



FAQs on Proposition 56 HYDE Services

What is the Proposition 56 – HYDE?

- Assembly Bill (AB) 120, Section 3, Item 4260-101-3305, Senate Bill (SB) 856, Section 44, Item 4260-101-3305 and AB74, Section 2, Item 4260-101-3305 appropriates Proposition 56 funding to support medical pregnancy termination services in the Medi-Cal managed care program.

What Provider types are eligible for this supplemental payment?

- All (contracted and non-contracted) providers who have rendered qualified HYDE professional services are eligible for supplemental payment.

Which service settings are excluded from this directed payment?

- There are no service locations that are excluded from this directed payment.

Who are the eligible Members?

- The Physician must have rendered qualified professional services to eligible Medicaid Members.

What is the effective period for this directed payment?

- Services rendered on or after July 1st, 2017.

What are the eligible (qualified) procedure codes, directed payment amount, and provider responsibilities to earn this Prop 56 directed payment?

CPT Code:	Description:	Directed Payment:
59840	Induced abortion, by dilation and curettage	Up to \$400
59841	Induced abortion, by dilation and evacuation	Up to \$700

How do we determine the payee for these payments?

- IEHP will pay the Prop 56 payment to the billing Provider and billing tax ID associated with the eligible claim or encounter.

How often will payments be disbursed?

- IEHP will pay Prop 56 payments on a monthly basis. For each payment cycle, we will pay Prop 56 payments for claims and encounter data adjudicated and/or received by the

cutoff date for the corresponding service months. The most current payment schedule can be found at: www.iehp.org > For Providers > Plan Updates > Correspondence.

What is the Provider Dispute process related to Prop 56 payments?

- If a Provider has a dispute regarding Prop 56 payments, the Provider is to complete the applicable dispute form (claim or encounter) and email the completed dispute form to Prop56Inquiry@iehp.org. The Prop 56 Dispute Forms can be found on the Provider portal at: www.iehp.org > For Providers > Plan Updates > Proposition 56 & GEMT.
- Prop 56 payments is processed separately after the initial submission is adjudicated. Providers **will not find** Prop 56 payments payment in the initial claim payment.

What is the turnaround time for a resolution for Provider disputes?

- IEHP will provide written notification of the Provider dispute results (via mail) within 30 working days from date of receipt.

How long does a Provider have to file a dispute regarding Prop 56 payments?

- A Provider has 365 calendar days from the Prop 56 payment date to file a dispute regarding Prop 56 payments.
- DHCS allows 90 calendar days from the date of receipt a clean claim to issue Prop 56 payment. Disputes submitted prior to this 90-day window will lead to denial or rejection of the dispute.