

CALIFORNIA LANGUAGE ASSISTANCE PROGRAM

Training for Cigna-contracted health care providers and their staff

September 2022

Together, all the way.®



Introduction



California law requires health plans to provide **language assistance program (LAP) services to eligible customers with **limited English proficiency (LEP)**.**

To ensure compliance with the law, it is recommended that all provider staff members who routinely interact with LEP patients be trained on the LAP regulations and how to access language services available through Cigna.

This presentation will provide you with an overview of:

- The California Language Assistance Program (CALAP) legislation.
- California customer demographics.
- How to access our language assistance services.
- How to communicate with your LEP patients and engage interpreters.



Objectives of this training

When you have completed this course, you will be able to:

- Understand CALAP and the services available to your LEP patients.
- Identify what type of documents and which languages are eligible for written translation.
- Understand how to request a document translation or an interpreter for your LEP patients through Cigna's Cultural and Linguistics Unit (CLU).
- Access tips for working with your LEP patients and language interpreters.
- Understand how we track language complaints.



CALAP law health plan requirements

Effective January 1, 2009, The Health Care Language Assistance Act (California Senate Bill 853) requires insurers to establish and support a LAP for certain California residents who have LEP.

Key components of the law for health plans

- Conduct an assessment of customer demographics.
- Identify the threshold languages that vital documents must be translated to.
- Collect and store customers' preferred languages, race, and ethnicity.
- Proactively send translated vital documents to customers in threshold languages.
- Translate vital nonstandard documents upon request.
- Provide verbal interpretation at Cigna and provider points of contact.
- Provide training for all health plan staff that routinely interact with CALAP-eligible customers.
- Use qualified interpreters or bilingual staff that have knowledge of medical and health care benefit terminology in the non-English language.
- Document complaints about the LAP.



Eligibility for LAP services



The LAP *only* affects customers under the following jurisdictions:

- Department of Managed Health Care (DMHC)
- California Department of Insurance (CDI)

To help make it easier for providers to comply with the law:

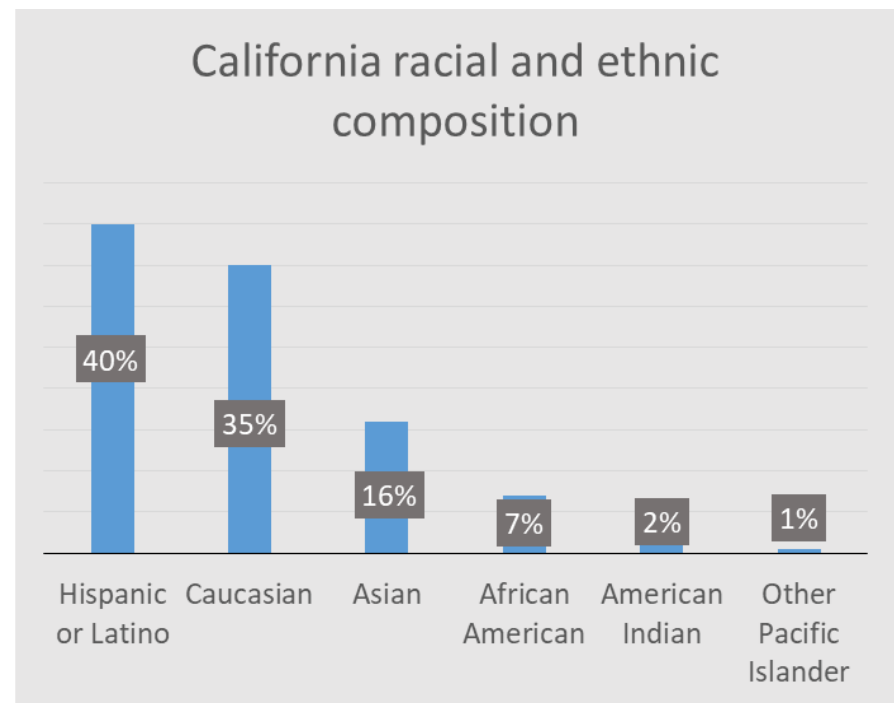
We provide language services to *all* Cigna customers residing in California, regardless of their health plan.



