IMPERIAL HEALTH PLAN OF CALIFORNIA

# IMPERIAL PROVIDER NEWSLETTER

FALL/WINTER 2025

# TABLE OF *Contents*

# TABLE OF *Contents*

# CMO Message – Medicare Provider Newsletter (Fall 2025)

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

I am proud to share that all Imperial Health entities remain fully NCQA-accredited for our health plan products, including MA-PD, C-SNP, and D-SNP. This recognition reflects the commitment of each of you—our trusted partners—in delivering patient-centered care with compassion, precision, and accountability.
The Fall season also marks an important time for preparation, as the Annual Enrollment Period (AEP) approaches in October. This is when members make critical decisions about their coverage, and the work you do to ensure excellent care, accurate documentation, and member satisfaction directly influences those choices.

## Clinical Updates & Focus Areas

- **Health Risk Assessment (HRA) Reminder**

Completion of the Health Risk Assessment (HRA) is **required for 100% of all SNP (Special Needs Plan) members and strongly recommended for all other Imperial Health members**. Imperial Health has developed a dedicated HRA—created with input from practicing physicians and providers like you—that is now available online. We encourage you to use this HRA as a structured tool to deliver **consistent, high-quality care** that emphasizes **patient safety**, while also ensuring complete and accurate **capture of encounter data for all chronic conditions**. All you do is complete it and we will find a way to collect it from you!

- Screen for fall risk, depression, and bladder control issues at least annually.
- Behavioral Health Access: Effective immediately, members no longer need a PCP referral to access behavioral health services. This change improves access while maintaining continuity of care. We encourage behavioral health providers to coordinate closely with PCPs to support whole-person care. For questions, please contact Lucet Health at 816-237-2362 or visit lucethealth.com.
- Complex Case Management Program: Case managers are available to help members with complex health conditions. They develop personalized care plans, provide disease education, complete medication reviews, support patient–provider relationships, and connect members to community resources. Providers can refer members by calling 1-626-655-8820.
- Preventive Care & Immunizations: Please encourage members to remain up to date with flu, COVID-19, shingles, RSV, pneumococcal, Tdap, and hepatitis B vaccines. Enhanced formulations improve immune response for seniors.
- HRA & Grocery Benefits: Remind your patients about completing the Health Risk Assessment (HRA) and certifying their grocery benefits (if eligible)—these are integral parts of maintaining health and accessing plan-provided support programs.

## Operational Reminders

- Chronic Condition Documentation: Recapture and document all chronic conditions clearly and accurately in the EHR every year. Avoid overcoding and undercoding.
- Encounter Data: Practitioners operating under capitation must submit 100% of encounters with >99% coding accuracy. Timely, accurate data impacts STARS, HEDIS, and risk adjustment performance. Use our online HRA as a guide checklist reminder (if needed).
- Balanced Utilization: Ensure care decisions are guided by clinical appropriateness—avoid both underuse and overuse of services.

## Provider Resources

We provide robust resources to support you and your staff:

- MDCalc Clinical Tools (Provider Portal – Calculators Section).
- Cozeva (population health, care gap tracking, EHR integration).
- Provider Portal: Eligibility verification, claims status, authorization/referral forms, EFT setup, dispute forms, clinical guidelines.
- Education & Training: 2025 Compliance Training, SNP MOC Training & Attestation, Cultural Awareness & Health Equity resources.
- Pharmacy Updates: Formulary and prior authorization lists are posted online. For questions, contact MedImpact at 844-269-0977 (24/7).

Together, we are more than just a network—we are a family. Your continued dedication ensures our members receive high-quality care and compassionate support.
With appreciation,

**Muthukumar Vaidyaraman, MD, MBA, FACHE**
Chief Medical Officer

# Pharmacy Department

At Imperial Health Plan, our Pharmacy team is dedicated to supporting providers and members in achieving safe, effective, and affordable medication use. For our Medicare Advantage Prescription Drug (MAPD) plan, we are focused on:

## Formulary Resources:

Please visit the Pharmacy Resources page on our website (https://imperialhealthplan.com/california/los-angeles/members/pharmacy-resources/ ) where you can find annual changes and ongoing updates regarding drugs, drug coverage rules and preferred options such as:

- o The Formulary along with a drug search tool on the Pharmacy Resources page.
- o How to use the plans coverage for prescription drugs.
- o An explanation of quantity limits
- o The process for generic substitution, therapeutic interchange, or step therapy protocols.
- o How to submit an exception request.

