

2025

Medi-Cal

Member Benefits Guide



IEHP Member Handbook Guide

The Member Handbook, also called the Combined Evidence of Coverage (EOC), tells you about your Medi-Cal coverage with Inland Empire Health Plan (IEHP).

- It helps you understand your benefits and services and how to use them.
- It explains your rights and responsibilities as an IEHP Member.
- It is also a summary of IEHP’s rules and policies and based on the contract between IEHP and the California Department of Health Care Services (DHCS).

Use this guide below to help you find important information about benefits and services in your IEHP Member Handbook. You can find the complete Member Handbook at www.iehp.org. You can also call IEHP Member Services to have a Member Handbook sent to you. If you have any questions, please call IEHP Member Services at 1-800-440-IEHP (4347), Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. For TTY users call, 1-800-718-4347 or 711.

You can get the Member Handbook and other plan materials free of charge and in other languages. You can get this information in alternative formats, such as braille, 18-point large font and audio.

Prospective Members can view or receive the Member Handbook from our IEHP website or call IEHP Member Services.

Page #	Section of the EOC/Member Handbook	Summary
1 & 107	Interpreter services	IEHP provides oral interpretation services, including sign language, from a qualified interpreter, on a 24-hour basis, at no cost to you. Help is available 24 hours a day, 7 days a week. For help in your language, or to get this handbook guide in a different language, call IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711). The call is free.
18	How your plan works	IEHP works with the State of California to help you get the health care you need. IEHP contracts with Independent Physician Associations (IPAs) to provide healthcare services. An IPA is a group of PCPs, specialists, and other providers of health care services. Your PCP may be part of an IPA. Your PCP, along with IEHP or the IPA, directs the care for all your medical needs. This includes referrals (prior authorizations) to see specialists or get medical services, like lab tests, x-rays, and/or hospital care.
24	Costs, Member costs & For Members with long-term care and a share of cost	IEHP serves Members who qualify for Medi-Cal. IEHP Members do not have to pay for covered services within IEHP’s Provider network. Some Members may have a share of cost per month (called monthly premium). The amount you pay depends on your income and resources. Contact IEHP Member Services or review the IEHP Member Handbook at www.iehp.org .



Call IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347). IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
25	If you get a bill from a health care provider	If you get billed for covered services, or you paid for a service that you think IEHP should cover, you can file a claim. Call IEHP Member Services for help and more information on how to file.
29	Primary Care Provider (PCP)	You will get most of your care from your PCP. Your PCP will give you all your routine and preventive care. You must choose a PCP within 30 days of enrolling in IEHP. If you do not choose a PCP within 30 days of enrollment, IEHP will assign you to a PCP. If you are assigned to a PCP and want to change, call IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711). The change happens the first day of the next month. To change your PCP, call IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711). Or use our online Member Portal.
33 – 34	Out-of-network providers who are inside the service area or Outside the service area	<p>Out-of-network providers are those who do not have a Provider contract to work with IEHP. Except for emergency care, you may have to pay for care for out-of-network providers if the services have not been approved by IEHP. If you need help with out-of-network services, call IEHP Member Services for more information.</p> <p>If you are outside of the IEHP service area and need care that is not an emergency or urgent, call your PCP right away or call IEHP Member Services. For emergency care, call 911 or go to the nearest hospital's emergency room. IEHP covers out-of-network emergency care. If you are traveling internationally outside of Canada or Mexico and need emergency care, IEHP will not cover your care in most cases. If you have questions about out-of-network or out-of-service area care, call IEHP Member Services or call the 24-Hour Nurse Advice Line.</p>
36 – 37	Doctors & Hospitals	If you need a specialist and it is medically necessary, your PCP will refer you to a specialist in the IEHP network. Your PCP will send a referral to IEHP or your IPA for review. You must get an approval from IEHP or your IPA before you can see a specialist. If you need hospital care and it's not an emergency, your PCP will decide which hospital you go to and will require pre-approval. You will need to go to a hospital in the network which can be found in the Provider Directory.
37 – 38	Provider directory	The IEHP Provider Directory lists providers that participate in the IEHP network. The network is the group of providers that work with IEHP. The IEHP Provider Directory lists hospitals, PCPs, specialists, nurse practitioners, nurse midwives, physician assistants, family planning providers, Federally Qualified Health Centers (FQHCs), outpatient mental health providers, managed long-term services and supports (LTSS), Freestanding Birth Centers (FBCs), Indian Health Care Providers (IHCPs), and Rural Health Clinics (RHCs).



