

**DATE:** December 5, 2024

ALL PLAN LETTER 24-017

**TO:** ALL MEDI-CAL MANAGED CARE PLANS

**SUBJECT:** TRANSGENDER, GENDER DIVERSE OR INTERSEX CULTURAL  
COMPETENCY TRAINING PROGRAM AND PROVIDER DIRECTORY  
REQUIREMENTS

**PURPOSE:**

The purpose of this All Plan Letter (APL) is to provide Medi-Cal managed care plans (MCPs) with guidance regarding the transgender, gender diverse, intersex (TGI) cultural competency training program and Provider Directory changes required by Senate Bill (SB) 923 (Chapter 822, Statutes of 2022) for the purpose of providing trans-inclusive health care to MCP Members.<sup>1</sup>

**BACKGROUND:**

SB 923 (Chapter 822, Statutes of 2022), known as the TGI Inclusive Care Act, added Health and Safety Code (H&S) sections 150950, 1367.043, and 1367.28, and Welfare and Institutions Code (W&I) section 14197.09. H&S section 150950 required the California Health and Human Services Agency to convene a TGI Working Group consisting of representatives from state departments, TGI-serving organizations, at least three California residents who identify as TGI, and health care Providers. In accordance with H&S section 150950(b), the TGI Working Group held public listening sessions across the state to receive input on the training curriculum to provide trans-inclusive health care.<sup>2</sup> Trans-inclusive health care is defined in H&S section 1367.043(d)(3) as comprehensive health care that is consistent with the standards of care for individuals who identify as TGI, honors an individual's personal bodily autonomy, does not make assumptions about an individual's gender, accepts gender fluidity and nontraditional gender presentation, and treats everyone with compassion, understanding, and respect.

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<sup>1</sup> California legislation and state law are searchable at: <https://leginfo.legislature.ca.gov>.

<sup>2</sup> The TGI Working Group also makes recommendations for future consideration related to the development of a quality standard for patient experience to measure cultural competency related to TGI communities. Those recommendations are outside the scope of this APL, and are not intended to be addressed as part of an MCP's SB 923 compliance requirements.

This APL outlines the TGI Working Group's recommendations<sup>3</sup> and requirements regarding the implementation of SB 923, including the submission of deliverables and compliance requirements for all MCPs.

**POLICY:**

**I. Evidence-Based Cultural Competency Training Requirements**

MCPs must require all Subcontractors, Downstream Subcontractors, and all staff who are in direct contact, including staff with oral and/or written contact, with Members in the delivery of care or Member Services to complete evidence-based cultural competency training for the purpose of providing trans-inclusive health care for individuals who identify as TGI, every two years or more often if needed.<sup>4</sup> Evidence-based training is a training and assessment method grounded in and supported by research demonstrating their success. MCPs should verify and review any research or data available that supports the efficacy or success of the training program that is being considered. MCPs must complete the following:

1. The MCP must collaborate with a TGI-serving organization(s) meeting the criteria of H&S section 150900(f)(2) to develop training curriculum and facilitate that training to ensure the trans-inclusive health care cultural competency training that is provided encompasses the topics and information recommended by the TGI Working Group. Refer to Attachment A of this APL for trans-inclusive health care cultural competency training curriculum requirements and topics.<sup>5</sup>
2. The MCP must provide to the Department of Health Care Services (DHCS) a signed and dated attestation every two years, that all MCP staff, Subcontractors, and Downstream Subcontractors in direct contact with Members have completed evidence-based cultural competency training. The bi-annual, signed attestation must be submitted to the health education inbox at: [MMCDHealthEducationMailbox@dhcs.ca.gov](mailto:MMCDHealthEducationMailbox@dhcs.ca.gov). MCPs located in the same geographical region or county must coordinate TGI trainings that reflect and encompass the criteria outlined in this APL so that if MCP staff, Subcontractor, or Downstream Subcontractor complete the training for one MCP, they meet the obligation to complete the training for all other MCPs and can attest to training completion. All MCPs within a similar geographical region or county must collaborate on TGI training criteria to prevent duplicative requirements

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<sup>3</sup> TGI Working Group recommendations are available at:

<https://www.dmhc.ca.gov/Portals/0/Docs/DO/TGIFinalReport2024.pdf>

<sup>4</sup> Refer to the MCP Contract for definitions. The MCP boilerplate Contract is available at:

<https://www.dhcs.ca.gov/provgovpart/Documents/2024-Managed-Care-Boilerplate-Contract.pdf>.

