



**Department of Health Care Service (DHCS) Tribal and Designees of Indian Health Programs Quarterly Webinar on Proposed Changes to the Medi-Cal Program
December 1, 2021
Questions and Answers**

Quality & Health Equity Strategy

- 1. Question:** What are some action based activities and objectives that the Department will set to work towards the goal of eliminating health disparities in the Native American community?

DHCS Response: The Department has seen stark disparities and poor outcomes in the following areas: children’s preventive care, behavioral health integration, maternity outcomes, and birth equity. DHCS will request for stakeholders and Managed Care Plans (MCPs) to focus on these areas and meet specific goals as listed in the [Webinar Presentation](#) from December 1, 2021 (slide 7), to reduce health disparities. In addition, the Department will utilize incentive programs to help reduce health care disparities. Incentive programs include the Quality Incentive Pool (QIP) Program, COVID-19 Vaccine Incentive Program, and upcoming CalAIM and behavioral health incentive programs. The Department also encourages ideas and feedback from tribal organizations on ways to engage Native American communities and tribal health centers to achieve these goals.

- 2. Question:** How can we provide feedback to the Department on our ideas of how to achieve the aforementioned goals?

DHCS Response: You may submit written feedback or send a request to schedule a meeting to the Department’s Chief Quality Officer, Dr. Palav Babaria, via e-mail at Palav.Babaria@dhcs.ca.gov, or to the Office of Tribal Affairs at TribalAffairs@dhcs.ca.gov. In addition, you may submit written feedback during the comment period.

- 3. Question:** What is the timeframe for the comment period?

DHCS Response: The Department anticipates posting the document on the DHCS website in the upcoming month for which there will be a 30 day comment period. The Office of Tribal Affairs will send a notification e-mail to stakeholders once the document has been posted.

4. **Question:** Will there be tribal consultation or a more in depth process with tribes to discuss this strategy?

DHCS Response: DHCS has been consulting with and has already incorporated feedback from tribal representatives at DHCS. In addition, we wanted to present the information at this meeting and then based on the feedback received from this group, arrange any specific follow up that may be needed in parallel with the 30 day posting period, including setting up specific meetings and focus groups for further discussion as recommended.

5. **Question:** Can you explain how the MCP auto-assignment algorithm works?

DHCS Response: A new Medi-Cal member may choose to select their MCP. Members who do not select a plan will be auto-assigned to a MCP (if there is more than one MCP in that county), based off of performance on certain quality measures. The Department will be adding health care disparities to its auto-assignment algorithm so plans with higher health disparities will have fewer members assigned to them. This will benefit not only members that do not pick a plan, but also serve as an incentive to get MCPs to improve their performance measures.

6. **Question:** What types of efforts will be made to ensure that our patients have continuity of care?

DHCS Response: Primary care provider assignment will be done at the MCP level, not at the state level. Also, a Native American member may choose to receive services with any tribal health clinic as listed in All Plan Letter (APL) [17-020 Attachment #1](#) for an Indian Health Service/Memorandum of Agreement (IHS/MOA) clinic or [APL 21-008 Attachment #2](#) for a Tribal Federally Qualified Health Center (FQHC) clinic, whether or not the clinic is contracted with the MCP they are assigned to.

7. **Question:** Does the quality and health equity strategy apply to Tribal FQHCs?

DHCS Response: The quality and health equity strategy helps shape the vision for DHCS. The specific requirements are targeted towards the MCPs, not at the provider level.

8. **Question:** How will the Department provide assistance to MCPs that are not performing well?

DHCS Response: DHCS' Managed Care Quality and Monitoring Division will provide a Corrective Action Plan, sanctions, and other assistance that may be needed to MCPs that fall below the performance threshold.

Exclude Reparation Payments from Recovery - SPA 21-0069

- 9. Question:** If a beneficiary receives compensation from the Forced or Involuntary Sterilization Compensation Program, will the compensation amount affect the member's eligibility in Medi-Cal?

DHCS Response: Compensation received from the Forced or Involuntary Sterilization Compensation Program will be excluded as income and resources from Medi-Cal eligibility determination.