

CULTURAL COMPETENCY TRAINING ATTESTATION 2024

Mandatory Requirement: Centers for Medicare and Medicaid Services (CMS)

Molina Healthcare is required to offer an annual Cultural Competency (CC) training to our participating provider network that meets the Centers for Medicare and Medicaid Services (CMS) guidelines in rule 42 Code of Federal Regulations (CFR) 438.10 (h) (1) (vii) to ensure providers meet the unique and diverse needs of all members.

Providers may complete the Molina training to fulfill this requirement if they do not have their own curriculum available in accordance with CMS requirements. Find the Molina training at MolinaHealthcare.com/OhioProviders on the Culturally and Linguistically Appropriate Resources/Disability Resources page under the Health Resources tab.

Providers are required to send the completed Cultural Competency Attestation Form to Molina at OHAttestationForms@MolinaHealthcare.com by Dec. 31, 2024. Providers are encouraged to send the form before the deadline to allow time for processing.

Sign below to attest you have completed a CC training that meets the 2024 CMS guidelines. Thank you for your immediate response and cooperation.

I have received and reviewed the training course in compliance with	·	raining, or I have complet	ted my own CC
Clinic/Practice Name:			
Clinic/Practice Address:			
Group Tax Identification Number (TIN):		
Signature:	Date:	State:	
Physician Information: Complete f available to our members to refere spreadsheet containing this inform	ence when selecting a provide nation can be attached if need	r who meets their cultura led.	Il needs. A
Provider Name:			
Provider Ethnicity (NCQA Requiren	nent):		
Provider Race:			
Language(s) Spoken:			
Provider Name:			
Provider Ethnicity (NCQA Requiren	nent):		
Provider Race:			
Language(s) Spoken:			