

California Department of Insurance
2026-2027 Provider Directory Policies and Procedures Component Location List
Product/Insurer Name:

Mandatory Provisions:	Citation	Location
1. UPDATES: Policies and Procedures must specify weekly (or more frequently under specified circumstances) updates regarding online directories.	CIC 10133.15(m) and (e)(1).	
2. UPDATES; Policies and Procedures must include a description of insurer’s process/procedure for implementing weekly updates	CIC 10133.15(m) and (e)(1).	
3. UPDATES: Policies and Procedures must specify, at a minimum, quarterly updates regarding printed directories. -Please include a description of the process/procedure for implementing quarterly updates.	CIC 10133.15(m) and (d)(2).	
4. UPDATES: Policies and Procedures must include a description of insurer’s process/procedure for implementing quarterly updates.	CIC 10133.15(m) and (d)(2).	
5. UPDATES: Policies and Procedures must specify, at a minimum, annual updates for all directories. This is a requirement to proactively update the directories by reviewing and notifying providers. The above listed updates can be in response to received changes.	CIC §10133.15(m) and (l)(1).	
6. REPORTING CHANGES: Policies and Procedures must specify a process for providers to verify or submit changes to information required to be in the directory. -The process must include: a) an online interface for providers to submit verification or changes; and b) the generation of an acknowledgment of receipt to the provider	CIC 10133.15(m)(2).	
7. REPORTING CHANGES: Policies and Procedures must specify a process for insureds, potential insureds, other providers, and the public to identify & report possible inaccurate, incomplete, or misleading information. - The process must include: a) a telephone number, b) a dedicated email address at which the insurer will accept these reports (interpreted as an email address that is separate from the main insurer email address), and c) a hyperlink to a form on insurer’s website.	CIC 10133.15(m)(3).	

California Department of Insurance
2026-2027 Provider Directory Policies and Procedures Component Location List
Product/Insurer Name:

<p>8. USE OF THIRD-PARTY ADMINISTRATOR AND/OR PHARMACY BENEFIT MANAGER: If the insurer uses a TPA or PBM, please list them here.</p> <p>TPA(s):</p> <p>PBM(s):</p>	<p>CIC § 10133.15(n)(1) and (2)</p>	
<p>9. DELAYED PAYMENT STATEMENT: An insurer that delays payment or reimbursement owed to a provider/provider group must submit this info annually, along with the P&Ps required above.</p> <p>–they must submit, in a separate clearly labeled document in the Policies and Procedures filing, information regarding each instance of delayed payments or reimbursements to providers as a result of providers’ failure to respond to the insurer’s attempts to verify providers’ information. If they did not delay any payments or reimbursements within the previous year, please confirm this in SERFF on the Supporting Documents tab.</p> <p>-If they are reporting delayed payment or reimbursement to providers, include a list by provider or provider group which tracks all of the statutory requirements of Cal. Ins. Code section 10133.15(p)(4), including:</p> <ol style="list-style-type: none"> a. Initial verification contact b. Ten-day notice period c. Statutory schedule of reimbursement d. Length of delayed payment or reimbursement 	<p>CIC §10133.15(p)(4).</p>	