

**Transgender, Gender Diverse, or Intersex (TGI) Health Care Quality Standards and  
Training Curriculum Working Group  
April 12, 2023  
Meeting Summary**

**1. TGI Working Group Members in Attendance**

**In-person attendees:**

**Dannie Ceseña**, California LGBTQ Health and Human Services Network (he/him/they/them)  
**Bambi Cisneros**, Department of Health Care Services (she/her/hers)  
**Miles Harris**, UC Davis Health (he/him)  
**Stesha Hodges**, California Department of Insurance (she/her/hers)  
**Evan Johnson**, Youth Programs for Trans Family Support Services (they/them/theirs)  
**Adrian Naidu**, California Public Employees' Retirement System (he/him/his)  
**Skyler Rosellini**, National Health Law Program (he/him)  
**Jacob Rostovsky**, Queer Works (he/him/his)  
**Dr. Ryan Spielvogel**, Sutter Family Medicine Residency Program (he/him)  
**Jason Tescher**, California Department of Public Health (he/him/his)

**Virtual attendees:**

**Thomi Clinton**, Transgender Health and Wellness Center (she/her/hers)  
**Bee Curiel**, TransLatin@ Coalition (they/them)  
**J.M. Jaffe**, Lyon-Martin Community Health Services (they/them)  
**Farnaz M. Kaufman**, Global Educational Initiatives for iLEAD Schools (she/her/hers)  
**Kendra M. Muller**, Disability Rights California (she/they)  
**Dr. Scott Nass**, Transgender Health and Wellness Center (he/him/his)  
**Morey Riordan**, Transgender Strategy Center (he/him/his)  
**Taylor Priestly**, Covered California (she/her)

**Department of Managed Health Care (DMHC) Staff in Attendance:**

**Mary Watanabe**, Director (she/her/hers)  
**Amanda Levy**, Deputy Director, Health Policy and Stakeholder Relations (she/her/hers)  
**Asha Jennings**, Attorney III (she/her/hers)  
**Mary Peterson**, Attorney III (she/her/hers)  
**Latika Sharma**, Attorney III (she/her/hers)  
**Sara Ortiz**, Staff Services Manager I (she/her/hers)  
**Leslie Thompson**, Associate Governmental Program Analyst (she/her/hers)  
**Shaini Rodrigo**, Staff Services Analyst (she/her/hers)  
**Alma Ochoa-Soria**, Associate Governmental Program Analyst (she/her/hers)

## **2. Welcome**

Director Mary Watanabe called the meeting to order and welcomed the Working Group members and attendees participating virtually and in-person. Director Watanabe reviewed the agenda and housekeeping items, and provided an overview of the purpose, charge and goals of the working group.

## **3. Opening Remarks**

Opening remarks were provided by California Senator Scott Wiener and California Health and Human Services Assistant Secretary Kimberly Chen, both thanked the members of the working group for their participation.

## **4. Working Group Member Introductions**

Each Working Group member introduced themselves, providing information on their backgrounds and organizational affiliations. Additionally, Director Watanabe stated the Department is planning to have a consultant facilitate future meetings. The Department released a solicitation earlier in the year and selected Queer Works to assist with planning and facilitating the TGI Working Group meetings and listening sessions. The contract is going through the final approval process and should be in place before the next meeting. Jacob Rostovsky, the CEO of Queer Works, was selected to be a member of the working group and will participate in the Working Group meetings as a member until the contract has been approved.

## **5. Overview of the DMHC**

Health Policy and Stakeholder Relations Deputy Director Amanda Levy provided an overview of the DMHC's mission, accomplishments, enrollment, and timely access requirements. In addition, Ms. Levy provided contact information for the DMHC's Help Center.

## **6. Facilitated Discussion: Working Group Goals, Future Presentations, and Timeline**

Director Watanabe facilitated a discussion with the Working Group members regarding the goals and expectations for the working group, future presentations that would be helpful and input on the communities and locations for the listening sessions. The Working Group identified the following items:

### **Considerations for future presentations:**

- The working group members have extensive experience and expertise that can be shared with the group. One recommendation was to poll the members on their experience and any research they have done and have the working group members take turns sharing their experience and providing information about their organization at each meeting.
- Identify and map the barriers to what is within the scope of the working group.

- Presentation from the Intersex community on unique barriers and unwanted medical care.
- Landscape assessment of the current requirements for the collection of gender identity data, including current data collection efforts by Department of Health Care Services (DHCS), Covered CA, and CalPERS.
- Data from DMHC's complaint and Independent Medical Review (IMR) process.
- Information on how health plans collect and use data related to gender identity.
- Data on health plan denials and their justifications.
- Data on gender-affirming surgery outcomes and follow-up care.
- Fact sheet on populations that fall within the scope of the working group and the oversight of the state departments participating in the working group.
- Overview of sexual orientation and gender identity (SOGI) data collection and National Committee for Quality Assurance (NCQA) measures.
- Overview of ICD 10 Codes.

### **Recommendations for the listening sessions:**

- Provide American Sign Language (ASL) interpreters at all listening sessions.
- Include a Spanish language facilitated listening session or multiple sessions in each location that would include a listening session in English and another in Spanish.
- Recommended locations: San Francisco, Oakland, Central Valley, Bakersfield, Los Angeles, San Diego, and Coachella Valley.
- Ensure community engagement includes Spanish speaking, immigrant, undocumented and rural communities.
- Request for compensation, transportation access, and childcare for meeting participants.
- Provide mental health support for community members sharing the trauma they have experienced in the health care system.

### **Other issues raised by the Committee members:**

- Lack of access in rural communities, including telehealth.
- Lack of an adequate network of quality, culturally competent providers with experience in transgender care.
- Lack of training in cultural competency.
- TGI community healthcare access should mirror those of the non-TGI community.
- IMR reviews should be done by neutral providers with transgender experience.
- Utilization measures to change the framing of cosmetic procedures.
- Improve the ability to change gender identity for providers and plans to access and keep record.
- Update state forms to include nonbinary gender markers and decouple sex and gender.
- Concern about elder trans community and access to aging and end of life services within hospice care.
- Concern about unhoused population.

**Action items:**

- Expand working group to address the lack of Black Transgender and Intersex representation on the working group. Working group members agreed to send the DMHC recommendations for organizations that may be interested in participating.
- Create a framework for the meetings, including the use and display of pronouns to create a safe environment for all.
- The DMHC will present an overview of the Consumer Participation Program (CPP) at the next meeting.
- DMHC will present data on IMRs and consumer complaints.

**7. Public Comment**

Director Watanabe asked for public comment and noted public comments could be submitted anytime to the DMHC's public comment inbox. There was no public comment. Director Watanabe closed the meeting and stated the next meeting would likely occur in the second half of May.