



Affordable Care Act: Cultural Competency

Improving access to care for vulnerable populations

Cultural competence is the ability of an individual or organization to accommodate the needs presented by consumers and communities with diverse languages, modes of communication, customs, beliefs, and values. Cultural competence leads to better communication, medication adherence, improved health status, and fewer emergency visits and hospitalization.

Prior to passage of the Affordable Care Act, the Emergency Medical Treatment and Active Labor Act (EMTALA) required hospitals to provide language assistance to people with limited English proficiency (LEP). In addition, the Hill-Burton Act required nonprofit community hospitals and health centers to comply with a "community service obligation," including non-discrimination in the delivery of services and language assistance. The Affordable Care Act will take several additional steps to improve the overall cultural competency of health providers in an effort to reduce disparities and increase access to care.

Fast Facts:

- People with limited English proficiency (LEP) are less likely to have a regular source of primary care and receive preventive care. They are also more likely to report overall problems with care, and may be at increased risk of experiencing medical errors.
- 80% of hospitals provide services to LEP patients regularly, and 63% of hospitals provide such services on a daily or weekly basis.
- 84% of federally qualified health centers (FQHCs) provide clinical services each day to LEP patients.

A number of provisions in the Affordable Care Act will help reduce disparities and increase access to culturally competent care.

Highlights of Cultural Competency in the Affordable Care Act

- Promotes the placement of community health workers in medically underserved areas by awarding grants to states, public health departments, clinics, and hospitals
- Provides scholarships for disadvantaged students who commit to work in medically underserved areas as primary care providers, and expands loan repayments to health professionals in such areas
- Supports demonstrations and research for training future health professionals in cultural competency, prevention, public health proficiency, and reducing health disparities
- Expands nursing diversity grants to include associate degrees, bridge or degree completion programs, or advanced nursing degrees

Implications for the American Cancer Society and American Cancer Society Cancer Action Network (ACS CAN)

- ACS CAN will continue to advocate for data collection and reporting on race, ethnicity, and language to identify and address health disparities and reduce medical errors. High-quality data are essential to helping organizations understand and remedy racial and ethnic disparities in health care.