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary																				
		The Provider Directory has IEHP in-network provider names, specialties, addresses, phone numbers, business hours and languages spoken. If you want information about a doctor's education, training qualifications, residency completion, Medical School attended and board certification, please call IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711) or find the online Provider Directory at www.iehp.org . If you need a printed Provider Directory, call IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711).																				
38 – 40	Timely access to care	<table border="1"> <thead> <tr> <th colspan="2" data-bbox="653 423 1940 516"></th> </tr> </thead> <tbody> <tr> <td data-bbox="653 516 1493 609">Urgent care appointments that do not require pre-approval (prior authorization)</td> <td data-bbox="1493 516 1940 609">48 hours of request</td> </tr> <tr> <td data-bbox="653 609 1493 701">Urgent care appointments that do require pre-approval (prior authorization)</td> <td data-bbox="1493 609 1940 701">96 hours of request</td> </tr> <tr> <td data-bbox="653 701 1493 760">Non-urgent (routine) primary care appointments</td> <td data-bbox="1493 701 1940 760">10 business days of request</td> </tr> <tr> <td data-bbox="653 760 1493 818">Non-urgent (routine) specialist care appointments</td> <td data-bbox="1493 760 1940 818">15 business days of request</td> </tr> <tr> <td data-bbox="653 818 1493 911">Non-urgent (routine) mental health provider (non-doctor) care appointments</td> <td data-bbox="1493 818 1940 911">10 business days of request</td> </tr> <tr> <td data-bbox="653 911 1493 1003">Non-urgent (routine) mental health provider (non-doctor) follow-up care appointments</td> <td data-bbox="1493 911 1940 1003">10 business days of last appointment</td> </tr> <tr> <td data-bbox="653 1003 1493 1128">Non-urgent (routine) appointment for ancillary (supporting) services for the diagnosis or treatment of injury, illness or other health condition</td> <td data-bbox="1493 1003 1940 1128">15 business days of request</td> </tr> <tr> <td data-bbox="653 1128 1493 1286">Telephone wait times during normal business hours – Calls received after normal business hours (Monday-Friday, 8am-5pm) are returned within one (1) business day. Calls received after midnight are responded to the same business day.</td> <td data-bbox="1493 1128 1940 1286">10 minutes of request</td> </tr> <tr> <td data-bbox="653 1286 1493 1344">Telephone wait times for Nurse Advice Line</td> <td data-bbox="1493 1286 1940 1344">30 minutes (connected to nurse)</td> </tr> </tbody> </table>			Urgent care appointments that do not require pre-approval (prior authorization)	48 hours of request	Urgent care appointments that do require pre-approval (prior authorization)	96 hours of request	Non-urgent (routine) primary care appointments	10 business days of request	Non-urgent (routine) specialist care appointments	15 business days of request	Non-urgent (routine) mental health provider (non-doctor) care appointments	10 business days of request	Non-urgent (routine) mental health provider (non-doctor) follow-up care appointments	10 business days of last appointment	Non-urgent (routine) appointment for ancillary (supporting) services for the diagnosis or treatment of injury, illness or other health condition	15 business days of request	Telephone wait times during normal business hours – Calls received after normal business hours (Monday-Friday, 8am-5pm) are returned within one (1) business day. Calls received after midnight are responded to the same business day.	10 minutes of request	Telephone wait times for Nurse Advice Line	30 minutes (connected to nurse)
Urgent care appointments that do not require pre-approval (prior authorization)	48 hours of request																					
Urgent care appointments that do require pre-approval (prior authorization)	96 hours of request																					
Non-urgent (routine) primary care appointments	10 business days of request																					
Non-urgent (routine) specialist care appointments	15 business days of request																					
Non-urgent (routine) mental health provider (non-doctor) care appointments	10 business days of request																					
Non-urgent (routine) mental health provider (non-doctor) follow-up care appointments	10 business days of last appointment																					
Non-urgent (routine) appointment for ancillary (supporting) services for the diagnosis or treatment of injury, illness or other health condition	15 business days of request																					
Telephone wait times during normal business hours – Calls received after normal business hours (Monday-Friday, 8am-5pm) are returned within one (1) business day. Calls received after midnight are responded to the same business day.	10 minutes of request																					
Telephone wait times for Nurse Advice Line	30 minutes (connected to nurse)																					



