



Cultural Competency Strategic Plan

PREFACE

Home State Health (Home State) is committed to establishing multicultural principles and practices throughout its organizational systems of services and programs. That mission is supported by facilitating the process by which Home State can respond to the healthcare needs of all individuals, regardless of their ethnic, cultural, religious beliefs or language.

The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) are established with the principal goal of providing the diverse population of the United States with improved health quality and equity. These standards promote optimizing the health care experience of minority populations primarily through the areas of:

- Governance, Leadership, and Workforce
- Communication and Language Assistance
- Engagement, Continuous Improvement and Accountability

Centene Corporation (Centene) and Home State) are dedicated to supporting and implementing CLAS standards and eliminating health disparities in the Missouri population.

This report outlines Home State's Cultural Competency plan and is designed to help Home State in its effort to continually seek ways to better serve the Medicaid population of Missouri. The following report intends to identify the challenges members face and the current health disparities that plague Missouri. Home State remains devoted to its members and this plan demonstrates Home State's commitment to continually seek ways to better serve its members.

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MISSOURI DEMOGRAPHIC PROFILE

The Home State Demographic profile was updated in April 2016 and is based on the most recent demographic data available. The primary sources for this data were as follows:

Kaiser Family Foundation. State Health Facts <http://kff.org/state-category/health-status/?state=MO>

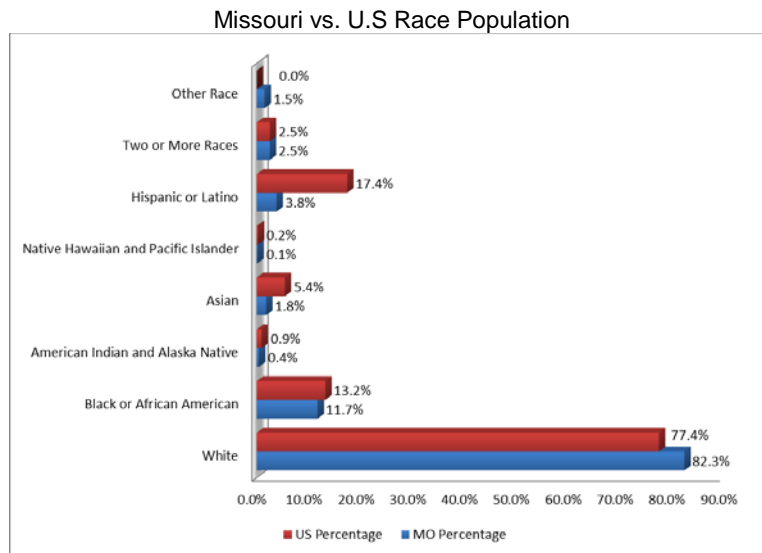
Missouri Census Data Center. (2016). ACS Profiles <http://census.missouri.edu/acs/profiles/>.

Missouri Medicaid Marketplace Overview. <https://www.medicaid.gov/medicaid-chip-program-information/by-state/missouri.html>

U.S Census Bureau, Quick Facts (2014). <http://www.census.gov/quickfacts/table/PST045215/00,29>

U.S. Census Bureau, Small Area Income and Poverty Estimates. <http://www.census.gov/did/www/saipe/index.html>

The state of Missouri consists of a total population of 6,063,589 as of 2014. Of these residents, 51 percent are female and 49 percent are male. 23 percent of the Missouri population is under the age of 18, while 6.1 percent are under 5. Those 65 and over make up 15.4 percent of the population. According to the most recent data available, the Missouri population’s ethnic background compares to the United States as follows:



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Medicaid and CHIP Data

As of December 2015, there are 948,576 people in Missouri currently enrolled in Medicaid and CHIP (Children Health Insurance Program). This is an increase of 12.11% since September of 2013. Children make up 64.08% of the total Medicaid and CHIP population in the state of Missouri (Medicaid.gov).

Of children eligible for CHIP participation, 85.5% are currently enrolled. This is slightly below the U.S average of 88.3%.

In Missouri, Medicaid covers a higher percentage of Black/African Americans (34%) and Hispanics (38%) than Whites (13%).

Economic Demographics

The total Missouri population living in poverty is 908,394, or 15.5%. The Missouri poverty population percentage is equal to the U.S. percentage. However, there is a substantial difference in the poverty level between White Missouri residents, and all other races. Only 7% of the White population is below the poverty level, compared to 31% for Black/African Americans, 24% for Hispanics, and 15% for all other races.

The amount of children living in poverty is also a concern for the State of Missouri, and a focus for Home State. It is noteworthy that 24.7% of all children under the age of 5 in Missouri live in poverty, as well as 21.3% of all Missouri children under 18.

