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**To:** All IPAs, PCPs, Specialists, Ancillary, BH and BHT Providers  
**From:** IEHP Compliance  
**Date:** April 16, 2024  
**Subject:** **Interim Changes – Provider Policy and Procedure Manuals for IEHP DualChoice (HMO-DSNP)**

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Inland Empire Health Plan (IEHP) has made the following interim changes to the 2024 Provider Policy and Procedure Manuals for IEHP DualChoice (HMO D-SNP).

It is important that you and your staff familiarize yourselves with these interim changes as updates may impact current business processes and reporting requirements. Interim changes are posted here:

Provider Website at <https://www.providerservices.iehp.org/> > Provider Central > Provider Manuals & Trainings > 2024 Manuals and Regulatory Trainings

Provider Website at <https://www.providerservices.iehp.org/> > Resources > Provider Resources > Forms

If you have any questions regarding the enclosed, please contact our Provider Call Center at (909) 890-2054 or (866) 223-4347.

Sincerely,



Lourdes Nery, MPA, CHC  
Vice President, Compliance  
IEHP Compliance Officer

LINES OF BUSINESS	POLICY/ ATTACHMENT	POLICY TITLE	DESCRIPTION OF CHANGE	REVISION STATUS*	REVISION EFFECTIVE DATE
IEHP DualChoice (HMO D-SNP)	05A1	<b>Credentialing Standards - Credentialing Policies (NCQA)</b>	Added more detail to the language regarding NCQA CR1C.1-5; and CR1D.1-3, Included definitions for "Qualitative analysis" and "Quantitative analysis" to align with NCQA language Included language/table to describe Credentialing System Controls process and compliance with Credentialing controls, as it is performed by Credentialing team.	<b>SUBSTANTIAL</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	07D	<b>Advance Health Care Directive</b>	Added definition of "Health Care Decision" as not including consent by a patient's agent, conservator, or surrogate to convulsive treatment, psychosurgery, sterilization, or abortion. This update aligns with new AB 1029.	<b>MODERATE</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	11G	<b>Coordination of Benefits</b>	Described how IEHP coordinate pharmacy benefits with PBM and Medi-Cal Rx.	<b>MODERATE</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	12A1	<b>Care Management Requirements - PCP Role</b>	Removed reference of Members receiving specialty mental health from County Mental Health Plan.	<b>MODERATE</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	12A2	<b>Care Management Requirements - Health Risk Assessment</b>	HRA process will now also identify Medi-Cal Dental Services.	<b>MODERATE</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	12A3	<b>Care Management Requirements - Individualized Care Plan</b>	Updates IPA responsibilities for coordination of care for Palliative services with members of the ICT and responsible for Coordination of ECM-like services. Also care plans can include coordination of benefits and services of Medi-Cal Dental Services.	<b>SUBSTANTIAL</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	12A4	<b>Care Management Requirements - Interdisciplinary Care Team</b>	Included Palliative care providers as example of ICT member.	<b>MODERATE</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	12A7	<b>Care Management Requirements - Transition of Care</b>	New updates include IEHP or IPA will follow up with Member within three (3) business days post discharge from hospital or skilled nursing facility.	<b>MODERATE</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	23A	<b>Monitoring of First Tier Downstream Entities</b>	Defined First Tier and Downstream Entities for purposes of Plan monitoring and oversight.	<b>MODERATE</b>	<b>1/1/2024</b>

LINES OF BUSINESS	POLICY/ ATTACHMENT	POLICY TITLE	DESCRIPTION OF CHANGE	REVISION STATUS*	REVISION EFFECTIVE DATE
IEHP DualChoice (HMO D-SNP)	24C	<b>Quality Management &amp; Health Equity Transformation Program and Quality Improvement Program Description</b>	Described how the Plan's Quality Program aligns with DHCS' Comprehensive Quality Strategy, and described newer Quality Subcommittees, including but not limited to Member Safety, Skilled Nursing Facility, and Ancillary Quality Improvement Subcommittees.	<b>SUBSTANTIAL</b>	<b>1/2/2024</b>
IEHP DualChoice (HMO D-SNP)	25A2	<b>Delegation Oversight - Audit</b>	Updated to align with MC_25A2, "IEHP does not delegate Quality Management and Improvement (QI), QI Health Equity Transformation Program, Preventive...to any non-NCQA accredited entities;	<b>MINOR</b>	<b>1/1/2024</b>
IEHP DualChoice (HMO D-SNP)	26B	<b>Glossary</b>	Defined "Medical Information" per CA Civil Code 56.05	<b>MODERATE</b>	<b>1/1/2024</b>
EDI	11	<b>Standard Medi-Cal Companion Guide (CG) Transaction Information</b>	Loop 2400-CN1-Contract Information table updated: Diagnosis Related Group (DRG) code and note.	<b>MODERATE</b>	<b>1/1/2024</b>

**Enclosures:** Available upon request, please contact Provider Call Center at (909) 890-2054 or (866) 223-4347.

**cc:**

- IPA Medical Director
- IPA Administrator
- IPA Care Management Manager
- IPA Utilization Management Manager

**\*Revision Status:**

**MINOR** = minor grammatical/punctuation corrections are mostly grammatical in nature, or involve changes in terminology for consistency throughout the manual

**MODERATE** = involve mostly procedural and/or operational clarifications of existing processes

**SUBSTANTIAL** = are those that involve 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

**REPLACEMENT** = replacing a new copy of attachment