## Medication Adherence:

We continue to monitor adherence for diabetes, hypertension, and statin therapies. Your partnership in encouraging timely refills and reviewing barriers with patients is critical to improving health outcomes.

## Care Coordination

Our team reconciles medication data across multiple sources to reduce discrepancies. Please update medication lists regularly and ensure any changes are documented in your EHR to support safe prescribing.

## Clinical Programs

Members identified for Medication Therapy Management (MTM) are outreached by our pharmacists to review medications, identify potential drug interactions, and support chronic condition management.

## Provider Resources

We provide monthly medication adherence reports, HEDIS quality gap lists, and targeted communications to help streamline your practice workflows.

## Seasonal Reminder:

Seasonal Reminder: As we enter the fall season, please encourage your patients to receive their annual flu vaccination. Additionally, remind them that all Part D vaccines are covered at zero cost to members, ensuring access to important preventive care.

We appreciate your continued collaboration in helping members stay healthy and engaged in their treatment. If you have questions about pharmacy reports, MTM, or medication adherence support, please contact our Pharmacy Department at (626) 788-0178 or by email at pharmacy@imperialhealthplan.com.

# RITE AID CLOSURES

As you may be aware, Rite Aid pharmacies declared bankruptcy in May 2025 and prescriptions are no longer available at these pharmacies. Imperial Health Plan's pharmacy team is dedicated to transitioning members to ensure continuity of care. Please reach out to our team at (626) 788-0178 and we can assist in helping your patients find a new pharmacy. Our pharmacy resources page on our website also has a directory and pharmacy finder at your convenience.

HTTPS://IMPERIALHEALTHPLAN.COM

# Active Initiatives to Address Persistent Care Gaps

Imperial Health engages contracted vendors each year to support our efforts to address persistent care gaps associated with HEDIS and Star performance measures and/or other concerns. The following vendors are contracted this year for the stated activities. Eligible members may be contacted by and/or receive services from one or more of these vendors, at no cost to them. To find out more, please contact your assigned QI Specialist, or email us at QIM@ImperialHealthHoldings.com.

## Simple HealthKit (simplehealthkit.com)

Program overview

- Imperial Health contracts with Simple HealthKit (SHK) to provide eligible members with at-home sample collection kits to screen for colon health, diabetes (HbA1c), and kidney function. Members first receive a preparatory postcard, followed by a kit that includes a letter from Imperial's CMO with instructions.

- Imperial Health makes every effort to avoid duplicate testing by excluding members who have recently been screened or are already compliant for relevant performance measures, or who are participating in similar programs with other providers. Failure to send lab values and performance (CPT-II) codes to Imperial may result in otherwise compliant members being included in the program.

Depending on eligibility, a member may receive one or more collection kits:

- Stool: A stool sample kit for a Fecal Immunochemical Test (FIT) to check for hidden blood.
- Blood: To either measure HbA1c levels for diabetes, or for kidney health, serum creatinine for an estimated glomerular filtration rate (eGFR).
- Urine: Measures the Urine Albumin-to-Creatinine Ratio (uACR) to assess kidney function.

*A member with diabetes may receive a blood kit, a urine kit, or a combined kit containing both, depending on their kidney screening history in the current year.*

Results and follow-up

- Samples are returned to SHK's laboratories using the included prepaid USPS label.
- Results are available to members via SHK's HIPAA-compliant portal within 24-48 hours of the lab receiving the sample.
- For positive results or results outside the healthy range for this population, SHK also sends the findings to the member's Primary Care Provider (PCP) by mail.
- Imperial's Case Managers also follow up with members to ensure they receive appropriate follow-up care, including with their PCP.
- Results from all completed tests are available to providers via Cozeva within two weeks of publication

# Active Initiatives to Address Persistent Care Gaps (Continued)

## Vynca Care (vyncacare.com)

Imperial Health has contracted with Vynca to offer eligible members optional, supplementary services, such as advance care planning, care coordination, and palliative care. A member's eligibility is determined by an assessment of their medical data and, when possible, a direct conversation. The goal is to improve the patient's quality of life through better symptom management, advance care planning, and reduced hospitalizations.