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Health Demographics

This disparity between races in the poverty level seems to translate to health indicators as well. The following graph shows some of the disparities in health status experienced by Missouri citizens.

	White	Black/African American	Hispanic	Other
Infant Mortality Rate-Missouri*	5.4	12.2	6.1	4.2
Infant Mortality Rate U.S.*	5.1	11.3	5.1	N/A
Low Birth weight Percent of All Births-Missouri	7.10%	14.20%	6.70%	N/A
Low Birth weight Percent of All Births-U.S.	7.00%	13.20%	7.10%	N/A
Preterm Birth Rate	9%	14.10%	8.80%	N/A
Missouri Diabetes Deaths**	19.1	36.6	N/A	N/A
U.S. Diabetes Deaths**	19.4	38.8	N/A	21.5
Missouri Heart Disease Deaths**	191.7	238.3	N/A	78.1
U.S. Heart Disease Deaths**	165.9	206.3	N/A	N/A
Overweight and Obesity Rate-Missouri	65.90%	71.30%	60.20%	63.80%
Overweight and Obesity Rate-U.S.	63.20%	72.70%	70.00%	61.50%

*Per 1,000 residents.

**Per 100,000 residents

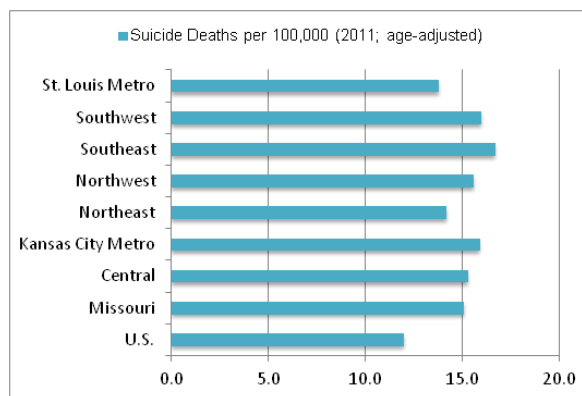
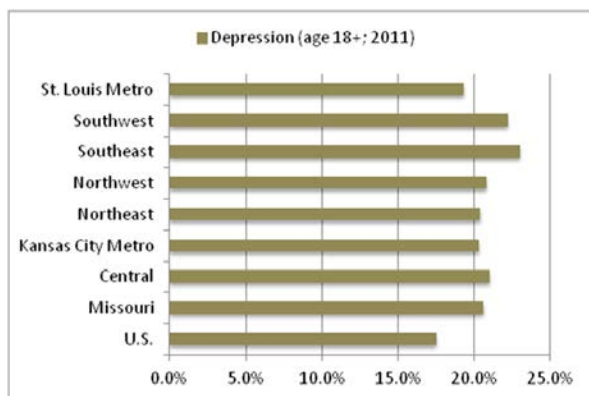
In reviewing the above data, it appears that minority populations are at a much more substantial risk of being affected by negative health events. In Missouri, Black/African Americans are more than twice as likely to be affected by infant mortality, as well as low birth weight. There is also a much higher risk of diabetes and heart disease related death among Black/African Americans than there is in the White population.

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Regional Information:

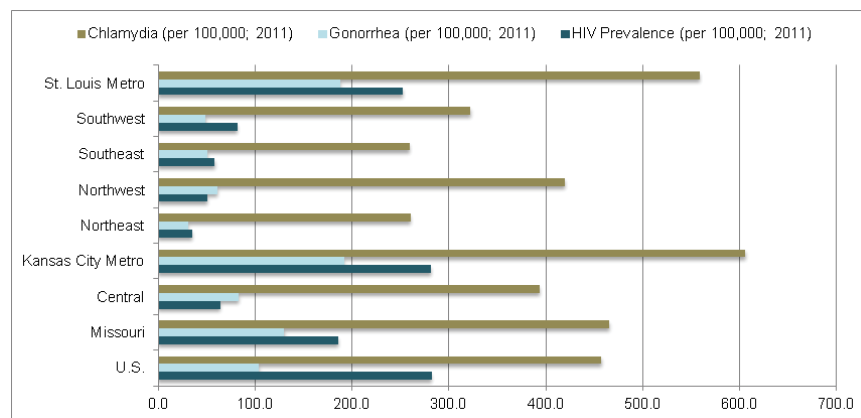
In 2013, The State of Missouri issued its most recent Community Health Needs Assessment. This assessment was mandated by the Patient Protection and Affordable Care Act of 2010 and attempted to determine what the primary areas of concern regarding healthcare were for the communities in Missouri. These communities are the same areas Home State serves, and therefore, these issues are of great importance to Home State as well.

