

JANUARY 2022
IEHP PROVIDER POLICY AND PROCEDURE MANUAL
– DUALCHOICE CAL MEDICCONNECT
SUMMARY OF EFFECTED CHANGES

Revision Status:

MIN = Minimal changes that have no impact on the content, scope and operation. Rephrase to clarify content.

MOD = Procedural and/or operational clarifications of existing processes. Content, scope and operational changes.

SUBST = Significant content, scope and operational changes. Major revisions or a complete rewrite of a policy or reflect changes that affect the Provider or PCP operationally, such as a change to a reporting timeframe or standards.

NEW = Addition of a new policy or attachment.

RETIRED = Retirement of a policy or attachment.

REPLACEMENT (attachment only) = Replacement of a new version that cannot be altered or modified.

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
0	Table of Contents	MOD
0.C	Manual Updates	MIN
1.A	General	MOD
1.B	Joint Powers Agency Governing Board	SUBST
Attachment 1	IEHP Committee Structure Chart	REPLACEMENT
2.A	Public Policy Participation Committee	SUBST
2.C	Quality Management Committee	MIN
2.D	Peer Review Subcommittee	MOD
2.F	Credentialing Subcommittee	MIN
2.H	Persons with Disabilities Workgroup	MIN
2.I	Coordinated Care Initiative Stakeholder Advisory Committee	MIN
Attachment 2	Persons with Disabilities Workgroup Application	MIN
3.B	Primary Care Provider Assignment	MOD
3.C	Member Identification Cards	MIN
3.E	Post Enrollment Kit	MIN
4.A	Eligibility Verification	MOD

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
4.B.1	Eligibility Verification Methods - Eligibility Files	SUBST
4.B.2	Eligibility Verification Methods - Eligibility Verification Options	MOD
4.C	Member Co-Payments	MIN
Attachment 4	Eligibility Data File Transmission Schedule	RETIRED
Attachment 4	Eligibility Data File Format	RETIRED
5.A.1	Credentialing Standards – Credentialing Policies	MOD
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5.A.3	Credentialing Standards – Credentialing Verification	SUBST
5.A.4	Credentialing Standards – Recredentialing Cycle Length	MOD
5.A.5	Credentialing Standards – Ongoing Monitoring and Interventions	MOD
5.A.6	Credentialing Standards – Notification to Authorities and Practitioner Appeal Rights	MOD
5.A.7	Credentialing Standards – Assessment of Organizational Providers	SUBST
5.A.8	Credentialing Standards – Delegation of Credentialing	MOD
5.B	Hospital Privileges	MOD
Attachment 5	Hospital Admitting Arrangement Attestation - Admitting	REPLACEMENT
Attachment 5	Hospital Admitting Privileges Reference by Specialty	MIN
Attachment 5	IEHP Peer Review Level I and Credentialing Appeal	MIN
Attachment 5	IEHP Peer Review Process and Level II Appeal	MIN
Attachment 5	Hospital Admitting Arrangement Attestation - Hospitalist	SUBST
Attachment 5	Hospital Admitting Privileges Reference by Specialty	SUBST
Attachment 5	Work History Form Past Five Year' Request	NEW
Attachment 5	Provider Privilege Adjustment Request Form	NEW
Attachment 5	Peer Review Termination Letter	NEW

