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To: All Medicare IPAs
From: IEHP – Delegation Oversight
Date: December 21, 2022
Subject: **UPDATED! D-SNP Letter Template (Effective January 2, 2023)**

Inland Empire Health Plan (IEHP) recently updated the following D-SNP Letter Template to be utilized effective January 2, 2023.

The updated **Detailed Notice of Discharge** letter template is now available in IEHP’s threshold languages: English, Spanish, Chinese and Vietnamese.

Updates made to the **Detailed Notice of Discharge** letter template are:

1. The footer had previously been removed from the model **"Form CMS 10066-DND (Exp.12/31/2022) OMB approval 0938-1019."**
 - **UPDATE:** A change has now been made to all letters in SAI360 to reflect the correct footer and includes the **"Form CMS 10066-DND (Exp. 12/31/2022) OMB approval 0938-1019."**
2. In the “According to the Paperwork Reduction Act of 1995” paragraph, the previous version notes that estimated to average is 60 minutes per response, whereas the CMS model states an average of **"15 minutes per response."**
 - **UPDATE:** All threshold languages uploaded to SAI360 now have the correct **"15 minutes per response."**

Please continue using the current Medicare DualChoice letter templates posted on the IEHP website for the remainder of 2022.

IEHP requires the new D-SNP letter templates be incorporated into your workflows for the D-SNP transition on **January 2, 2023.** IEHP will begin auditing implementation of the updated template for letters dated as of **January 2, 2023.**

Updated D-SNP letter templates can be found at: www.iehp.org > Providers > Provider Resources > Forms > NEW D-SNP Letter Templates or click [here.](#)

NEW D-SNP Letter Templates

new These templates should not be used until the effective date of [January 2, 2023](#). Please continue using the current Medicare DualChoice letter templates currently seen on this webpage for the remainder of 2022.

A complete template includes all documents listed under each template in the order specified listed. Changes can only be made to highlighted areas, [any changes made outside of the highlighted areas are strictly prohibited by CMS](#).

Click on the title to expand the menu and download desired document.

1. AOR Dismissal Letter

2. AOR Request Letter

3. Continuity of Care - Notice of Authorization

4. Continuity of Care – Notice of Termination

5. Detailed Explanation of Non-Coverage

6. Detailed Notice of Discharge

English

Last Updated: 12/20/2022



Spanish

Last Updated: 12/20/2022



Chinese

Last Updated: 12/20/2022



Vietnamese

Last Updated: 12/20/2022



[Multi-Language Insert](#)- [All Languages] Updated July 26, 2022

[Nondiscrimination Notice & Taglines](#)- [English] [Spanish] [Chinese] [Vietnamese] Updated September 07, 2022

As a reminder, all communications sent by IEHP can also be found at: www.iehp.org > For Providers > Plan Updates > Correspondence

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054 or (866) 223-4347 or email ProviderServices@iehp.org