

Regulatory Provider Training

Updated February 2025

Diversity, Equity and Inclusion

Diversity, Equity and Inclusion: About Our Membership



- 173,439 members (in 2024).
- 81% are Medi-Cal members.
- Almost ½ of our members are Hispanic/Latino.
- Largest subgroups in our Asian and Pacific Islander membership are Filipino and Chinese.

Diversity, Equity and Inclusion: Disparities by Race



- Black-identifying members experience disparities in Kidney Exams for Diabetes (KED) and Well Child Visits (W30-2+, WCV).
- Additionally, the Asian or Pacific Islander members experiences disparities in blood pressure control and diabetes (CBP, BPD).
- Finally, Caucasian members experience the highest volume of disparities, including in blood pressure control, diabetes management, cervical cancer screening, well visits, and child and adolescent immunizations.

Diversity, Equity and Inclusion: Federal Regulations

Federal regulations prohibit discrimination based on many factors, including:

- Age
- Race
- Color
- National origin
- Disability
- Religion
- Sex



Diversity, Equity and Inclusion: Institutional Racism

What is institutional racism?

Institutional racism includes policies or behaviors within an organization discriminating against people of color— either intentionally or unintentionally. Structural racism is a system in which those policies and laws perpetuate racial and ethnic group inequality.

Why should I care about institutional racism?

Because discrimination against people based on their race is so pervasive into our culture, racism is not often explicit or conscious. To best serve our members, we must understand what kinds of daily inequities they experience that impact their health and wellness and our own biases.

Diversity, Equity and Inclusion: Patient-Centered Communication



Fundamentals of Patient-Centered Communication:

- Eliciting and understanding patient perspectives (e.g., concerns, ideas, expectations, needs, feelings, and functioning).
- Understanding the patient within his or her unique psychosocial and cultural contexts.
- Reaching a shared understanding of patient problems and treatments that are concordant with their values.

Diversity, Equity and Inclusion: Disparities by Language



- 45.1% of members prefer a language other than English.
- Our threshold languages are Spanish, Chinese (Mandarin/Cantonese) and Tagalog.
- Members speaking non-threshold non-English languages experience disparities in Cervical Cancer Screening (CCS), Well Visits (W30-2+, WCV), Perinatal Care (PPC:PN) and childhood immunizations (CIS-10).

Diversity, Equity and Inclusion: Language Assistance Services



- Providing HPSM members with limited English proficiency with language assistance services is a contractual requirement.
- HPSM offers free, on-demand interpreter services via phone, video, and in-person.
- Members should NOT be asked to provide their own interpreter.

Certified Languages International Phone Line (24/7): 1-800-225-5254

Access Code: 64095

<https://www.hpsm.org/provider/resources/language-services>

Email: interpreters@hpsm.org

Diversity, Equity and Inclusion: Health Literacy

Health Literacy: the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

Make healthcare information more accessible by:

1. Utilizing interpreter services.
2. Using techniques like the teach back method.
3. Ensuring that appointments are accessible for all patients at all points of contact.
4. Providing tools to support patients in getting the care they need.

Diversity, Equity and Inclusion: Disparities by Age

- The 17-21 age group experiences disparities in Diabetes Care (HBD-A1C, EED, KED), well visits (WCV, AAP) and Perinatal Health care (PDS, PND, PPC:PN).
- The 22-50 age group experiences similar disparities in Diabetes Care (HBD-A1C, EED, KED, BPD), Controlling Blood Pressure (CBP), and well visits (AAP).

Diversity, Equity and Inclusion: Disparities by Gender



- Men experience disparities in Diabetes Care (HBD-A1c, EED, BPD) and well visits (WCV, AAP).

Diversity, Equity and Inclusion: Disparities for People with Disabilities

- People with disabilities experience a high volume of disparities, including in Asthma Medication Ratios (AMR), Blood Pressure Control (CBP), Diabetes Care (EED, KED, BPD) and Cervical Cancer Screening (CCS).

Diversity, Equity and Inclusion: LGBTQIA+ Community



HPSM does not currently collect SOGIE (Sexual Orientation, Gender Identity and Expression) data. Review these tips for working with LGBTQIA+ members:

- **ALWAYS ASK:** “What is your preferred name? What are your preferred pronouns?” Once the member answers, do not deviate from their preferred name and pronouns. Be sure to note their preference.

Diversity, Equity and Inclusion: LGBTQIA+ Community

DEFINITIONS:

- **Gender identity “How I identify”:** Gender identity is the personal sense of one's own gender. Gender identity can correlate with a person's assigned sex or can differ from it.
- **Gender expression “How I look and express myself”:** Gender expression, or gender presentation, is a person's behavior, mannerisms, interests, and appearance that are socially associated with gender. This can range from masculine, to feminine, to androgenous.
- **Sex assigned at birth:** Sex assigned at birth is the label at birth based on external genital anatomy. This is either Male or Female
- **Sexual attraction:** Sexual attraction is who a person is physically attracted to.

Diversity, Equity and Inclusion: LGBTQIA+ Community

DEFINITIONS (CONTINUED):

Sexual Orientation: Sexual orientation is a person's identity in relation to the gender or genders to which they are sexually attracted. There are many different types of sexual orientation including but not limited to:

- **Lesbian:** A woman with a significant attraction to members of the same gender, or who identifies as a member of the lesbian community.
- **Gay:** One who has significant sexual attractions primarily to members of the same gender or sex, or who identifies as a member of the gay community. Typically associated with men.
- **Bisexual:** The potential to be sexually attracted to people of more than one sex and/or gender, not necessarily at the same time, not necessarily in the same way, and not necessarily to the same degree.

