



IMPERIAL
HEALTH PLAN
OF CALIFORNIA

IMPERIAL PROVIDER NEWSLETTER

SUMMER 2025

06/01/2025

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Message from the Chief Medical Officer – Summer 2025 Medicare Newsletter

Dear Doctors, Practitioners, Providers, FDRs, Consultants, and Delegated IPAs,

I am excited to announce that all Imperial Health entities are now NCQA Accredited for Health Plan products—including Medicare Advantage (MA-PD), Chronic Condition SNPs (C-SNP), and Dual Eligible SNPs (D-SNP). This achievement is a shared success with all of you who work tirelessly to deliver high-quality, patient-centered care.

As we continue through 2025, I want to highlight several key focus areas for clinical excellence and operational alignment:

1. Clinical Tools: Use MDCalc for Evidence-Based Care

- MDCalc tools—now posted under the Provider Calculators section of our portal—can assist you with risk scoring, clinical decision-making, and guideline-based care. These are especially valuable in managing seniors and patients with complex conditions.

2. Recapture and Document Chronic Conditions Thoughtfully

- Every chronic condition should be reviewed and documented accurately in the EHR each year. Complete, specific, and timely documentation ensures better outcomes and more precise care planning. Avoid over coding, under coding, or non-specific diagnoses.

3. Timely, Accurate Encounter Data Submission for IPAs Receiving Capitation

- Practitioners and provider groups operating under capitation agreements must submit 100% of encounter volume with greater than 99% coding accuracy. This is essential for HEDIS, STARS, and Risk Adjustment programs. Failure to meet these standards can impact Quality and Compliance performance.

4. Promote Balanced Utilization of Covered Services

- Please continue to avoid both overuse and underuse of covered services. Clinical appropriateness should always guide care decisions, supported by clear and concise documentation.



We are Here for You

- At Imperial Health, we consider you part of our extended family. We are always here to support your care delivery with tools, programs, and resources that make a difference. Whether it's clinical assistance, operational guidance, or help with member services—we are just a phone call or message away.
- These newsletters are more than just updates—they are gateways to unlocking resources that support your teams, improve patient outcomes, and elevate member satisfaction. We are grateful for your continued partnership and your commitment to excellence in caring for our members.

Important Contacts Service Phone Number

- Quality dept. at QIM@imperialhealthholdings.com
- Provider Network at PNM@imperialhealthholdings.com
- Credentialing dept. at credentialingadmin@imperialhealthholdings.com
- Case Managers 1-800-708-8273
- Virtual Clinic 1-866-999-1415
- Lucet (Mental Health Support) 1-816-273-2362
- Hearing Test (HCS) 1-866-344-7756
- Vision Test (VSP) 1-855-492-9028
- American Specialty Health (ASH) 1-800-848-3555
- Plan Pharmacy Department 626-788-0178
- Nymbl Science App 1-800-672-6854
- Silver & Fit 1-877-427-4788
- MedImpact at 844-269-0977 (Pharmacy Benefit Manager support 24/7)
- Member services 1-800-595-0619, TTY 711
- Member transportation vendor Care Car: 844-743-4344

With appreciation,

Muthukumar Vaidyaraman, MD, MBA, FACHE

Chief Medical Officer

Imperial Health Plan of California, Inc. & Affiliated Companies

2025 Provider Summer Newsletter

STARS Measure – Medication Adherence

As we approach the midpoint of 2025, the Pharmacy Services Department at Imperial wants to focus and emphasize our efforts on our members and their adherence to medications. Medication adherence is vital to the overall health and wellness of our patients. Poor medication adherence for chronic conditions often can negatively impact clinical outcomes, quality of life, and lead to higher rates of readmissions. Together, we want to create a plan to improve and achieve the greatest level of adherence.



How do you make an impact on medication adherence?

- As a reminder, our plan offers 100-day supply on most maintenance medications. Utilization of this pharmacy benefit can significantly reduce both trips to the pharmacy and cost in certain situations.
- Clearly communicate with and educate your patients – what are the medications for and why they are important to take on a regular basis.
- Involving family members and caregivers in treatment plans, especially for elderly patients.
- Save the patient money by prescribing Tier 1 and Tier 2 medications.
- You can find the Part D formulary list by going to:
 1. <https://imperialhealthplan.com>
 2. Select your state and county.
 3. Scroll down the quick links and under “Prescription Search” select the Plan Benefit Package.

You might hear from our team on a regular basis regarding your patients’ medications. Please help us by responding to our requests so that we can keep our members adherent. We invite you to reach out to us as well should you have any questions or concerns. Our team is a small but mighty group of specially trained Pharmacists, Pharmacy Technicians, and Pharmacy Concierge. We are experts in pharmacy benefits, formulary, coverage determinations, appeals, and more. We hope that in collaborating, we can help optimize the health of our members.

Immunization Updates

Flu vaccines for the 2025-2026 season will be available at all the pharmacies starting in the summer of 2025. Please encourage all your members to get vaccinated, as the flu vaccine is a safe and effective way to protect them from seasonal influenza. Other recommended vaccines for seniors are pneumonia, RSV, shingles and COVID which are all covered at a \$0 copay.

