

To: IEHP Trading Partners

From: IEHP – EDI Team

Date: August 16, 2021

Subject: ACTION REQUIRED: IEHP Clean Claim Rules Implementation

ATTENTION - ACTION REQUIRED!

Inland Empire Health Plan (IEHP) is amending its provider billing requirements (Clean Claim Rules) relating to 837p and 837i claim submissions.

The goals of these changes are to improve claim payment efficiency and prevent unnecessary encounter rejections with our State and Federal agencies.

Listed below is a **new edit** that we would like for you to add to our existing claim file validation rules.

Form Locator #	Description	Loop, Segment / Data Element	Comments & Business Input
Box 18 To Date	Discharge Date	Discharge Date: 2300 DTP03	Regulatory rejections due to
(for discharge date	before Date of	(where DTP01 = '096')	Discharge Date before Date of
at header level) Box 24 Line 1-06 (for Service date at line level)	Service	Service Date: 2400 DTP03 (where DTP01 = '472')	Service on <u>837 Professional</u> claims only.

IEHP is requesting your feedback regarding your required timeline to code, test, and implement these changes. A response is requested by Tuesday, August 31st and should be emailed to <u>Allende-A@iehp.org</u>. Our goal is to implement this validation rule by September 7th.

We are committed to providing quality service and appreciate your partnership and cooperation with this upcoming change.

If you have any questions, please do not hesitate to contact the IEHP EDI Team at EDI@iehp.org or contact Arnold Allende directly at (909) 890-2162 or via email at Allende-A@iehp.org.

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