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary														
		<table border="1"> <thead> <tr> <th data-bbox="653 185 1346 282"></th> <th data-bbox="1350 185 1900 282"></th> </tr> </thead> <tbody> <tr> <td data-bbox="653 285 1346 378">Life-threatening emergency</td> <td data-bbox="1350 285 1900 378">Immediate disposition of Members to appropriate care setting</td> </tr> <tr> <td data-bbox="653 381 1346 444">Non-life-threatening emergency</td> <td data-bbox="1350 381 1900 444">6 hours, or go to the ER</td> </tr> <tr> <td data-bbox="653 448 1346 540">Urgent visit for behavioral health need that do not require a prior authorization</td> <td data-bbox="1350 448 1900 540">Within 48 hours of request</td> </tr> <tr> <td data-bbox="653 544 1346 636">Urgent visit for behavioral health need that do require a prior authorization</td> <td data-bbox="1350 544 1900 636">Within 48 hours of request</td> </tr> <tr> <td data-bbox="653 639 1346 732">Initial routine (non-urgent) appointment with a Behavioral Health Care Provider</td> <td data-bbox="1350 639 1900 732">Within 10 business days of request</td> </tr> <tr> <td data-bbox="653 735 1346 799">Follow-up routine</td> <td data-bbox="1350 735 1900 799">Within 10 business days of request</td> </tr> </tbody> </table>			Life-threatening emergency	Immediate disposition of Members to appropriate care setting	Non-life-threatening emergency	6 hours, or go to the ER	Urgent visit for behavioral health need that do not require a prior authorization	Within 48 hours of request	Urgent visit for behavioral health need that do require a prior authorization	Within 48 hours of request	Initial routine (non-urgent) appointment with a Behavioral Health Care Provider	Within 10 business days of request	Follow-up routine	Within 10 business days of request
Life-threatening emergency	Immediate disposition of Members to appropriate care setting															
Non-life-threatening emergency	6 hours, or go to the ER															
Urgent visit for behavioral health need that do not require a prior authorization	Within 48 hours of request															
Urgent visit for behavioral health need that do require a prior authorization	Within 48 hours of request															
Initial routine (non-urgent) appointment with a Behavioral Health Care Provider	Within 10 business days of request															
Follow-up routine	Within 10 business days of request															
42 – 43	Payment	<p>You do not have to pay for your approved covered services from an approved Provider. If you get a bill, call IEHP Member Services. You are not responsible to pay a provider for any amount owed by IEHP for any covered service. Exclusions may apply to emergency care or urgent care; you may have to pay for care from providers who are not in the network.</p>														
43	Referrals	<p>When your PCP thinks you need a specialized treatment or supplies, your PCP will need to get a referral from IEHP and/or medical group (IPA). A referral means that you must get approval from IEHP and/or medical group. Changes to your PCP may impact referrals that have already been approved. If you have a health problem that needs special medical care for a long time, you may need a standing referral. This allows you to go to the same specialist more than once without getting a referral each time. Call IEHP Member Services if you have trouble getting a referral or want a copy of the IEHP referral policy.</p> <p>You do not need a referral for:</p> <ul style="list-style-type: none"> • PCP visits 														