The CDC recommends the pneumococcal vaccine for adults 65 years or older, RSV vaccine for adults 60 years and older to protect from severe RSV, flu vaccine for people 65 years and older because they are at higher risk of developing serious flu complications, and the updated 2024-2025 COVID vaccine for everyone ages 6 months and older.

Notice to Providers: Pharmaceutical Information and Updates

We are committed to ensuring that you have easy access to the latest pharmaceutical information to support your practice and patient care. The following resources are available online to help you navigate our pharmacy benefit services effectively:

Part D Pharmaceutical information and updates

Pharmaceutical information and updates are available on the **Provider page** of our website (www.imperialhealthplan.com) as well as in the **provider manual**. You can access a direct link to the **Pharmacy Resources** page on the Provider page, where you will find:

- **The Formulary (PDF version):** A list of covered pharmaceuticals with restrictions and preferences (e.g., drug tiers, prior authorization requirements).
- Explanation of quantity limits, generic substitution processes, therapeutic interchange, and step therapy protocols.
- How to use pharmaceutical management procedures.
- **Drug Search Tool:** A tool to quickly locate a drug, including any associated restrictions or preferences.
- **Formulary Change Notice:** A list of drugs organized by date of change, including those that were added, deleted, or had restrictions or preferences applied.
- **Exception request:** Instructions for initiating exception requests, including required supporting documentation.

For additional questions, please contact MedImpact at 877-391-1105. Their support team is available 24 hours a day, 7 days a week.

Physician Administered Drugs (PADs) information

Prior authorization is required for all PADs included on the Prior Authorization List. The Prior Authorization List can be accessed on our website at <https://imperialhealthplan.com>. This list is regularly reviewed and updated to ensure that any changes in procedures or applicable drug recalls are communicated promptly.

Detailed instructions for submitting a prior authorization request are available in the Policies and Procedures section of this manual.

Once a request is received, it will be reviewed for medical necessity utilizing our Medical Necessity review hierarchy. A determination will then be issued via fax within the appropriate turn-around time. If you require additional information or support, the Utilization Management Department can be reached at 626-838-5100, Hours: M-F 8:00AM-5:00PM PT and 7:00AM-3:30PM PT weekends. Closed on holidays.

Pharmaceutical Updates

Our organization regularly updates pharmacy benefit information to maintain accuracy and relevance. Updates are communicated promptly, within 15 days of receiving notice.

Date	Brand-Names	Product-Description
5/6/2025	Endurance Boost	Dietary supplement for male performance and energy
4/18/2025	Amneal Pharmaceuticals LLC.	Ropivacaine Hydrochloride Injection, USP, 500mg/100mL IV bag
2/25/2025	CAPS	Phenylephrine 40 mg added to 0.9% Sodium Chloride 250 mL in 250 mL Excel Bag
2/25/2025	SinuCleanse	Soft Tip Squeeze Bottle Nasal Wash System
2/20/2025	Vitality	Vitality male enhancement dietary supplement capsules
2/18/2025	BD	ChloraPrep Clear 1 mL applicator skin preparation product
2/14/2025	ICU Medical	POTASSIUM CHLORIDE Inj. 20 mEq and 10 mEq
1/31/2025	Alvogen	Fentanyl Transdermal System 25 mcg/h transdermal patches
1/24/2025	Provepharm Inc.	Phenylephrine hydrochloride Injection, USP, 10 mg/ mL

Feedback and Reporting

To maintain the quality and accuracy of our information, we encourage you to report any inaccuracies or provide feedback on the clarity and usefulness of this information.

Please contact the **Imperial Pharmacy Department** at **(626) 788-0178** with your feedback or concerns.

- If you require a written copy of any of this information, it can be requested by calling Member Services: (800) 838-8271 (TTY: 711) October 1 - March 31: Monday - Sunday from 8:00 am - 8:00 pm and April 1 - September 30: Monday - Friday from 8:00 am - 8:00 pm.

Thank you for your continued partnership in providing high-quality care to our members.

New Medicare Coverage for HIV Prevention – PrEP Now Covered Under Part B

Effective September 30, 2024, the Centers for Medicare & Medicaid Services (CMS) issued a National Coverage Determination (NCD 210.15) for Pre-Exposure Prophylaxis (PrEP) for HIV Prevention. This NCD establishes Medicare coverage for FDA-approved antiretroviral drugs used to prevent HIV in individuals at increased risk.

As part of this determination, CMS has ruled that the cost of coverage under NCD 210.15 does not meet the significant cost threshold under 42 CFR § 422.109. As a result, Medicare Advantage (MA) plans are required to assume the costs and cover PrEP drugs under this new policy.

Key Updates for Providers:

- PrEP coverage is shifting from Medicare Part D to Medicare Part B.
- PrEP will now be a zero-dollar cost-sharing preventive service under Part B.
- MA organizations and Part D sponsors must ensure seamless access to PrEP, including necessary counseling and screenings for eligible beneficiaries.

Scope of Policy:

This policy applies to all MA organizations, Part D plan sponsors, network pharmacies, and healthcare providers involved in the administration of PrEP for HIV prevention.

Providers should be aware of this transition to ensure patients continue to receive uninterrupted access to PrEP medications and related services. If you have any questions about this update, please reach out to Imperial Pharmacy Department.

Please help us keep our member population protected and safe this summer season.

Give us a call, fax, or email if you have any questions. It is our pleasure to assist you.