Racial, ethnic, and linguistic diversity of Cigna customers

We collect customer language preference, race, and ethnicity data for California-eligible customers. We use California demographic data as a proxy for our customer base until we have a statistically valid number of customer language preference records.

- **44%** of the California population (over five-years old) speak a language other than English.*
- **Top three** non-English languages spoken in California:*
 - 29% Spanish
 - 10% Asian or Pacific Island



* U.S. Census Bureau, 2017-2021 five-year American Community Survey.

Key definitions

Limited English proficient

A limited English proficient (LEP) person does not speak English as their primary language, and has a limited ability to read, speak, write, or understand English on a level that permits them to interact effectively with health care providers or health plan employees.

LEP individuals can be identified by:

- Self-identifying as LEP by requesting language assistance.
- Having trouble communicating in English, or you may be having trouble understanding what they are trying to communicate.
- Not responding to questions or being unusually quiet – simply answering “yes” or “no,” or gives inappropriate or inconsistent answers to your questions.

Threshold languages

Threshold languages are identified by a health insurer pursuant to California Insurance Code section 10133.8 and regulations into which vital documents will be translated.

Cigna has determined its threshold languages to be Spanish and Traditional Chinese.

Customers who register a written language preference with us for Spanish and Traditional Chinese will have access to translated vital documents.



Key definitions *continued*

Translation

Translation is the **written** word. It is the conversion of a written text in one language into a written text in a second language corresponding to, and equivalent in meaning to, the text in the first language.

Interpretation

Interpretation is the **spoken** word. It is the process of listening, understanding, and analyzing something spoken, or reading something written in one language (the source language) and orally re-expressing that message faithfully, accurately, and objectively in another spoken language (the target language), taking the cultural and social context into account.

According to the law, customers have the right to interpretation in **any language.**

LAP notice of translation

Written notice of availability of translation services, free of charge, must accompany all vital nonstandard documents.

Providers delegated for utilization management (UM) or claims must send the LAP notice with all vital documents.

Examples of vital documents include UM denials and claim denials or notices requiring a customer response. The LAP notice is in **16 languages**, including English, Spanish, and Traditional Chinese.

The list of all available languages and the notice are available on the Health Industry Collaboration Effort (HICE) website at [ICEforHealth.org](https://www.iceforhealth.org) > Library > Health Plan Specific Letter Templates > Cigna > [Cigna UM COMM LAP Option 1 Notice of Translation 2017.pdf](#).



Key definitions *continued*

Vital documents

- These are documents that affect your patients' benefits and coverage.
- They may be produced by the plan, or delegated to a contracting provider or vendor.

Vital standard documents

- These documents are generic and repeatable, and contain no specific health plan participant information, such as applications and consent forms.
- We will proactively send standard translated vital documents to those who have registered with Cigna indicating that their written language preference is a threshold language (Spanish or Traditional Chinese).

Vital nonstandard documents

- These documents are customer-specific and may contain personal health information, such as denial letters and explanation of benefits (EOBs).
- The document is originally sent in English, and translated into Spanish or Traditional Chinese upon request.



Detailed requirements



Provider contracts

Provider contracts that are issued, amended, delivered, or renewed as of January 1, 2009 require compliance with Cigna's LAP.

Sharing customer-preferred language

- We share customer language preferences on file with contracted providers delegated for UM and claims through [PRNlink.com](https://prnlink.com). They are also shared with contracted providers upon request.
- Race and ethnicity data will **not** be shared with providers.



Translation requirements

Translation of vital documents

We will perform all translations. Translations are *not* delegated to providers.

Provider-specific documents that must be translated upon customer request:

- **Notices** pertaining to the denial, reduction, modification, or termination of services, benefits, and the right to file a grievance or appeal.
- An **EOB** or similar claim processing document that is sent to the customer and requires a response.

If a customer requires help, the notice instructs them to call Cigna at:

800.244.6224.

Translations must be sent within 21 calendar days of the customer request.

We will contact the provider for a copy of the letter to be translated.



