### DHCS Responses to Follow-Up Items from August 11

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<th>Follow-Up Items</th>
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<td><strong>Updates:</strong> Anthony Wright, Health Access California: Thank you for moving forward on the Estate Recovery program changes. Is there a process to educate enrollers or others about the change? This became a significant item that enrollers and others learned about over the past few years and will need to understand the changes to “unlearn” some previous information.</td>
<td>Jennifer Kent, DHCS: We are working on submission of the SPA and the 3rd party liability staff is working to update materials and change public facing documents to push out information to groups we work with. As we get closer to the implementation, we can work with you on who we should reach out to. We also work with the state bar since there are attorneys who help people on this issue.</td>
<td>DHCS is working on materials and discussing procedural changes, and plans to connect with stakeholders for input, likely starting in November.</td>
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<td><strong>PRIME:</strong> Erica Murray, CA Association of Public Hospitals and Health Systems: When will the PRIME applications be posted on the waiver renewal website?</td>
<td>Adam Weintraub, DHCS: We distributed a summary of the projects but not the details of individual projects. We will follow up on this.</td>
<td>Approved project plans have been posted.</td>
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<td><strong>SB75 Update</strong></td>
<td>Sandra Williams, DHCS: I want to mention one follow up from the May meeting. We indicated about 96% were English or Spanish. The actual numbers are English 14%; Spanish 82%. We have the details for other languages (each under 1%) and will send out the details after the meeting for the break-outs.</td>
<td>Notice 1, the general information letter to the transitioning population, was sent in these languages: Arabic, 0.47% Armenian, 0.22% Cambodian, 0.01% Chinese, 1.72% English, 13.93% Farsi, 0.12% Hmong, 0.01% Korean, 0.63% Russian, 0.30%</td>
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**SB75 Update, applications and renewals:**

*Kim Lewis, National Health Law Program:* What is the process for knowing these are primarily duplicates? Have they compared the actual applications or is this more about their speculation of what is going on?

*Stephanie Lee, Neighborhood Legal Services of Los Angeles County:* Is there a way to break down data by county and age for adults?

*Sandra Williams, DHCS:* We have gone in to the system to spot-check the applications. Most of the duplicates have an application with some incorrect information – wrong social security number or name - on a separate application. We want to clear this up and figure out why this continues.

*Sandra Williams, DHCS:* We can pull the county specifics and we will work on the age break-down.

Still working to gather and vet additional information.

**Dental Transformation Initiative Update:**

*Lisa Davies, Chapa-De Indian Health Program:* Are tribal health programs participating in the safety net work group?

*Lisa Davies, Chapa-De Indian Health Program:* It would be important to include some tribal health programs in this work.

*Alani Jackson, DHCS:* The work group includes CPCA and rural health clinics but I will check on tribal and get back to you. On the tool, some of the advisory group have taken this back to their locations to test its implementation.

*Mari Cantwell, DHCS:* We can make sure we understand where they fall in the billing today and circle back to you to be sure we aren’t missing something.

The DTI work group has included representatives from:

California Rural Indian Health Board (CRIHB) and California Consortium for Urban Indian Health (CCUIH)