Phone (626) 788-0178

Fax (626) 689-4232

Pharmacy@imperialhealthplan.com

Sincerely,

Imperial Pharmacy Department

Improve performance and better manage patient care with Imperial Health Plan new web-based platform

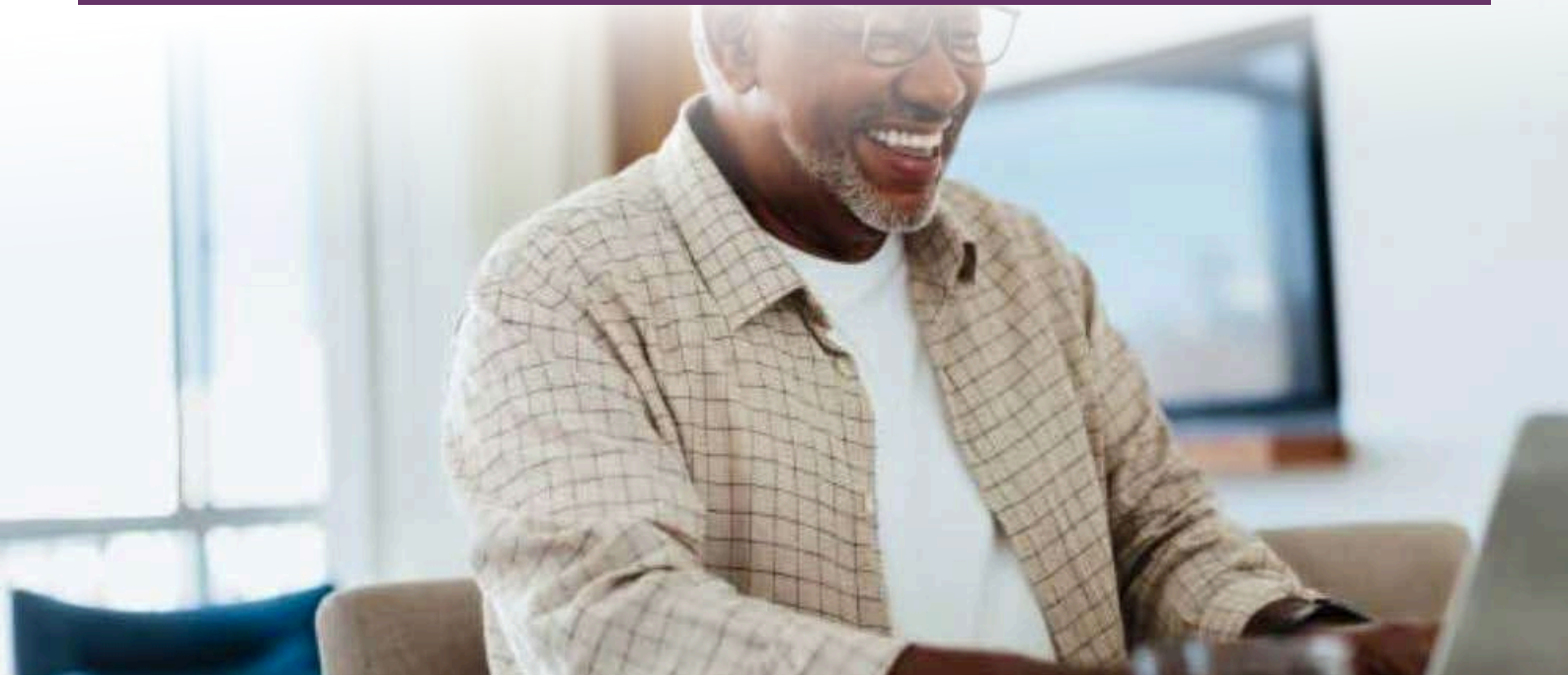
Imperial Health Plan recently made a significant investment to offer COZEVA at no cost to participating providers. COZEVA is a powerful population health and analytics platform that will allow you to better monitor and take action on performance gaps for quality and risk measures.

Advantages of Using COZEVA:

- Great tool for Providers, Medical assistants and Office staff for chart prep to Provide Patients with the most efficient care.
- Receive timely data on Quality and Risk Performance. Trend your scores over time.
- Review open care gaps and chronic conditions for your Imperial Health Plan patients. Use batching and bulk printing of face sheets to facilitate pre-visit planning.
- Close care gaps instantly by submitting attestations for measure compliance or exclusion and uploading proof-of-service documentation.
- Based on the system you use, integrate your EHR system with COZEVA and eliminate double documentation.



For more information please contact the Imperial Health Plan Quality Improvement team via email at QIM@imperialhealthholdings.com to register for Cozeva today!



Annual HEDIS® Hybrid Measure Record Collection for MY2024 is underway

In accordance with Federal and State laws and regulations and standards set forth by the National Committee for Quality Assurance (NCQA), provider groups under contract with Imperial Health are required to have health record keeping practices in place that comply with Imperial Health's standards and guidelines regarding confidentiality, availability, system of health record organization, and methods to assess the quality of health record keeping.

The Healthcare Effectiveness Data and Information Set (HEDIS®)¹ is one of the most widely used set of health care performance measures in the United States. Hybrid measures are measures in which additional information in the medical chart may be necessary to complement claims data in order to provide a full picture of the care/services provided and record compliance with a given performance measure.