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
		<ul style="list-style-type: none"> • Obstetrics/Gynecology (OB/GYN) visits • Urgent or emergency care visits • Adult sensitive services, such as sexual assault care • Family planning services (to learn more, call Office of Family Planning Information and Referral Service at 1-800-942-1054) • HIV testing and counseling (12 years or older) • Sexually transmitted infection services (12 years or older) • Initial mental health assessment (therapy and psychiatry) • Acupuncture (the first two services per month; additional appointments will need a referral) • Eligible dental services • Out of area renal dialysis • Preventive services, including health education
45 – 46	Pre-approval (prior authorization)	For some types of care, your PCP or specialist will need to ask for a prior authorization, prior approval, or pre-approval. It means that IEHP must make sure that the care is medically necessary or needed based on appropriateness of care and services and existence of coverage.
47	Utilization Management (UM) processes	<p>IEHP has specific processes for Utilization Management (UM). IEHP has guidelines or criteria that are used in specific cases to approve or deny requested health care services. In all cases, a Medical Director is required to take the Member's needs into account when making decisions to approve or deny requested health care services.</p> <p>The UM staff are on hand between 8am and 5pm during working days to talk about any UM issues. UM staff will always identify themselves by name, title, and organization name when calling or returning your calls. You can also call DHCS at 1-888-452-8609.</p>
50 – 52	Urgent Care	<p>Urgent care is not for an emergency or life-threatening condition. It is for services to prevent serious damage to your health from a sudden illness, injury, or complication of a condition you already have. For urgent care services, contact your PCP, our 24-hour Nurse Advice Line, www.iehp.org, or call IEHP Member Services to help you find the nearest location and for out of the area care. If you need care after normal business hours or holidays, the IEHP 24-Hour Nurse Advice Line is available 24 hours a day, seven days a week at 1-888-244-4347. For TTY, call 711.</p> <p>If you need mental health urgent care, call your county mental health plan or IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711). To find all counties' toll-free telephone numbers online, visit http://www.dhcs.ca.gov/individuals/Pages/MHPContactList.aspx.</p>



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
52 – 53	Emergency care	<p>Emergency care is for life-threatening medical and behavioral health conditions. If you don't get care right away, your health could be in danger. For emergency care, call 911 or go to the nearest hospital's emergency room (ER). Emergency care does not need a pre-approval.</p> <p>If you or someone you know is in crisis, please contact the 988 Suicide and Crisis Lifeline: Call or text 988 or chat online at 988lifeline.org/chat. The 988 Suicide and Crisis Lifeline offers free and confidential support for anyone in crisis. That includes people who are in emotional distress and those who need support for a suicidal, mental health, and/or substance use crisis.</p>
5	What benefits and services your health plan covers	Your covered services are free if they are medically necessary and provided by an in-network provider. IEHP may cover medically necessary services from an out-of-network provider but that must be requested. Care is medically necessary if it is reasonable and necessary to protect your life, keeps you from becoming seriously ill or disabled, or reduces severe pain from a diagnosed disease, illness or injury. For a list of limited services refer to the Member Handbook.
59	Medi-Cal Benefits covered by IEHP	IEHP offers these types of services: outpatient (ambulatory) services, telehealth services, mental health services (outpatient), emergency services, hospice and palliative care, hospitalization, maternity and newborn care, rehabilitative and habilitative (therapy) services and devices, laboratory and radiology services, preventive and wellness services and chronic disease management, Diabetes Prevention Program (DPP), substance use disorder treatment services, pediatric services, vision services, non-emergency medical transportation (NEMT), non-medical transportation (NMT), long-term services and supports (LTSS), and transgender services.
69	Behavioral Health Treatments (BHT)	<p>BHT includes services and treatment programs, such as applied behavior analysis and evidence-based behavior intervention programs, that develop or restore, to the maximum extent practicable, the functioning of an individual. BHT services must be medically necessary, prescribed by a licensed doctor or psychologist, approved by the plan, and provided in a way that follows the approved treatment plan.</p> <p>BHT services must be medical necessary, prescribed by a licensed doctor or psychologist, approved by IEHP, and provided in a way that follows the approved treatment plan.</p>
75	Substance use disorder screening services	IEHP covers alcohol misuse screenings, illicit drug screenings and behavioral health counseling interventions for alcohol misuse.
80 – 81	Complex Care Management (CCM) program	If you are sick or have a serious illness, IEHP will work with you and your Doctor to make sure you get the care you need. The IEHP Behavioral Health and Care Management Team (BHCMT) can help you if have a serious illness, like heart disease, lung disease, kidney disease, AIDS, Hepatitis