<sup>5</sup> Additional details regarding the information and topics that must be included in the training curriculum may be found in section V of the TGI Working Group's recommendations.

while also maintaining accurate training records.

3. The initial training must be completed no later than March 1, 2025. If MCP staff, Subcontractors, and Downstream Subcontractors who are in direct contact with Members have not completed the training by March 1, 2025, the MCP must provide an explanation for the delay and a timeline for completion of the training.

After initial training is completed, MCPs may incorporate TGI training into the MCP's existing diversity, equity, and inclusion (DEI) training program for new and recurring staff training. Refer to APL 24-016, or any superseding APL, for DEI training requirements.<sup>6</sup>

4. The MCP's attestation must also provide that all newly hired staff of the MCP, Subcontractors, and Downstream Subcontractors in direct contact with Members will complete the trans-inclusive health care cultural competency training within 45 days of being hired and every two years thereafter.
5. In addition, MCPs must have policies and procedures (P&Ps) in place to track and report to DHCS when a Grievance is made against a named individual(s) of an MCP or its Subcontractors, Downstream Subcontractors, or staff for failure to provide trans-inclusive care. If a Grievance is decided in the Member's favor, the applicable individual(s) must retake the trans-inclusive health care cultural competency training within 45 days and before they have direct contact with Members again. For requirements on Grievance monitoring and course reporting, see the Section III of this APL (below) titled "Grievance Monitoring and Reporting Requirements".

MCP TGI training instructions and implementation timelines are detailed in Attachment B of this APL.

## **II. Provider Directory Requirements**

No later than March 1, 2025, MCPs must include information accessible from the MCP's Provider Directories and call center identifying which in-Network Providers have voluntarily affirmed they offer and have provided gender-affirming services as detailed in APL 20-018, or any superseding APL, and the MCP Contract. MCPs are required to maintain up-to-date information on which in-Network Providers have voluntarily affirmed they offer and provide gender-affirming services.

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<sup>6</sup> APLs are searchable at: <https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>.

1. The MCP must update its Provider Directory to include information identifying which in-Network Providers have voluntarily affirmed they offer and have provided gender-affirming services. MCPs are also required to make this information accessible through the MCP's call center.
2. The MCP must ensure their Provider Directory is, at a minimum, compliant with the following:
  - Up-to-date directory of in-Network Providers who have attested they offer and have provided gender-affirming services.
  - A mechanism to receive information from in-Network Providers attesting they have provided gender-affirming services to the MCP Provider Directory within 30 days.
  - MCPs must verify information received from in-Network Providers indicating the Provider offers and has provided gender-affirming services.
  - MCPs must follow up on and resolve Grievances of in-Network Providers identifying as providing gender-affirming services who fail to provide trans-inclusive care, or do not offer gender-affirming services. MCPs are reminded that if an in-Network Provider is unavailable to provide Medically Necessary services within timely access standards for appointments, or the Provider type is unavailable within the Network, the MCP must arrange for an out-of-Network Provider to provide the services.
  - MCPs must ensure their in-Network Provider Directories are updated within 30 days following an investigation and finding that information regarding which Providers offer and have provided gender-affirming services is inaccurate or misleading.

MCPs should refer to W&I section 14197.09(c) for a list of services and refer to APL 20-018, or any superseding APL, to become familiar with all antidiscrimination laws applicable to the provision of trans-inclusive care.