How to request a translation



Providers can forward the English document to be translated to Cigna's Cultural and Linguistic Unit Translation department by:

- Email: CulturalandLinguisticsUnit-TranslationRequest@Cigna.com
- Fax: **866.931.3068**

Please remember to:

- Include provider contact information.
- Protect personal health information by using encryption and following standard operating procedures.



Translation timelines

Request type	Minimum policy requirements
<p>Request for translation of a nonstandard vital document comes from the customer to the provider.</p>	<p>Urgent request</p> <ol style="list-style-type: none"> 1. Forward the translation request and a copy of the document to the contracted health plan within one-business day. 2. Log the date the request is received from the customer, and the date the request and document were forwarded to the health plan. <p>Nonurgent request</p> <ol style="list-style-type: none"> 1. Forward the translation request and copy of the document to the contracted health plan within two-business days. 2. Log the date the request is received from the customer, and the date the request and document were forwarded to the health plan.
<p>Request for a nonstandard vital document comes from the health plan to the provider.</p>	<p>Urgent request</p> <ol style="list-style-type: none"> 1. Forward a copy of document to the contracted health plan within one-business day. 2. Log the date the request is received from the customer, and the date the request and document were forwarded to the health plan. <p>Nonurgent request</p> <ol style="list-style-type: none"> 1. Forward copy of document to the contracted health plan within two-business days. 2. Log the date the request is received from the customer, and the date the request and document were forwarded to the health plan.
<p>Request for a plan-produced vital document comes from the customer to the provider.</p>	<p>All plan-produced vital documents</p> <ol style="list-style-type: none"> 1. Forward the customer's request within one-business day. 2. Log the date the request is received from the customer, and the date the request and document were forwarded to the health plan.



Provider-based interpretation requirements

A professionally trained interpreter must be offered when:

An LEP patient is accessing care in any provider setting (e.g., pharmacy, provider office, or emergency room). Use of family members and friends (especially minors) as interpreters should be discouraged.

Document interpreter refusal in the patient medical record.

This not only protects you and your practice, it also ensures consistency when your medical records are monitored through site reviews and audits by contracted health plans to ensure adequacy of the plan's LAP.

SMART PRACTICE TIPS

- If a patient chooses to use a family member or friend as an interpreter, consider using a telephonic interpreter in addition to ensure accuracy of interpretation.
- Document the patient's preferred language in paper and electronic medical records in the manner that best fits practice flow.

For example, for paper records, post colored stickers on a patient's chart to flag when an interpreter is needed (e.g., orange for Spanish, green for Russian).



Cigna interpreter access



We do not delegate interpreter services to providers.

As of January 1, 2009, we offer free telephonic interpretation for Cigna-eligible LEP customers through our language service vendor.

To engage an interpreter for Cigna-eligible LEP customers, call

800.806.2059

when your patient is ready to receive interpreter services.

Services do not need to be arranged in advance.

Please have the following information available:

- Customer's Cigna ID number (found on their Cigna ID card)
- Customer's date of birth
- Provider's Taxpayer Identification Number to confirm eligibility and access interpretation services.



Cigna interpreter access *continued*



We do not delegate interpreter services to providers.

Cigna now offers video remote interpreting (VRI) services for Cigna-eligible LEP customers through our language service vendor, CQ Fluency.

To engage a VRI interpreter for Cigna-eligible LEP customers using a computer or smart device:

- Go to <https://LanguageAccessProgram-Cigna.CQFluencyVRI.com>.
- Enter access code **CignaProviderVRI** (case sensitive).
- Have the following information available:
 - Customer last name
 - Customer (member) ID
 - State where customer lives
 - State where provider's office is located



Cigna interpreter access *continued*



After a customer has been informed that a trained interpreter is available free of charge, and they want to use a family member or friend to provide interpretation services, their refusal should be documented in their medical record (in a provider setting), or the customer's administrative file (in the health plan's Customer Service setting).

Request/Refusal for Interpretation Services form

This form can assist you in documenting a patient's request or refusal for language services.

