

Provider Bulletin

Central Health Medicare Plan

April 2, 2025

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ACTION REQUIRED: Changes to CHP Medicare Criteria

This is an advisory notification to Central Health Medicare Plan (CHP) network providers applicable to CHP Medicare business.

What you need to know:

Dear Delegated Partners:

We would like to inform you about an important change to the CHP Medicare Criteria in meeting the CMS 2024 Final Rule requirements.

Effective immediately, the use of Apollo, InterQual or any clinical criteria other than MCG will no longer be approved for clinical review of CHP Medicare members. This change also applies to all our delegated partners contracted for all Medicare lines of business.

CHP utilizes MCG criteria, which is made available to the public on the health plan's website at centralhealthplan.com/CHP/Member/ClinicalCriteria.aspx

For any group considering the use of InterQual or other criteria in the future, delegates will need to obtain prior approval from the Plan.

When this is happening:

Effective immediately.

Provider Action

Our Delegation Oversight team will continue to provide oversight in ensuring that the correct hierarchy and criteria are being utilized, including compliance to this change. Delegates not adhering to the CMS rules will be subject to corrective actions which will be escalated to the Delegation Oversight Committee for potential further actions.

Please ensure that this information is communicated to all relevant parties within your teams. If you have any questions or need further clarification, do not hesitate to reach out.

Thank you for your attention to this matter.

What if you need assistance?

If you have any questions regarding the notification, please contact your CHP Provider Relations Representative at PRCalifornia@molinahealthcare.com.