



# Cultural and Linguistics Competency Training

LIBERTY Dental Plan

# Objective

- Know and understand key terms associated with cultural competency
- Understand the impact of CLAS on healthcare
- Know the main components of LIBERTY's Cultural Competency Program
- Recognize and Identify the diverse needs of our LIBERTY audience
- Know how to bridge linguistic and cultural gaps to members
- Understand the importance of giving all members equal access to dental care
- Know the main components of LIBERTY's Language Assistance Program
- Know how to access language assistance services LIBERTY offers
- Understand the member's right and responsibilities

# Culturally and Linguistically Appropriate Service (CLAS)

## **Principal Standard:**

*Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.*

The Cultural and Linguistic Competency Program incorporates the National CLAS Standards into our operations to ensure the utmost quality of care and service is being provided to members.

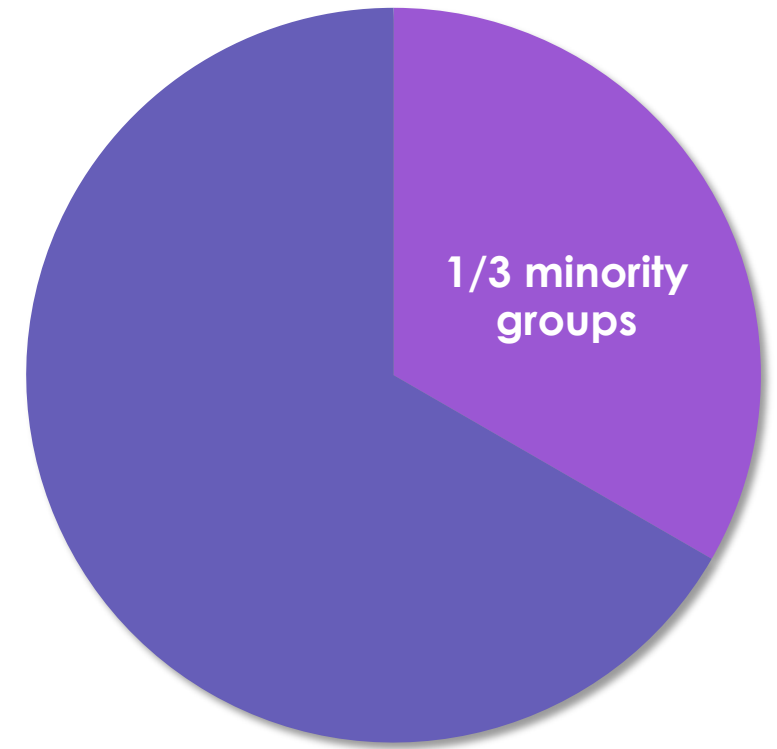
LIBERTY shall monitor, evaluate, and take effective action to address any needed improvement in the delivery of culturally and linguistically appropriate services.

# Section 1

Embracing  
Different Cultures  
& Languages

# Diversity in the USA

- Minorities now comprise roughly one-third of the U.S. population
- More than half of all the children in the U.S. will be minorities by 2023
- It is anticipated that these groups will be in the majority by 2042



■ Minorities ■ Non-Minorities

# What is Culture?

Refers to the integrated patterns of human behavior that include the languages, thoughts, actions, customs, beliefs, values, and institutions that unite a group of people. Culture includes:

- Ethnicity
- Language
- Education
- Religion/beliefs
- Family and community
- Race, age, and gender
- Immigration status
- Socioeconomic status





# What is Cultural Competency?

**The capability of effectively dealing with people from different cultures.**

## **Elements of Cultural Competency:**

- Awareness of one's own culture

- Understanding the dynamics of differences

- Awareness and acceptance of differences

- Development and application of cultural knowledge

- Celebration of diversity

# What is Linguistic Competency?



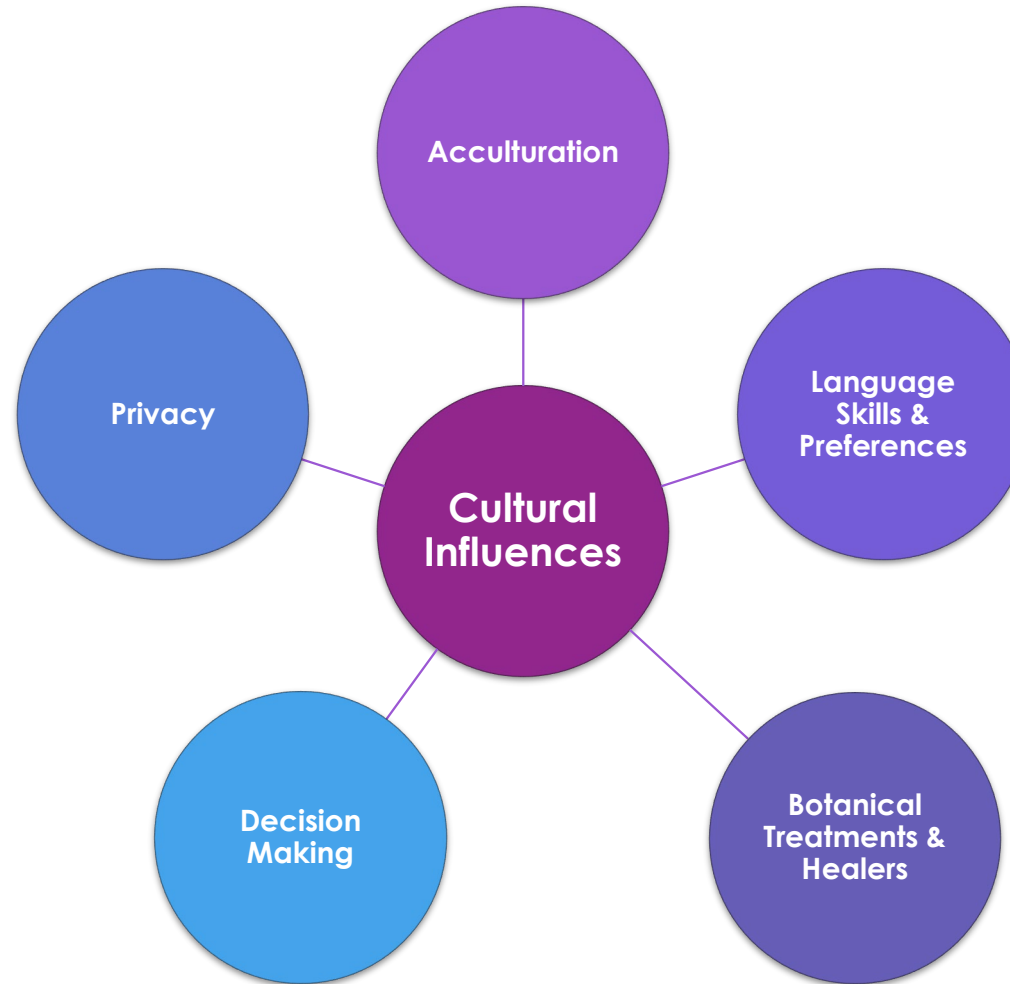
**The ability to communicate effectively with patients at every point of contact.**