For the State of Missouri as a whole, Depression and Suicide occur at a much higher rate than the United States average and are an area of great concern.



*Graph retrieved from Missouri Community Health Assessment, 2013

Sexually Transmitted Disease is also an area of concern in Missouri's metropolitan areas. As this graph shows, the Metro areas of Kansas City and St. Louis have incredibly high rates of Chlamydia and Gonorrhea when compared to the Missouri and U.S. averages.



*Graph retrieved from Missouri Community Health Assessment, 2013

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Regionally, the state of Missouri reported the following key issues:

St. Louis area:

Access to healthcare services, quality and access to Behavior and Mental Health Services, Health Education and Literacy, Financial Barriers to receiving necessary healthcare, Safety within the community, proper training of Healthcare Professionals, Chronic Conditions, and Lack of Service Coordination.

Springfield, MO area-:

Access to Healthcare, Behavior and Mental Health services availability and quality, and Health Education and Literacy.

Kansas City, MO area:

Access to Healthcare services, Safety within the community, and Nutrition and Obesity.

St. Joseph, MO area:

Behavior and Mental Health services, Health Education and Literacy, and Nutrition and Obesity.

Cape Girardeau area:

Access to healthcare services, Behavior and Mental Health, Financial Barriers to receiving healthcare, Chronic Conditions, Nutrition and Obesity, and Smoking related Cancer.

*Information Retrieved from 2013 Community Health Needs Assessment reports from Hospitals listed in Appendix A.

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Our Response

Home State, as previously stated, is dedicated to meeting and exceeding the needs of Missouri's diverse population. Home State recognizes the disparities in the population and has programs in place to help combat these negative trends. This section will further discuss the programs that are used to target these trends.

Infant Mortality and Low Birth Weight

Start Smart for Your Baby is an award winning program designed to reach women early in their pregnancy. In infants, there tends to be a distinct disparity between races and outcomes such as mortality rate, low birth weight, and preterm birth rate. Start Smart begins with early outreach to pregnant mothers and provides incentives for making and keeping prenatal doctor visits. Start Smart provides access to an on call staff, home visits, and can arrange transportation as well. This program is unique to Home State and is one of its signature programs.



Home State also offers a High Risk Pregnancy Program that focuses on mothers who have had premature births in the past. This program is aimed at doing everything possible to help these mothers deliver healthy babies. It is the belief of Home State that this program is a great step forward in eliminating the disparity between races in regards to low birth weight and preterm birth rate.

Case Management and Disease Management Programs

In regards to some of the other disparities mentioned, such as STD's, Diabetes, and Obesity; Home State offers members with these health issues Case and Disease Management services. The Case and Disease Management teams are able to provide services such as scheduling physician visits (in some instances home visits are provided), arranging transportation, and can coordinate services between providers. These teams also offer access to health coaches that can provide training to the member on how to manage their health. This includes information on medications, tests available, when to contact their primary care physician and management programs. Home State has also designed specific management programs aimed at childhood obesity, and weight management.

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Suicide and Depression

As before mentioned, Suicide and Depression are great areas of concern for the State of Missouri. With Missouri rates well above the national level, it is important to take a targeted approach to these sensitive issues. Home State members have access to an on-call Missouri licensed behavioral health professional 24/7 through our crisis line. Members can access this service by calling Home State's single access point, with a live representative 24/7. Members needing behavioral health support are warm transferred to a behavioral health professional. Additionally Home State targets depression at its start by performing depression and postpartum depression screening. Case management services are also offered to those suffering from depression and behavior health issues.

Access to Healthcare Services

Access to healthcare services was another consistent area of concern throughout Missouri. Home State does not require prior authorization for emergent services, allowing for quick service in times of need. Transportation services are also made easily available to those in need, ensuring transportation does not become a barrier to receiving necessary care. Also, in certain incidences, Case Management may be offered to improve coordination of care, and therefore improving members' access to healthcare services. Additionally, Home State aims to improve access to healthcare by offering a Find a Provider portal on the Home State website. Through this portal, members can easily find providers in a wide range of specialties near them. This portal ensures that Home State's members can easily find a doctor that suits their needs. The portal will allow them to see the doctor's hours, credentials, specialty, contact information and location.

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Home State's CLAS Objectives

As part of Home State's efforts to serve the Missouri Medicaid population, Home State has maintained the CLAS standards as a critical part of its program. Standards are consistently reviewed to ensure they are being met and Home State has strived to meet and look for opportunities for improvement. The following discusses the CLAS standards, and the actions being taken to address each standard.