Refer to slide 24 on how to access the forms, which are available in English, Spanish, and Traditional Chinese.

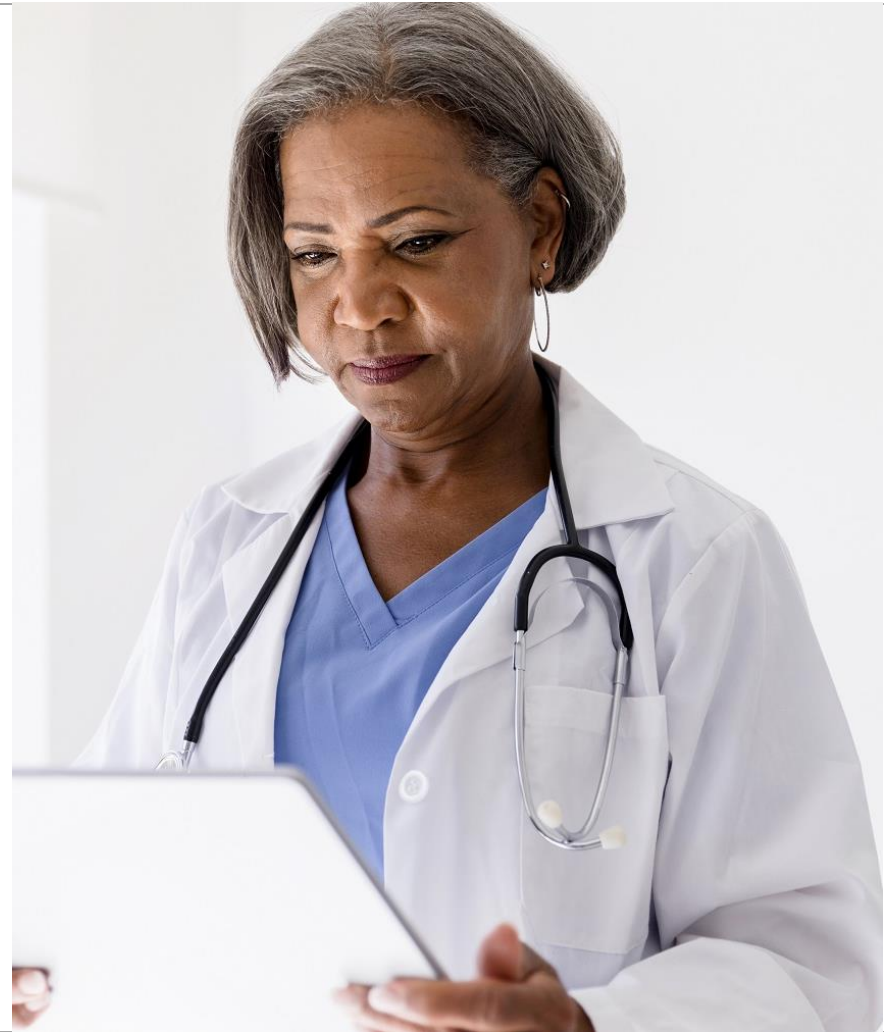
NOTE

Detailed instructions on interpreter access are also included in the Cigna Reference Guide. See slide 24, Cigna CALAP resources, on how to access the reference guide.



Independent medical review

- Informational notices about how to contact a plan, file a complaint, obtain assistance from the DMHC, and seek an **independent medical review (IMR)** are available in non-English languages on the DMHC website at [DMHC.CA.gov](https://www.dmhc.ca.gov).
- IMR complaint forms are available in **17 languages**, including English, Spanish, and Arabic. They are available at the DMHC website at ([DMHC.CA.gov](https://www.dmhc.ca.gov)) > File a Complaint > Independent Medical Review / Complaint Form > [Submit by Mail](#).*



* IMR complaint forms (in 17 languages) may also be submitted by fax.