**Linguistic competency is important when working with:**

- Patients with limited English proficiency (LEP)
- Patients with low or no literacy skills
- Patients with disabilities
- Patients who are deaf or hard-of hearing



# Cultural Influences



# Key Terms and Concepts

## **Cultural and Linguistic Competency:**

- Is a set of behaviors, attitudes, and policies that come together to enable effective work in cross-cultural situations.

## **Cultural Sensitivity:**

- Refers to the knowledge that cultural differences and similarities exist, without assigning them values, i.e. better or worse, right or wrong.

## **Limited English Proficiency (LEP):**

- Refers to individuals who do not speak English as their native language and have a limited ability to read, speak, or understand English.

## **Language Assistance:**

- Refers to services that must be made available to each person with LEP and are to be provided by bilingual staff that can communicate directly with patients/consumers in their preferred language.

## **Culture and Language:**

- Shapes the understanding of oral and general health, shapes our health behaviors and affects everything.



# Section 2

Understanding and  
Acknowledging  
Health Disparities



# What is an Oral Health Disparity?

- In general, health disparities are closely linked with social, economic and/or environmental disadvantages
- Also referred to as:
  - Health inequalities
  - Health inequities

# Who it Affects

- Health disparities negatively affect groups who have more obstacles to health care based on characteristic such as, but not limited to:
  - Racial or Ethnic group
  - Religion
  - Socioeconomic status
  - Gender
  - Age
  - Mental Health
  - Cognitive, sensory or physical disability
  - Sexual orientation or gender identity
  - Geographic location

# Social Determinants of Health



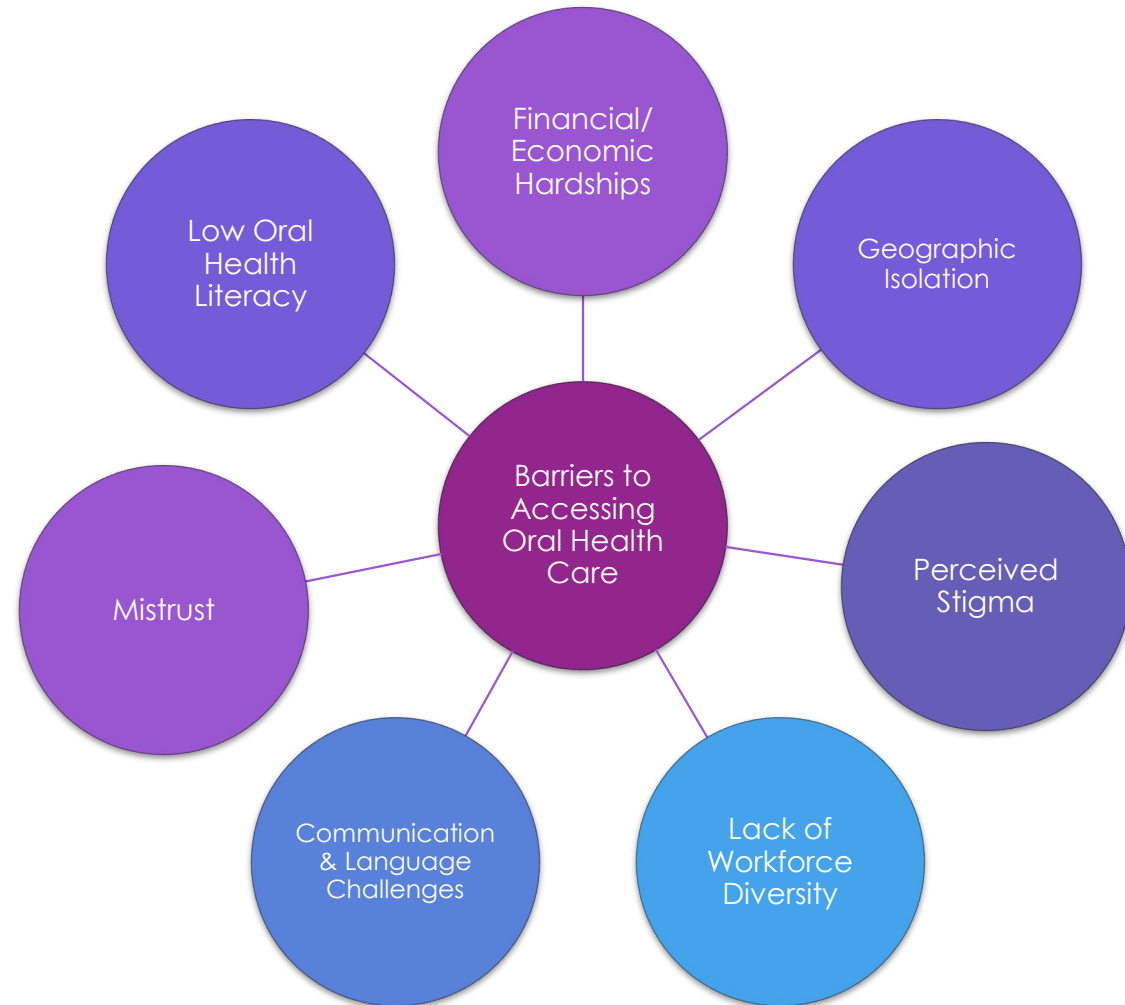
Social determinants can have a major effect on people's health, well-being, and quality of life.

