

Provider Services

MONTHLY POLICY UPDATES

To: IPA Administrators

From: IEHP Compliance Policy & Regulatory Operations

Date: October 3, 2023

Subject: IPA Monthly Interim Provider Manual Changes

Inland Empire Health Plan (IEHP) has made the following interim changes to the 2023 Provider Policy and Procedure Manuals.

It is important that you and your staff familiarize yourselves with these interim changes as updates may impact current business processes and reporting requirements. All interim changes have also been posted here:

Provider Portal at <u>www.iehp.org</u> > For Providers > Provider Manual > 2023 Manuals

If you have any questions regarding the enclosed, please contact our Provider Call Center at (909) 890-2054 or (866) 223-4347.

Sincerely,

Lourdes Nery, MPA Senior Director, Compliance

LINES OF BUSINESS	POLICY/ ATTACHMENT	POLICY TITLE	DESCRIPTION OF CHANGE	REVISION STATUS*	REVISION EFFECTIVE DATE
Medi-Cal & IEHP DualChoice (HMO D-SNP)	09A	Access Standards	The appointment standard timeframes have been updated.	SUBSTANTIAL	9/12/2023
Medi-Cal	9C	Non-Emergency Medical and Non-Medical Transportation Services and Related Travel Expenses	Added modalities list.	MODERATE	9/26/2023
Medi-Cal & IEHP DualChoice (HMO D-SNP)	Att 09	NEMT Physician Certification Statement Form	Emphasized the Plan and Broker's inability to downgrade mode of transportation.	MODERATE	9/13/2023
Medi-Cal	10A	Initial Health Assessment	Updated per APL 22-030, which deactivates the SHA/IHEBA requirements of the IHA.	SUBSTANTIAL	1/1/2023
Medi-Cal & IEHP DualChoice (HMO D-SNP)	14C	Emergency Services	Explains the Plan's financial responsibility and process over post-stabilization care per APL 23-009.	MODERATE	5/3/2023
Medi-Cal	16A	Member Grievance Resolution Process	Removing 180 day limitation for discrimination allegations. Added language for Civil Rights Coordinator	MODERATE	9/26/2023

LINES OF BUSINESS	POLICY/ ATTACHMENT	POLICY TITLE	DESCRIPTION OF CHANGE	REVISION STATUS*	REVISION EFFECTIVE DATE
Medi-Cal	18B	Provider Directory	Policy updated regarding Timely Access Standards and the process when a Provider is not eligible through PAAS.	MODERATE	1/1/2023

Enclosures:

MC; MA_09A - Access Standards (approved and redline)

MC_09C - Non-Emergency Medical and Non-Medical Transportation Services and Related Travel Expenses (approved and redline)

MC;MA_Att 09 - NEMT Physician Certification Statement Form (approved and redline)

MC 10A - Initial Health Assessment (approved and redline)

MC;MA 14C - Emergency Services (approved and redline)

MC_16A - Member Grievance Resolution Process (approved and redline)

MC_18B - Provider Directory (approved and redline)

cc:

IPA Medical Director IPA Compliance Manager IPA Care Management Manager IPA Utilization Management Manager

***Revision Status:**

 \underline{MIN} = minor grammatical/punctuation corrections are mostly grammatical in nature, or involve changes in terminology for consistency throughout the manual

MOD = involve mostly procedural and/or operational clarifications of existing processes

 \underline{SUBST} = are those that involve major revisions or a complete rewrite of a policy, or reflect changes that affect the Provider or PCP operationally, such as a change to a reporting timeframe or standards

<u>**REPLACEMENT**</u> = replacing a new copy of attachment