## XII. Cultural Competence

From its inception, the Tracking Project has investigated whether managed care systems incorporated specific system of care values and principles in their RFPs, contracts, and other key system documents. Impact analysis findings suggested that, despite the incorporation of cultural competence requirements in many systems, managed care implementation has had little, if any, effect on the overall level of cultural competence.

### **Cultural Competence Strategies**

The 2000 and 2003 State Surveys included items to investigate cultural competence in greater depth. A range of strategies that potentially could be used to address and enhance cultural competence were presented to respondents so that they could indicate the specific strategies incorporated into their managed care systems.

Of all the strategies to enhance cultural competence, the provision of translation and interpreter services was identified as the most widely utilized strategy (86%) in managed care systems in 2003 (**Table 97**). According to respondents, the next most frequently used strategies are requirements in RFPs and contracts related to cultural competence, and outreach to culturally diverse populations (61% of the systems reportedly use each). Requirements in RFPs and contracts tend to be used more frequently in carve outs (76%) than in integrated systems (40%), while outreach to culturally diverse populations tends to be used more frequently in integrated systems (67% as compared with 57% of the carve outs).

The strategies of including culturally diverse providers in provider networks (58% of systems), specific planning for culturally diverse populations (56%), and training of MCOs and providers on cultural competence (47%) are found at much higher rates in carve outs than in integrated systems. Of note is the reported increase in specific planning for culturally diverse populations, which was reported in more than half (56%) of the systems in 2003, as compared with only a third of the systems in 2000 (a 23% increase). In both 2000 and 2003, about one-third of the managed care systems reportedly include the strategies of incorporating specialized services needed by culturally diverse populations and tracking utilization and/or outcomes by culturally diverse groups.

# Specific Planning and Data Analysis for Culturally Diverse Populations

In both impact analyses, stakeholders in most states reported that managed care planning typically did not include a specific focus on culturally diverse groups or specific analyses of the needs of culturally diverse children and families. The impact analyses also suggested that few managed care systems were tracking service utilization and/or child outcomes by culturally diverse populations.

Table 97								
Percent of Reforms Incorporating Various Types of Strategies Related to Cultural Competence in Managed Care Systems								
	2000 Total	2003			Percent of Change			
		Carve Out	Integrated	Total	2000–2003			
Specific planning for culturally diverse populations	33%	62%	47%	56%	23%			
Requirements in RFPs and contracts related to cultural competence	85%	76%	40%	61%	-24%			
Training of MCOs and/or providers on cultural competence	42%	71%	13%	47%	5%			
Outreach to culturally diverse populations	58%	57%	67%	61%	3%			
Inclusion of specialized services needed by culturally diverse populations	36%	43%	20%	33%	-3%			
Inclusion of culturally diverse providers in provider networks	64%	67%	47%	58%	-6%			
Translation/Interpreter services	82%	90%	80%	86%	4%			
Tracking utilization and/or outcomes by culturally diverse groups	36%	43%	13%	31%	-5%			
None	0%	5%	13%	8%	8%			
Other	6%	5%	13%	8%	2%			

As indicated on **Table 97**, slightly more than half (56%) of the managed care systems (62% of carve outs and 47% of the integrated systems) reportedly conduct specific planning for culturally diverse populations. The increase in planning for culturally diverse groups is encouraging as it represents a 23% increase from 2000 findings. However, as noted, both the 2000 and 2003 surveys found that only about one-third of the systems track service utilization and/or outcomes by culturally diverse groups.

#### **Requirements for Cultural Competence**

The impact analyses indicated that most states included requirements related to cultural competence in the managed care RFPs and contracts, and the 2000 State Survey results supported this finding, with 85% of managed care systems reporting the inclusion of cultural competence requirements in key system documents. Findings from the 2003 State Survey, however, show a 24% decrease in the percent of systems (61%) that include cultural competence requirements in managed care RFPs and contracts (**Table 97**). A much higher rate of inclusion of such requirements is reported by the carve outs (76%) than by the integrated systems (40%).

Comparing the requirements related to cultural competence under managed care with premanaged care, more than three-quarters of the systems (78%) reported having stronger cultural competence requirements than previously, a 14% increase from 2000 (**Table 98**). Stronger cultural competence requirements were reported more frequently in carve outs (86%) than in systems with an integrated design (65%). No system reported weaker cultural competence requirements than before managed care; in 22% of the systems, managed care has had no effect on cultural competence requirements.

Table 98 Comparison of Cultural Competence Requirements in Managed Care Systems Versus Previous Systems								
	2000 Total	2003			Percent			
		Carve Out	Integrated	Total	of Change 2000–2003			
Cultural competence requirements are stronger in the managed care system	64%	86%	65%	78%	14%			
Cultural competence requirements are weaker in the managed care system	3%	0%	0%	0%	-3%			
No change	33%	14%	35%	22%	-11%			

### **Inclusion of Culturally Diverse Providers**

Findings from the impact analyses were contradictory regarding the inclusion of culturally diverse providers in managed care systems. Stakeholders in nearly half of the states in the 1997 sample felt that managed care had impeded the inclusion of culturally diverse providers, while in the 1999 sample, most stakeholders did not feel that managed care was an obstacle to the inclusion of culturally diverse providers.

To further explore this area, the state surveys have tracked the extent to which managed care systems have had a specific focus on including culturally diverse providers in their provider networks. The results indicate a steady reduction over time in the percent of managed care systems with specific strategies for including culturally diverse providers and practitioners in provider networks. Specific provisions or efforts for including culturally diverse providers were reported in 80% of managed care systems in 1997/98, 64% of the systems in 2000, and 58% of the systems in 2003 (see **Table 97**).