2026 Central Health Plan Provider Manual Update

The following table identifies the chapters, sections and subsections updated for the 2026 edition of the **CHP Medicare Provider Manual**. This summary does not include all the changes. Providers are encouraged to review and familiarize themselves with the entire document.

Chapter	Section	Subsection	Update	Page	Date
2. Medicare products overview	Central Health Plan of California (CHPC) and Central Health Medicare Plan (CHMP)	N/A	Table Update	11	11/2025
3. Contact information	Provider services	N/A	New Availity link	12	11/2025
3. Contact information	Health care services	N/A	Care Management Email updated	15	11/2025
4. Provider responsibilities	Various	Various	Important updates made throughout chapter. Please review in full.	17-28	11/2025
4. Provider responsibilities	Provider data accuracy and validation	N/A	New language	17	03/2026
4. Provider responsibilities	Availity Essentials portal	N/A	New language	22	03/2026
4. Provider responsibilities	Digital Correspondence Hub	N/A	New language	23	03/2026
5. Culturally and linguistically appropriate services	Various	Various	Important updates made throughout chapter. Please review in full.	29-34	11/2025
9. Health care services	Requesting prior authorization	N/A	Updated language	42	11/2025 03/2026
9. Health care services	Availity Essentials portal	N/A	New language	44	03/2026
9. Health care services	Digital Correspondence Hub	N/A	New language	45	03/2026
9. Health care services	Peer-to-peer discussions and re-openings	N/A	Updated Phone and hours	46	03/2026
9. Health care services	Notification requirements	N/A	Updated language	50	11/2025
9. Health care services	Health management	Level 1 case management (health management)	New language	60	11/2025

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10. Behavioral health	Utilization management and prior authorization	N/A	Updated language	66	11/2025
10. Behavioral health	Behavioral health care management	Access to records and information to support Member care coordination and care management activities	New language	67	11/2025
11. Quality	Medical appointment Behavioral health appointment	N/A	Updated table	76	03/2026
11. Quality	Monitoring for compliance with standards	N/A	Updated language	79	11/2025
11. Quality	Quality improvement and health equity transformation activities and programs	N/A	New language	81	11/2025
11. Quality	Clinical practice guidelines	N/A	Updated language	81	11/2025
12. Risk adjustment accuracy and completeness	Risk Adjustment Data Validation (RADV) audits	N/A	New language	87	11/2025
13. Compliance	HIPAA Requirements and Information	N/A	New language	97	03/2026
13. Compliance	Artificial intelligence	N/A	New language	98	11/2025 06/2026
13. Compliance	Confidentiality of Substance Use Disorder Patient Records	N/A	Updated language	99	11/2025
13. Compliance	Additional Requirements for Delegated Providers and Atypical Providers	N/A	Updated language	102	03/2026
14. Claims and compensation	Various	Various	Important updates made throughout chapter. Please review in full.	118-124	06/2026
14. Claims and compensation	Timely Claim Filing	N/A	Updated language	120	03/2026
14. Claims and compensation	Timely Claim processing	N/A	Updated language	131	03/2026
14. Claims and compensation	Provider Claim payment disputes, appeals and inquiries	Provider Claim payment disputes	New language	133	11/2025

14. Claims and compensation	Encounter data	N/A	New language	135	03/2026
15. Medicare Member Grievances and appeals	Medicare Member liability appeals: how to file an appeal	N/A	New language	141	03/2026
16. Credentialing and recredentialing	Notification of discrepancies in credentialing information & Practitioner's right to correct erroneous information	N/A	Address update	153	11/2025
16. Credentialing and recredentialing	Ongoing monitoring of sanctions and exclusions	N/A	New language	155	11/2025
17. Delegation	Delegation reporting and audit submission requirements	N/A	Updated language	157	11/2025
17. Delegation	Utilization management (UM)	N/A	Updated language	160	11/2025