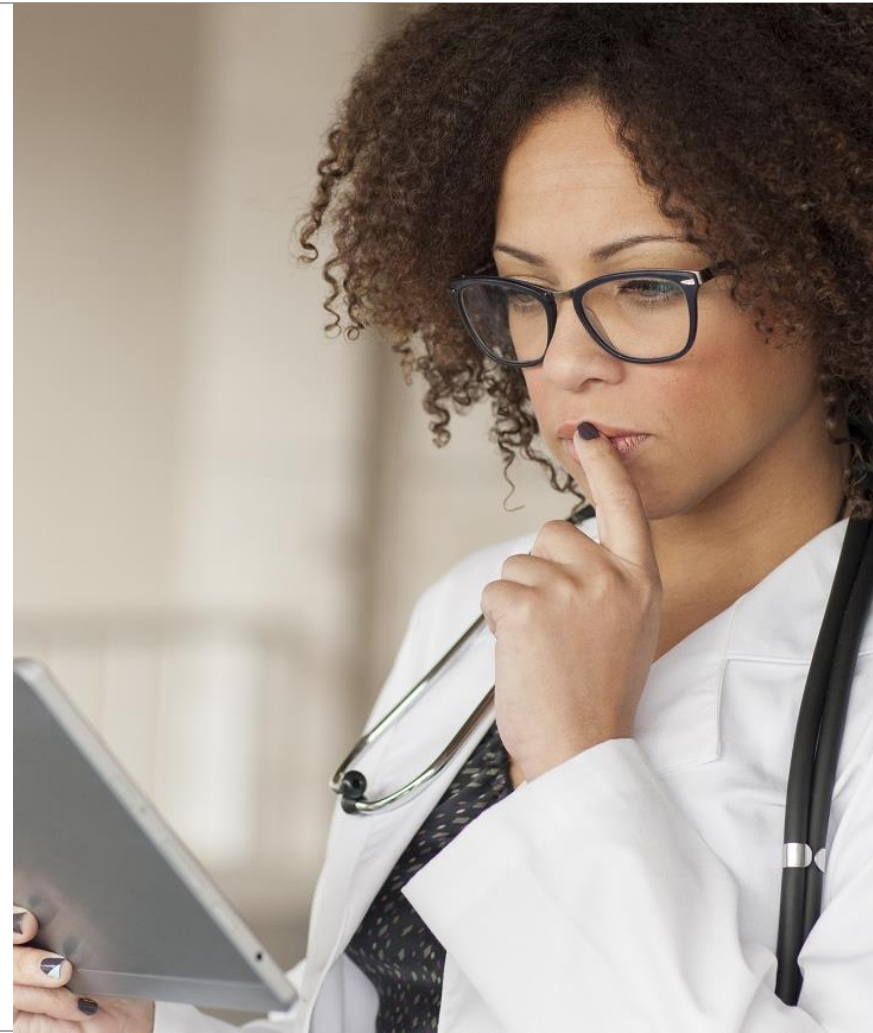
Customer complaints and regulatory reporting

Regulations require health plans to monitor, track, and trend complaints about the LAP.

For example, if a provider is unable to meet a patient's cultural, language, ethnic, or racial needs or preferences due to, but not limited to:

- Not having interpreters available, or
- Intolerance of customer's health-related or cultural beliefs, or
- Refusal to provide an interpreter...

the health plan is then obligated to report those complaints to the regulatory agencies.



Provider frequently asked questions (FAQs)

Q: Can a provider use their bilingual staff as interpreters?

A: We do not delegate interpreter services to health care providers.

- The law obligates health plans to provide and monitor the delivery of qualified interpreter services to LEP patients at all points of contact in order to ensure meaningful access to health care. To meet this requirement, we provide professional telephonic interpreter services.
- The law does not require an LEP customer to use the plan's interpreter services, or prevent an LEP customer from choosing to speak with a bilingual provider staff member.
- It is strongly recommended that providers help their LEP patients make informed decisions about when to use highly skilled, qualified interpreters at no cost to them or providers.
- The plan's interpreters have been tested for proficiency and are knowledgeable about health care benefit terminology in non-English languages, as well as being culturally sensitive to diverse ethnic and linguistic nuances.
- LEP patients may prefer to rely upon the objectivity, accuracy, and confidentiality of professional interpreter services.
- If the LEP patient refuses to access our interpreter services, document the refusal in their medical record.



