

Translation Services Provider Manual Language:

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Rights and Responsibilities

To communicate with each patient at an appropriate level of comprehension and/or in a language understood by the patient, or to refer the patient to Versant Health for translation services.

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B. Cultural competency and sensitivity As established by the Participating Eye care professional Agreement, eye care professionals must provide covered services in a culturally competent and sensitive manner to all Versant Health members, including those with limited English proficiency and diverse cultural and ethnic backgrounds. Eye care professionals will only be able to provide culturally competent services if cultural knowledge and sensitivity is incorporated into the office policies, procedures and service manuals.

The U.S. Department of Health and Human Services, Office of Minority Health has established fifteen (15) standards to advance health equity, improve quality, and eliminate health care disparities. These standards may be reviewed by going to www.minorityhealth.hhs.gov and reviewing the Office of Minority Health's Cultural Competency information. Translation services at no cost to the patient during the provision of services are available through Versant Health for members requiring communication in a language other than the languages available at the participating Versant Health office. As a best practice, Eye care professionals should contact provider services at 1-800-77DAVIS at least seven (7) business days prior to the patient's appointment to request translation services. The patient's language preference must be documented in the patient's clinical files. Refusal by a patient to accept access to language assistance through the Company at no cost to the member should also be documented in the clinical files. The Company's client health plans, through which a member may be enrolled, are required by law to give the member written information concerning health care advance directives. If a member is not competent to make health care decisions due to a physical or mental change or condition as determined under applicable state law and gives the eye care professional an advance directive regarding the member's health care, the eye care professional is required to document the member's medical record with respect to the existence of the advance 57 DV-PROV v001 September 2019 directive in compliance with the Patient Self-Determination Act (Section 4751 of the Omnibus Reconciliation Act of 1990), as amended, and other applicable law. The advance directive will serve as the member's instructions, as applicable, regarding the provision or withholding of eye care services or the designation of another individual to make treatment decisions on the member's behalf if the member is or becomes unable to make his/her own decisions.

Contract Language:

Section V .4 "Obligation of Providers" Compliance with DAVIS Rules

PROVIDER agrees to be bound by all of the provisions of the rules and regulations of DAVIS, including without limitation, those set forth in the Provider Manual. PROVIDER recognizes that from time to time, DAVIS may amend such provisions and that such amended provisions shall be similarly binding on PROVIDER. DAVIS shall maintain the Provider Manual to comply with applicable laws and regulations. However, in instances when DAVIS' rules are not in compliance, applicable State and federal laws and regulations shall take precedence and govern. PROVIDER agrees to cooperate with any administrative procedures adopted by DAVIS regarding the performance of Covered Services pursuant to this Agreement.