

Gavin Newsom State of California Health and Human Services Agency DEPARTMENT OF MANAGED HEALTH CARE 980 9th Street, Suite 500 Sacramento, CA 95814

Phone: (916) 324-8176 | Fax: (916) 255-5241

www.HealthHelp.ca.gov

MODEL SECTION 1367.27 ANNUAL COMPLIANCE FILING EXHIBIT E-1

Name:
C File No.:
Has the Plan amended its Exhibit J-14 (Provider Directory Policies & Procedures) since its last Section 1367.27 Provider Directory Compliance Filing?
Yes □ No □
If no, provide the eFiling No. for the last approved Exhibit J-14:
If yes, attach clean and redlined versions of the amended Exhibit J-14.
The website URL for the Plan's online provider directory or directories:
The website URL for each provider directory or directories the Plan links or directs enrollees and consumers to in order to view contracting providers that deliver health care services to the Plan's enrollees, if any. If the Plan does not link or direct enrollees and consumers to other provider directories, please indicate so.
Plan vendor a. The name of the Plan's vendor(s), if any, the Plan utilizes for Section 1367.27 compliance (e.g. provider outreach or verification). If the Plan does not currently utilize a vendor, please indicate so.

:Date

DMHC Model E-1 Exhibit

¹ Please be advised that, in addition to providing the information required by this checklist, plans must continue to comply with all filing obligations and timeframes, including those described in Section 1352 and Rules 1300.52.