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
		<p>C, spinal injury, or other chronic problems. The IEHP CMT can help you manage your condition and medicines, coordinate your care by working with your doctors, and can help you get any needed medical equipment. An Interdisciplinary Care Team (ICT) can also help you with your personal plan of care. An ICT consists of your PCP, Nurse care manager, Behavioral Health care manager (when needed), and others who support your health care needs.</p> <p>There are several ways that you can be referred into IEHP's Complex Care Management program such as:</p> <ul style="list-style-type: none"> • A Medical Management Referral (example: A nurse from IEHP's Nurse Advice Line thinks you would benefit from the program), • A Discharge Planner Referral (example: If you are being discharged from a hospital and have many complicated needs), • A Member or Caregiver Referral (example: You can call IEHP to ask for a Complex Care Manager's help), • A Practitioner Referral (example: Your doctor can make a referral on your behalf). <p>Call IEHP Member Services if you are interested in enrolling or feel that you or your caregiver would benefit from being in the program, or talk to your doctor if you would like to learn more about this no-cost Complex Care Management Program, speak with your ICT, create a personal plan of care, or if you just need help with your health care. Call 1-800-440-IEHP (4347) (TTY 1-800-718-4347), Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm.</p> <p>How to opt into the CCM Program: First, we will need to complete a health survey with you to assess your needs. This will help determine if you are eligible for the program. If you are eligible for the program and wish to opt in, you will be automatically enrolled. If you are not eligible for the CCM program but want more information on other Care Management Services available, please contact Member Services at 1-800-440-4347. After enrollment into the CCM program, you will be assigned a Primary Case Manager. The Case Manager will contact you at least once every 30 days to discuss your health goals. They will also assist you with a plan to meet those goals. To get started, call IEHP Member Services at 1-800-440-IEHP (4347), Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. TTY users should call 1-800-718-4347.</p> <p>How to opt out of the CCM Program: Once enrolled you may opt out of the program at any time. Simply contact IEHP Member Services at 1-800-440-4347 and let them know you no longer wish to be involved with the program. Be sure to notify your Case Manager as well.</p>



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
81	Enhanced Care Management (ECM)	<p>IEHP covers Enhanced Care Management (ECM) services for Members with certain chronic health conditions. These services are to help coordinate physical health services, behavioral health services, community-based Long-Term Services and Supports (LTSS) for member with chronic conditions and referrals to available community resources.</p> <p>You may be contacted if you qualify for the program. If qualified, you will be able to choose to opt in or out of this program. You can also call IEHP, or talk to your doctor or clinic staff, to find out if you can receive ECM services.</p>
85	Other Medi-Cal programs and services	<p>Sometimes IEHP does not cover services, but you can still get them through Regular or Straight Medi-Cal (called FFS Medi-Cal). To learn more, call IEHP Member Services.</p>
86	Prescription drugs covered by Medi-Cal Rx	<p>Most prescription drugs are covered by Medi-Cal Rx, some drugs may be covered by IEHP. Your provider can prescribe you drugs that are on the Medi-Cal Rx Contract Drugs List.</p> <p>To find out if a drug is on the Contract Drug List or to get a copy of the Contract Drug List, call Medi-Cal Rx at 1-800-977-2273 (TTY 1-800-977-2273 and press 5 or 711), visit the Medi-Cal Rx website at www.Medi-CalRx.dhcs.ca.gov/home/, or call IEHP Member Services at 1-800-440-IEHP (4347), Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. TTY users should call 1-800-718-4347 or 711.</p>
86 – 87	Pharmacies	<p>If you are filling or refilling a prescription, you must get your prescribed drugs from a pharmacy that works with Medi-Cal Rx. You can find a list of pharmacies that work with Medi-Cal Rx in the Medi-Cal Rx Pharmacy Directory at www.Medi-CalRx.hcs.ca.gov/home/. You can also find a pharmacy near you by calling Medi-Cal Rx at 1-800-977-2273 (TTY 1-800-977-2273 and press 5 or 711). Or call IEHP Member Services at 1-800-440-IEHP (4347), Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. TTY users should call 1-800-718-4347 or 711.</p>
87	Specialty mental health services	<p>Some mental health services are provided by county mental health plans instead of IEHP. These include specialty mental health services (SMHS) for Medi-Cal members who meet criteria for SMHS. SMHS may include these outpatient, residential and inpatient services:</p> <p>Outpatient services:</p> <ul style="list-style-type: none"> • Mental health services • Medication support services • Day treatment intensive services