Imperial Health has again contracted with Credo Health ("ChartFast") to perform record collection for this mandated, time-sensitive, audit and compliance by your office and medical-records/HIM staff is vital to our joint success!

**PLEASE RESPOND TO RECORDS REQUESTS
WITHIN 3 DAYS AND BEGIN SUBMITTING
REQUESTED RECORDS WITHIN 5 DAYS.**

See the next page for details regarding:

- How Imperial Health Maintains Medical Record Confidentiality
- Are You Authorized to Comply with a Records Request from Imperial Health?



Medical record confidentiality:

Imperial Health strictly maintains the confidentiality of all records, and records are only accessed by authorized individuals adhering to the following guidelines:

- Records are used only for the purpose designated in the specific request
- Records are kept in a safe and secure location
- Records are appropriately destroyed when they are no longer needed for the purpose requested
- Records are not further disclosed or otherwise distributed

Medical record release:

A special authorization from your patient (our member) is **not** required prior to releasing a copy of the medical record to Imperial Health.

Title 45 Code of Federal Regulations (CFR) Part 164.506 permits disclosures to other covered entities, such as the health plan, to carry out health care operations. 45 CFR 164.501 defines health care operations to include quality assessment and improvement activities, and 45 CFR 164.504 permits disclosures to business associates under contract to perform health care operations for covered entities.

Imperial Health is a covered entity under the Health Insurance Portability and Accountability Act (HIPAA). Imperial Health secures the consent of our members for release of medical records upon enrollment. We are not asking for, nor do we want, any medical record information related to psychotherapy, HIV, substance use disorder, or developmental disabilities.

In addition, contractual agreements between Imperial Health and our participating providers contain an explicit provision that requires providers to provide member information when requested for quality review purposes.

Questions: If you or your staff have questions regarding HEDIS®, please reach out to your assigned Quality Improvement Specialist or email QIM@imperialhealthholdings.com.

1HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)

Imperial Health Plan of California's Compliance Program



Imperial's Compliance Training/Program/Code of Conduct are located on our plan's website under the provider page at www.imperialhealthplan.com. Annually Imperial Compliance will audit these elements.

Compliance Training, Compliance Program, Code of Conduct



www.imperialhealthplan.com

Training

- 2025 Compliance Training and Education
- 2025 Compliance Training Attestation
- 2025 Compliance Training Quiz
- Code of Conduct
- Compliance Program Description



Provider Webinar Calendar May 2025

Throughout the year, Imperial Health conducts a series of New Provider webinars on authorizations, referrals, and Provider Portal. These webinars are mandatory for new providers and serve as a tool to educate the healthcare providers on best practices. All Webinars are also open to Existing Providers and will be hosted by Imperial Provider Network Administrators. Please RSVP at PNM@imperialhealthholdings.com.

Webinar Series Schedule

Date Range: May 1st to May 31st, 2025

▶ May 1st (Thursday)

▶ May 7th (Wednesday)

▶ May 8th (Thursday)

▶ May 14th (Wednesday)

▶ May 15th (Wednesday)

▶ May 21st (Wednesday)

▶ May 22nd (Thursday)

▶ May 28th (Wednesday)

▶ May 29th (Thursday)

Afternoon Sessions:

- CST: 2:00 PM – 3:00PM
- PST: 12:00 PM – 1:00 PM



Provider Webinar Calendar

June 2025

Throughout the year, Imperial Health conducts a series of New Provider webinars on authorizations, referrals, and Provider Portal. These webinars are mandatory for new providers and serve as a tool to educate the healthcare providers on best practices. All Webinars are also open to Existing Providers and will be hosted by Imperial Provider Network Administrators. Please RSVP at PNM@imperialhealthholdings.com

Webinar Series Schedule

Date Range: June 4th to June 26th, 2025

▶ June 4th (Wednesday)

▶ June 5th (Thursday)

▶ June 11th (Wednesday)

▶ June 12th (Thursday)

▶ June 18th (Wednesday)

▶ June 19th (Thursday)

▶ June 25th (Wednesday)

▶ June 26th (Thursday)

Afternoon Sessions:

- CST: 2:00 PM – 3:00PM
- PST: 12:00 PM – 1:00 PM



Provider Webinar Calendar July 2025

Throughout the year, Imperial Health conducts a series of New Provider webinars on authorizations, referrals, and Provider Portal. These webinars are mandatory for new providers and serve as a tool to educate the healthcare providers on best practices. All Webinars are also open to Existing Providers and will be hosted by Imperial Provider Network Administrators. Please RSVP at PNM@imperialhealthholdings.com.

