



To: Direct PCPs, Specialists, Vision and BH Providers
From: IEHP – Provider Relations
Date: July 1, 2021
Subject: **New Fax Number for Reported Direct Provider Changes**

Inland Empire Health Plan (IEHP) would like to inform you of the new fax number to use when requesting a Provider Change in the network, including the termination of a Primary Care Provider and Specialist. **Effective today, July 1st, 2021**, all Provider Network Change letters will be submitted to IEHP Provider Network Team via fax.

Please remember to include the following information in your notice to IEHP:

- IEHP requires sixty (60) days written notification coverage plan from Direct Providers
- Provider First and Last Name
- Provider NPI
- Provider Specialty
- Provider Address, Phone and Fax
- Reason for Changes
- Plan for assuring Member continuity of care
- Copy of Provider's W9

Please fax your letters for Direct Provider Changes to (909) 297-2502.

As a reminder, all communications sent by IEHP can also be found on our Provider portal at:
www.iehp.org > Providers > Plan Updates > Correspondences

If you have any questions regarding this process, please refer to IEHP Policy 18 C.1, PCP, Vision and Behavioral Health Provider Network Changes, or contact the IEHP Provider Relations Team at (909) 890-2054.