



September 7, 2022

RE: Changes to the L.A. Care Direct Network effective November 1st, 2022*

Dear Contracted Provider,

As of November 1, 2022*, L.A. Care Health Plan (L.A. Care) will no longer use a third-party vendor to process certain authorizations or conduct case management (CM) activities for members assigned to the L.A. Care Direct Network.

What will be changing on November 1, 2022*:

- Authorization requests must be submitted by fax or phone. The iExchange platform will no longer be available for electronic submission. Status tracking will be available until December 31, 2022.
- We will issue an updated, more straightforward prior authorization request form.
- L.A. Care staff will perform the utilization management (UM), and care management (CM) functions for Direct Network members.

What is not changing:

- Validity of authorizations issued prior to with end dates after November 1, 2022*. Providers are still obligated to confirm member's eligibility status for the dates of service.
- Phone and fax numbers for L.A. Care UM, CM, Customer Service, Provider Account Management. See table below.
- Case management referral forms – link below.
- Prior authorization requirements or turnaround times.
- Primary Care Physician (PCP) assignments or membership within the Direct Network.
- Participating network of specialty, hospital and ancillary providers.
- L.A. Care policies for UM, CM and Claims.
- UM and CM process for members assigned to other networks

Please continue to utilize the Prior Authorization Fax Request form located here until November 1, 2022*:

[Prior Authorization Request Form \(lacare.org/priorauth\)](https://www.lacare.org/priorauth)

And the Direct Network prior authorization tool (search by category or individual code) is located here:

[Direct Network Only - Prior Authorization Search | L.A. Care Health Plan](https://www.lacare.org/providers/provider-resources/prior-authorization-search)

<https://www.lacare.org/providers/provider-resources/prior-authorization-search>

The L.A. Care Direct Network Contracted Provider Reference Guide which provides comprehensive information is located here:

https://www.lacare.org/sites/default/files/la3482_contracted_provider_reference_guide_202108.pdf

* Subject to regulatory approval.

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L.A. Care
HEALTH PLAN[®]

For All of L.A.

Important contact information:

Resource	Contact Information
Ambulatory Case Management	(844) 200-0104 CMReferral@lacare.org
Customer Solution Center (Member Services)	(888) 839-9909
Direct Network – Provider Services & Information	(844) 361-7272 DirectNetwork@lacare.org
Provider Solution Center	(866) 522-2736 Option 1 for Eligibility Option 2 for Claims
Transportation - Call The Car	(626) 817-9211
Utilization Management	(844) 917-7272 Prior Authorization Request Form (lacare.org/priorauth)

No action is required of you at this time. As the date approaches, we will send additional information and specific instructions to you in writing directly and via our website, as well as offering webinars for reviewing changes and answering questions.

Please contact your L.A. Care Account Manager for any questions at (844) 361-7272 or via email at DirectNetwork@lacare.org.

Sincerely,

Raffie Barsamian, MBA
Director, Direct Network
Provider Network Management

David Kagan, MD
Senior Medical Director, Health Services
Direct Network

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