Vynca's care teams are available 24/7 by phone, video, or in person to ensure coordinated care with the member's Primary Care Physician (PCP) and specialists. Vynca's support is supplemental and does not replace regular visits with a PCP.

## My Diabetes Tutor (mydiabetestutor.com)

In partnership with Imperial Health, My Diabetes Tutor (MDT) offers personalized, one-on-one education and support for eligible members with diabetes. Each patient is matched with a qualified diabetes education professional to help them navigate their condition and improve overall health. This comprehensive program offers virtual education, nutritional counseling, remote device support, and remote patient monitoring.

# WHY ADOPT CPT-II CODES IF THERE'S NO REIMBURSEMENT??

1 **Improve Patient Care:** CPT-II codes enable precise tracking of quality measures, helping identify gaps in care and improving outcomes for chronic conditions like diabetes and hypertension.

2 **Streamline Reporting:** These codes simplify compliance with regulatory requirements, saving time and effort in quality reporting processes.

3 **Prepare for Value-Based Care:** As healthcare shifts toward value-based models, CPT-II codes position your practice as a leader in quality care, making it future-ready.

4 **Gain Recognition:** Demonstrating commitment to quality metrics can attract valuable partnerships and enhance your reputation in the healthcare community.

**The Bottom Line:**

*CPT-II codes are an investment in better care, operational efficiency, and long-term success. Don't miss the opportunity to lead the way in healthcare innovation.*

# 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.

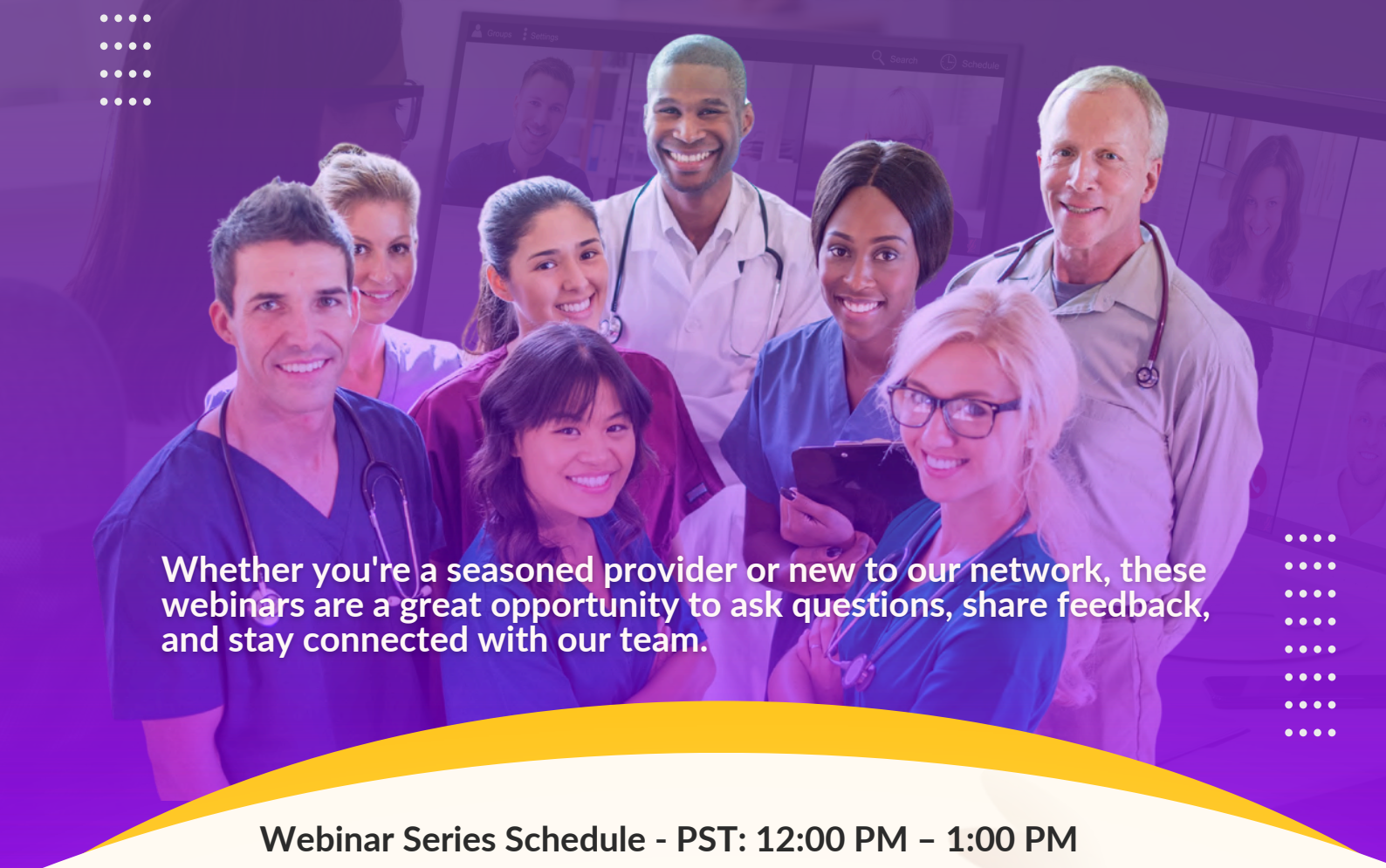
## Compliance Training, Compliance Program, Code of Conduct

