As America becomes more diverse, the need to provide excellence in multicultural health care is increasingly important. Multicultural care is vital for getting people proper care, and helping them become partners in the process. Otherwise, they may not get needed care or learn how to avoid costly, preventable complications and hospitalizations that drive up costs for everyone.

That is why the National Committee for Quality Assurance (NCQA), which sets the “Gold Standard” for assessing and improving health quality, developed the Multicultural Health Care (MHC) Distinction Program. MHC Distinction is a voluntary program that aligns with NCQA’s Accreditation standards for insurers and other health care organizations. Organizations can earn MHC Distinction by meeting rigorous and practical requirements for assessing and improving efforts to meet individuals’ cultural and linguistic needs.

**Roadmap for Meeting Standards & Addressing Disparities:** NCQA’s MHC standards and guidelines show how to meet, and even exceed, federal Office of Minority Health (OMH) culturally and linguistically appropriate services (CLAS) standards. Not only can NCQA help organizations comply with state OMH CLAS requirements, federal, state and other payers could deem organizations with NCQA MHC Distinction as satisfying OMH CLAS standards. MHC Distinction also helps establish benchmarks for tracking improvement and measuring what works in meeting CLAS standards and reducing disparities in health care. Each of the program expectations is in a set of standards. NCQA awards points towards the MHC Distinction based on how closely an organization’s activities meet the standards.

Through initiatives that help earn MHC Distinction “we can drill down by race, ethnicity, language—even zip code on disparities we want to improve,” says Mary K Stom, MD, chief medical officer and senior vice president of healthcare management, Health Partners of Philadelphia, the first to receive NCQA’s MHC Distinction. “By looking at data in ways we didn’t before, we see what we were doing well and can apply that to new activities.” This helped identify, for example, cultural barriers inhibiting good perinatal care in inner city African American neighborhoods. “We learned that women in these communities trust relatives and neighbors more than our nurses and education. So now we’re educating entire neighborhoods, not just pregnant women on that block.”

MHC Distinction builds on NCQA’s work with Lilly to develop the *Multicultural Health Care: A Quality Improvement Guide*, now interactive online at [www.clashealth.org](http://www.clashealth.org).
Specific subjects that the standards address are below. NCQA staff can provide more information on the detailed requirements upon request. To learn more, contact NCQA’s Public Policy Department at 202-955-1709 or visit www.ncqa.org.

**Standards for NCQA’s Multicultural Health Care Distinction**

**Race/Ethnicity & Language Data**
- Collect members’ ethnicity/language data in Office of Management and Budget categories
- Use a validated methodology to extrapolate or estimate ethnic population percentages based on reported data
- Use a system of effective data storage and retrieval for ethnic and linguistic information
- Report the HEDIS diversity of membership measure
- Identify “threshold languages” spoken by 5% of membership or 1,000 members, whichever population is smaller

**Language Services**
- Demonstrate use of competent translators, provide timely and high-quality translation
- Provide practitioners with individual data on the language preferences of the patients they treat, training on the provision of language services, and language assistance resources
- Regularly notify members of the availability of language services

**Practitioner Network Cultural Responsiveness**
- Collect and publish information on the languages contracted providers speak fluently, or languages for which they offer translation services
- Collect and disclose upon request provider race/ethnicity data
- Analyze the provider network’s ability to serve members’ language needs and develop ways to address gaps

**CLAS Services Program**
- Adopt a program description or work plan listing measurable goals for reducing disparities that ethnic and linguistic minorities experience, and include plans to monitor and evaluate services against measurable goals
- Conduct an annual accounting of activities meant to achieve performance improvement in reducing disparities, and evaluation of progress and trending in measurable outcomes

**Reducing Health Care Disparities**
- Collect, report and analyze clinical quality and patient experience measures by race, ethnicity, and primary language and compare outcomes among members of different backgrounds
- Make targeted interventions to improve disparities in relevant care measures, and continually evaluate their effectiveness