.hhs.gov/Assets/pdf/Checked/HC-LSIG.pdf

Provider Training

We provide ongoing training through United Healthcare *Online*, a resource for physicians and other health care professionals (<http://www.uhc.com/provider>). Additionally, providers receive ongoing education regarding the Cultural Competency Plan through the <http://www.uhc.com/provider> website, the *Provider Administrative Guide*, and the initial in-service provider training. Our provider education efforts focus on encouraging our providers to understand the potential for racial, ethnic, socioeconomic, gender and geographic disparities in access and use of services. Our staff recruiting and provider network development processes are driven by membership and member's language and cultural needs.



Florida MMA Provider
Manual.pdf



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We develop various programs, tools and processes to address the needs of our diverse member population. These range from methods to identify members with health disparity issues, to hiring staff from the same cultures as our members. Strategies include:

- Proactively identifying minority providers to support minority health workforce development initiatives.
- Ongoing provider education about cultural competency.

Additionally, cultural competency training is posted to our provider portal website, allowing providers to perform the training at their own pace. The training address the same elements described above for the employee training. Finally, recognizing that providers may require assistance communicating with members who speak languages other than English, we train providers to use our translation services through initial orientation, the provider administrative manual and ongoing provider relations visits. Provider training is an important part of our approach to network management, quality improvement and customer service.

Clinical Care Management Training

Cultural sensitivity is at the heart of serving our members, their individual health needs and their unique circumstances. Cultural sensitivity plays a vital part in realizing our goal of supporting member recovery and resiliency in ways that are meaningful and appropriate for individuals in their communities and relevant to their unique cultural experiences.

Our clinical and care management staff is trained in cross-cultural communications as part of our efforts to provide members with the care they need, such as:

- Cultural sensitivity trainings and tools that foster the development of care management cross-cultural communication skills and help build trust with diverse members to develop effective care and treatment plans.
 - Data are integrated into our care management system to help our nurses ask culturally and linguistically appropriate questions and effectively communicate to meet our member's unique needs.
 - Visibility to this information helps our nurses ask more appropriate questions and participate in more relevant problem solving.
 - Our goal is to offer a cultural sensitivity training program that is:
 - *Practical*: Applicable to specific job scenarios.
 - *Sustainable*: Does not require significant internal resources to maintain.
 - *Adaptable*: Easily tailored to meet needs of various employee groups.
 - *Measurable*: Provides us with the ability to assess integration of material and evaluate effectiveness of training.
 - *Cost-Effective*: Represents a significant value-add relative to cost.
 - *Market Differentiating*: Provides us with a distinct asset which helps us to help members *lead healthier lives*.
 - *Applicable*: Offers employees resources and tools to support them in interactions with our diverse membership and provider network.
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Experience and Effective Strategies to Address Disparities

Racial and ethnic minorities, people with disabilities, residents of rural areas and other vulnerable groups more often face barriers to good health. As a result, these Americans are more likely to suffer from disease and may die up to 20 years earlier than others.”

Continued, regular analysis of our Florida’s membership and programs is the key to refining and targeting our efforts for greater effectiveness. Analysis of clinical and service quality measures in conjunction with member demographic information helps us develop member-focused quality improvement programs and services. Providing this data to our health care practitioners helps them to adapt their clinical practice in ways that will improve quality and close gaps in care.

To make sure we are addressing health disparities, we analyze data, initiate and track targeted outreach and education activities, and adopt national best practices; share locally developed best practices; implement new strategies to address geographical, ethnic, racial and illness-based disparities. Additionally, we make sure our QM/QI activities effectively address and improve health care disparities identified through data collection. We also apply this knowledge and insight gained to improve access and services for other programs. We have the capability to collect race, ethnicity and language (REL) information directly from members. For population level outreach, we use inferred REL information. We can fulfill vital documents in the member’s preferred language and do so upon request. We use REL information in various clinical programs to help us better identify, measure and reduce disparities.

Experience and Strategies to Address Geographical Disparities

Beginning with a member-centric approach, our commitment to culturally appropriate services integrates the member’s environment, background and culture. We focus on the following:

Strategy to Address Racial and Ethnic Disparities	Program Names
Demographic and Clinical Analytics	We review/analyze member age, gender, address, race/ethnicity and language data with member clinical data to identify disparities in care that are associated with these member demographics.
Member Services Center	Our approach to improving member care is local and community-based. We build our programs with an understanding of the cultural needs of members, provider network and in terms of how we move members to better health.
Recruiting Diverse Staff	We actively recruit employees who represent the ethnic and cultural groups we serve or who have extensive experience working with diverse populations, including the perspectives of individuals with disabilities. We leverage their diverse knowledge to provide formal and informal educational and training opportunities for our staff and the community. We actively pursue potential candidates who are bilingual. We use an established process to determine staffing levels to serve Florida members. This process includes several components, including consideration of the unique needs of the Florida population.
Training Clinical/Non-clinical Staff	Ongoing staff training addresses the cultural and linguistic characteristics and special health care needs of our member population, including:

