



A Public Entity

INLAND EMPIRE HEALTH PLAN



**To:** IPAs, PCPs, and OBs  
**From:** IEHP – Provider Relations  
**Date:** July 24, 2015  
**Subject:** **OB and Family Planning Services**

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This is a reminder of important protocols concerning direct access to OB/GYN services as specified in AB 1354. Conditions for which a woman can directly access an OB/GYN or eligible FP **without obtaining prior authorization** include, but are not limited to the following:

- Abdominal/Pelvic Pain
- Amenorrhea
- Well-Woman Exam
- Breast Lump
- Dysmenorrhea
- Ectopic Pregnancy
- Endometriosis
- Dysuria
- Estrogen Replacement
  - Therapy/Hormonal Changes
- Mastitis
- Menopause
- PMS
- Pregnancy/Prenatal Care
- Vaginal Bleeding/Vaginal Discharge
- Well Woman Exam

The OB/GYN or FP providing care to non-assigned Members **must obtain prior authorization** from their IPA for procedures, surgery or other services beyond routine or follow-up office visits. Examples of services requiring prior authorization include, but are not limited to, the following:

- Diagnostic Procedures
  - Amniocentesis
  - Colposcopy
  - CT
  - Endometrial Biopsy
  - Ultrasound
  - Other Specialty Diagnostic Procedures
  - MRI
- Services
  - Referrals to Other Specialists
- Surgical Intervention
  - D & C
  - Hysterectomy
  - Laparoscopy
- Treatments
  - Cone Biopsy
  - Cryosurgery

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054.