BLUE CROSS OF IDAHO MMCP MANDATORY TRAINING

**Cultural Competency**- Understanding the values, beliefs and needs associated with a client’s age, gender identity, sexual orientation, and/or racial, ethnic, or religious backgrounds. It includes competencies to ensure appropriate and culturally sensitive healthcare from people with congenital or acquired disabilities.

**Cultural Awareness**- Recognizing cultural factors that can shape personal and professional behavior. These factors may influence the way a patient views and presents his or her health status and responds to a plan of care. Important cultural competency skills include:

* Respecting diverse points of view
* Using appropriate methods to interact with sensitivity
* Recognizing the impact of cultural differences and other factors

Clients have the right to receive equal, quality, and effective treatment with access to healthcare, support systems and community services. This includes clients with limited ability to speak or read English, and those with diverse cultural and ethnic backgrounds. A Caring Hand will recruit and maintain a workforce that supports a culturally and linguistically diverse client population.

* Blue Cross of Idaho Provider Administrative Policy for Reporting of Non-Discrimination Complaints**: providers.bcidaho.com/policies-and-procedures/hcbs/hcbs233.page**
* **Native American Cultural Resources**:
	+ Shoshone-Bannock Culture: **subtribes.com**
	+ Shoshone-Paiute Tribe Culture: **Shopaitribes.org**
	+ Coeur d’Alene Tribe Culture: **cdatribe-nsn.gov/cultural/ancestral.aspx**
	+ Kootenai Tribe Culture: **Kootenai.org**
	+ Nez Perce Tribal Culture: **nezperce.org**
* **Hispanic Culture Resource**:
	+ Hispanic Cultural Center of Idaho**: hispanicculturalcenter.org**
* **Civil Rights Complaint Form:**
	+ **Providers.bcidaho.com/forms-and-resources/MMCP/civil-rights-complaint-form.page**

To review the Idaho Department of Health and Welfare guidelines on interpreter services, visit

**Healthandwelfare.idaho.gov/Providers/MedicaidProviders** and select **Policies**, then **Interpretive Services.**

\*By signing you attest that you have received and understand this information\*

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Signature Date

**Print Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_