



Los Angeles County  
**DEPARTMENT OF MENTAL HEALTH**  
ROBERT BURCHUK M.D.  
MEDICAL DIRECTOR

January 3, 2019

To: Fee for Service Network Provider

**SUBJECT: Network Adequacy and Cultural Competence Plan Requirements For Cultural Competence Training**

There are currently two separate provisions under which cultural competence training must be obtained by persons employed by, or under contract with, the LACDMH (collectively referred to as the Mental Health Plan-MHP). These provisions are similar but not identical. One is associated with the Federal Medicaid Managed Care "Final Rule" requirements for Network Adequacy under Title 42 CFR 438 Part 2, the other with the State Medi-Cal regulations under Title 9 CCR 1810.410 as reflected in the Departments' Cultural Competence Plan. While both of these provisions set forth requirements for cultural competence training, neither specifies a minimum number of hours/minutes for the training:

- 1. Network Adequacy Requirement- All practitioners** (Directly Operated and Contracted including fee-for-service) who currently provide Medi-Cal outpatient specialty mental health services (SMHS) regardless of level (e.g. a BA level staff), time (e.g. a supervisor who rarely sees clients), program (e.g. wraparound, psychiatric mobile response team) or whether they carry a "caseload" (e.g. a housing coordinator) must provide the number of hours of cultural competence training received with the past 12 months.  
*Note: For the purpose of this requirement, outpatient SMHS include mental health services, targeted case management, medication support services and crisis intervention. Inpatient, residential, crisis stabilization, day treatment/rehabilitation and community outreach services are not included.*
- 2. Cultural Competence Plan Requirement-** All MHP workforce members inclusive of clerical/support, financial, clinical/direct service, and management from Directly Operated, Legal Entities/Contracted and Administrative programs must complete annual cultural competence training.

To meet these requirements, providers must complete the Network Adequacy Certification Tool (NACT) application using the instructions provided by the LACDMH Quality Assurance Division.

In addition to the multiple instructor-led trainings and conferences, LACDMH offers on-line trainings to meet the culture competence requirements including:

1. County of Los Angeles Implicit Bias
2. "Cultural Competency 101" training videos developed by the Quality Improvement Division-Cultural Competency Unit:

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**Part 1:** Basic definitions, regulations related to cultural competency, LACDMH strategies to reduce mental health disparities, and LACDMH demographic and client utilization data [Duration: 37 minutes]

[http://lacountymediahost.granicus.com/MediaPlayer.php?clip\\_id=6638](http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=6638)

**Part 2:** Cultural humility, client culture, stigma, elements of cultural competency in service delivery, and resources [Duration: 30 minutes]

[http://lacountymediahost.granicus.com/MediaPlayer.php?clip\\_id=6640](http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=6640)

**Part 3:** Cultural competency scenarios and group discussion [Duration: 19 minutes]

[http://lacountymediahost.granicus.com/MediaPlayer.php?clip\\_id=6639](http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=6639)

For questions regarding the Final Rule (Network Adequacy) requirement, please contact Mr. Howard Washington, Quality Assurance Management Fellow, at [hwashington@dmh.lacounty.gov](mailto:hwashington@dmh.lacounty.gov).

For questions regarding the Cultural Competence Plan requirement, please contact Dr. Sandra Chang Ptasinski, Ethnic Services Manager, at [schang@dmh.lacounty.gov](mailto:schang@dmh.lacounty.gov).

Sincerely,



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Mental Health Clinical Program Manager III  
Clinical Operations-Intensive Care Division

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c: Robert Burchuk, Managed Care Medical Director  
April Byrd, Mental Health Clinical Program Manager I

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
OFFICE OF ADMINISTRATIVE OPERATIONS  
QUALITY IMPROVEMENT DIVISION  
CULTURAL COMPETENCY UNIT**

**FREQUENTLY ASKED QUESTIONS REGARDING THE CULTURAL COMPETENCE  
TRAINING REQUIREMENTS FOR THE NETWORK ADEQUACY REPORT AND  
THE MEDI-CAL SYSTEMS REVIEW/CULTURAL COMPETENCE PLAN REQUIREMENT**

**1) Who should complete the cultural competence training for the Network Adequacy reporting?**

All direct service practitioner in outpatient programs, including Directly Operated and Contract programs must complete this training. The information needs to be entered into the application based on Legal Entity, Provider Number, and practitioner. In addition, this information needs to be entered on a quarterly basis for each provider number and each practitioner on the hours of cultural competence training completed.

**2) Who is NOT required to complete the Network Adequacy reporting?**

- Programs and facilities who do not provide Medi-Cal services (Non Medi-Cal services/providers);
- Inpatient service providers; and
- Non practitioner staff

**3) Are the Network Adequacy and Medi-Cal Systems Review/Cultural Competency Plan training requirements the same?**

No.

- For the Network Adequacy requirement - 100% of direct service practitioners (clinicians, case managers, psychiatrists, etc.) must complete a cultural competency training between April 2017 to March 2018 per the State request to report cultural competence training in the past 12 months and hours of training.
- For the Medi-Cal Systems Review/ Cultural Competence Plan Requirement - 100% of staff including clerical support staff, direct service providers, and management/administration need to complete a cultural competence training annually.