Social determinants can include:

- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Access to nutritious foods and physical activity opportunities
- Polluted air and water
- Language and literacy skills
- The availability of health services

# Access to Oral Health Care

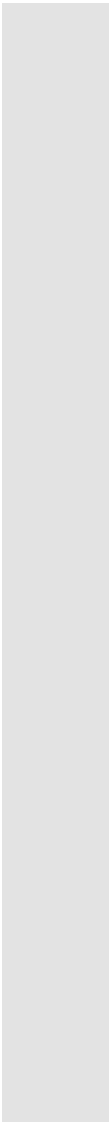
Access is one of the key factors in oral health disparities.





# Section 3

Cultural &  
Linguistic  
Competence  
Impact on Health  
Care





# Culture Impacts Every Health Care Encounter

Culture defines health care expectations

- Who provides treatment
- What is considered a health problem
- What type of treatment
- Where is care sought
- How symptoms are expressed
- How rights and protections are understood



# The National CLAS Standards Impact on Health Care

- Culturally and Linguistically Appropriate Services (CLAS) has 15 National CLAS Standards
- Healthcare organizations, nationally, have adopted their standards as part of their operation framework

Example of a CLAS Standard:

***Standard 4:***

*Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis*

- Being aware of member's cultural background
- Ensure members have access to available service such as:
  - Written materials suited for them (large print or in language the member speaks)
  - Telephonic Interpretation Service at all points of service
  - TTY line is available for the hearing impaired. The number can be found on their benefit card
- Requiring providers to complete and understand Cultural Competency Training

## Demonstrating Cultural Competence

# Results of Cultural and Linguistic Competence

Being Cultural and Linguistically competent can help:

- Decrease clinical errors and malpractice risks
- Improve quality of care
- Improve safety and adherence
- Reduce administrative burdens
- Decrease risk of liability
- Reduce oral health disparities
- Save time and money
- Increase provider and member satisfaction



# Section 4

Communicating  
with Various  
Diverse  
Communities and  
Populations



# Clear Communication in Health Care

Various cultures are diverse and different, as a result, communication methods can also vary.

Recognize and acknowledge how members communicate:

- Verbal
  - Different language
  - Colloquial slang
- Non-verbal
  - Paralinguistic cues
    - Tone
    - Volume
  - Body Language
    - Face
    - Body movement
    - Posture
    - Gesture
    - Eye contact
  - Appropriate space
- Written

# LGBTQ and Health Disparities within the Community

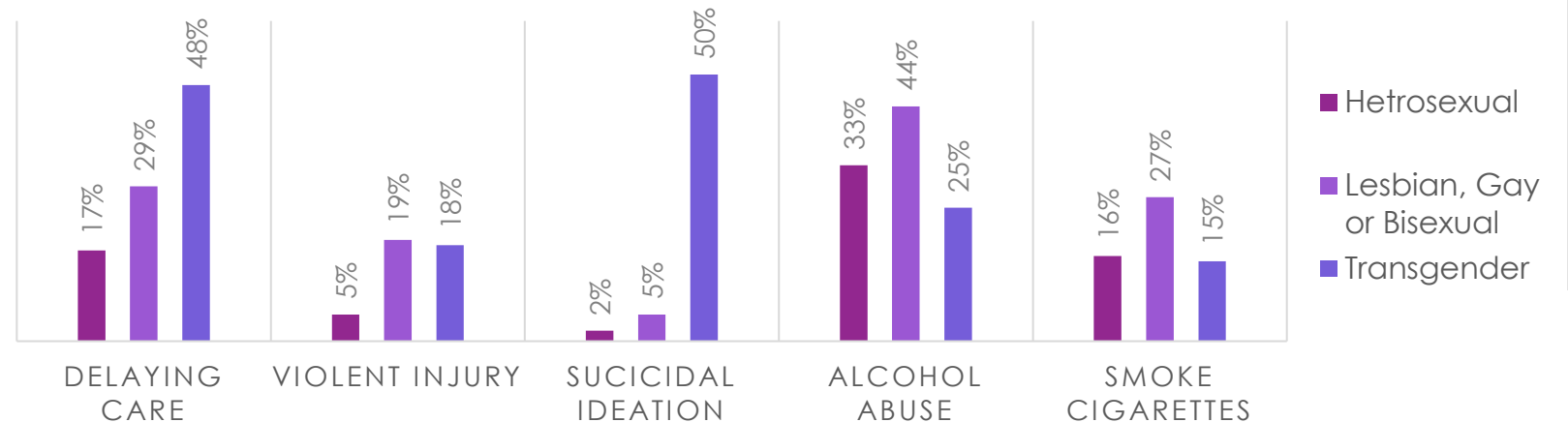


The LGBTQ community comprises about roughly 4% of the US population.

Tips on communication with person who identify with the LGBTQ community:

- Avoid assumptions or labels
- Language matters: strive for neutral terms on forms and during the clinical encounter
- If you are unsure about something, ask in an open and respectful manner

Being cultural aware and sensitive to those of this community will lead to quality care and a reduce in delayed treatment.



