
PROVIDER POLICY AND PROCEDURE MANUAL

MEDI-CAL

TABLE OF CONTENTS

INTRODUCTION

- A. Manual Overview
- B. IEHP Overview
- C. Manual Updates
 - 1. Provider Policy and Procedure Manual
 - 2. EDI Manual
 - 3. Summary of Effected Changes
 - 4. IEHP Code of Business Conduct and Ethics
 - 5. D-SNP Model of Care Training
 - 6. Compliance Program, Fraud, Waste and Abuse, HIPAA Privacy and Security Training
 - 7. Distribution Letter
 - 8. Acknowledgment of Receipt (AOR)
 - 9. IPA Delegation Agreement – Medi-Cal (IPA only)

1. ORGANIZATIONAL STRUCTURE

- A. General
- B. Joint Powers Agency Governing Board
- C. IEHP Committees

2. COMMITTEE OVERVIEW

- A. Public Policy Participation Committee
- B. Provider Advisory Committee
- C. Quality Management and Health Equity Transformation Committee
- D. Peer Review Subcommittee
- E. Persons with Disabilities Workgroup
- F. Credentialing Subcommittee
- G. Utilization Management Subcommittee
- H. Pharmacy and Therapeutics Subcommittee

3. ENROLLMENT AND ASSIGNMENT

- A. Enrollment and Eligibility

Table of Contents

- B. Medi-Cal Enrollment Process
- C. Eligible Members
- D. IEHP Service Area
- E. Primary Care Provider Assignment
- F. Member Identification Cards
- G. Post Enrollment Kit
- H. Primary Care Provider Auto-Assignment Process

4. ELIGIBILITY AND VERIFICATION

- A. Eligibility Verification
- B. Eligibility Verification Methods
 - (1) Eligibility Files
 - (2) Eligibility Verification Options
- C. Member Co-Payments

5. CREDENTIALING AND RECREDENTIALING

- A. Credentialing Standards
 - (1) Credentialing Policies
 - (2) Credentialing Committee
 - (3) Credentialing Verification
 - (4) Recredentialing Cycle Length
 - (5) Ongoing Monitoring and Interventions
 - (6) Notification to Authorities and Practitioner Appeal Rights
 - (7) Assessment of Organizational Providers
 - (8) Delegation of Credentialing
 - (9) Identification of HIV/AIDS Specialists
- B. Hospital Privileges
- C. Provider Screening and Enrollment Requirements

6. FACILITY SITE REVIEW

- A. Facility Site Review and Medical Records Review Survey Requirements and Monitoring
- B. Physical Accessibility Review Survey (PARS)
- C. PCP Sites Denied Participation or Removed from the IEHP Network
- D. Residency Teaching Clinics
- E. Rural Health Clinics
- F. Advanced Practice Practitioner Requirements
- G. Urgent Care Center Evaluation

H. Interim FSR Monitoring for Primary Care Provider

7. MEDICAL RECORDS REQUIREMENTS

- A. Provider and IPA Medical Records Requirements
- B. Information Disclosure and Confidentiality of Medical Records
- C. Informed Consent
- D. Advance Health Care Directive

8. INFECTION CONTROL

- A. Infection Control

9. ACCESS STANDARDS

- A. Access Standards
- B. Missed Appointments
- C. Non-Emergency Medical and Non-Medical Transportation Services
- D. Access to Care for Members with Access and Functional Needs
- E. Access to Services with Special Arrangements
- F. Open Access to Obstetrical or Gynecological Services
- G. Cancer Treatment Services
- H. Cultural and Linguistic Services
 - (1) Language Assistance Capabilities
 - (2) Language Competency Study
 - (3) Non-Discrimination
- I. Access to Care During a Federal, State or Public Health Emergency

10. MEDICAL CARE STANDARDS

- A. Initial Health Appointment
- B. Adult Preventive Services
- C. Pediatric Preventive Services
 - (1) Well Child Visits
 - (2) Immunization Services
- D. Obstetrical Services - PCP Role in Care of Pregnant Members
 - (1) Guidelines for Obstetrical Services
 - (2) Obstetric Care by Certified Nurse Midwives, LM and Freestanding Birthing Centers
 - (3) PCP Provision of Obstetric Care
- E. Referrals to the Supplemental Food Program for Women, Infants, and Children

Table of Contents

- F. Sterilization Services
- G. Family Planning Services
- H. Sexually Transmitted Infection Services
- I. HIV Testing and Counseling
- J. Tuberculosis Services
- K. Reporting Communicable Diseases to Public Health Authorities
- L. Vision Examination Level Standards
- M. Mandatory Elder or Dependent Adult Abuse Reporting
- N. Mandatory Child Abuse and Neglect Reporting
- O. Mandatory Domestic Violence Reporting
- P. Total Fracture Care
- Q. Maternal Mental Health Services
- R. Personal Care Services and Home Health Care Services
- S. Community Health Worker Services
- T. Doula Services