www.imperialhealthplan.com

**Training**

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

# Provider Webinar Calendar
# October – December 2025



Whether you're a seasoned provider or new to our network, these webinars are a great opportunity to ask questions, share feedback, and stay connected with our team.

## Webinar Series Schedule - PST: 12:00 PM – 1:00 PM

### Date Range: Oct. 2, 2025 – Oct. 30, 2025

- October 2nd (Thursday)
- October 9th (Thursday)
- October 16th (Thursday)
- October 23rd (Thursday)
- October 30th (Thursday)

### Date Range: Nov. 6, 2025 – Nov. 27, 2025

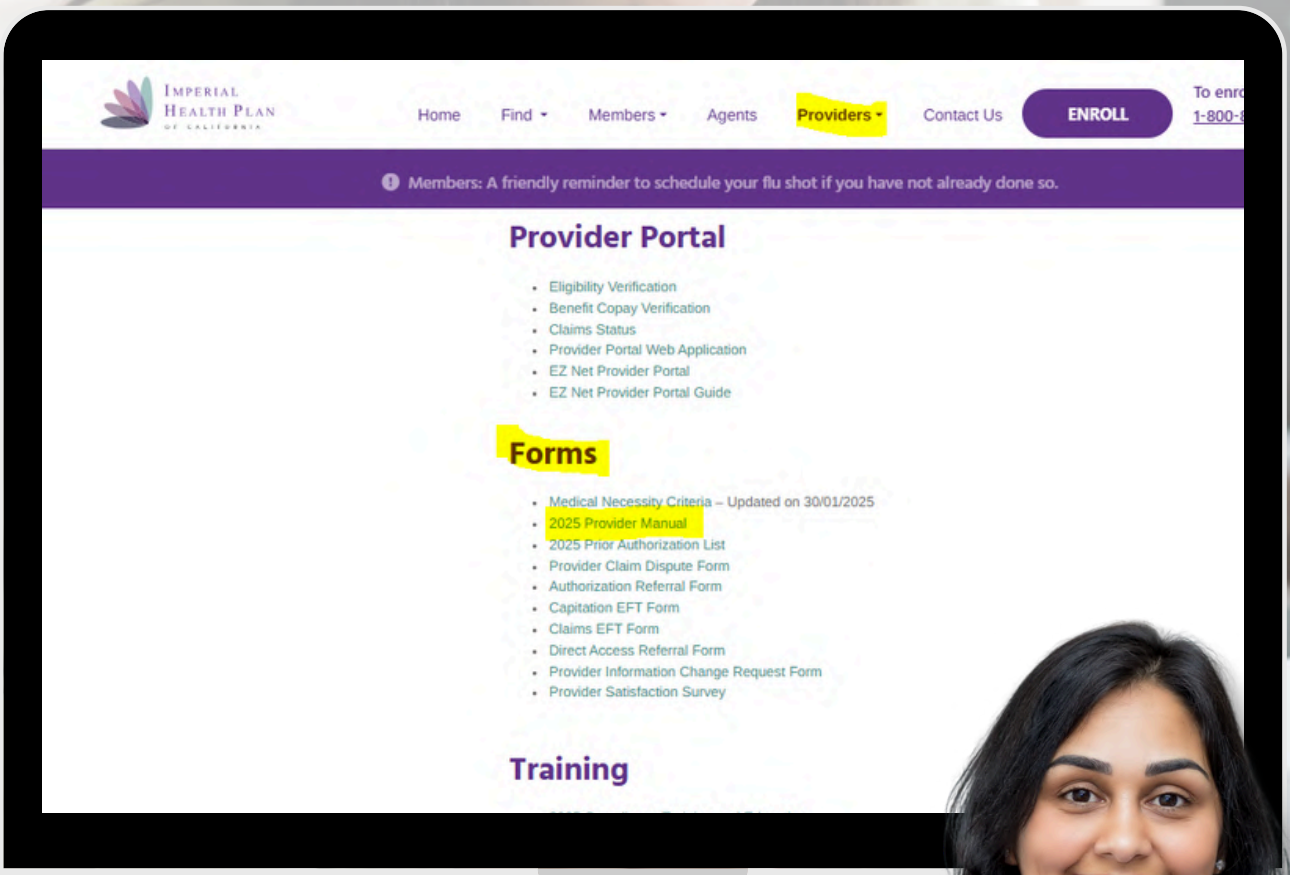
- November 6th (Thursday)
- November 13th (Thursday)
- November 20th (Thursday)
- November 27th (Thursday)