# Refugee & Immigrant Members



By the end of the 2021 Fiscal Year, the U.S. is expecting to receive more than 300,000 asylum claimants and refugees

Refugees and Immigrants may:

- Not be familiar with the U.S. health care system
- Experience illness related to life changes
- Practice spiritual and botanic healing or treatments before seeking U.S. medical advice

Tips for communicating:

- Try to make them feel comfortable
- Be mindful of religion and culture
- Be mindful of literacy levels
- Be sensitive to cultural groups' feelings about disclosing information and talking with public health agencies and officials



# American Indian/ Alaskan Native (AI/AN) Population

As of 2020, there is an estimated total of 574 federally recognized tribes and 1.1% (37 million people) accounted for in the U.S.

Keep in Mind...	Do's and Don'ts
Each tribal group has their own customs, language, and cultural practices	<ul style="list-style-type: none"><li>• Be respectful</li><li>• Do not make cultural assumptions</li><li>• Do not ask questions based on cultural assumptions</li></ul>
AI/AN people communicate a lot through non-verbal gestures	<ul style="list-style-type: none"><li>• Carefully observe non-verbal behavior</li><li>• Some AI/AN people may look down in order to show respect</li><li>• A gentle handshake is often seen as a sign of respect and not weakness</li></ul>
Most Alaskan Natives do not refer to themselves as "Indians"	<ul style="list-style-type: none"><li>• Most AI/AN people will identify the name of their tribe/village and/or their location of their traditional or family homeland</li></ul>

Healthcare obstacles for the AI/AN community:

- Tobacco
- Diabetes
- Distance/shortage of participating providers
- Lack of information/uninformed of available options
- Apprehensive sentiments towards healthcare

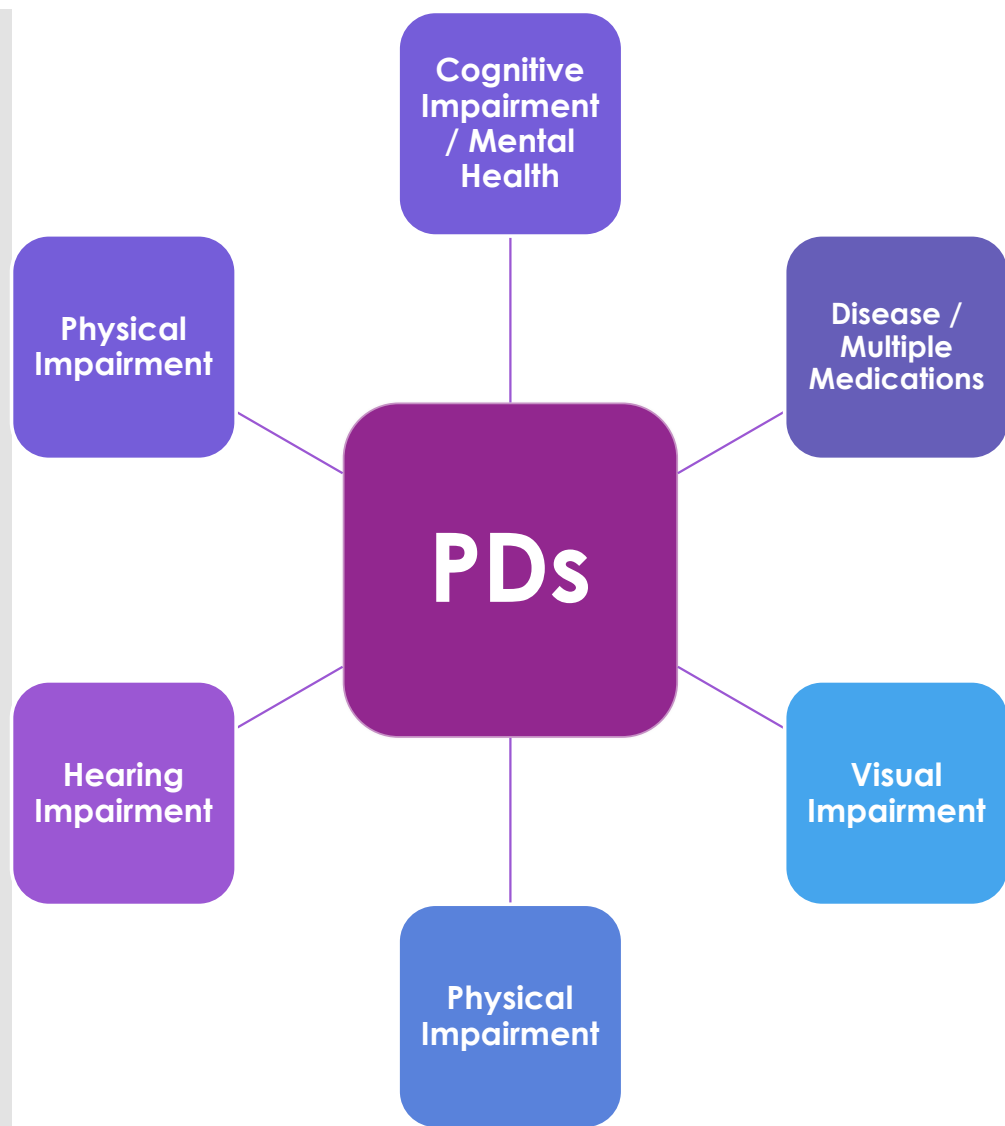
# Seniors

Issues senior members may be facing:

- Hearing impairments
- Visual impairments
- Cognitive impairments
- Age related illness
- Non-age related illness
- Structural or neurological issues
- Medicinal effects

