



To: Medicare IPAs
From: IEHP – Provider Relations
Date: March 11, 2022
Subject: Notice of Dismissal of Coverage Letter Updates

On March 11, 2022, in compliance with APL 21-004, Inland Empire Health Plan (IEHP) has posted Member letter templates in the following threshold languages:

- Notice of Dismissal of Coverage_Chinese
- Notice of Dismissal of Coverage_English
- Notice of Dismissal of Coverage_Spanish
- Notice of Dismissal of Coverage_Vietnamese

Regulation	Language
42 CFR §§ 422.568(g)	<p>DISMISSING A REQUEST. The MA organization dismisses an organization determination request, either entirely or as to any stated issue, under any of the following circumstances:</p> <p>(1) The individual or entity making the request is not permitted to request an organization determination under § 422.566(c).</p> <p>(2) The MA organization determines the party failed to make out a valid request for an organization determination that substantially complies with paragraph (a) of this section.</p> <p>(3) An enrollee or the enrollee's representative files a request for an organization determination, but the enrollee dies while the request is pending, and both of the following apply:</p> <p>(i) The enrollee's surviving spouse or estate has no remaining financial interest in the case.</p> <p>(ii) No other individual or entity with a financial interest in the case wishes to pursue the organization determination.</p> <p>(4) A party filing the organization determination request submits a timely request for withdrawal of their request for an organization determination with the MA organization</p>

Regulation	Language
423.568(i)	<p>DISMISSING A REQUEST. The Part D plan sponsor dismisses a coverage determination request, either entirely or as to any stated issue, under any of the following circumstances:</p> <p>(1) When the individual making the request is not permitted to request a coverage determination under § 423.566(c).</p> <p>(2) When the Part D plan sponsor determines the party failed to make out a valid request for a coverage determination that substantially complies with paragraph (a) of this section.</p> <p>(3) When an enrollee or the enrollee's representative files a request for a coverage determination, but the enrollee dies while the request is pending, and both of the following criteria apply:</p> <p>(i) The enrollee's surviving spouse or estate has no remaining financial interest in the case.</p> <p>(ii) The enrollee's representative, if any, does not wish to pursue the request for coverage.</p>

To ensure compliance of appeal provisions related to utilizing the Notice of Dismissal, we are requesting your IPA attest and provide evidence (screenshots) that your medical management system allows you to capture when a Member is self-requesting a service.

Please submit your attestation and evidence to Juan Ortega at Ortega-j2@iehp.org by March 31, 2022.

Per the following regulation (42 CFR 40.1), Members are allowed to self-request an organization determination and the requirement for the delegates to review it as such:

In circumstances where there is a question whether the plan will cover an item or service, the enrollee, enrollee's representative, or the provider on behalf of the enrollee, has the right to request a pre-service organization determination (prior authorization) from the plan. Such preservice requests to the plan (even if to an agent or contractor of the plan, such as a network provider) are requests for an organization determination and must comply with the applicable regulatory requirements. Whenever an enrollee contacts an MA plan to request a service, the request itself indicates that the enrollee believes the MA plan should provide or pay for the service.

Updated letter templates can be found at IEHP website:
www.iehp.org > Providers > Provider Resources > Forms > Medicare-Medicaid Plan Letter Templates or click [here](#):

If you have any questions, please feel free to contact Juan Ortega, IEHP Delegation Oversight Director at Ortega-J2@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



IPA Attestation

Ability to Systematically Capture Member Self Requests for Service

By signing this Attestation _____ (IPA) confirms that the IPA has the system capability to capture and log Member Self Requests for Services as required in 42 CFR 40.1.

Signed by,

Name

Title

Date