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
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Attachment 5	Prescribing Arrangements for DEA and CDS Eligible Practitioners	NEW
Attachment 5	Credentialing Subcommittee Termination Letter	NEW
6.A	Facility Site Review and Medical Record Review Survey Requirements and Monitoring	SUBST
6.B	Physician Accessibility Review Survey	MIN
6.C	PCP Sites Denied Participation or Removed from IEHP Network	MIN
6.D	Residency Teaching Clinic	MIN
6.E	Rural Health Clinics	MOD
6.F	Advanced Practice Practitioner Requirements	MOD
6.G	Urgent Care Center Evaluation	MIN
6.H	Interim FSR Monitoring for Primary Care Providers	MOD
Attachment 6	Corrective Action Plan Notification Tool	REPLACEMENT
Attachment 6	Interim Facility Site Review (On-Site) Tool - Medi-Cal	MIN
Attachment 6	Interim Facility Site Review (Assessment) Tool - Medi-Cal	MIN
Attachment 6	Urgent Care CAP Complete tool and Notification Letter	NEW
7.A	Provider and IPA Medical Record Requirements	SUBST
9.A	Access Standards	MOD
9.B	Missed Appointments	MIN
9.C	Access to Care for People with Disabilities	MIN
9.D	Access to Care for People with Disabilities	MIN
9.C.1	Access to Care for People with Disabilities - Members who are Deaf or Hard-of-Hearing	MIN
9.D	Access to Services with Special Arrangements	MOD
9.E	Open Access to Obstetrical or Gynecological Services	SUBST
9.F	Cancer Screening and Treatment Services	MOD
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POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
9.H.1	Cultural and Linguistic Services - Foreign Language Capabilities	MIN
9.H.2	Cultural and Linguistic Services - Language Competency Audits	SUBST
9.I	Access to Care During a Federal, State or Public Health Emergency	MOD
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Attachment 9	Video Remote Interpretation Approved Devices and Technical Specifications	SUBST
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10.B	Adult Preventive Services	SUBST
10.C	Initial Health Assessment	MIN
10.D	Obstetrical Services - PCP Role in Care of Pregnant Members	MOD
10.D.1	Obstetrical Services - Guidelines for Obstetrical Services	SUBST
10.D.2	Obstetrical Services - Obstetric Care by Certified Nurse Midwives, LM and Alternative Birthing Centers	SUBST
10.D.3	Obstetrical Services - PCP Provision of Obstetric Care	SUBST
10.E	Referrals to the Supplemental Food Program for Women, Infants, and Children	MOD
10.F	Sterilization Services	MIN
10.G	Family Planning Services	SUBST
10.H	HIV Testing and Counseling	SUBST
10.I	Tuberculosis Services	SUBST
10.J	Reporting Communicable Diseases to Public Health Authorities	MOD
10.K	Family Planning Services	SUBST
10.L	Mandatory Elder or Dependent Adult Abuse Reporting	MIN
10.M	Mandatory Domestic Violence Reporting	MIN
10.N	Maternal Mental Health Program	MIN
Attachment 10	Authorization for Use and Disclosure of Personal Health Information – English	REPLACEMENT
Attachment 10	Authorization for Use and Disclosure of Personal Health Information – Spanish	REPLACEMENT

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
11.A	Formulary Management	MOD
11.B	Coverage Determination	MIN
11.C	IEHP DualChoice Vaccine Coverage	MOD
11.D	Claims for Drug Prescribed or Dispensed by Excluded, Sanctioned, and Precluded Providers	MIN
11.E	Pharmacy Access During a Federal Disaster or Other Public Health Emergency Declaration	MIN
11.F	Coverage Determination – Part B vs D Determination	MIN
11.G.	Coordination of Benefits	MOD
11.H	Best Available Evidence	MOD
11.I	Transition Process	MIN
11.J	Pharmacy Access Standards	MOD
11.K	Medication Therapy Management Program	MIN
11.L	Insulin Administration Devices and Diabetic Testing Supplies	MIN
11.M	Member Request for Pharmacy Reimbursement	MIN
11.N	Pharmacy Disease Therapy Management Program	RETIRED
11.N	Pharmacy Credentialing and Recredentialing	RENUMBERED/ MOD
Attachment 11	Denial Letter – IEHP DualChoice – English	RETIRED
Attachment 11	Denial Letter – IEHP DualChoice – Spanish	RETIRED
Attachment 11	Notice of Cases Status - English	REPLACEMENT
Attachment 11	Notice of Cases Status - Spanish	REPLACEMENT
Attachment 11	Notice of Denial of Prescription Drug Coverage - English	REPLACEMENT
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12.A.2	Care Management Requirements – Health Risk Assessment	MOD

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
12.A.3	Care Management Requirements – Individualized Care Plan	MOD
12.A.4	Care Management Requirements – Interdisciplinary Care Team	MIN
12.A.5	Care Management Requirements - Continuity of Care	SUBST
12.B	Multipurpose Senior Services Program	MOD
12.C	Organ Transplant	MOD
12.D.1	Behavioral Health – Behavioral Health Services	SUBST
12.D.2	Behavioral Health – Substance Use Treatment Services	SUBST
12.D.3	Behavioral Health – Admission and Concurrent Review – Global and Shared Risk Delegated IPAs	MIN
12.E	Care Plan Option Services	SUBST
12.F	In-Home Supportive Services	SUBST
12.G	Vision Services	MIN
12.G.2	Vision Services – Vision Provider Referral	MIN
12.H	Community Based Adult Services	SUBST
12.H.1	Community Based Adult Services – Unbundled Services	RETIRED
13.B	QM Program Overview for Members and Providers	MIN
13.C	Chaperone Guidance	MIN
13.D	Reporting Requirements Related to Provider Preventable Conditions	MIN
Attachment 13	Provider Preventable Conditions	MOD
14.A.1	Review Procedures - Primary Care Provider Referrals	MOD
14.A.2	Review Procedures – Standing Referral/Extended Access to Specialty Care	MOD
14.B	Second Opinions	MIN
14.C	Emergency Services	MOD
14.D	Pre-Service Referral Authorization Process	MOD
14.E	Referral Procedures for Custom Wheelchairs and Powered Mobility Devices	MIN

