

**THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:**

**COUNTIES:**

- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

**LINES OF BUSINESS:**

- Molina Medi-Cal Managed Care
- Molina Medicare
- Molina Marketplace (Covered CA)

**PROVIDER TYPES:**

- Medical Group/ IPA/MSO**
  - Primary Care**
  - IPA/MSO
  - Directs
- Specialists**
  - Directs
  - IPA
- Hospitals**
  - Ancillary**
  - CBAS
  - SNF/LTC
  - DME
  - Home Health
- Other

## Concept for Review: Home Hospice Rates for 61+ Days

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding Home Hospice Rates for 61+ Days.

**WHAT YOU NEED TO KNOW:**

The Centers for Medicare & Medicaid Services (CMS) guideline for Medicaid states that, the state pays the hospice one of two-tiered per diems based on a beneficiary's length of stay with a higher rate for the first 60 days of hospice care and a lower rate starting on day 61 for routine home care services.

The routine home care rate is paid for each day the patient is under the care of the hospice and another hospice is not paid. This rate is paid without regard to the volume or intensity of services provided on any given day. *Molina will review reimbursement rates for all hospice routine home care claims that require the lower rate after 61+ days.*

**WHAT YOU NEED TO DO:**

To prevent a recoup please submit a CORRECTED CLAIM with the correct revenue code.

For more information, please see the links below:

- **State rules:** [https://files.medi-cal.ca.gov/pubsdoco/outreach\\_education/workbooks/modules/hhhcp/Workbook\\_hospice\\_home-hos.pdf](https://files.medi-cal.ca.gov/pubsdoco/outreach_education/workbooks/modules/hhhcp/Workbook_hospice_home-hos.pdf)
- **Rates:** <https://www.dhcs.ca.gov/services/medi-cal/Pages/Hospice.aspx>

**What if you need assistance?**

If you have any questions regarding the notification, please contact your Molina Provider Services Representative below:

Service County Area	Provider Services Representative	Contact Number	Email Address
California Hospital Systems	Deletha Foster Teresa Suarez	909-577-4351 562-549-3782	<a href="mailto:Deletha.Foster@molinahealthcare.com">Deletha.Foster@molinahealthcare.com</a> <a href="mailto:Teresa.Suarez2@molinahealthcare.com">Teresa.Suarez2@molinahealthcare.com</a>
Los Angeles	Clemente Arias Christian Diaz Shante Mangram Daniel Amirian	562-517-1014 562-549-3550 562-549-4718 562-549-4809	<a href="mailto:Clemente.Arias@molinahealthcare.com">Clemente.Arias@molinahealthcare.com</a> <a href="mailto:Christian.Diaz@molinahealthcare.com">Christian.Diaz@molinahealthcare.com</a> <a href="mailto:Shante.Mangram@molinahealthcare.com">Shante.Mangram@molinahealthcare.com</a> <a href="mailto:Daniel.Amirian@molinahealthcare.com">Daniel.Amirian@molinahealthcare.com</a>
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San Diego / Imperial County	Briana Givens Salvador Perez	562-549-4403 562-549-3825	<a href="mailto:Briana.Givens@molinahealthcare.com">Briana.Givens@molinahealthcare.com</a> <a href="mailto:Salvador.Perez@molinahealthcare.com">Salvador.Perez@molinahealthcare.com</a>

If you are not contracted with Molina and wish to opt out of the Just the Fax, email: [mhcproviderjustthefax@molinahealthcare.com](mailto:mhcproviderjustthefax@molinahealthcare.com)  
Please include provider name, NPI, county, and fax number and you will be removed within 30 days.