Standard 1:

Ensure that members receive from staff and providers, effective, understandable, and respectful care that is provided in a manner compatible with their cultural health beliefs and practices and preferred language.

Actions Taken:

- Language line access, TDD access, in addition, the 24/7 nursing advice linestaffed with bilingual nurses on a 24-hour basis.
- All member materials are printed in English and Spanish at the state required 6th grade reading level.
- Member Rights are published in the member handbook.
- Member materials are available in large print and braille, upon request.
- Instructions on how to report member greivences and quality of care concerns is outlined in the member handbook.
- Training on Cultural Competency is provided regularly to Home State staff.
- Cultural Competency is included in the Home State provider orientations as wells as in the provider manual.
- Home State issues the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey to members and providers on an annual basis to gauge member and provider satisfaction.
- Home State provides satisfaction surveys to members whom have had contact with our outreach teams, members who were active in case management and members who have interactions with our customer service team to ensure we are addressing members needs. This survey allows for members to leave comments; these comments are immediately escalated to Home State leadership to be addressed in the moment.

Standard 2:

Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.

Actions Taken:

- Home State leadership promotes the importance of CLAS standards through daily interactions as well as training opportunities for the company.
- Diversity training opportunities will continue to be built throughout 2016.

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- Home State has a diverse Board of Directors from both urban and rural Missouri.

Standard 3:

Implement strategies to recruit, retain, and promote, at all levels of the organization, a diverse staff and leadership that reflect the demographics of the regions we serve.

Actions Taken:

- Home State promotes diversity within its staff through consistent and dedicated recruitment efforts.
- Home State maintains strict policies and procedures prohibiting discrimination in hiring in any form.
- Call center positions include bilingual qualifications. Currently, there are bilingual call center staff that service Home State in the Georgia, and Arizona call centers as well as the 24/7 nursing advice line.

Standard 4:

Ensure that staff, at all levels and across all disciplines, receive ongoing education and training in culturally and linguistically appropriate service delivery.

Actions Taken:

- Home State makes Cultural Competency awareness a central part of our staff education.
- Multiple Cultural Competency training events and educational opportunities are provided on an ongoing basis. For example, in October 2015 all call center employees visited the International Institute of St. Louis. Additionally, in 2015 2014 Home State provided Poverty Training to its employees.
- Home State requires that every employee attend at least one Cultural Competency training event per year. Training is tracked and monitored by the Home State Compliance team.

Standard 5:

Offer and provide language assistance services, including bilingual staff and interpreter services, at no cost to each patient/consumer with limited English proficiency at all points of contact, in a timely manner during all hours of operation.

Actions Taken:

- Member materials are available in both English and Spanish. In addition, translation of materials into other languages is available.
- Home State contracts with interpreter services to address the needs of members who speak other languages.

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Standard 6:

Provide to members, in their preferred language, both verbal offers and written notices, informing them of their right to receive language assistance services.

Actions Taken:

- Marketing and member materials are provided in English, Spanish and a language block containing Bosnian.. Additionally, translation into other languages is available upon request.
- Member mailings include a required language block that provides information on how to request translation services.
- All call center employees are trained to assist members in accessing translation services when needed.

Standard 7:

Assure the competence of language assistance provided to limited English proficient patients/consumers by interpreters and bilingual staff. Family and friends should not be used to provide interpretation services (except on request by the patient/consumer).

Actions Taken:

- Home State contracts with interpreters to provide telephonic, video and in-person interpreter services for members. Interpreters will attend member appointments as well as phone call and video interpretations, when needed.
- Home State receives translation certificates for all printed materials in languages other than English.

Standard 8:

Make available easily-understood member-related materials and post signage in the languages of the commonly encountered groups and/or groups represented in the regions covered by Home State.

Actions Taken:

- Home State posts signage in commonly encountered languages.
- All member materials are written at a 6th Grade reading level as required by the State of Missouri.

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Standard 9:

Develop, implement, and promote a written strategic plan that outlines clear goals, policies, operational plans, and management accountability/oversight mechanisms to provide culturally and linguistically appropriate services.

Actions Taken:

- Home State's Cultural Competency plan has been developed in order to meet this objective and is posted on the Home State website.
- Home State's provider manual contains a "Cultural Competency Overview" advising providers about the importance of providing culturally competent service to members.
- Home State has the following policies and procedures in place: CC.HUMR.32, Non-Discrimination and CC.HR.03, Minority Recruiting.