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
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14.G	Acute and Behavioral Health Admission and Concurrent Review	MOD
14.I	Expedited Initial Organization Determinations	SUBST
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Attachment 14	Referral Audit Corrective Action Plan Tool	REPLACEMENT
Attachment 14	Referral Audit CAP Notification Letter	REPLACEMENT
Attachment 14	Specialty Office Service Auth Sets Grid	MOD
15.A	Health Education	SUBST
15.B	Weight Management	MOD
15.C	IEHP Family Asthma Program	MIN
15.D	IEHP Diabetes Self-Management Program	MIN
15.E	Perinatal Program	MOD
15.F	Diabetes Prevention Program	SUBST
15.F	Individual Health Education Behavioral Assessment (IHEBA) and Staying Healthy Assessment (SHA)	MIN
16.A	Member Grievance Resolution Process	SUBST
16.A.1	Appeal (Reconsideration or Redetermination) Resolutions Process for Part C and Part D Members – Urgent (Expedited) Appeal	RETIRED
16.A.2	Grievance and Appeal Resolutions Process for Members, Standards, Fast (Immediate) and Fast–Track Appeals	RETIRED
16.A.3	Member Rights and Options	RETIRED
16.B	Member Appeal Resolution Process – Part C (Reconsideration)	NEW
16.B.3	Dispute and Appeal Resolution Process for Providers – UM Decisions	RETIRED
16.C.1	Grievance and Appeal Resolution Process for Providers - Initial	RENUMBERED/ MIN
16.C.2	Grievance and Appeal Resolution Process for Providers - Health Plan	RENUMBERED/ SUBST

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
Attachment 16	Appeal of UM Decision – Member – Provider Acknowledgment – IEHP DualChoice Part D	RETIRED
Attachment 16	Appeal of UM Decision – Member – Provider Acknowledgment – IEHP DualChoice Part C	RETIRED
Attachment 16	Appeal of UM Decision Uphold - Member - Provider Resolution - IEHP DualChoice Part C	RETIRED
Attachment 16	Appeal of UM Decision Uphold - Member - Provider Resolution - IEHP DualChoice Part D	RETIRED
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17.A.1	Primary Care Provider Transfers - Voluntary	SUBST
17.A.2	Primary Care Provider Transfers - Involuntary	MIN
17.B.1	Disenrollment from IEHP – Voluntary	MOD
17.B.2	Disenrollment from IEHP – Involuntary Member Behavior	MIN
17.B.3	Disenrollment from IEHP – Involuntary Member Status Changes	MOD
17.c	Episode of Care – Inpatient	SUBST
18.A.2	Primary Care Provider - Enrollment Capacity	MIN
18.B	Provider Directory	SUBST
18.C	PCP, Vision, and Behavioral Health Provider Network Changes	SUBST
18.F	Specialty Network Requirements	MOD
18.G	Provider Resources	SUBST
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18.K	Hospital Network Participation Standards	SUBST
18.P.1	Virtual Care - eConsult Services	SUBST
Attachment 18	California Health and Safe Code 123110	REPLACEMENT
Attachment 18	Hospital Geographic Services Area	MOD
Attachment 18	Peer Review Termination Letter	MOVED to Section 5
Attachment 18	Specialty Network Review	NEW
Attachment 18	Specialty Panel Worksheet	RETIRED