## How to Communicate Effectively

Be Respectful	<ul style="list-style-type: none"><li>○ Use the proper form of address<ul style="list-style-type: none"><li>• Mr., Mrs., Miss</li><li>• Preferred title</li></ul></li><li>○ Do not condescend or use condescending language</li><li>○ Do not rush the member</li><li>○ Avoid interrupting as this may defer members from revealing their concerns</li></ul>
Be Patient	<ul style="list-style-type: none"><li>○ Understand that some members may be suffering from cognitive impairments that may be related to age and/or illness.</li></ul>
Ask Questions	<ul style="list-style-type: none"><li>○ Do not make assumptions about what the member may want or need<ul style="list-style-type: none"><li>• Some members may be shy or intimidated</li></ul></li></ul>
Ensure Communication	<ul style="list-style-type: none"><li>○ Make sure the member can hear you<ul style="list-style-type: none"><li>• Talk slowly, clearly, and in a normal tone</li><li>• Face member while speaking</li><li>• Reduce background noise</li></ul></li><li>○ Use active listening skills</li></ul>
Take Notes	<ul style="list-style-type: none"><li>○ Older members may have a harder time remembering everything discussed during the appointment<ul style="list-style-type: none"><li>• Write simple and clear notes</li></ul></li></ul>



# Persons with Disabilities (PDs)

What the Member may be thinking...	How we can respond...
I have a medical condition that affects my thinking/ understanding (e.g., pain, stroke, hypertension, diabetes, UTI, pneumonia)	<b>Pay attention and be aware</b> <ul style="list-style-type: none"><li>• Slow down</li><li>• Speak clearly</li><li>• Use plain language</li><li>• Recommend assistive listening devices</li></ul>
My medication can affect my cognition (e.g., pain medication, anti-depressants, drug interactions)	<b>Obtain information</b> through health history

# Assisting members who have a Hearing-impairment

## Persons with hearing impairment range between different levels:

- Mild
- Moderate
- Severe
- Profound

If you are having difficulties communicating...

Do:

- Maintain eye contact
- Speak naturally
- Do repeat or try to say it differently

Don't

- Yell
- Cover your face
- Be dismissive or exclusive



# Assisting Members who have a Visual- Impairment

## Common Diagnosis

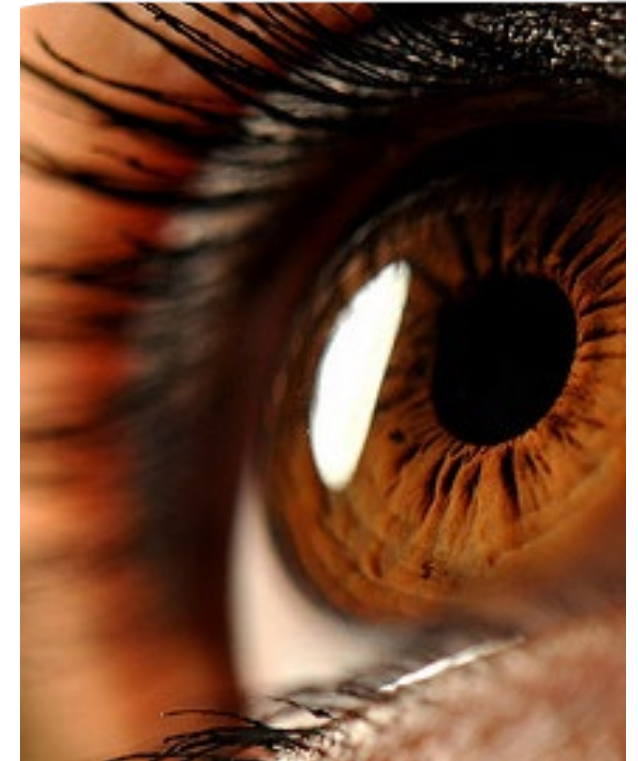
- Macular Degeneration
- Diabetic Retinopathy
- Cataract and Glaucoma

### Do:

- Verbalize where things are (e.g., “It’s on your left”)
- Identify yourself when someone visually impaired enters a room or when you are approaching the person
- Direct questions or comments directly to the person who is blind or visually impaired

### Do not:

- Point to objects
- Speak in an exaggeratedly loud voice
- Be afraid to ask a person if he or she needs assistance; if the answer is no, respect his or her wishes



# Assisting Members who have Speech- Disabilities

## **Many Types:**

- Learning disability
- Deafness
- Cerebral Palsy

## **People with speech disabilities may use:**

- Their own voice
- Letter board

## **If you do not understand...**

- **Do:**
  - Speak slowly and clearly
  - Offer to repeat or spell it
  - Offer a paper and pen
  - Be patient
- **Do not:**
  - Shout
  - Finish a person's sentence or thoughts





# Assisting members who have Learning-Disabilities

Forms of learning disabilities:

- Dyslexia
- Auditory processing
- Information processing

Do:

- Read things out loud
- Speak slowly
- Allow time – be patient

Don't:

- Ask to “hurry up”

# Assisting Members who have Service Animals

## **Allowed:**

- Dogs
- Always under the person's control
- Cannot impose a threat

## **Typically not allowed:**

- Large animals, rodents & reptiles 'Therapy' or 'comfort' animals

## **Do:**

- Ask if the animal is a service animal, and if it helps with a disability

## **Don't:**

- Deny a member with a service animal entrance inside the clinics or offices
- Pet any service animal or give it a treat without asking first





# Disability Etiquette

- **Person-First Language**

- Show respect by putting the person before the disability
- The disability or the equipment they use is a descriptor
- People with a disability are more like people without disabilities than different

