

▶ Developing the Business Case for Culturally and Linguistically Appropriate Services in Health Care

American Public Health Association
November 5, 2007

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A project conducted by the Alliance of Community Health Plans with support from the Merck Company Foundation

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▶ ACHP Members



HIP



Security Health Plan.



- Capital Health Plan** (Tallahassee, FL)
- CareOregon** (Portland, OR)
- Fallon Community Health Plan** (Worcester, MA)
- Geisinger Health Plan** (Danville, PA)
- Group Health Cooperative** (Seattle, WA)
- Group Health Cooperative** (Madison, WI)
- HealthPartners** (Minneapolis, MN)
- HIP Health Plan of New York** (New York, NY)
- Independent Health** (Buffalo, NY)
- Kaiser Foundation Health Plans and the Permanente Federation** (Oakland, CA)
- Security Health Plan** (Marshfield, WI)
- UCare Minnesota** (Minneapolis, MN)
- UPMC Health Plan** (Pittsburgh, PA)

New Members as of January 1, 2008

- Priority Health* (Grand Rapids, MI)
- Tufts Health Plan* (Watertown, MA)



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▶ ACHP Mission

Mission:

ACHP and its members improve the health of the communities we serve and actively lead the transformation of health care so that it is safe, effective, patient-centered, timely, efficient and equitable.

▶ Background and History of Project

- 2000—Office of Minority Health, HHS Publishes National Standards for CLAS
- 2001—Centers for Medicare and Medicaid Services (CMS) commissions development of guides for Medicare + Choice Organizations (now Medicare Advantage plans) on how to develop and implement CLAS
- CMS and School of Public Health, UNC Chapel Hill sponsor “Best Practices in CLAS” Conference
- CMS and UNC, with additional funding from OMH and Robert Wood Johnson Foundation conduct workshops on CLAS project development and implementation

▶ Project Aims—and Not

- Add to the literature some information tools for organizations that are contemplating implementation of CLAS related projects.
- Identify instances where health care organizations had achieved business benefits from implementation of projects related to any of the National CLAS Standards
- Identify and draw on demonstrated successes
- **Not** about trying to prove CLAS projects will reduce disparities
- **Not** about trying to convince people to pursue CLAS

▶ Major Findings and Disappointments

- Increased Market Share
- Reductions in language interpretation costs
- Increased patient and provider satisfaction
- Reduced communication delays yields efficiency
- Reduced hospital LOS and more prompt discharge

Yet to accomplish

- Demonstrate dollar value of culturally competent physician office visit
- Economic benefits of collecting racial and ethnic data

Many organizations implementing CLAS had no data on benefits—because they did not care about the bottom line implications.

▶ Project Methods

- Assessment to provide information about CLAS projects that produced a business benefit
- Advisory committee of health plan and other experts in CLAS activities to help guide the process
- Review of existing literature including peer-reviewed and consumer documents
- Comprehensive telephone and in-person interviews were conducted as well.
- Forty-two projects were contacted; 13 projects selected studied and highlighted in this report

Project Participants

Individual Case Studies

- Bilingual Employee Incentive Program
 - University of New Mexico Hospitals
- Bilingual Deaf Access Program
 - University of New Mexico Hospitals
- Family-Centered Maternity Suites
 - Holy Cross Hospital
- Group Discharge Classes in Spanish
 - Holy Cross Hospital
- Health Care Interpreter Certificate Program
 - Kaiser Permanente
- Multilingual Health Resource Exchange Program
 - UCare Minnesota

▶ Project Participants

- Qualified Bilingual Staff Model
 - Kaiser Permanente
- Remote Video/Voice Medical Interpretations Project
 - Contra Costa Health Services
- Staff Volunteer Interpretation Program
 - Holy Cross Hospital
- TeleSalud
 - Molina Healthcare
- Dual Head Set and Hand Set Interpretation
 - L.A. Care Health Plan
- Training for Interpreters in a Health Care Setting
 - L.A. Care Health Plan
- Web Repository
 - L.A. Care Health Plan

▶ Business Benefits Achieved

- *Increased market share among limited English proficient patients*
 - *The Young Children's Health Center (YCHC)*
 - o YCHC has become the provider of choice for this population and has increased its insured patient volume from 5 to 70.
 - *Holy Cross Hospital*
 - o Maternity suites opened in fiscal 2004 and since that time deliveries increased from 7,300 to 9,300 annually.