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
		<ul style="list-style-type: none"> • Day rehabilitation services • Crisis intervention services • Crisis stabilization services • Targeted case management services • Therapeutic behavioral services (covered for members under 21 years old) • Intensive care coordination (ICC) (covered for members under 21 years old) • Intensive home-based services (IHBS) (covered for members under 21 years old) • Therapeutic foster care (TFC) (covered for members under 21 years old) • Mobile crisis services • Peer Supportive Services (PSS) (optional) <p>Residential services:</p> <ul style="list-style-type: none"> • Adult residential treatment services • Crisis residential treatment services <p>Inpatient services:</p> <ul style="list-style-type: none"> • Psychiatric inpatient hospital services • Psychiatric health facility services
29	Services you cannot get through IEHP or Medi-Cal	<p>Some services that neither IEHP nor Medi-Cal will cover, include: experimental services, fertility preservation, In Vitro Fertilization (IVF), permanent home modifications, vehicle modifications, cosmetic procedures and treatment, hygiene item, foot care, hearing aid loaners, or any other items detailed by the Medi-Cal Provider Manual.</p> <p>This is not a complete list. Services that are not listed as a covered benefit and are not covered by Medi-Cal are not covered by IEHP. To learn more, call IEHP Member Services.</p>
93 – 94	Evaluation of new and existing technologies	<p>Our Medical Directors identify new medical or behavioral procedures, treatment, drugs, and devices on a regular basis. They present research data to the IEHP Utilization Management (UM) Subcommittee or IEHP Pharmacy & Therapeutics (P&T) Subcommittee, where Doctors review the technology and suggest whether it can be added as a new benefit. If approved by the IEHP Quality Management & Health Equity Transformation Committee, IEHP will add the new technology as a covered benefit for our Members. To learn more about this review of new technology, call IEHP Member Services.</p>



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
95	Child and youth well care	Child and youth members under 21 years old can get special health services as soon as they are enrolled. This makes sure they get the right preventive care and services upon enrollment.
95	Medi-Cal for Kids and Teens	<p>Members under 21 years old are covered for needed care. IEHP covers medically necessary services to treat or ameliorate defects and physical, mental diagnosis. Some covered services include well-child visits and teen check-ups (important visits children need), immunizations (shots), mental health services, health and preventive education, lab tests, including blood lead poisoning testing and vision services.</p> <p>These services are called Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services. Please refer to your Member Handbook for more covered pediatric services.</p>
101	Reporting and solving problems	You can use the IEHP grievance and appeal process to let us know about your problem. This does not take away any of your legal rights and remedies. We will not discriminate or retaliate against you for complaining to us. Letting us know about your problem will help us improve care for all members.
102	Complaints	A complaint (or grievance) is when you have a problem or are unhappy with the services you are receiving from IEHP or a provider. There is no time limit to file a complaint. You can file a complaint with us at any time by phone, in writing or online. If you need help filing your complaint, we can help you. We can give you free language services. Please call IEHP Member Services for help.
103	Appeals	<p>An appeal is different from a complaint. An appeal is a request for IEHP to review and change a decision we made about coverage for a requested service. If we sent you a Notice of Action (NOA) letter telling you that we are denying, delaying, changing or ending a service, and you do not agree with our decision, you or your authorized representative can file an appeal. Your PCP can also file an appeal for you with your written permission. You must file an appeal within 60 calendar days from the date on the NOA you received. If you are currently getting treatment and you want to continue getting treatment, then you must ask for an appeal within 10 calendar days from the date the NOA was delivered to you, or before the date IEHP says services will stop. You can file an appeal by phone, in writing or online. Please call IEHP Member Services for help.</p> <p>An Independent Medical Review (IMR) is when an outside doctor who is not related to your health plan reviews your case. If you want an IMR, you must first file an appeal with IEHP. If you do not hear from your health plan within 30 calendar days, or if you are unhappy with your health plan's decision, then you may request an IMR. You must ask for an IMR within 6 months from the date on</p>