Diversity, Equity and Inclusion: LGBTQIA+ Community

DEFINITIONS (CONTINUED):

- **Transgender:** Umbrella term for those whose gender expression or identity is not congruent with the sex assigned at birth and/or whose gender is not validated by the dominant culture.
- **Queer:** Reclaimed derogatory slang by many who reject gender and sexual binaries. Also used as a political identity by many who want to dismantle oppressive systems in society.
- **Intersex:** Used for a variety of bodies in which a person is born with reproductive or sexual anatomy that does not fit into the sex binary.
- **Asexual:** Umbrella term for those to tend not to have a sexual desire towards others; asexuals may experience romantic attractions and engage in sexual behavior.

Diversity, Equity and Inclusion: LGBTQIA+ Community

DEFINITIONS (CONTINUED):

Non-Binary: “Non-binary” is generally used as an umbrella for various gender nonconforming identities and is most often used by those who do not strictly identify as "male" and "female."

Pansexual: One who can feel an attraction to anyone, including individuals who do not identify as a specific gender. Pansexual people may describe their attraction as focusing on personality rather than gender.

Cisgender: Umbrella term for those whose gender expression and gender identity are congruent with the sex assigned to them at birth, and whose gender is validated by the dominant culture.

Diversity, Equity and Inclusion: Gender-Affirming Care

Gender-affirming care is a supportive form of healthcare that includes, medical, surgical, mental health, and non-medical services for transgender and nonbinary people.

Some things you can do:

- Share and list your pronouns.
- Make all-gender restrooms available.
- Use gender inclusive language on forms and during health encounters.
- Ask and use members' preferred names.

<https://www.hpsm.org/provider/resources/language-services/tips-for-supporting-lgbtqia-patients>

Diversity, Equity and Inclusion: Beliefs Around Illness and Health

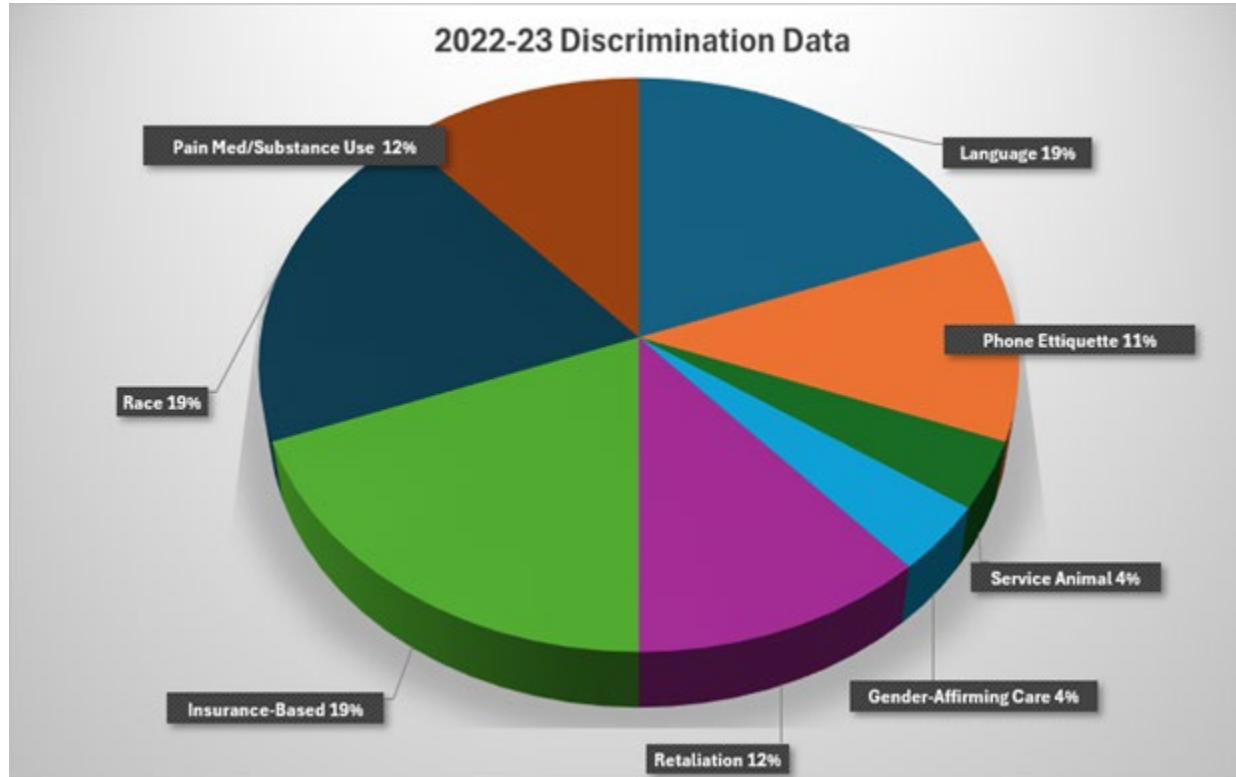
Cultural beliefs can influence:

- Where patients seek help.
- Types of treatments patients prefer.
- Clear communication can help establish trust.
- Home remedies.

About home remedies: Home remedies, may be used more often by communities of color because of cultural, financial, and trust-related factors.

Remember to take a patient-centered approach and work with members to understand what remedies work for them. A treatment plan can be created with these in mind to provide a holistic and more positive health care experience.

Diversity, Equity and Inclusion: Discrimination-Related Grievances



Contact Information



Here is important contact information for HPSM providers:

- **General email:** PSInquiries@hpsm.org
- **General phone number:** 650-616-2106
- **Contracting:** HPSMcontracting@hpsm.org
- **Credentialing:** HPSMcredentialing@hpsm.org