**4) Why are we reporting on cultural competence training under the Network Adequacy Report?**

Cultural competency is required for Network Adequacy reporting. The State requires reviewing this component for Network Adequacy and ensuring that our providers of services (direct service practitioners) are culturally competent. When Program Heads/Directors log into the application, they will report if each of their practitioners completed a cultural competency training and how many hours of training they have completed.

**5) What are the Network Adequacy expectations for Fee for Service (FFS) hospitals?**

The Network Adequacy requirements **do not apply** to inpatient services.

**6) If staff have taken the cultural competence training before, are they required to take it again?**

- For the Network Adequacy report, as long as the training was completed between April 2017 and March 2018, there is no need to take it again.
- For the Medi-Cal Systems Review/Cultural Competence Plan requirements, a cultural competency training is required **annually** for 100% of the staff.

**7) Can the requirement be met by taking another training (other than the QID CC 101 training) that meets the cultural competency requirement?**

Yes.

**8) If providers have not participated in any training that meets the cultural competency requirement, will the Cultural Competency 101 training meet this requirement?**

Yes.

**9) In terms of cultural competency, does participation in a Black History Month Program count?**

No. To be in compliance with this requirement, it must be a formal training or a conference that focuses on a specific cultural group or groups.

**10) Regarding the Cultural Competence training, can the agency's in-house Cultural Competence trainings fulfill the requirement in lieu of the Cultural Competency 101 training?**

Yes.

**11) Do you have to include our non-permanent doctors and student workers to complete the training as well?**

Yes. This is required for the Network Adequacy report as well as for the Medi-Cal Systems Review/Cultural Competence Plan requirement.

**12) Can we report for all our agency sites together vs. multiple ones for each of our sites?**

Reporting is required for each site by Provider number. For example, if an agency has five sites with five different provider numbers, five reports are required.

**13) If my agency can provide documentation for staff who completed the training between April 2017 and March 2018 that shows 100% compliance, do we need to have everyone who is already trained watch these videos?**

No.

**14) What is the requirement for new staff or staff who are outside the 12 month range?**

They can complete the on-line Cultural Competency 101 training or any other cultural competence training.

**15) Can agencies fulfill the cultural competency requirements in their own way (through outside CC trainings, etc.) instead of the cultural competence training 101 video?**

Yes. Providers have the option of utilizing any cultural competence training that their staff may have completed between April 2017 and March 2018. Should providers opt to use alternate trainings, they will need to log in the specific number of hours of completed

cultural competence trainings for each staff into the application referenced in the QA Bulletin.

**16) Are we required to report the number of hours for cultural competence training?**

- Yes, for the Network Adequacy Report
- No, for the Medi-Cal Systems Review/ Cultural Competence Plan requirement. A signed attestation from the Program manager/Director is required annually.

**17) When I clicked one training link, it said to install WIN MEDIA PLAYER. Is this normal?**

This may happen when the staff have a newer computer or a computer that has never had video played on it. Our media expert recommended that you try “Recommended Setting” and it will play back. For further issues, call the help desk to open a HEAT ticket and/or try another computer for playback.

**18) How do we have proof that we completed the cultural competence 101 training if there is no certificate attached for this training?**

- a. Program Heads/Directors can show the cultural competency 101 training videos during a staff meeting and have all the staff complete a sign-in sheet
- b. Each staff can send an email to their Program Heads/Directors attesting that they completed the training, if they completed it individually
- c. Program Heads/Directors can check that their staff are in the process of completing the cultural competence 101 training, then complete the attestation form

**19) If a training is checked off as “cultural competency” on the training bulletin, then yes, it can be utilized to meet the requirement?**

Yes.

**20) Regarding the Cultural Competence training requirement, the memo states that “100% of the LACDMH workforce inclusive of clerical/support, financial, clinical/direct service, and administrative/management shall receive cultural competency training. Does this requirement apply to non-LACDMH programmatic workforce?**

This requirement applies to all DMH directly operated programs and contracted legal entities, including fee for service outpatient providers.

**21) Do 100% of LE’s staff need to take the cultural competence training?**

No, only those staff who work for DMH funded program(s). More specifically, those staff providing mental health services, **inclusive** of clerical and administrative staff.

**22) How about if the agency has non-mental health related programs?**

This is not required for non-Mental health related programs.

**23) How do providers report their information**

The Network Adequacy Certification Tool (NACT) instructions related to the cultural competence training specify that counties have to select “yes”- If the provider has had training in the past 12 months. If the provider has not received cultural competence training in the past 12 months, the answer is “no”.

**24) What are the reporting periods?**

The timeframes for submission of completed CC trainings:

- Quarterly Update - October 1, 2018  
(reporting period: March 1, 2018 – August 31, 2018)
- Quarterly Update - January 2, 2019  
(reporting period: September 1, 2018 – November 30, 2018)
- Annual Update - April 1, 2019  
(reporting period: December 1, 2018 – February 28, 2019)
- Quarterly Update - July 1, 2019  
(reporting period: March 1, 2019 – May 31, 2019)