Webinar Series Schedule

Date Range: July 2nd - 31st, 2025

▶ July 2nd (Wednesday)

▶ July 3rd (Thursday)

▶ July 9th (Wednesday)

▶ July 10th (Thursday)

▶ July 16th (Wednesday)

▶ July 17th (Thursday)

▶ July 23rd (Wednesday)

▶ July 24th (Thursday)

▶ July 30th (Wednesday)

▶ July 31st (Thursday)

Afternoon Sessions:

- CST: 2:00 PM – 3:00PM
- PST: 12:00 PM – 1:00 PM

Provider Webinar Calendar August 2025

Throughout the year, Imperial Health conducts a series of New Provider webinars on authorizations, referrals, and Provider Portal. These webinars are mandatory for new providers and serve as a tool to educate the healthcare providers on best practices. All Webinars are also open to Existing Providers and will be hosted by Imperial Provider Network Administrators. Please RSVP at PNM@imperialhealthholdings.com

Webinar Series Schedule

Date Range: August 6th - August 28th, 2025

▶ August 6th (Wednesday)

▶ August 7th (Thursday)

▶ August 13th (Wednesday)

▶ August 14th (Thursday)

▶ August 20th (Wednesday)

▶ August 21st (Thursday)

▶ August 27th (Wednesday)

▶ August 28th (Thursday)

Afternoon Sessions:

- CST: 2:00 PM – 3:00PM
- PST: 12:00 PM – 1:00 PM



Provider Webinar Calendar September 2025

Throughout the year, Imperial Health conducts a series of New Provider webinars on authorizations, referrals, and Provider Portal. These webinars are mandatory for new providers and serve as a tool to educate the healthcare providers on best practices. All Webinars are also open to Existing Providers and will be hosted by Imperial Provider Network Administrators. Please RSVP at PNM@imperialhealthholdings.com.

Webinar Series Schedule

Date Range: September 3rd - September 25th, 2025

▶ September 3rd (Wednesday)

▶ September 4th (Thursday)

▶ September 10th (Wednesday)

▶ September 11th (Thursday)

▶ September 17th (Wednesday)

▶ September 18th (Thursday)

▶ September 24th (Wednesday)

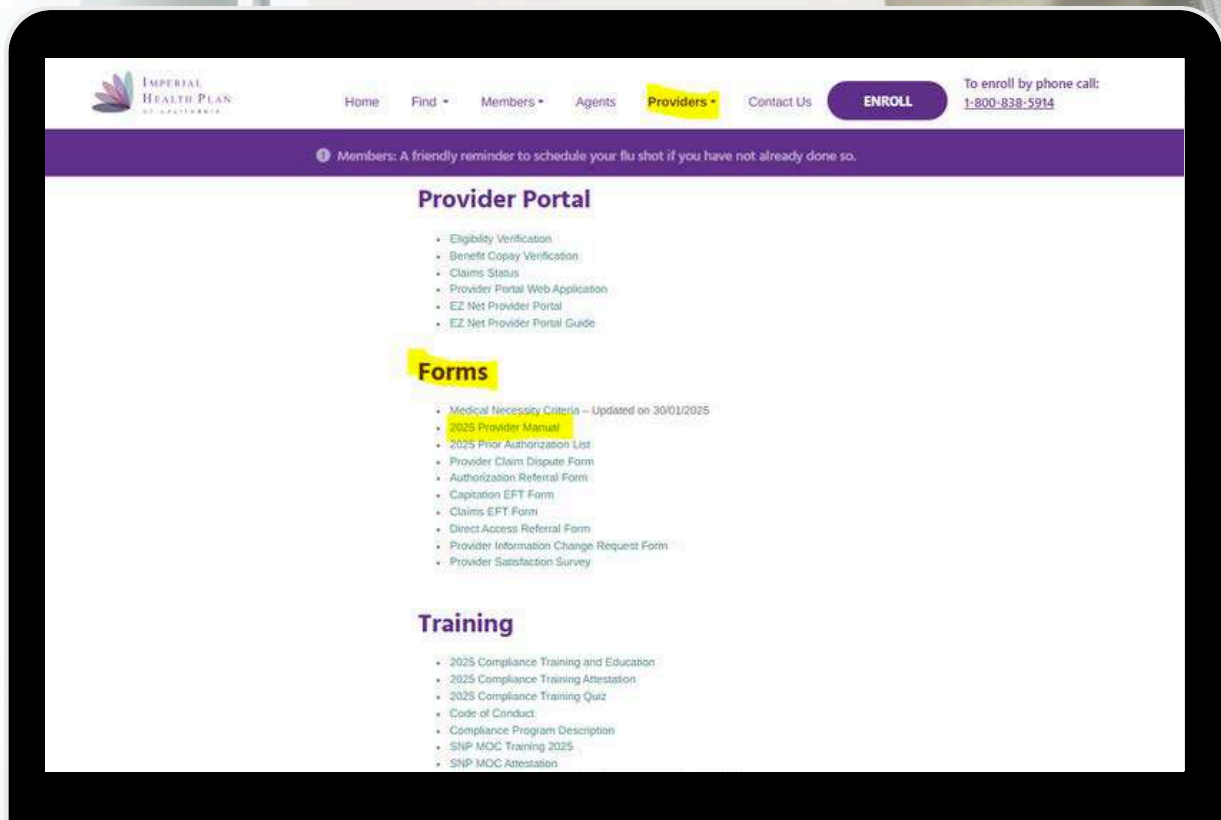
▶ September 25th (Thursday)

Afternoon Sessions:

- CST: 2:00 PM – 3:00PM
- PST: 12:00 PM – 1:00 PM



2025 Imperial Provider Manual is now added to our plan website:



www.imperialhealthplan.com

Choose a State and County under Market place then
Go to "Providers" and then select under "Forms"



HEALTH OBSERVANCE DATES:

JUNE

June 1

National Cancer Survivors Day

June 8

World Brain Tumor Day

June 14

Family Health and Fitness Day

June 14

World Blood Donor Day

June 18

Autistic Pride Day

June 19

World Sickle Cell Day

June 25

World Vitiligo Day

June 27

National HIV Testing Day

June 9-15

Men's Health Week

June 22-28

Helen Keller Deaf-Blind Awareness Week

- Alzheimer's & Brain Awareness Month
- Cataract Awareness Month
- Men's Health Month
- Myasthenia Gravis Awareness Month
- National Aphasia Awareness Month
- National Congenital Cytomegalovirus Awareness Month
- National Migraine and Headache Awareness Month
- National Scleroderma Awareness Month
- PTSD Awareness Month
- Scoliosis Awareness Month

HEALTH OBSERVANCE DATES:

JULY

July 28

World Hepatitis Day

- Cord Blood Awareness Month
- Group B Strep Awareness Month
- Healthy Vision Month
- Juvenile Arthritis Awareness Month
- National Cleft & Craniofacial Awareness & Prevention Month
- Sarcoma Awareness Month
- UV Safety Month

AUGUST

August 1

World Lung Cancer Day

August 31

International Overdose Awareness Day

August 1-7

World Breastfeeding Week

August 4-10

National Health Center Week

August 12-18

OSHA's Safe and Sound Week

- Children's Eye Health and Safety Month
- Digestive Tract Paralysis Awareness Month
- Gastroparesis Awareness Month
- National Breastfeeding Month
- National Immunization Awareness Month
- Psoriasis Action Month



OTC- Quarterly Allowance
added to the Card.

Member Rewards Incentives-
Added to the card for
convenience and ease of use.

Grocery Benefits \$460.00 Quarterly
(D-SNP, California Only-Eligible
chronic conditions to qualify)

Reference OTC benefit chart below.

OTC allowance is loaded on a Silver Mastercard with Imperial logo and cannot be carried over from quarter to quarter or calendar years. Benefit is a use it or lose it benefit.

Members can track their quarterly benefit allowance amount by going online or calling 1-855-AND-MORE.

OTC can be redeemed at
Online at andmorehealth.com
Via phone at 1-855-AND-MORE

Retail store: Food 4 less, Fry's, Kroger, Ralphs, Smith's
Food and Drug, CVS, Albertsons, Amigos, Andronicos.
Market Street, Pavilions, Safeway Tom Thumb, Vons,
Walmart and Walgreens

Plan	PBP	OTC Benefits (No rollover)	Rewards	Food & Produce (No Rollover)
Imperial Senior Value (HMO C-SNP) 005	H5496-005	\$130 per quarter	Up to \$300	N/A
Imperial Traditional (HMO) 007	H5496-007	\$95 per quarter	Up to \$300	N/A
Imperial Dynamic Plan (HMO) 012	H5496-012	\$140 per quarter	Up to \$300	N/A
Imperial Courage Plan (HMO) 016	H5496-016	\$75 per quarter	Up to \$300	N/A
Imperial Insurance Company Dual D-SNP (HMO D-SNP) 011	H5496-011	\$140 per quarter	Up to \$300	\$460 per quarter
Imperial Giveback (HMO) 014	H5496-014	\$75 per quarter	Up to \$300	N/A

DENTAL

The Delta Dental logo, featuring a stylized white triangle icon followed by the text "DELTA DENTAL" in white capital letters, set against a green rectangular background.

Offered on all Imperial Plans



Member Portal with a dashboard, dentist finder, cost estimator offered by a new dental vendor, Delta Dental for 2025.
<https://www.deltadentalins.com>



Mobile Application available hosted by Delta Dental.

VISION - VSP

vsp

vision care



Access to strong provider network.



Freedom to choose your doctor and eyewear.

IN-HOME SUPPORT

Is a network of friendly helpers who are available both in-person or virtually through a phone call. Offered by Papa Pals.

These friendly helpers provide company and help with everyday tasks such as rides, help with errands, grocery shopping, meal prep, and board game/walking partner.



Benefit Allowance

➤ Imperial Senior Value (HMO C-SNP) 005 - 48 hours per year.

➤ Imperial Traditional (HMO) 007 - 48 hours per year.

➤ Imperial Dual Plan (HMO D-SNP) 011 - 60 hours per year.

➤ Imperial Dynamic Plan (HMO) 012 - 48 hours per year.

➤ Imperial Strong (HMO) 014 - 48 hours per year.

TRANSPORTATION

Health Plan Approved Locations

- Primary and Specialist office
- Lab
- Pharmacy
- Dentist
- Vision Provider
- Hearing Care Services

Note: Curb-to-curb routine non-emergency transportation services to plan approved locations within a 30-mile radius of your primary care provider's office.

Transportation Vendor: Care Car
Visit: www.carecar.co/schedule to schedule or call: (844)-743-4344



100 One-Way Trips



\$0 Copayment to access the benefit



Health plan approved locations ONLY.



Contact our Member Services line at least (1) day prior to arrange the ride.



Member needs assistance setting up Doctor's appointment and transportation? Call (800)-838-8271



Please remind your patients that Imperial offers a free gym membership!



Members will receive membership to SilverMembers will receive membership to Silver and Fit fitness program upon enrollment. and Fit fitness program upon enrollment.