11. PHARMACY

- A. Pharmacy Benefits and Services
- B. Medical Drug Prior Authorization List
- C. Prior Authorization or Exception Requests for Physician Administered Drugs

12. COORDINATION OF CARE

- A. Care Management Requirements
 - (1) PCP Role
 - (2) Continuity of Care
 - (3) Health Risk Assessment
- B. California Children's Services
- C. Early Start Services and Referrals
- D. Early and Periodic Screening, Diagnosis and Treatment
- E. Genetically Handicapped Persons Program
- F. In-Home Supportive Services
- G. Organ Transplant
- H. Community Based Adult Services
- I. Complex Case Management
- J. Dental Services
- K. Behavioral Health
 - (1) Behavioral Health Services
 - (2) Substance Use Treatment Services
 - (3) Behavioral Health Treatment

- L. Vision Services
 - (1) Vision Exception Request
 - (2) Vision Provider Referrals
- M. Developmental Disabilities
- N. Multipurpose Senior Services Program
- O. Open Access (Foster Care) Program
- P. Home and Community-Based Alternatives Waiver Program
- Q. Medi-Cal Waiver Program

13. QUALITY MANAGEMENT

- A. Quality Studies Medical Records Access
- B. Quality Management & Health Equity Transformation Program Overview for Members and Providers
- C. Chaperone Guidance
- D. Reporting Requirements Related to Provider Preventable Conditions

14. UTILIZATION MANAGEMENT

- A. Utilization Management
 - (1) Review Procedures - Primary Care Provider Referrals
 - (2) Review Procedures – Standing Referral/Extended Access to Specialty Care
 - (3) Review Procedures - Other Health Coverage
- B. Second Opinions
- C. Emergency Services
- D. Pre-Service Referral Authorization Process
- E. Referral Procedures for Powered Mobility Devices
- F. Long Term Care
 - (1) Custodial Level
 - (2) Skilled Level
- G. Acute Inpatient Admission and Concurrent Review
- H. Hospice Services
- I. My Path Palliative Care Program

15. HEALTH EDUCATION

- A. Health Education
- B. Weight Management
- C. IEHP Family Asthma Program

- D. IEHP Diabetes Self-Management Program
- E. Perinatal Program
- F. Pediatric Health and Wellness
- G. Diabetes Prevention Program

16. GRIEVANCE AND APPEAL RESOLUTION SYSTEM

- A. Member Grievance Resolution Process
- B. Member Appeal Resolution Process
- C. Dispute and Appeal Resolution Process for Providers
 - (1) Initial
 - (2) Health Plan
- D. IPA, Hospital, and Practitioner Grievance and Appeal Resolution Process

17. MEMBER TRANSFERS AND DISENROLLMENT

- A. Primary Care Providers Transfers
 - (1) Voluntary
 - (2) Involuntary
- B. Disenrollment from IEHP
 - (1) Voluntary
 - (2) Involuntary Member Status Changes
- C. Loss of Medi-Cal Eligibility - PCP Responsibilities
- D. Episode of Care – Inpatient

18. PROVIDER NETWORK

- A. Primary Care Provider
 - (1) IPA and Hospital Affiliation
 - (2) Enrollment Capacity
- B. Provider Directory
- C. PCP, Vision and Behavioral Health Provider Network Changes
- D. IPA Reported Provider Changes
 - (1) PCP Termination
 - (2) Specialty and Ancillary Provider Termination
- E. Management Services Organization Changes
- F. Specialty Network Requirements
- G. Provider Resources
- H. Hospital Affiliations
- I. Leave of Absence
- J. IEHP Termination of PCPs, Specialists, Vision, and Behavioral Health Providers

Table of Contents

- K. Hospital Network Participation Standards
- L. Providers Charging Members
- M. Outsourcing Standards and Requirements
- N. IPA Medical Director Responsibilities
- O. Provider Disruptive Behavior
- P. Virtual Care
 - (1) eConsult Services
- Q. Subcontractor Certification Requirement

19. FINANCE AND REIMBURSEMENT

- A. IPA Financial Viability
- B. IPA Financial Supervision
- C. Pay For Performance (P4P)
- D. Third-Party Liability
- E. Public and Private Hospital Directed Payment Program
- F. Medi-Cal Capitation – IPA and IEHP Direct Providers

20. CLAIMS PROCESSING

- A. Claims Processing
- B. Billing of IEHP Members
- C. Claims Deduction from Capitation - 7-Day Letter
- D. Claims and Compliance Audits
- E. Disputes Between Contracted Relationships
- F. Coordination of Benefits
- G. Claims and Provider Dispute Reporting
- H. Provider Dispute Resolution Process
 - (1) Initial Claims Disputes
 - (2) Health Plan Claims Appeals