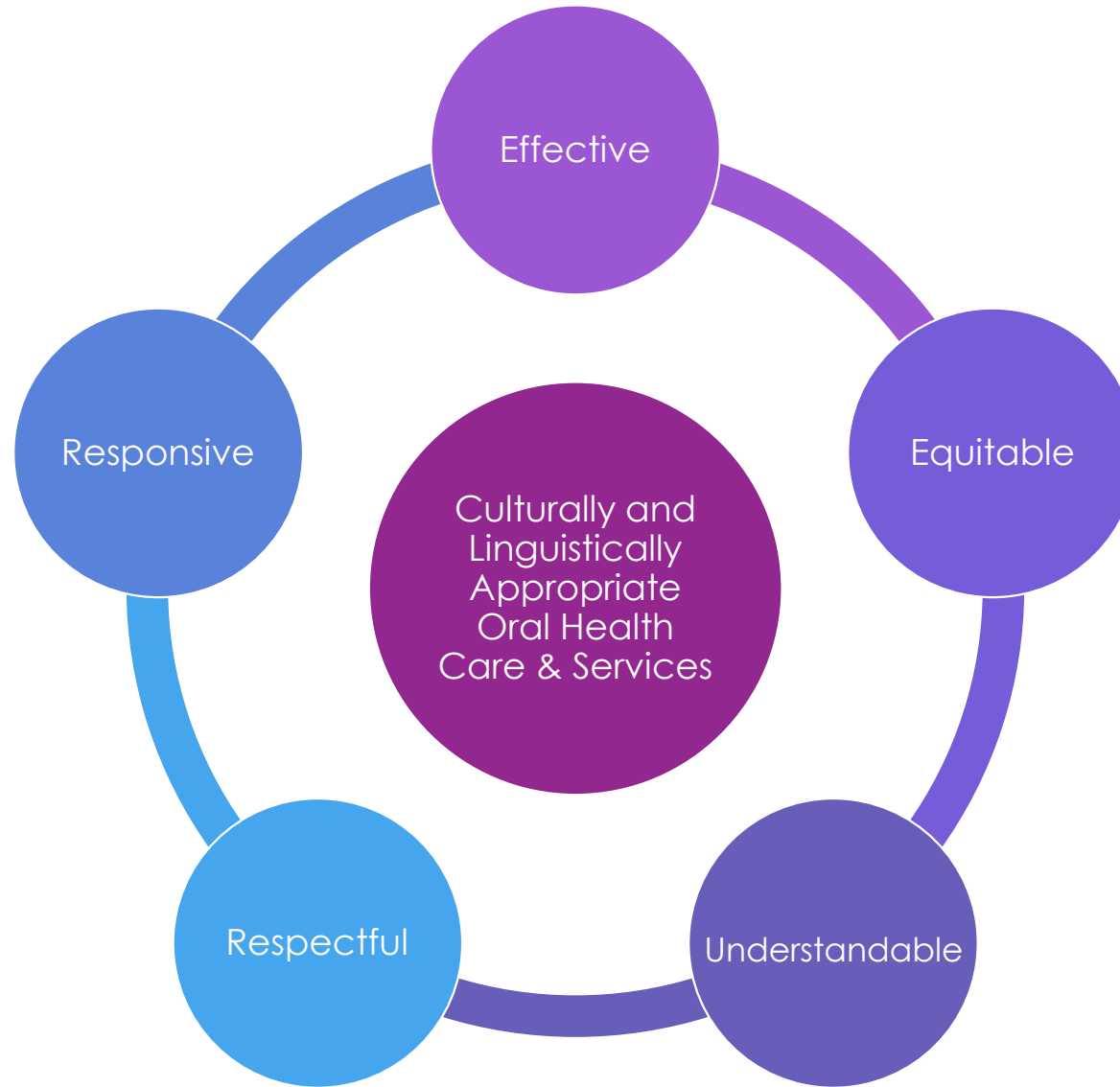
# Appropriate Language

	Appropriate	Inappropriate
Disability	<ul style="list-style-type: none"><li>• Person with a disability</li></ul>	<ul style="list-style-type: none"><li>• Impaired</li><li>• Crippled</li><li>• Handicap</li><li>• Handicapped person</li><li>• The handicapped.</li></ul>
People with disabilities	<ul style="list-style-type: none"><li>• People with cerebral palsy</li><li>• People with spinal cord injuries</li></ul>	<ul style="list-style-type: none"><li>• The disabled</li><li>• The cerebral palsied</li><li>• The spinal cord injured</li></ul>
Person who was born with a disability	<ul style="list-style-type: none"><li>• Person with a physical disability</li><li>• Person with no arms</li></ul>	<ul style="list-style-type: none"><li>• Lame</li><li>• Defective</li><li>• Defect</li><li>• Deformed</li><li>• Invalid</li><li>• Infirm</li><li>• Vegetable</li></ul>
Person who incurred a disability	<ul style="list-style-type: none"><li>• Person who incurred a spinal cord injury</li><li>• Person who has post-polio syndrome</li><li>• Person who had a stroke</li></ul>	<ul style="list-style-type: none"><li>• Victim of a spinal cord injury</li><li>• Stricken with polio</li><li>• Victim of a stroke</li></ul>

# Appropriate Language

Specific Disabilities	Appropriate	Inappropriate
Deaf or hard of hearing	<ul style="list-style-type: none"><li>• Person who is deaf</li><li>• Person who is hard of hearing</li><li>• Person with hearing loss</li></ul>	<ul style="list-style-type: none"><li>• Hearing impaired</li><li>• Deaf</li><li>• Dumb</li></ul>
Blind or Low Vision	<ul style="list-style-type: none"><li>• Person who is blind</li><li>• Person who has low vision</li></ul>	<ul style="list-style-type: none"><li>• Visually handicapped</li><li>• Visually impaired</li></ul>
Speech disability	<ul style="list-style-type: none"><li>• Person with a speech disability</li><li>• Person who stutters</li><li>• Communication disability</li></ul>	<ul style="list-style-type: none"><li>• Speech impaired</li><li>• Halted</li><li>• Dumb</li><li>• Mute</li></ul>
Mobility disability	<ul style="list-style-type: none"><li>• Person who uses a wheelchair or crutches</li><li>• A wheelchair user</li><li>• Walks with crutches</li></ul>	<ul style="list-style-type: none"><li>• Confined/restricted to a wheelchair</li><li>• Wheelchair bound</li><li>• Physically impaired</li></ul>
Intellectual disability	<ul style="list-style-type: none"><li>• Person who has an intellectual disability</li><li>• Person who has a cognitive disability</li><li>• Person who incurred a traumatic brain injury</li></ul>	<ul style="list-style-type: none"><li>• Mentally retarded</li><li>• The retarded</li><li>• Mentally impaired</li><li>• Moron</li><li>• Imbecile</li><li>• Idiot</li></ul>
Mental Illness	<ul style="list-style-type: none"><li>• Person with a mental health condition</li><li>• Person with a psychiatric disability</li><li>• Person with a behavioral health disability</li></ul>	<ul style="list-style-type: none"><li>• Crazy</li><li>• Freak</li><li>• Maniac</li><li>• Lunatic</li><li>• Psycho</li></ul>