Simply visit website for locations in your city and state.
www.silverandfit.com



MAINTAIN YOUR ONLINE PROVIDER DIRECTORY INFORMATION

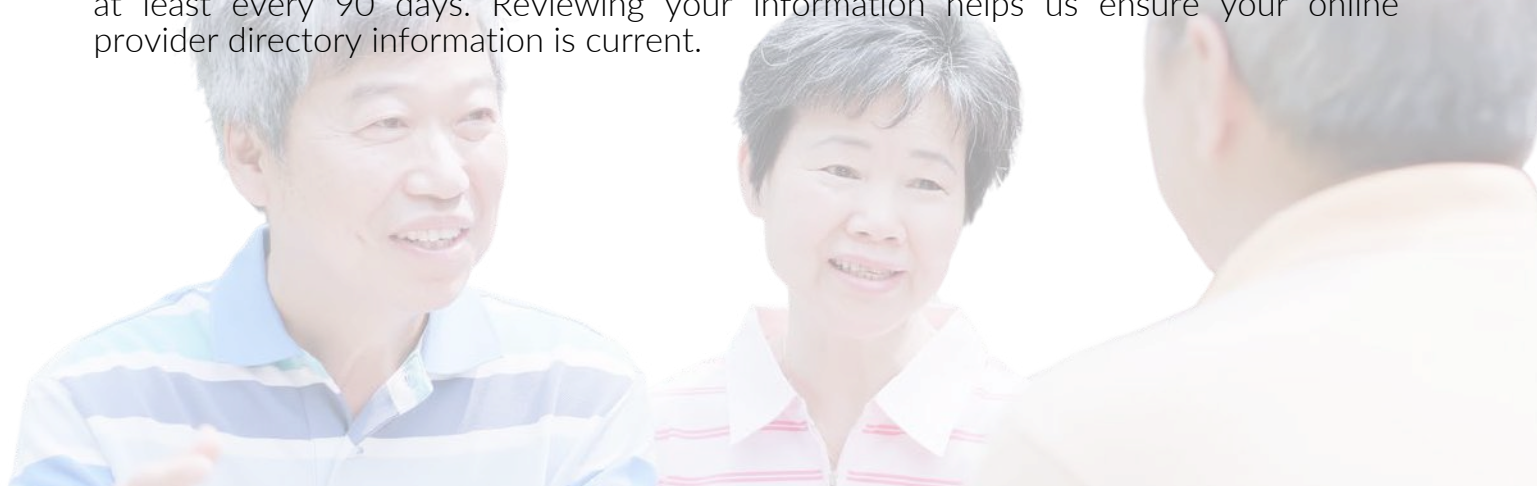
Maintaining your online provider directory information is essential for consumers and healthcare partners to connect with you when needed. Please review your information frequently and let us know if any of your information we show in our online directory has changed.

Submit updates and corrections to your online directory information by using our Provider Information Change Request Form, located on our Provider website under “forms”. Once you submit the form, we will send you an email acknowledging receipt of your request. Update options include:

- Add/change an address location.
- Add/change billing address.
- Add TIN
- Deactivate TIN
- Change TIN

- Name Change.
- Provider leaving a group or a single location.
- Phone/fax number changes.
- Closing a practice location.

The *Consolidated Appropriations Act (CAA)* implemented in 2021 contains a provision that requires online provider directory information be reviewed and updated as needed at least every 90 days. Reviewing your information helps us ensure your online provider directory information is current.



IMPERIAL is pleased to formally announce the re-launch of

portal.imperialhealthholdings.com

NEW &

IMPROVED

EZ NET PROVIDER PORTAL



Listening to the needs and requests of providers that utilize our original portal, IMPERIAL has responded with a Secure, User-Friendly Web Platform to allow users effortless, navigation!

- Member Verification of Eligibility
- Member Lists
- HEDIS Gaps
- Claims Status (detail information)
- EOP access
- Authorization Submission, Confirmation and Status
- Provider Search
- Training Modules
- Secure Submission Documents such as W9's, Annual Training Attestation

IMPERIAL is committed to enhancing our provider's experience with the best service possible to support their practice and its daily administrative needs.

Imperial is pleased to formally announce the re launch of the IMPERIAL EZ NET PROVIDER PORTAL to all participating network providers.

PORTAL REGISTRATION IS SIMPLE! PLEASE UTILIZE THE URL BELOW! Provider Portal Web Application

Submission (office.com) Portal Training

Request/Questions: pnm@imperialhealthholdings.com

Please allow 3-5 business days for inquiry response

Urgent authorization requests should be submitted through the Imperial Provider Portal for expedited processing. An expedited/urgent request for a determination is a request in which waiting for a decision under the standard time frame could place the member's life, health, or ability to regain maximum function in serious jeopardy.

For example:

- A serious threat to life, limb, or eyesight.
- Worsening impairment of a bodily function that threatens the body's ability to regain maximum function.
- Worsening dysfunction or damage of any bodily organ or part that threatens the body's ability to recover from the dysfunction or damage; or
- Severe pain that cannot be managed without prompt medical care.

Urgent requests need determination within 72 hours.

MEMBERS RIGHTS & RESPONSIBILITIES

Our organization annually distributes the Member's Rights and Responsibilities Statement to Providers in the newsletter. Additionally, Providers and Practitioners can find it in the Provider Manual you received upon the orientation process.