Strategy to Address Racial and Ethnic Disparities	Program Names
	<p>Use of the member’s first language</p> <p>Cultural awareness and understanding of health disparities among different cultural group</p> <p>Cultural beliefs related to health, illness, medical care and end-of-life issues</p> <p>The need to treat each person with dignity and respect; how to avoid stereotyping</p> <p>Communication protocols for members with limited English proficiency; characteristics of and barriers facing individuals with special health care needs</p> <p>Cultural competency and adult sensitivity training.</p> <p>CSRs receive formal/informal education and training opportunities such as TTY-line assistance for our hearing-impaired members.</p>
Member Communications	<p>We customize member materials and engagement strategies based upon unique cultural needs and identified gaps in care. Our customer services representatives (CSRs) are bilingual/multi-lingual. In compliance with CMS and Florida requirements, all health-related member materials are written at a fourth grade reading level and provided in English and Spanish.</p>
Assisting Members with Limited English Proficiency	<p>Delivering a consistent member experience as part of our “one-stop” service model includes focusing on the quality of the interaction with our members and providing personalized service, including speaking to the member in their first language. Accessible and appropriate linguistic services are the foundation of culturally proficient health care and upon enrollment into our health plans, the member’s need for linguistic and translation services is determined and noted in the member’s record. We currently employ plan advocates who are fluent in Spanish to assist members in Florida. Members also have the ability to select language preference on our public website (www.uhccommunityplan.com)</p>
Assisting Members Who Are Hearing or Sight Impaired	<p>We use the 711 National Telecommunications Relay Service (TRS) TTY line to facilitate communication with hearing impaired members, and print the telephone contact information on all member mailings and marketing materials. When the office is closed, the TRS operator can leave a message on the system requesting a call back. We return those messages the next business day using TRS via 711.</p> <p>Telephonic oral translation services for English and 170 non-English languages through language line</p> <p>Braille or large print for sight-impaired individuals</p>

Experience and Strategies to Educate and Support Providers

When we contract with providers, our goal is to establish a comfortable, high-quality relationship between the primary care physician (PCP) and the member. Our commitment to diversity in recruiting and hiring provides members with care that is culturally appropriate and gives them the opportunity to discuss important health issues in a manner that meets their cultural needs and beliefs. We focus on the following:

Strategy to Address Racial and Ethnic Disparities	Program Names
PCP Recruiting	We recruit a diverse array of providers to the network to care for the equally diverse populations we serve. We strive to enlist providers and supportive services that value diversity and are committed to serving people of racial and ethnic minorities.
Provider Training	We provide ongoing provider training through an online portal (http://www.uhc.com/provider) containing hundreds of Web-based training sessions.
Maintaining Provider Diversity and Supporting Providers	We offer assistance in locating interpreters for providers encountering language barriers when providing services to a member. Providers in need of interpretation services contact our provider services team for assistance in locating an interpreter.
Foreign Language Translation Services	Providers are contractually bound to provide appropriate assistance to members that might have a limited English proficiency or reading skills. We also produce written materials in languages as requested.

Member Materials

We fulfill special requests from members for written information or oral interpretation services in their specific non-English language. For example, written information may be more useful to individuals with a developmental disability or a learning deficit, and large-print formats are available for those members who are sight-impaired; oral interpretation services are useful to all non-English speaking individuals. These requests help us understand the specific need for non-English services to adjust our processes as indicated and to determine the translations (and translators) we have available.

We verify that vital documents and written materials provided to members are culturally appropriate and at a fourth grade reading level.

Translation/Interpreter Services

We are committed to supporting the vision of Healthy People 2020, a nationwide initiative to increase public awareness and understanding of the determinants of health, disease and disability and to identify health improvement priorities. As part of achieving this goal, we use health communication (health literacy) strategies to achieve health care equity. A positive impact on health, health care and health equity includes increasing health literacy skills, providing interpreter services (including verbal translation and verbal interpretation for those with limited English proficiency) and sign language for the hearing impaired. Oral interpretation is available for any language and written information is available in prevalent languages free of charge. This applies to all non-English languages, not just those that the State identifies as prevalent.

We do offer no cost interpreter services to members for medical appointments when needed. The member or PCP may contact us at any time to request an interpreter.

