
PROVIDER POLICY AND PROCEDURE MANUAL

IEHP DUALCHOICE

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INTRODUCTION

A. Manual Overview

The Inland Empire Health Plan (IEHP) Provider Policy and Procedure Manual helps its contracted entities (Providers) understand how the health plan functions in compliance with rules and regulations set forth by the California Department of Health Care Services (DHCS), California Department of Managed Health Care (DMHC), and the Centers for Medicare and Medicaid Services (CMS). IEHP's Providers are expected to adhere to the provisions set forth in this Manual.

This Manual is intended to incorporate the statutory, regulatory and contractual requirements imposed by DHCS, DMHC, CMS, and other agencies such as medical professional licensing boards. It is not intended to replace or exclude any statutory, regulatory or contractual requirement not stated herein.

In addition to this Manual, a CMS link to the Benefit Manual is included in the annual mailing and electronic mailing to IEHP's Contracted Entities. The CMS Benefit Manual is offered as a guideline to determine benefit eligibility and is not intended to be construed as or to serve as a standard of medical care, or as a contractual agreement for payment.

The Delegate or Provider has the responsibility of ensuring the appropriate people in their organization review and understand the information contained in this Manual. Policies and procedures are updated periodically to remain current with regulatory, accreditation, contractual, and Plan requirements. Updates are sent to IPAs and published in the IEHP website at www.iehp.org to keep Providers informed of any policy changes.

IEHP holds training sessions for its Providers to assist in learning IEHP policies and procedures as outlined in this Manual.

INLAND EMPIRE HEALTH PLAN		
Chief Approval: <i>Signature on file</i>	Original Effective Date:	January 1, 2007
Chief Title: Chief Operating Officer	Revision Date:	January 1, 2023

INTRODUCTION

B. IEHP Overview

Inland Empire Health Plan (IEHP) is a not-for-profit public entity that is a Health Maintenance Organization (HMO) serving Medi-Cal and IEHP DualChoice beneficiaries residing in Riverside and San Bernardino Counties.

IEHP is a Knox-Keene licensed Health Plan and is regulated by the California Department of Managed Health Care (DMHC), the California Department of Health Services (DHCS), and the Centers for Medicare and Medicaid Services (CMS).

IEHP was formed on July 26, 1994 as a Joint Powers Agency (JPA) created by the two (2) counties to administer the Two-Plan Model as the Local Initiative Medi-Cal Managed Health Care Plan. IEHP commenced operations on September 1, 1996.

Mission, Vision and Values

- A. Mission: We heal and inspire the human spirit.
- B. Vision: We will not rest until our communities enjoy optimal care and vibrant health.
- C. Values: We do the right thing by:
 - 1. Placing our Members at the center of our universe.
 - 2. Unleashing our creativity and courage to improve health & well-being.
 - 3. Bringing focus and accountability to our work.
 - 4. Never wavering in our commitment to our Members, Providers, Partners, and each other.

INLAND EMPIRE HEALTH PLAN		
Chief Approval: <i>Signature on file</i>	Original Effective Date:	January 1, 2007
Chief Title: Chief Operating Officer	Revision Date:	January 1, 2023

INTRODUCTION

C. Manual Updates

The Inland Empire Health Plan (IEHP) Provider Policy and Procedure (Provider Manual) is reviewed and updated in its entirety no less than once a year. IEHP Provider Manual can be accessed through the IEHP website at www.iehp.org.

The Provider Manual annual update includes the following:

Provider Manual of Policies and Procedures

1. Medi-Cal
 2. IEHP DualChoice
- A. Electronic Data Interchange (EDI) Manual (Delegates only)
 - B. CMS Medicare Benefit Policy Manual
<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS012673.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=ascending>
 - C. Summary of Effected Changes
 - D. IEHP Code of Business Conduct and Ethics
 - E. IEHP Model of Care Training
 - F. General Compliance, Fraud, Waste and Abuse (FWA) and Health Insurance Portability and Accountability Act (HIPPA) Privacy and Security Training
 - G. Cultural and Linguistic (C&L) Training
 - H. Distribution Letter
 - I. Acknowledgment of Receipt (AOR) – Providers are required to sign and return this AOR to IEHP to signify receiving and reviewing the electronic copies of the Provider Manual and Trainings.

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