### Date Range: Dec. 4, 2025 – Dec. 18, 2025

- December 4th (Thursday)
- December 11th (Thursday)
- December 18th (Thursday)

# 2025 Imperial Provider Manual

**You may find our Provider Manual located on our plan website under “Providers”, “Forms”**




**www.imperialhealthplan.com**

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


**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, Krover, 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

- 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

- Access to strong provider network.
- Freedom to choose your doctor and eyewear.


**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.**

## IN-HOME SUPPORT

### 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 Spervices

**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.**

- 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

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

## SILVER & FIT

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

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

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

# IMPERIAL HEALTH PROVIDER DIRECTORY UPDATE – ACTION REQUIRED

Imperial Health Plan is updating our Provider Directory to ensure members have accurate information when choosing their providers.

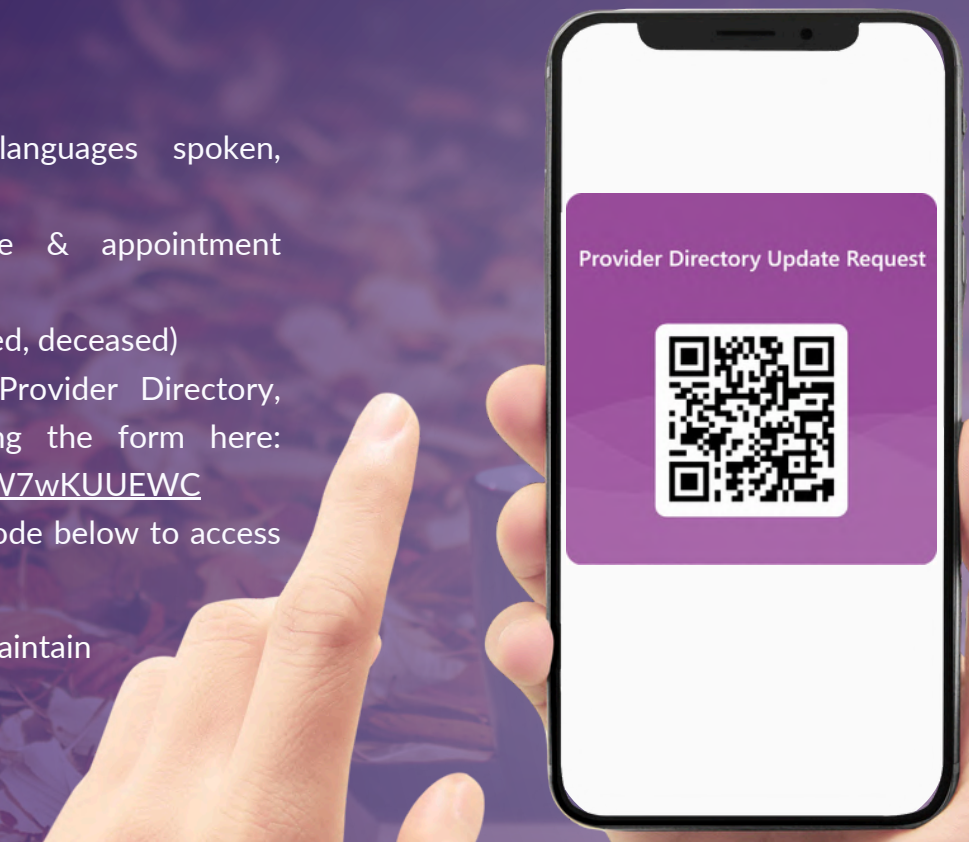
We are requesting that you verify your information and submit any updates by completing our **Provider Directory Update Request Form** online. You may update or confirm:

* Provider name
* Practice location(s)
* Phone, fax, or email address
* Specialty, designation, languages spoken, hospital affiliation
* New patient acceptance & appointment availability
* Provider status (active, retired, deceased)

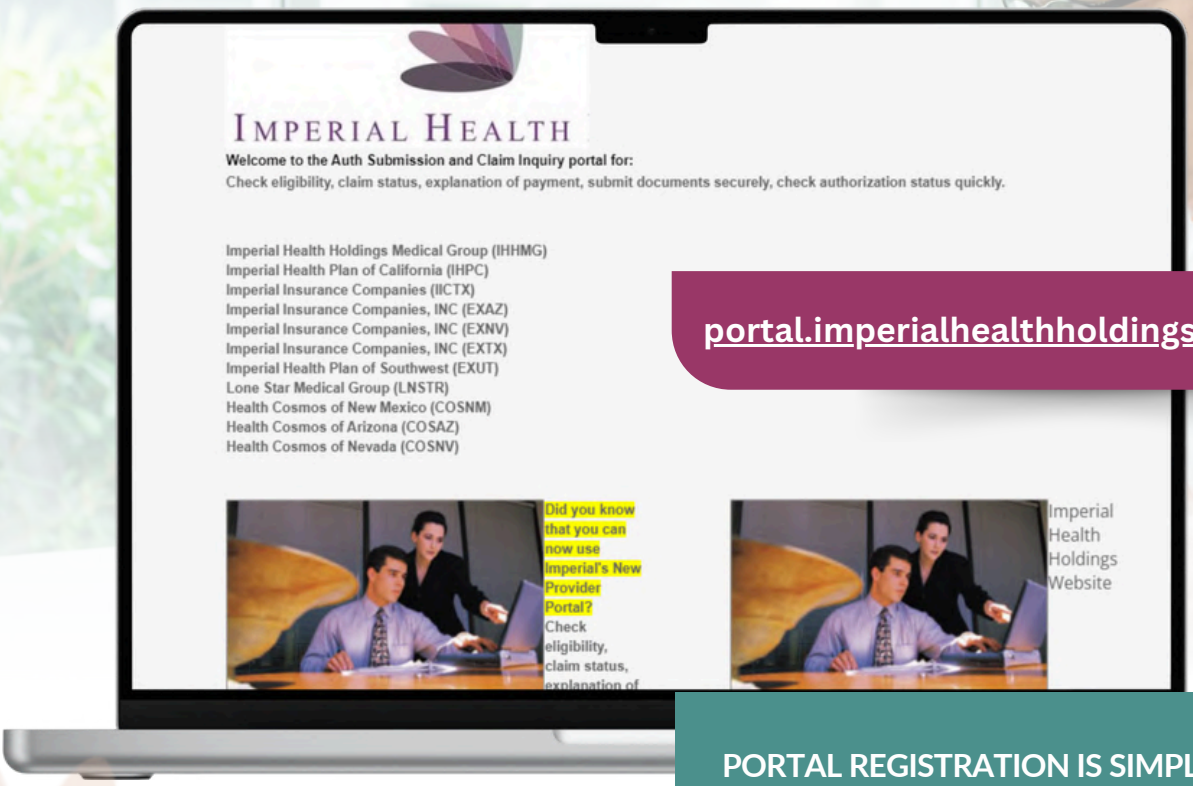
To remain current in our Provider Directory, please submit updates using the form here: https://forms.office.com/r/nW7wKUUEWC

(You may also scan the QR code below to access the form directly.)