OUR PLAN MUST HONOR YOUR RIGHTS AS A MEMBER OF THE PLAN

Our plan has staff and free interpreter services available to answer questions from disabled and non-English speaking members. We can also give you information in braille, in large print, or other alternate formats at no cost if you need it. We are required to give you information about the plan's benefits in a format that is accessible and appropriate for you. To get information from us in a way that works for you, please call Member Services at 1-800-838-8271 October 1 – March 31: Monday – Sunday, from 8:00 a.m. – 8:00 p.m. PST April 1 – September 30: Monday – Friday, from 8:00 a.m. – 8:00 p.m. PST.

These rights and responsibilities are for all members, regardless of race, sex, culture, economic, educational or religious background. Refer to Chapter 8: Rights and Responsibilities in your Evidence of Coverage.

If you have any trouble getting information from our plan in a format that is accessible and appropriate for you, please call to file a grievance with Member Services at 1-800-838-8271. You may also file a complaint with Medicare by calling 1-800-MEDICARE (1-800-633-4227) or directly with the Office for Civil Rights. Contact information is included in this Evidence of Coverage or with this mailing, or you may contact Member Services for additional information at the number listed above.

You can locate our Members Rights and Responsibilities on our plan website: www.imperialhealthplan.com under "Members", "Member Rights and Responsibilities"

2025 SNP MOC TRAINING & ATTESTATION



Please access and review Compliance Training and Education materials which include training on Compliance, FWA, HIPAA and Annual Model of Care Training (SNP-MOC) located at <https://www.imperialhealthplan.com> under the Provider section, "Training".

Please note the completion of the attestation is time sensitive with CMS. Once the referenced materials have been reviewed, please complete the training attestation form, and return it by fax to Provider Network Management at (626) 689-4230 or by email to pnm@imperialhealthholdings.com.

2025 Member Quality Rewards Program



Reward yourself by taking care of your health!

Complete health screenings and tests before November 30, 2025, to earn rewards. **Total rewards available for 2025 have increased from \$275 to \$300!**

\$75

Annual Wellness Exam

Complete an Annual Wellness Exam with your doctor.

\$40

Breast Cancer Screening

For members recommended for a breast cancer screening who complete a mammogram.

\$30

Health Risk Assessment (HRA)

An HRA may be completed with your doctor or a member of Imperial's staff.

\$35

Colorectal Screening

For members recommended for a screening for colon cancer and who complete a colonoscopy, flexible sigmoidoscopy or CT Colonography procedure.

\$15

Retinal Eye Exam

For members who complete a recommended retinal eye exam.

\$15

Kidney Health Evaluation

For members recommended for a Kidney Health Evaluation.

UPTO \$60

Blood Pressure

Enter your Blood Pressure reading in the Member Portal once per quarter and earn \$15 for each entry.

UPTO \$30

A1c

Enter your A1c reading in the Member Portal twice a year and earn \$15 for each entry.

Reward funds are added to your **&more card** after Imperial receives and processes supporting documentation for the completed service or correct claims from your provider, please allow up to 30 days for processing.

Activities must be completed by November 30, 2025, to be eligible for a reward.



Call Imperial Member Services with any questions:
1-800-838-8271, TTY 711

We are open October 1 – March 31: Monday – Sunday, from 8:00 am – 8:00 pm, except holidays, and April 1 – September 30: Monday – Friday, from 8:00 am – 8:00 pm, except holidays.

Imperial Health Plan of California is a (HMO) (HMO SNP) with a Medicare Contract. Enrollment in Imperial Health Plan of California depends on contract renewal. Imperial Health Plan of California (HMO) (HMO SNP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex/cumple con las leyes federales de derechos civiles aplicables y no discrimina por cuestiones de raza, color, nacionalidad, edad, discapacidad o género. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-838-8271 (TTY: 711).

CODE



**IMPERIAL
HEALTH PLAN**
OF CALIFORNIA

Practitioner Credentialing & Rights

Practitioners are notified of their right to review and correct erroneous information obtained in the credentialing or re-credentialing process. This includes information from any outside primary source (state licensing boards, malpractice insurance carriers).



The right to review does not extend to references or recommendations or other information is peer review protected or if disclosure is prohibited by law. Before a decision is made, they may also ascertain the status of their application or reapplication at any time by contacting the Credentials Department at:

Email: credentialingadmin@imperialhealthholdings.com

Practitioners receive notification of their rights by IMAS during the verification process or the appeal process if they do not meet their criteria after receiving a denial or termination of the network during the credentialing/recredentialing process.

If credentialing information obtained from other sources varies from that provided by the practitioner, the credential coordinator will notify the practitioner in writing for their response within ten working days.

The Credentialing Coordinator will make three attempts to collect the corrected information from the practitioner. Telephone, fax, email or letter are all acceptable forms of communication. The credentialing coordinator will advise the practitioner of acceptable formats when submitting corrected information.

Corrected information is accepted by the Credentialing Coordinator and documented in the credentialing system. The practitioner's application is pended until a decision is made by the Credentialing Committee.

The Credentialing Coordinator will date stamp receipt of corrected information and this information is kept in the practitioner's credential file maintained within the department. If the Credentialing Coordinator is unable to obtain the requested information, terminated practitioners can correct discrepant information under the IMAS appeal policy. Practitioners are notified that appeals must be submitted within (30) days.

Practitioners are notified of these rights in the Provider Manual and company website.