▶ Business Benefits Achieved

- *Substantial reductions in outsourced language interpretation services and subsequent savings in related costs*
 - **Contra Costa Health Services** reduce its per minute interpretation costs from \$1.69 per minute for contracted services to \$.75 per minute through a project with remote video interpretation.
 - **LA Care** reduced reliance on expensive contract interpretation services, reduced the reliance on friends and family members for interpretation, as well as decreasing the use of gesturing and other ineffective communication methods.

▶ Business Benefits Achieved

Substantial reductions in outsourced language interpretation services and subsequent savings in related costs (cont.)

– ***Holy Cross Hospital*** achieved significant cost savings by avoiding additional costs for contract interpretation services ranging from \$320,000 to \$190,000 depending on the circumstances.

– ***The Young Children's Health Center (YCHC)*** estimates that trained in-house staff interpreters have saved the organization more than \$50,000 in interpretation costs after adjusting for salary increases.

▶ Business Benefits Achieved

- *Increased patient and provider satisfaction*
 - ***Kaiser Permanente*** found that in addition to creating a large cohort of trained interpreters, one of the benefits of their Health Care Interpreter Certificate Program was that providers preferred the trained interpreters as opposed to family members or bilingual staff.
 - A recent survey of site users of ***UCare Minnesota's*** Multilingual Health Resource Exchange Program shows that 85.5% found the translated material they were looking for and 98.8% of those surveyed felt that the Exchange site is easy to use.

▶ Business Benefits Achieved

- *More efficient use of staff time by reducing communication delays between patients and providers*
 - ***Contra Costa Health Services'*** Remote Video/Voice Medical Interpretation Project has increased the overall effectiveness and improved the process for interpretation services
 - o Number of patients served per day increased from 10-15 to serving 25-30.
 - ***The Young Children's Health Center (YCHC)*** using trained in-house staff for interpretation has resulted in improvements in the scheduling and process of interpretation. Delays associated with waiting for an interpreter have been largely eliminated.

▶ Business Benefits Achieved

- *Cost-savings resulting from shorter hospital stays and more prompt and efficient patient discharges*
 - *Holy Cross Hospital* reduced the wait time for an interpreter and as a result has improved the discharge process by creating group discharge classes for its large Latina population in the private birthing suites.
 - o Discharge an additional 265 women annually.
 - o Discharge classes are more informative and thorough than individual discharges.

▶ Business Benefits Achieved

- *Cost-savings resulting from shorter hospital stays and more prompt and efficient patient discharges (cont.)*
 - *Molina Health Care's* TeleSalud project, emergency room usage for Spanish-speaking enrollees who had access to TeleSalud
 - Resulting in a usage rate for TeleSalud at only 88 percent of the rate for those without such access.

▶ Major Themes

- **Minority and LEP Consumers are a Business Market.**
- **Cost-effective Spending Leads to Subsequent Savings.**
- **Government Requirements Compel Organizations to Take on CLAS.**
- **CLAS is the Right Thing to Do.**

► Findings and Lessons Learned

- Linguistically appropriate services may be the first logical step for successful implementation of the CLAS standards
- Barriers to CLAS implementation (real and perceived) need to be identified and overcome
- Workforce and bilingual employee development is key to implementing CLAS
- Exploration and integration of community partnerships and resources is important for successful CLAS interventions

▶ Findings and Lessons Learned

- Technology can be useful in supporting a system for serving LEP populations
- Performance measurement should be a component of any CLAS project plan
- There are many existing resources that provide information on how to implement CLAS in health care settings.

▶ Project Related Resources

The full **Final Report** as well as individual **Case Studies** on each project described in the report are at: http://www.achp.org/page.asp?page_id=1059

The Final Report contains additional resources and links related to design and implementation of projects related to the CLAS Standards.

The Case Studies provide contact information for individuals at each participating health care organization.

▶ Questions?

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