The Centers for Medicare and Medicaid Services (CMS) requires Inland Empire Health Plan (IEHP) and its IPAs to document and report the efforts made to coordinate the care of IEHP DualChoice Cal MediConnect Plan (Medicare-Medicaid Plan) Members receiving specialty mental health services through the County Mental Health Plans.

Pursuant to this requirement, as of June 1, 2018, Medicare IPAs were expected to perform and report, on a monthly basis, the outcome of their outreach efforts to Members and county mental health clinics. We appreciate the feedback that we have received thus far and acknowledge the opportunities for improvement. Please be informed that an internal workgroup has been put in place to develop a streamlined approach to coordinating care with the county mental health clinics for both Direct and delegated Members.

IEHP will continue to provide the IPAs, on the 1st of every month, a list of IEHP DualChoice Members known to be receiving specialty mental health services through the County Mental Health Plans. However, effective immediately, we would only expect the IPAs to:

1) Outreach to these Members and document their outreach attempts and outcomes as outlined in Policy 12A2, “Care Managements – IPA Responsibilities”

2) Provide data elements specific to the Member outreach requirements of this measure, as outlined in Policy 21F, “Medicare MMP Reporting Requirements – IEHP DualChoice Cal MediConnect Plan (Medicare-Medicaid Plan) and Attachment, “Medicare Provider Reporting Requirements Schedule” in Section 21.

IMPORTANT: We are therefore, suspending the reporting requirements for county outreach (only) until such time when we have developed and implemented a streamlined approach to meeting this requirement.

As a reminder, all communications sent by IEHP can also be found on our Provider portal at the following address: https://www.iehp.org/en/providers/plans-updates

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054. Thank you.