# Key Concepts





# Section 5

Language  
Assistance  
Program



# Language Assistance Program

## LIBERTY has a Language Assistance Program that:

- Ensures member materials are appropriately reviewed and vetted
  - Tracks and monitors our member language preferences and ethnicities
  - Tracks and monitors provider language capacity
  - Ensures our bilingual staff is trained
  - Provides access and oversight of language assistance services
  - Monitors our cultural and linguistic services through grievance and appeals review
- If you have questions related to accessing language assistance services, please contact LIBERTY's Member Services Department. You can locate the contact information on the slide "**LAP Contact Numbers By Region**".

# Who We Service

## **Who we service:**

Commercial HMO, POS and PPO

Medicaid/Medi-Cal

Medicare

Marketplace

Applicants and prospective  
members have a right to some  
LAP services



# Who can Access and Request Services?

- **Members**
  - Parents or Guardians of a member
  - Potential members and applicants (limited)
- **Contracted providers**
  - Dentists and their staff
  - Ancillary service providers
- **LIBERTY Dental Plan Associates**

**\*\*Members are strongly discouraged from using friends and family, especially minors as interpreters.**

At all applicable points of contact

Definition: "Instances in which a member accesses covered services where the need for language assistance may be reasonably anticipated."

Partial list of applicable points of contact:

Administrative contact with the dental plan

Call Center

Assistance with Enrollment Process

Dental visits

Tests, procedures and ancillary services

Telephonic and in-person contacts



# Member Demographic Monitoring

- Collection of data is required by Language Assistance Regulations
- Data Collected from Our Members:
  - Race
  - Ethnicity
  - Preferred written language
  - Preferred spoken language
- Data used to determine individual linguistic needs
  - Language Assistance Services utilization

Race, ethnicity and language data are **very** sensitive for some people!

LIBERTY **will** use data to:

- Provide members with need-specific language services
- Determine threshold languages

LIBERTY **will not** use data to:

- Deny, restrict or rescind services
- Raise premium rates
- Discriminate against members in any way
- Do anything unlawful or unethical

# Interpretation Services

## **Telephonic Interpretation**

- An interpreter is connected by telephone to the parties needing interpretation assistance
- Communicating parties may or may not be in the same physical location
- Includes TTY/TDD, video relay services, and remote interpreting services

## **Face-to-Face/Onsite Interpretation**

- An interpreter is physically present to provide language assistance
- The communicating parties are also physically present  
Includes sign-language interpreting



# Translation Services



## Oral Translation

- An interpreter reads the contents of a written document out loud to a member in the member's preferred language
- A written translation is not produced

## Written Document Translation

- *A qualified linguist reviews and translates the written document from English to the requested non-English language.*
- *Ensures all member materials are at the appropriate font size (min. 12 pt.)*

## Non-Specific Member-Informing Materials

- All non-specific Member-Informing Materials are pre-translated and made readily available in the Plan's threshold languages to members.

## Non-Standard Vital Documents (Member specific)

- Non-standardized document will be fully translated in the Plan's threshold languages.
- *Note: If translating the member's specific rationale in adverse benefit determination notices jeopardizes an ability to comply with the mailing timeframes, the rationale can be left in English when the rest of the standardized part of the letter is translated and mailed with the Notice of Language.*
- All member-requested translation **must** be mailed to the member **within 21 calendar days**.
- There is no time limit for a member to request a translation

# Member Materials: Readability

Low health literacy and Low reading literacy are barriers for members to access meaningful services.

To reduce this barrier, LIBERTY ensures member materials are developed and written with clear and concise language and at the appropriate reading level.

Readability Level by State	
California	6 <sup>th</sup> Grade
Florida	4 <sup>th</sup> Grade
New York	6 <sup>th</sup> Grade
New Jersey	5 <sup>th</sup> Grade
Nevada	8 <sup>th</sup> Grade

# When Can Services Be Requested?

LIBERTY does not delegate Language Assistance Services to our Providers. Providers are encouraged to contact LIBERTY to access interpretation and translation services.

- LIBERTY facilitates all member request for interpretation services and translation services.
- **Hours of Availability:**
  - 24 hours a day, 7 days a week, at no cost to member

CA	Medicaid	Los Angeles: 1-888-703-6999 Sacramento: 1-877-550-3875 TTY: 1-877-855-8039
	Exchange	1-888-844-3344 HMO Help Center at: 1-888-466-2219
FL	Medicaid	1-833-276-0850 TTY: 1-877-855-8039
	Commercial	1-888-442-8984 TTY: 1-877-855-8039
NV	Medicaid	1-888-401-1128 TTY: 1-877-855-8039

