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Hospice Services and Medi-Cal Managed Care

Dear providers,

This letter is to inform you of requirements for network providers outlined in the Department of Health Care Services (DHCS)' All Plan Letter (APL) 25-008. This APL clarifies responsibilities for providing medically necessary hospice services to its members.

Key takeaways that are relevant to our provider network include:

- Timely Access: HPSM will ensure that hospice services are available to members without delay. For in-network hospice providers, this means working to provide access to care by submitting the required documentation within 24 hours of a member's request whenever possible.
- **Prior Authorization**: Only general inpatient care is subject to prior authorization. Routine home care, continuous home care and respite care, or hospice physician services do not require prior authorization. To ensure appropriate reimbursement, please make sure to submit the required documentation.
- **Documentation and Timelines**: Hospice providers are responsible for submitting the required documentation, including the member's certification of terminal illness and election of hospice services. It is crucial that the appropriate DHCS election form (Medi-Cal Hospice Program Election Notice, see below) be submitted to HPSM within five (5) calendar days of certification and election of hospice care. If this form is not submitted in a timely manner, HPSM is not obligated to cover and pay for hospice care provided from the admission date to the election form submission date. These non-covered days become the provider's liability and the hospice provider cannot bill the Member for them. Please send these documents to HPSM's Utilization Management fax number: **650-829-2079**.

Medi-Cal Hospice Program Election Notice form: https://www.dhcs.ca.gov/services/medi-cal/Documents/DHCS-8052-Hospice-Election-Notice-BD.pdf

For the full list of the requirements, please review the APL here:

https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL%202025/APL25-008.pdf

We appreciate your cooperation in adhering to these guidelines to ensure our members receive the high-quality care they deserve. Please contact HPSM Provider Services with questions about this notification at PSInquiries@hpsm.org.

Thank you,

The Health Plan of San Mateo