21. ENCOUNTER DATA REPORTING

- A. Encounter Data Submission Requirements
- B. Encounter Data Submission Requirements for Directly Contracted Capitated Providers
- C. Medi-Cal Risk Adjustment and Chronic Illness and Disability Payment System (CDPS)

22. RIGHTS AND RESPONSIBILITIES

- A. Members' Rights and Responsibilities
- B. Providers' Rights and Responsibilities

23. COMPLIANCE

- A. Non-Monetary Member Incentive – The California Department of Health Care
- B. HIPAA Privacy and Security
- C. Health Care Professional Advice to Members
- D. Monitoring of First Tier Downstream Entities

24. PROGRAM DESCRIPTIONS

- A. Disability Program Description
- B. Cultural & Linguistic Services Program Description
- C. Quality Management and Quality Improvement Program Description
- D. Fraud, Waste and Abuse Program Description
- E. Compliance Program Description
- F. Enhanced Care Management Program Description

25. DELEGATION AND OVERSIGHT

- A. Delegation Oversight
 - (1) Delegated Activities
 - (2) Audit
 - (3) IPA Performance Evaluation
 - (4) Corrective Action Plan Requirements
- B. Credentialing Standards
 - (1) Credentialing Policies
 - (2) Credentialing Committee
 - (3) Credentialing Verification
 - (4) Recredentialing Cycle Length
 - (5) Ongoing Monitoring and Interventions
 - (6) Notification to Authorities and Practitioner Appeal Rights
 - (7) Assessment of Organization Providers
 - (8) Delegation of Credentialing
 - (9) Identification of HIV/AIDS Specialists
 - (10) Credentialing Quality Oversight of Delegates
- C. Care Management
 - (1) Monitoring and Oversight
 - (2) Reporting Requirements
- D. Quality Management
 - (1) Quality Management Reporting Requirements
 - (2) Quality Management Program Structure Requirements
- E. Utilization Management
 - (1) Reporting Requirements
 - (2) Referral and Denial Audits

26. QUICK REFERENCE

- A. Quick Reference Guide
- B. Glossary

INTRODUCTION

A. Manual Overview

The Inland Empire Health Plan’s (IEHP) Provider Policy and Procedure Manual helps its contracted entities, including but not limited to Independent Physician Associations (IPAs), Hospitals, Providers and other delegates, 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), the Centers for Medicare and Medicaid Services (CMS), and the National Committee for Quality Assurance (NCQA). IEHP’s contracted entities are expected to adhere to the provisions set forth in this Manual.

This Manual is reviewed and updated in its entirety no less than once a year. IEHPs solicits feedback from, and documents review by appropriate committees including but not limited to the Public Policy Participation and Quality Management & Health Equity Transformation Committees to inform the development of this Manual and clarify new and revised policies and procedures contained herein. This Manual is intended to incorporate the statutory, regulatory, and contractual requirements imposed by DHCS, DMHC, CMS, NCQA, 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 link to the Benefit Manual located at https://files.medical.ca.gov/pubsdoco/Manuals_menu.aspx is included in the annual mailing and electronic mailing to IEHP’s contracted entities. The State 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.

IEHP’s contracted entities are responsible for ensuring the appropriate personnel within 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. Policy updates are sent to contracted entities, as appropriate, as well as published on the IEHP website at www.iehp.org.

IEHP trains its contracted entities, as appropriate, to assist in learning IEHP’s policies and procedures as outlined in this Manual.

INLAND EMPIRE HEALTH PLAN		
Regulatory/ Accreditation Agencies:	<input type="checkbox"/> DHCS	<input type="checkbox"/> CMS
	<input type="checkbox"/> DMHC	<input checked="" type="checkbox"/> NCQA
Original Effective Date:	September 1, 1996	
Revision Effective Date:	January 1, 2024	

INTRODUCTION

B. IEHP Overview

Inland Empire Health Plan (IEHP) is a not-for-profit public entity that is a Health Maintenance Organization (HMO) serving Members 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 Care 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.

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INTRODUCTION

C. Manual Updates

The Inland Empire Health Plan (IEHP) Provider Policy and Procedure Manual (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:

- A. Provider Policy and Procedure Manuals:
- B. Electronic Data Interchange (EDI Manual)
- C. Benefit Manual
- D. Summary of Effected Changes
- E. IEHP Code of Business Conduct and Ethics
- F. IEHP DualChoice (HMO D-SNP) Model of Care Training
- G. General Compliance, Fraud, Waste and Abuse (FWA) and Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security 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.

INLAND EMPIRE HEALTH PLAN		
Regulatory/ Accreditation Agencies:	<input type="checkbox"/> DHCS	<input type="checkbox"/> CMS
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