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
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19.A.2	Financial Viability - Hospital	RETIRED
19.B.1	Medicare Capitation – IPA	MIN
19.C	Pay for Performance Program	MIN
19.E	IPA Financial Supervision	MIN
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20.A	Claims Processing	MIN
20.A.2	Claims Processing – Provider Payment Dispute Resolution	MIN
20.D	Claims and Compliance Audits	SUBST
20.E	Coordination of Benefits	MIN
20.F	Claims and Payment Appeal Reporting	SUBST
20.G	Third Party Liability	MIN
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Attachment 20	Notice of Denial of Payment - Spanish	REPLACEMENT
Attachment 20	Notice of CAP Deductions	REPLACEMENT
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21.A	Encounter Data Submission Requirements	MOD
21.B	Medicare Risk Adjustment and Hierarchical Condition Categories	MIN
21.C	Encounter Data Submission Requirements for Directly Contracted Capitated Providers	MIN
Attachment 21	Encounter Data Submission Schedule	SUBST
23.A	Monitoring of First Tier, Downstream, and Related Entitles	MIN
23/B	HIPAA Privacy and Security	MIN
Attachment 23	Notice of Privacy Practices	MIN
24.A	Disability Program Description	MIN
24.B	Cultural & Linguistic Services Program Description	MOD
24.C	Quality Management and Quality Improvement Program Description	SUBST
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POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
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25.A.2	Delegation Oversight - Audit	SUBST
25.A.3	Delegation Oversight - Corrective Action Plan Requirements	MIN
25.B.1	Credentialing Standards - Credentialing Policies	SUBST
25.B.2	Credentialing Standards – Credentialing Committee	SUBST
25.B.3	Credentialing Standards - Credentialing Verification	SUBST
25.B.4	Credentialing Standards - Recredentialing Cycle Length	SUBST
25.B.5	Credentialing Standards - Ongoing Monitoring and Interventions	SUBST
25.B.6	Credentialing Standards - Notification to Authorities and Practitioner Appeal Rights	MOD
25.B.7	Credentialing Standards - Assessment of Organizational Providers	SUBST
25.B.8	Credentialing Standards - Delegation of Credentialing	SUBST
25.B.9	Credentialing Standards - Identification of HIV/AIDS Specialists	MOD
25.B.10	Credentialing Standards - Credentialing Quality Oversight of Delegates	SUBST
25.C.1	Care Management - IEHP Monitoring and Oversight	SUBST
25.C.2	Care Management - Reporting Requirements	MOD
25.E.3	Utilization Management - Referral and Denial Audits	MOD
25.F.1	Medicare MMP Reporting Requirements - IEHP DualChoice Cal MediConnect Plan (Medicare - Medicaid Plan)	MIN
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Attachment 25	2021 MM Capitated Financial Alignment Model Reporting Requirements	REPLACEMENT

POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
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Attachment 25	Care Coordinator Training for Supporting Self-Direction	MOD
Attachment 25	Care Management - Delegation Oversight Data Validation Tool	REPLACEMENT
Attachment 25	Care Coordinator to Member Ratio Template 5.1	MOD
Attachment 25	Compliance and FWA Tool	NEW
Attachment 25	CPE Delegation Oversight Annual Audit Tool – Medi-Cal	NEW
Attachment 25	IEHP ASK File Template	NEW
Attachment 25	IEHP Universe Expedited Auth MESAR Data	REPLACEMENT
Attachment 25	IEHP Universe Expedited Auth MESAR Template	REPLACEMENT
Attachment 25	IEHP Universe M_Claims Data Dictionary	REPLACEMENT
Attachment 25	IEHP Universe M_Claims Template	REPLACEMENT
Attachment 25	IEHP Universe Standard Auth MSSAR Data	REPLACEMENT
Attachment 25	IEHP Universe Standard Auth MSSAR Template	REPLACEMENT
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Attachment 25	Credentialing DOA Audit Tool	REPLACEMENT
Attachment 25	Delegation Oversight Audit Preparation Instructions – IEHP DualChoice	MIN
Attachment 25	CAP Response Form	REPLACEMENT
Attachment 25	Denial Log Review Tool – IEHP DualChoice	SUBST
Attachment 25	IPA Biographical Information Sheet	MIN
Attachment 25	IPA Care Management Review Tool - IEHP DualChoice	REPLACEMENT
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Attachment 25	Medicare Provider Reporting Requirements Schedule	REPLACEMENT
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POLICY/ ATTACHMENT	POLICY TITLE	REVISION/ UPDATE REASON
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Attachment 25	Practitioner Profile Template	NEW
Attachment 25	Response to Request for UM Criteria letter	MIN
26.A	Quick Reference Guide	MOD
26.B	Glossary	MOD
26.C	Index	MOD