Q: Do these regulations prohibit family members from serving as interpreters for patients?

A: No. Although using family and friends (especially minors) as interpreters is discouraged, family members are not banned from serving as interpreters for LEP individuals under this legislation. However, the availability of free, quality interpretation services must be offered. Document a patient's refusal of interpreter services in their medical record.

Q: Which staff needs training regarding the LAP?

A: To ensure compliance with the law, it is recommended that all provider staff members who routinely interact with LEP patients be trained on the LAP regulations and how to access language services available through Cigna.

Q: What are examples of situations that would meet the requirements for a face-to-face interpreter?

A: Face-to-face interpreters may be provided to patients who are eligible for CALAP upon their request, or the request of a health care provider, in situations that may include:

- Sensitive topics, such as end-of-life conversations, or complex medical procedure preparation such as a kidney transplant.
- Legal issues.
- Customer requires an in-person demonstration (e.g., how to use an insulin pump or glucometer).
- Customer or provider feels that the telephonic services did not meet the needs of their situation.
- Cultural issues.

Provider responsibilities



- Provide training to staff members, as needed, to allow for a general awareness of Senate Bill 853, its requirements, and how to access plan services.
- Apply language assistance notification on vital nonstandard documents.
- Provide the English copy of the letter to be translated in a timely manner.
- Offer telephonic interpreter services to Cigna-eligible LEP customers.
 - Refer to the **Cigna Health Care Professional Reference Guides** for interpreter access information (refer to slide 24, Cigna CALAP resources, on how to access the Cigna Reference Guide).
- Execute requirements regarding Senate Bill 853 included in new or renewed contracts as of January 1, 2009.

Cigna CALAP resources

Cultural Competency and Health Equity website

The website includes a wide variety of resources for providers and their office staff, including:

- Commonly used patient forms in Spanish.
- Tips for working with a language interpreter.
- And much more.

Visit [Cigna.com](https://www.cigna.com) > For Providers > Provider Resources > [Cultural Competency and Health Equity](#).

CALAP

Go to [Cigna.com](https://www.cigna.com) > For Providers > Explore all resources on Cultural Competency and Health Equity > [California Language Assistance Program](#) (CALAP).

Cigna Reference Guides for participating physicians, hospitals, and providers

The California edition of the Cigna Reference Guide includes:

- A grievance section.
- A hospital guide.
- Detailed instructions on engaging an interpreter.
- And more.

To access the reference guide:

by logging in to the Cigna for Health Care Professionals website ([CignaforHCP.com](https://www.cignaforhcp.com)) > Resources > Reference Guides > Medical Reference Guides > Health Care Professional Reference Guides.



Additional resources

Request/Refusal for Interpretation Services form

CignaforHCP.com > Get questions answered: Resource > Medical Resources > Doing Business with Cigna > [California Language Assistance Program](#)

The forms are at the bottom of the page, and are available in English, Spanish, and Traditional Chinese.

Senate Bill 853

View [Bill Number 853](#).*

State of California Department of Managed Health Care 2015

DMHC.CA.gov > Health Care in California > Your Health Care Rights > [Language Assistance](#).

Health Industry Collaboration Effort (HICE) cultural and linguistics provider toolkit

This helpful toolkit includes resources such as:

- Tips for working with interpreters.
- Tips for working with LEP patients.
- Best practices.
- And more.

Visit ICEforHealth.org > Library > Approved HICE Documents > Cultural and Linguistics Provider Toolkit > Approved HICE Toolkit > Better Communication, Better Care – [Provider Tools to Care for Diverse Populations](#).

* Go to <https://leginfo.legislature.ca.gov>. Under Quick Bill Search, enter Bill Number 853; click Go. Enter Session Year 2003 – 2004; click Search. Click [SB-853](#).

Questions?



- If you have any questions about CALAP or language assistance services, please call **Cigna Customer Service at 800.88Cigna (800.882.4462)**.
- If you are calling about a patient that has a Cigna ID card with a “G” in the upper right-hand corner, please call **866.494.2111**.



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