
PROVIDER POLICY AND PROCEDURE MANUAL

MEDI-CAL

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INTRODUCTION

A. Manual Overview

The Inland Empire Health Plan (IEHP) Provider Policy and Procedure Manual is designed to help IEHP's Contracted Entities (Providers) understand how IEHP functions and understand the rules and regulations IEHP must comply with, as governed by the California Department of Health Care Services (DHCS), California Department of Managed Health Care (DMHC), the Centers for Medicare and Medicaid Services (CMS) and the National Committee for Quality Assurance (NCQA). The provisions of this Manual must be adhered to by all IEHP's Providers.

This Manual is intended to incorporate the statutory, regulatory and contractual requirements imposed by DHCS, DMHC, CMS, NCQA and other agencies such as medical professional licensing boards. It is not intended to replace or exclude any statutory, regulatory or contractual requirement not stated herein.

In addition to the Provider Policy and Procedure Manual, a State link to the Benefit Manual is included in the annual mailing and electronic mailing to IEHP's Contracted Entities. The State Benefit Manual is offered as a guideline to determine benefit eligibility and is not intended to be construed as or to serve as a standard of medical care, or as a contractual agreement for payment.

The Delegate or Provider has the responsibility of ensuring the appropriate people in their organization review and understand the information contained in this Manual. Additionally, periodic updates are sent to keep the Manual current and our Providers informed of any policy changes.

IEHP holds training sessions for its Providers to assist in learning IEHP policies and procedures as outlined in this Manual.

INLAND EMPIRE HEALTH PLAN		
Chief Approval: <i>Signature on file</i>	Original Effective Date:	September 1, 1996
Chief Title: Chief Operating Officer	Revision Date:	January 1, 2021

INTRODUCTION

B. IEHP Overview

Inland Empire Health Plan (IEHP) is a not for profit public entity that is a Health Maintenance Organization (HMO) serving Medi-Cal, and IEHP DualChoice Cal MediConnect Plan (Medicare – Medicaid Plan) beneficiaries residing in Riverside and San Bernardino Counties.

IEHP is a Knox-Keene licensed Health Plan and is regulated by the California Department of Managed Health Care (DMHC), the California Department of Health Care Services (DHCS), and the federal government’s Centers for Medicare and Medicaid Services (CMS).

IEHP was formed on July 26, 1994 as a Joint Powers Agency (JPA) created by the two (2) counties to administer the Two-Plan Model as the Local Initiative Medi-Cal Managed Health Care Plan. IEHP commenced operations on September 1, 1996.

Mission, Vision and Values

- A. Mission: We heal and inspire the human spirit.
- B. Vision: We will not rest until our communities enjoy optimal care and vibrant health.
- C. Values: We do the right thing by:
 - 1. Placing our Members at the center of our universe.
 - 2. Unleashing our creativity and courage to improve health & well-being.
 - 3. Bringing focus and accountability to our work.
 - 4. Never wavering in our commitment to our Members, Providers, Partners, and each other.

INLAND EMPIRE HEALTH PLAN		
Chief Approval: <i>Signature on file</i>	Original Effective Date:	September 1, 1996
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C. Manual Updates

The Inland Empire Health Plan (IEHP) Provider Policy and Procedure Manual (Provider Manual) is reviewed and updated in its entirety no less than once a year. IEHP maintains manuals that are available publicly and can be accessed at www.iehp.org by contracting entities in accordance with contractual and regulatory requirements.

The Provider Manual annual update includes the following:

- A. Policy and Procedure Manual
 - 1. Medi-Cal
 - 2. IEHP DualChoice Cal MediConnect Plan (Medicare – Medicaid Plan)
- B. EDI Manual (Delegates only)
- C. Benefit Manual http://files.medi-cal.ca.gov/pubsdoco/Manuals_menu.asp
- D. Summary of Effected Changes
- E. IEHP Code of Business Conduct and Ethics
- F. IEHP Guidelines for Care Management
- G. General Compliance, Fraud, Waste and Abuse (FWA) and Health Insurance Portability and Accountability Act (HIPPA) Privacy and Security Training
- H. Cultural and Linguistic (C&L) Training
- I. Distribution Letter
- J. Acknowledgment of Receipt (AOR)

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