

## Provider Directory and Subdirectory Questionnaire

### **Purpose:**

Section 438.10 of the Managed Care Federal Regulation issued on May 6, 2016, requires providers who provide health care services to Minnesota Health Care Programs (MHCP) members enrolled in a Managed Care Organization (MCO) must confirm compliance with the requirement of cultural competency training and accessibility for people with disabilities.

### **Instructions:**

1. Please complete this form for **each location** you own or manage.
2. Email completed form to [PNM\\_Fax@ucare.org](mailto:PNM_Fax@ucare.org) (PNM\_Fax@ucare.org) or Fax to 612-884-2232.

If you have questions, please send an email to the email address listed above or call the UCare Provider Assistance Center at 1-888-531-1493.

Sole Practitioner Name (First, Middle Initial, Last) \_\_\_\_\_

Clinic/Facility Name \_\_\_\_\_

Office Location Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

NPI Number \_\_\_\_\_

Clinic/Facility/Sole Practitioner Website URL \_\_\_\_\_

Clinic/Facility/Sole Practitioner Phone Number (including area code) \_\_\_\_\_

Is your office accepting new patients? Yes  No

### **Cultural Competency:**

Cultural and linguistic competence is the ability of managed care organizations and the providers within their network, to provide care to recipients with diverse values, beliefs and behaviors, and to tailor the delivery of care to meet recipients' social, cultural, and linguistic needs. The ultimate goal is a health care delivery system and workforce that can deliver the highest quality of care to every patient, regardless of race, ethnicity, cultural background,

language proficiency, literacy, age, gender, sexual orientation, disability, religion, or socioeconomic status.

Have the staff in your office completed cultural competency training in the past 12 months?

Yes  If yes, please provide month/year \_\_\_\_\_ No

**Accessibility:**

The following provider types do not need to complete the accessibility portion of this questionnaire: Home Health, Home and Community Based Services (HCBS), Nursing Homes, Personal Care Assistance (PCA), and Transportation.

The Americans with Disabilities Act (ADA) requires public accommodations to take steps to ensure that persons with disabilities have equal access to their goods and services. For example, the ADA requires public accommodations to make reasonable changes in their policies, practices, and procedures; to provide communication aids and services; and to remove physical barriers to access when it is readily achievable to do so. <https://www.ada.gov/>

Is your office, including parking, entry ways, and other relevant space, accessible for people with disabilities? Yes  No

Are your office exam rooms accessible for people with disabilities? Yes  No

Does your office have equipment accessible for people with disabilities? Yes  No

Please provide a contact name and phone number in case of questions on the responses to this questionnaire:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Phone Number