



Gavin Newsom, Governor  
State of California  
Health and Human Services Agency  
**DEPARTMENT OF MANAGED HEALTH CARE**  
980 9<sup>th</sup> Street, Suite 500  
Sacramento, CA 95814  
Phone: 916-324-8176 | Fax: 916-255-5241  
[www.DMHC.ca.gov](http://www.DMHC.ca.gov)

## ALL PLAN LETTER

**DATE:** April 8, 2025

**TO:** All Health Care Service Plans

**FROM:** Jenny Phillips  
Deputy Director  
Office of Plan Licensing

**SUBJECT:** APL 25-008 (OPL) - Provider Directory Annual Filing Requirements (2025)

---

The Department of Managed Health Care (the Department) issues this All Plan Letter (APL) to remind health care service plans (plans) of California Health and Safety Code section 1367.27, subdivision (m)'s requirement to annually submit provider directory policies and procedures to the Department. In addition, the Department reminds plans to submit the changes to their provider directory policies and procedures as instructed in APL 24-018 – Compliance with Senate Bill 923.<sup>1</sup>

### I. BACKGROUND

On August 15, 2024, the Department issued APL 24-018 – Compliance with Senate Bill 923, which among other things, required plans to provide in its “Compliance with SB 923” filing a roadmap for the proposed changes to its Exhibit J-14, Provider Directory Policies and Procedures, to comply with Section 1367.28. APL 24-018 specified that plans should submit the changes as part of the plan’s annual provider directory compliance filing as an Exhibit J-14.

### II. FILING REQUIREMENTS

#### 1. Annual Provider Directory Compliance Filing – Section 1367.27(m)

If the Plan made changes to its Exhibit J-14, Provider Directory Policies and Procedures, submit the Exhibit J-14 with all changes identified via highlight or redline in accordance with Rule 1300.52(d).

---

<sup>1</sup> [APL 24-018 – Compliance with APL SB 923](#)

Attached are the Department's: (1) Provider Directory Checklist – Annual Filing, and (2) Model Section 1367.27 Annual Compliance Filing Exhibit E-1. The Department provides this checklist as a reference tool for plans when completing the required annual filings.<sup>2</sup>

Please note all lines of business are subject to the requirements of Health and Safety Code section 1367.27 except for Medicare, Exclusively Aligned Enrollment D-SNPs, and those Employee Assistance Programs that have previously received an exemption from the Department. A plan only operating one or more of these lines of business must, in lieu of submitting provider directory policies and procedures, is required to submit an Exhibit E-1 affirming it continues to only operate one or more of these lines of business and therefore provider directory policies and procedures are not required.

## 2. Provider Directory Updates – Section 1367.28

If the Plan made changes to comply with SB 923, submit the Exhibit J-14 with all changes identified via highlight or redline in accordance with Rule 1300.52(d).

**On or before May 12, 2025**, please submit the Provider Directory Annual filing via eFiling as a **Report/Other** titled “**Section 1367.27 Annual Compliance 2025.**”

If you have any questions regarding the checklist or this All Plan Letter, please contact the Office of Plan Licensing through your assigned reviewer.

---

<sup>2</sup> The checklist is also available for download from the Department's eFiling web portal.