## LAP Contact Numbers by Region

# Working with Interpreters



**Hold a brief introductory discussion**

Your name, organization and nature of the call/visit

Reassure the patient about confidentiality



**Allow enough time**



**Avoid interrupting**



**Speak in a normal voice; not too fast or too loudly**



**Speak in short sentences**



**Avoid acronyms, medical jargon**



**If in person, face and talk to the member directly**

# Important Reminders

- **Avoid Possible Liabilities for Yourself and for LIBERTY!**
- Bilingual LIBERTY Dental associates should **NEVER** interpret clinical matters for members
- **Examples:**
  - A member's diagnosis or test results
  - Recommendations for additional treatment
- Leave clinical interpreting to LIBERTY Dental Plan's contracted interpreter service providers. We pay them to be expertly trained and impartial interpreters of clinical information.
- Providing high-quality interpreters
  - *Interpreter Qualifications*
  - *Interpreter Ethics and Confidentiality*
- **Discouraging the use of friends, family members and minors as interpreters**
- Documentation of Interpreter Services
  - *In LIBERTY Dental member records*
  - *In dental records by contracted providers*
- Grievance process





# Section 6

Members Rights  
and Responsibilities



# Members Rights

## General Rights –

1. LIBERTY Dental Plan (“LIBERTY”) has written policies regarding member/enrollee rights and responsibilities.
2. LIBERTY complies with any applicable Federal and State laws that pertain to member/enrollee rights, and ensures that its employees and contracted providers observe and protect those rights.

# Members Rights

## Specific Rights–

Members/enrollees have rights to –

- a) Receive information in accordance with § 438.10.
- b) Be treated with respect and with due consideration for his or her dignity and privacy.
- c) Receive information on available treatment options and alternatives, presented in a manner appropriate to the enrollee's condition and ability to understand. (The information requirements for services that are not covered under the contract because of moral or religious objections are set forth in § 438.10(g)(2)(ii)(A) and (B).)
- d) Participate in decisions regarding his or her health care, including the right to refuse treatment.
  - i. Members under the age of 18 must receive parent or guardian consent for any decision regarding treatments. This does not apply if emergency care is needed.
  - ii. Emancipated minors may make their own decisions regarding dental care.
- e) Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation, as specified in other Federal regulations on the use of restraints and seclusion.
- f) Request and receive a copy of his or her medical records.
- g) Request that his or her medical records be amended or corrected, as specified in 45 CFR 164.524 and 164.526.
- h) Be furnished health care services in accordance with §§ 438.206 through 438.210.

# Members Rights

## Specific Rights (cont.)–

Members/enrollees also have rights to –

- a) Request a printed copy of the Member Handbook *at least once per year* or more frequently as determined necessary.
- b) Choose their LIBERTY in-network primary care dentist, within reasonable distance from their residence from the provider directory list, upon enrollment.
- c) Change their primary care dentist upon request for any reason and as frequently as needed. Instructions are located in the Member Handbook.
- d) Have access to the grievances and appeals system.
- e) Request and appeal of any denial/adverse benefit determination, or notice of action within applicable time frame as mandated by state or federal regulation.
- f) Request a state fair hearing, including information on circumstances under which an expedited fair hearing is possible.
- g) Receive interpretation services in their preferred languages at no cost.
- h) Be provided disenrollment requirements and limitations and to disenroll from the plan upon request.

Specific Rights (cont.)–

Free exercise of rights –

- Members/Enrollees have the right to freely exercise his or her rights, and that the exercise of those rights does not adversely affect the way the LIBERTY and its network providers treat the member/enrollee.

Compliance with other Federal and State laws -

- LIBERTY complies with any other applicable Federal and State laws (including: Title VI of the Civil Rights Act of 1964 as implemented by regulations at [45 CFR part 80](#); the Age Discrimination Act of 1975 as implemented by regulations at [45 CFR part 91](#); the Rehabilitation Act of 1973; Title IX of the Education Amendments of 1972 (regarding education programs and activities); Titles II and III of the Americans with Disabilities Act; and section 1557 of the Patient Protection and Affordable Care Act.

To access more information on Member Rights, please click [HERE](#).

# Members Rights

# State Specific Members Rights

Below are member rights specific to each state and program:

## **CA Medicaid**

- Members have access to Federally Qualified Health Centers, Indian Service Facilities, and Emergency Services outside the Plan's network.

## **FL Medicaid**

- Know if provider or facility accepts the Medicare assignment rates.
- Request a copy of a bill and have the charges explained.

## **NV Medicaid**

- Formulate advanced directives.

# Member Responsibilities

All members have the responsibility to:

- Provide accurate and updated information to contracting dentists, dental office staff and LIBERTY administrative staff to provide care (to the extent possible)
- Not allow any other person to use their ID Card
- Communicate changes in demographic or dependent information, or other changes that would affect eligibility
- Notify LIBERTY of any other insurance coverage
- Respect and follow the policies and guidelines given by LIBERTY's contracting dentists, dental office staff and LIBERTY administrative staff with respect and courtesy
- Cooperate with LIBERTY's contracting dentists in following a prescribed course of treatment; including instructions and oral health care recommendations/ guidelines provided
- Actively participate in treatment decisions
- Keep scheduled appointments or communicate with the dental office at least twenty-four (24) hours in advance to cancel an appointment
- Communicate and provide feedback on their needs and expectations to their dental office and to LIBERTY
- Report any suspected provider fraud/abuse
- Be aware of and follow LIBERTY's guidelines in seeking dental care.

# Questions

If you have any questions or concerns regarding the topics covered in the training, you may reach out to the Cultural and Linguistic Competency Department.

- Email: [CLC@libertydentalplan.com](mailto:CLC@libertydentalplan.com)



# Training Recap

Understand the provision of the Culturally and Linguistically Appropriate Service Standards

- *Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.*

Be able to define culture

- The integrated patterns of human behavior that include the languages, thoughts, actions, customs, beliefs, values, and institutions that unite a group of people

Be able to identify the existing oral health disparities

Understand key concepts to appropriately communicate with various communities and populations LIBERTY serves

Be able to identify which language assistance services LIBERTY offers and how to access these services:

- Telephonic Interpretation Services
- Onsite Interpretation Service
- Written Document Translation