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
		<p>the notice telling you of the appeal decision, but you only have 120 days to request a State Hearing so if you want an IMR and a State hearing file your complaint as soon as you can. Here is how to ask for an IMR. The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at IEHP Member Services at 1-800-440-IEHP (4347) (TTY 1-800-718-4347 or 711) and use your health plan's grievance process before contacting the department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services. The department also has a toll-free telephone number (1-888-466-2219) and a TDD line (1-877-688-9891) for the hearing and speech impaired. The department's internet website https://www.dmhc.ca.gov/ has complaint forms, IMR application forms and instructions online.</p>
110	Rights and Responsibilities – Your rights	<p>IEHP Members have these rights:</p> <ul style="list-style-type: none"> • To be treated with respect and dignity, giving due consideration to your right to privacy and the need to maintain confidentiality of your medical information. • To be provided with information about the plan and its services, including covered services, practitioners, and member rights and responsibilities. • To participate in decision making with providers regarding your own health care, including the right to refuse treatment. • To voice grievances, either verbally or in writing, about the organization or the care you got. • To ask for an appeal of decisions to deny, defer or limit services or benefits. • A right to a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage. • To make recommendations about IEHP's member rights and responsibilities policy.
111	Your Responsibilities	<p>IEHP Members have the responsibility to follow the advice and care procedures provided by your Doctor, IEHP, and the program. If you have questions about these procedures, call IEHP Member Services.</p> <p>IEHP Members have the responsibility to give accurate information to IEHP, your Doctor, and any other Provider. This helps you get better care. Also, IEHP Members have the responsibility to</p>



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.

Page #	Section of the EOC/Member Handbook	Summary
		understand their health needs and be a part of their health care decisions.. Ask your doctor questions if you do not understand or have suggestions about the development of your treatment plan.
113	Notice of non-discrimination	<p>Free language services are offered to people whose first language is not English. If you need these services, contact IEHP Member Services at 1-800-440-IEHP (4347) or 1-800-718-4347 for TTY users, Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm for help.</p> <p>Discrimination is against the law. IEHP follows state and federal civil rights laws. IEHP does not unlawfully discriminate, exclude people or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity or sexual orientation.</p>
115	Notice of privacy practices	<p>IEHP will keep your medical information confidential. This includes any medical records, computer data, reports, or records about you or your health care. You have the right to keep your medical information and records confidential, unless you say differently. You also have the right to review, request corrections to, and receive a copy of your medical records from your Doctor or health care provider. Whenever your medical records need to be released for any reason, you will be contacted for your permission.</p> <p>IEHP will keep your confidential information private within IEHP because only certain employees are permitted to have access to your confidential information. You have the right to access your confidential medical information. IEHP will provide you with access and an accounting of disclosures upon request. You also have the right to amend your confidential medical information and request restrictions on the use and disclosure of your confidential medical information.</p> <p>Please refer to your Notice of Privacy Practices for further information regarding IEHP’s Privacy Practices.</p>



Call IEHP Member Services at 1-800-440-IEHP (4347). TTY 1-800-718-4347. IEHP is here Monday–Friday, 7am–7pm, and Saturday–Sunday, 8am–5pm. The call is toll free. Or call the California Relay Line at 711. Visit online at www.iehp.org.



We heal and inspire the human spirit.

Office

10801 Sixth Street
Rancho Cucamonga, CA
91730

IEHP Member Services

1-800-440-IEHP (4347)
TTY 1-800-718-4347 or 711
Monday-Friday, 7am-7pm
Saturday-Sunday, 8am-5pm

Mailing Address

P.O. Box 1800
Rancho Cucamonga, CA
91729-1800



iehp.org

