

**To:** PCPs, Specialists, Ancillary, BH, Hospitals & IPAs  
**From:** IEHP Compliance  
**Date:** August 26, 2025  
**Subject:** **Ad Hoc Changes – Provider Policy and Procedure Manual for IEHP DualChoice (HMO D-SNP)**

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Inland Empire Health Plan (IEHP) has made the following ad hoc changes to the Provider Policy and Procedure Manual for IEHP DualChoice (HMO D-SNP).

It is important that you and your staff familiarize yourselves with these ad hoc changes, as updates may impact current business processes and reporting requirements. Current policies and procedures are posted here:

[ProviderServices.iehp.org](http://ProviderServices.iehp.org) > Resources > Provider Manuals & Trainings > Manuals > IEHP DualChoice (HMO D-SNP)

For any questions, comments, and concerns, please contact our IEHP Provider Call Center at (909) 890-2054 or (866) 223-4347.

Sincerely,



Lourdes Nery, MPA, CHC, CHPC  
Vice President, Compliance  
IEHP Compliance Officer

LINES OF BUSINESS	POLICY	POLICY TITLE	DESCRIPTION OF CHANGE	DEGREE OF CHANGE	REVISION EFFECTIVE DATE
IEHP DualChoice (HMO D-SNP)	09G	<b>Non-Emergency Medical and Non-Medical Transportation Services and Related Travel Expenses</b>	Updated list of exceptions to the 5-day policy for NMT/NEMT as it applies to Medicare.	<b>MODERATE</b>	<b>1/1/2025</b>
IEHP DualChoice (HMO D-SNP)	09J	<b>Transgender, Gender Diverse or Intersex Cultural Competency Training</b>	Describes TGI training requirements for IPAs, Subcontractors, and Providers.	<b>NEW</b>	<b>3/1/2025</b>
IEHP DualChoice (HMO D-SNP)	16B1	<b>Member Appeal Resolution Process - Part C</b>	Added language for member's right to file a grievance for failure to provide trans-inclusive services for individuals who identify as transgender, gender diverse, and intersex. Clarified definitions for Independent Review (IRE) Entity and Organizational Determination (OD). Clarified member's right to request an appeal within 65 calendar days instead of 60 days.	<b>MODERATE</b>	<b>1/1/2025</b>
IEHP DualChoice (HMO D-SNP)	24B	<b>Cultural and Linguistically Appropriate Services Programs (CLAS) Program Description</b>	Updated Committee structure and specified program evaluation activities include collaboration with community groups for review and feedback.	<b>MODERATE</b>	<b>7/1/2025</b>

**cc:**

IPA Medical Director  
IPA Administrator  
IPA Care Management Manager  
IPA Utilization Management Manager

**MINOR** = minor grammatical/punctuation corrections and wordsmithing

**MODERATE** = procedural and/or operational clarifications of existing processes

**SUBSTANTIAL** = notable content and process revisions that are expected to impact Providers operationally