Standard 10:

Conduct initial and ongoing organizational self-assessments of CLAS-related activities and are encouraged to integrate cultural and linguistic competence-related measures into their internal audits, performance improvement programs, patient satisfaction assessments, and outcomes-based evaluations.

Actions Taken:

- Home State performs an annual assessment of CLAS related activities.
- Ethnicity, gender and ability to communicate in different languages is included in provider data/surveys.
- Home State 's annual CAHPS survey is available in both English and Spanish.

Standard 11:

Keep an up to date health record of Home State's member's race, ethnicity and spoken and written language and integrate this data into Home State's information systems.

Actions Taken:

- Home State is able to pull limited member language information from the daily member files and is also reviewing the translation services used. We will continue to monitor these services to ensure members are aware of the services and identify additional opportunities for outreach. Member information/data is documented and assessed in the Home State systems.

Standard 12:

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Maintain a current demographic, cultural, and epidemiological profile of the community as well as a needs assessment to accurately plan for and implement services that respond to the cultural and linguistic needs of the communities we serve.

Actions Taken:

- GeoAccess software is utilized to analyze the geographic scope of Home State's provider network to ensure that coverage needs are met.
- Languages spoken by providers are found on the Find a Provider portal.

Standard 13:

Develop participatory, collaborative partnerships with communities and utilize a variety of formal and informal mechanisms to facilitate community and patient/consumer involvement in designing and implementing CLAS-related activities.

Actions Taken:

- Home State is involved in and maintains relationships with various community organizations. Some of these include the following:
 - MO HealthNet Consumer Advisory Council
 - Starkloff Institute
 - Community Partner Council
 - Black Healthcare Coalition
 - Casa de Salud
 - St. Louis Clergy Coalition
 - National Urban League
 - National Assessment of Community Health Centers
 - National Council of La Raza
- In addition to these groups, Home State also regularly participates in the community with events such as:
 - The Adopt a School initiative which presents wellness programs designed to engage children and promote healthy practices
 - Home State has participated in 110 Back to School and Health Fair events all across the State of Missouri since 2012
 - Have a Healthy Baby Community Baby Shower in Kansas City, MO
 - Central Missouri Community Action Baby Shower

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Standard 14:

Ensure that the conflict and grievance resolution processes are culturally and linguistically sensitive and capable of identifying, preventing, and resolving cross-cultural grievance and appeals by the member.

Actions Taken:

- All written communications relating to the Grievance and Appeal process are written in English and contain a Spanish and Bosnian language block.
- Additionally, all communications can be translated into additional languages upon request.

Standard 15:

Regularly make information available to the public about Home State's progress and successful innovations in implementing culturally and linguistically appropriate services and inform communities about the availability of this information.

Actions Taken:

- Home State regularly partners with external community resources and has provided press releases related to programs, innovations and success stories.
- Home State's provider manual contains a "Cultural Competency Overview" section advising providers about the importance of providing culturally competent service to members.
- The Cultural Competency Strategic Plan is posted on the Home State website for providers.
- Home State sends an annual newsletter to providers that discusses Cultural Competency.
- Home State performs an annual evaluation of its compliance with the CLAS standards.
- Policies are presented during member advisory committees.

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Appendix

Community Health Needs Assessments

The Regional needs information was retrieved and compiled from the following Hospitals' and State of Missouri Community Health Needs Assessments:

St. Louis Area- For the Saint Louis area, the Barnes Jewish Hospital 2013 Community Needs Assessment was used. This report can be found at <http://www.barnesjewish.org/About-Us/Community-Benefit/Community-Health-Needs-Assessment>

Springfield, MO- The Springfield area needs were retrieved from the Mercy Hospital of Springfield's 2012 Community Health Needs Assessment. This assessment can be found at <https://www.mercy.net/sites/default/files/files/springfield-chna-11576.pdf>

Kansas City, MO- The Children's Mercy Hospital of Kansas City's 2013 Community Needs Assessment was used for this area. This assessment can be found at https://www.childrensmercy.org/About_Us/About_Childrens_Mercy/Community_Health_Needs_Assessment/Children_s_Mercy_Hospital_Assessment/

St. Joseph, MO- St. Joseph, MO information was retrieved from the 2013 Community Health Needs Assessment of the Mosaic Life Care Center. This assessment can be found at <https://www.mymosaiclifecare.org/contentassets/560700dc2aa34098b640da6faad6bdb2/chna-stjoseph-2013-2.pdf>

Cape Girardeau, MO Area- For the Cape Girardeau area, the 2013 Community Health Needs Assessments of SE Health were used. These assessments can be accessed at <https://www.sehealth.org/about/community-health>