Individuals with Disabilities

We fulfill special requests from members for written information or oral interpretation services in their specific non-English language. For example, written information may be more useful to individuals with a developmental disability or a learning deficit, and large-print formats are available for those members who are sight-impaired; oral interpretation services are useful to all non-English speaking individuals.

We also translate member educational materials and Televox messages into multiple languages, including, Spanish. As needed, we can develop Braille or large print versions of select member materials, or provide audio CDs of materials such as the *Member Handbook*.

Providers identify members who have potential language issues for which alternative communication methods are needed and contact our Member Services Center to arrange appropriate assistance.

Telephone system applications were established to provide members with access to the Telecommunications Relay Services via 711 for hearing impaired services. We notify members and potential members about oral interpretation services through the following methods:

- *Member Handbook*
- PCPs provide assistance to members that might have limited English proficiency or reading skills and sets up a call to Language Line
- Member Services Center: MMA 888-716-8787; FHK 888-216-0015; LTC 800-791-9233 (hearing impaired 711)
- Public website: www.UHCCommunityPlan.com

Tracking/Monitoring Tools

Data on service areas are used in the analysis of culturally appropriate services. Service area data include grievances/appeals, requests for translation services, requests for member information in alternate languages, requests for providers who speak specific languages or who need special services for hearing impaired, etc.

We track the number of incoming calls to the Member Services Center requesting the use of an interpreter via our Language Line and the number of requests for materials written in languages other than English. When we identify a predominant language in more than 10 percent of members or potential enrollment base, we translate core marketing and health information materials into that language using CMS, state requirements, special needs issues and best-practice standards from professional organizations.

Health Literacy

The Institute of Medicine defines health literacy as follows: “The degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions” or value-based health decisions.

We take seriously our role in providing our members with the right information and helping them make the right decisions about their health. To verify that members receive the health education and outreach they need and it is specific to their health and health care needs, we use multiple data sources including HEDIS and claims data to identify members who need outreach and to target the information and assistance that they receive. Personalization strategies that enable us to focus our efforts on the most relevant programs for each member include:

- Health Risk Assessments
- Care Management Programs
- Member Outreach
- Flu Shot Outreach
- Online Education and Information
- Quarterly Member Newsletters
- Community-Specific Outreach Education

Community Outreach

We identify marketing representatives who speak the language and are familiar with the area, to work in and engage the entire community from PCPs, faith-based organizations, community leaders and local politicians. We build out from our core zone until we are deeply rooted into a given target ethnic population.

Monitoring Member Satisfaction

We employ a broad diversity of communication channels to educate and support our members. To validate that we are reaching members and providing the information and communication they want, we monitor member satisfaction through a number of methods which include: (1) annual member satisfaction survey and (2) continuous monitoring of member complaint/grievance data.

Cultural Competency Plan

The Cultural Competency Plan is one of the most important elements in UHCCP-FL's ability to incorporate cultural awareness into the delivery of care to Florida members. The purpose of the cultural competency plan is to make certain that we meet the individual, cultural and linguistically diverse needs of all members; to provide a framework for advancing and valuing diversity within the organization; to meet the needs of the members that are in need of linguistic services and supports; and to enable members to obtain adequate communication support based upon their individual needs.

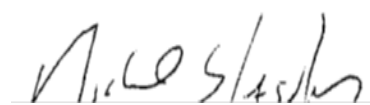
Our local leadership team, led by Michael Lawton, is accountable for creating and maintaining the cultural competency plan along with the infrastructure and a set of business processes that support the achievement of the best possible clinical outcomes and quality of care through culturally proficient care to all Florida members. We incorporate cultural awareness into the

delivery of care to members in many ways, using personal high-touch care and appropriate technological supports. Understanding our membership population enables us to focus organizational attention in the right places, and on the right populations.

The purpose of the cultural competency plan is to make certain that we meet the individual, cultural and linguistically diverse needs of all members; to provide a framework for advancing and valuing diversity within the organization; to meet the needs of the members that are in need of linguistic services and supports; and to enable members to obtain adequate communication support based upon their individual needs.

The objectives of the cultural competency plan are to:

- Identify members that have potential cultural or linguistic needs for which alternate communication methods or care managements approaches may be required
- Use educational materials that are culturally sensitive to the member's race, ethnicity and primary language
- Ascertain that the appropriate processes and tools are available to meet the unique communication and language barriers that may exist in the population at the community level
- Educate providers to recognize the culturally-diverse needs of the population and acknowledge the value of the diverse cultural and linguistic differences in the organization and the populations that they serve



Michael Lawton, President and CEO
Quality Management Committee Co-Chairperson
UnitedHealthcare Community Plan – Florida's

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