### **III. Grievance Monitoring and Reporting Requirements**

MCPs must ensure that Members are made aware of all their Grievance and appeal rights, including their right to submit Grievances to MCPs and the Department of Managed Health Care in accordance with H&S section 1368 and title 28 California Code of Regulations (CCR) section 1300.68 for failure to provide trans-inclusive health care as defined in H&S section 1367.043(d)(3).<sup>7</sup>

If a Member submits a Grievance against an MCP or its Subcontractors, Downstream Subcontractors, or staff for failure to provide trans-inclusive health care, the MCP is

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<sup>7</sup> The CCR is searchable at: <https://govt.westlaw.com/calregs/Search/Index>.

required to report the Grievance through their monthly managed care program data (MCPD) file under the benefit type “Gender Affirming Care.” DHCS will use the Grievance data reported to monitor and publicly report all gender affirming care related Grievances against MCP staff, Subcontractors, and Downstream Subcontractors on the DHCS website as required by H&S section 1367.043(c).

MCPs are also required to submit additional information, as specified by DHCS, that verifies the Grievance data reported under the benefit type “Gender Affirming Care” when the outcomes of the Grievances reported are resolved in a Member’s favor. If a Grievance is resolved in the Member’s favor then the individual named in that Grievance who is employed by an MCP, its Subcontractors, or its Downstream Subcontractors must complete a refresher course by retaking the trans-inclusive health cultural competency training. MCPs are required to submit to DHCS verification of the completed refresher trainings no later than 30 Calendar Days following the monthly MCPD submissions. Verification of the completed refresher trainings may include, but is not limited to:

- Grievance date and MCP reference number;
- Name of the individual, position title, affiliation with the MCP;
- Completion date of the refresher training; and
- Any additional actions taken by the MCP to prevent future complaints.

MCPs should note that any pattern of repeated complaints against an individual, or multiple complaints against multiple individuals of an MCP or its Subcontractors, or Downstream Subcontractors gives rise to a presumption that the MCP or its Subcontractors, and Downstream Subcontractors are not providing adequate trans-inclusive care, as required. Such patterns and practices suggest that existing training is ineffective or that the working culture is hostile to trans-inclusive care and requires further remediation including, but not limited to staff training, staff discipline, and/or re-evaluation of the training curriculum.

#### **IV. Policies and Procedures**

The requirements contained in this APL necessitate a change in MCPs’ contractually required P&Ps. MCPs must submit their updated P&Ps to the Managed Care Operations Division (MCOD)-MCP Submission Portal<sup>8</sup> by March 1, 2025.

MCPs are responsible for ensuring that their Subcontractors, Downstream Subcontractors, and Network Providers comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and

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<sup>8</sup> The MCODE-MCP Submission Portal is located at: <https://cadhcs.sharepoint.com/sites/MCOD-MCPSubmissionPortal/SitePages/Home.aspx>.

Policy Letters (PL). These requirements must be communicated by each MCP to all Subcontractors, Downstream Subcontractors, and Network Providers. DHCS may impose Corrective Action Plans (CAP), as well as administrative and/or monetary sanctions for non-compliance. MCPs should review their Network Provider and/or Subcontractor Agreements, including Division of Financial Responsibility provisions as appropriate, to ensure compliance with this APL. For additional information regarding administrative and monetary sanctions, see APL 23-012, and any subsequent iterations on this topic. Any failure to meet the requirements of this APL may result in a CAP and subsequent sanctions.

If you have any questions regarding this APL, please contact your MCOD Contract Manager.

Sincerely,

Original Signed by Bambi Cisneros

Bambi Cisneros  
Acting Division Chief, Managed Care Quality and Monitoring Division  
Assistant Deputy Director, Health Care Delivery Systems

### **Attachment A: Guidelines for Evidence-Based Cultural Competency Training and Checklist**

The MCP must explain how it developed the curriculum and how the training is administered, including:

- Identifying the TGI-serving organization(s) that facilitated the training.
- The bid, procurement, or selection process, if any, the MCP utilized to engage with TGI-serving organizations and select a TGI-serving organization qualified to facilitate the training.
- Any processes employed to verify and evaluate the experience of the TGI-serving organization to facilitate the training.
- The procedures for oversight and monitoring the MCP implemented to verify the training and performance of the TGI-service organization complied with the requirements of H&S section 1367.043(a).
- A description of the training materials, including whether the training materials include written and/or electronic materials, and the manner in which the training is conducted, such as in-person, via video conferencing, or through on-demand video or other access.
- The MCP affirms it will maintain related P&Ps that require MCP staff, Subcontractors, and Downstream Subcontractors to retake the full course when a Grievance is made against an employee for failure to provide trans-inclusive care, and a decision was made in favor of the Member.
- The MCP will explain whether the MCP delegated compliance to a contracted entity. If so, identify the entity to whom the MCP delegated compliance, explain the scope of delegation, and identify P&Ps the MCP utilized to monitor and oversee performance of the delegated entity.

The tool below was created for MCPs to use when developing TGI training curriculum components. MCPs are responsible for complying with all applicable state and federal law, Contract requirements, and APLs and PLs.

TGI Training Curriculum Requirements		Completed Y/N
Curriculum Components		
1	Welcome/Introduction	
2	Introduction to Cultural Competency in Health Care Coverage	
3	Effects of Historical, Contemporary, and Present-Day Exclusion, Microaggressions, and Oppression	
4	Effective Communication Across Gender Identities	
5	Trauma-Informed Approaches to Care Delivery	
6	Health Inequities and Family/Community Acceptance	
7	Perspectives from Diverse Constituency Groups and TGI-Serving Organizations	
8	Personal Values and Professional Responsibilities	
9	Health Plan Considerations for Gender-Affirming Care	
10	Ensure Culturally Competent Health Care Services	
11	Collaborative Approaches to Enhance TGI Access to Care	
12	Continuous Quality Improvement	
13	Transgender services covered under Medi-Cal as detailed in APL 20-018 or any superseding APL <sup>9</sup>	

<sup>9</sup> APL 20-018 on Ensuring Access to Transgender Services can be found at:

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-018.pdf>.



TGI Training Curriculum Requirements		Completed Y/N
<b>Inclusion of Real-Life Experiences and Challenges of TGI Individuals Including:</b>		
1	Challenges with Accessing Health Care Services	
2	Lack of Knowledge Among Health Care Staff, Including Plan Staff	
3	Gaps in Data Collection	
4	Denials by Health Plans – Gender Affirming Care	
5	Denials by Health Plans – Interlapping Health Care Problems	
6	Effects on Mental Health	
7	Privacy Considerations	
8	Positive Experiences with Health Care Providers and Health Plans or Insurers	
9	Grievances with Health Care Providers and Health Plans	
10	Intersectional Barriers	
<b>Sub-Population Considerations (Include All Applicable Sub-Populations for the MCP's Servicing Area):</b>		
1	Intersex Individuals	
2	TGI Youth	
3	Elderly TGI Individuals	
4	Non-Binary Individuals	
5	Individuals with Physical Health Disabilities	
6	Individuals with Mental Health Disabilities	
7	Neurodivergent Individuals	
8	Guardians of TGI Individuals	
9	The Spectrum of Reproductive Health Care for TGI individuals	

The table below is included for MCPs to add components they identify as necessary and has opted to include in the curriculum.

[illegible]

**Attachment B: Implementation Timelines**

MCPs develop and implement TGI training and complete training of all staff, Subcontractors, and Downstream Subcontractors	By March 1, 2025
MCPs update Provider Directories to identify in-Network Providers who offer and have provided gender-affirming services	By March 1, 2025
MCPs submit TGI training curriculum to DHCS for review	By March 14, 2025
DHCS reviews and approves TGI training	March 15, 2025 – June 15, 2025

- MCPs must submit their TGI training curriculum to the MCOB-MCP Submission Portal by March 14, 2025.
- DHCS utilizes a standard review tool for assessing compliance with TGI training requirements. Refer to Attachment A of this APL for the TGI training curriculum review checklist.