Thank you for helping us maintain accurate and reliable records.



# EZ NET PROVIDER PORTAL




**portal.imperialhealthholdings.com**

**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**

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.

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.**

**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

# 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.

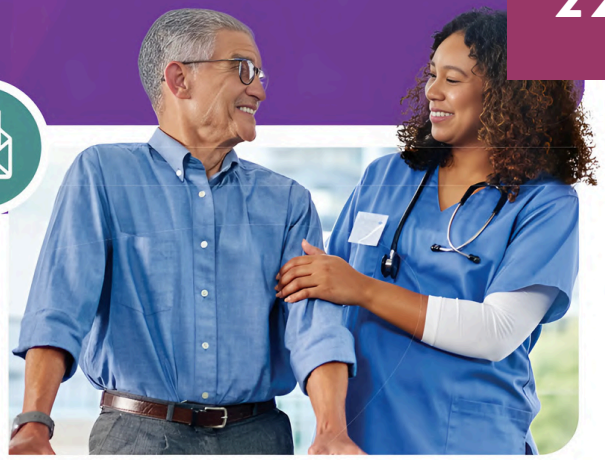
You can locate our Members Rights and Responsibilities on our plan website: **www.imperialhealthplan.com** under **"Members"**, **"Member Rights and Responsibilities"**

# 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.

**UP TO $60** — **Blood Pressure**
Enter your Blood Pressure reading in the Member Portal once per quarter and earn $15 for each entry.

**UP TO $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.

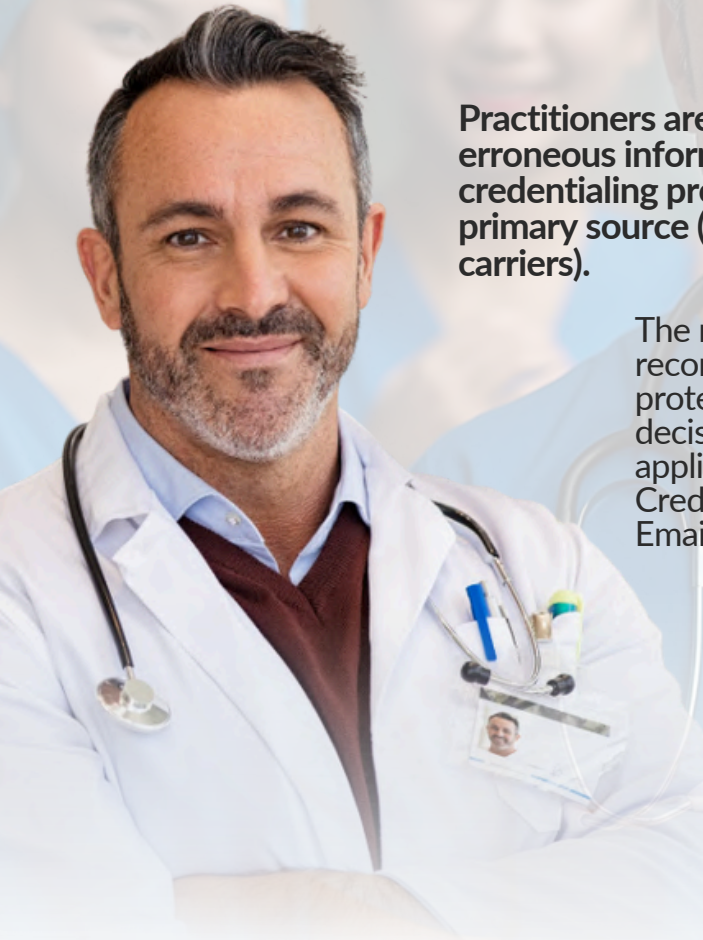
Activities must be completed by November 30, 2025, to be eligible for a reward.

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

# 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.