



# Department of Medicaid

Mike DeWine, Governor  
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**TO:** Contracted Medicaid Managed Care Plans  
Contracted MyCare Ohio Plans

**FROM:** Roxanne Richardson  
Deputy Director, Office of Managed Care

**DATE:** September 6, 2019

**SUBJECT:** Hospice Services in a Nursing Facility Policy Clarifications

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Effective July 1, 2019, Medicaid managed care plans and MyCare Ohio plans were required to pay room and board payments directly to the hospice provider for any individual receiving hospice services while residing in a nursing facility (7/1/19 Provider Agreement, Appendix G). Plans may or may not require prior authorization for hospice services.

For any member that was receiving hospice services in a nursing facility prior to 7/1/19, if a prior authorization approval is on file from the nursing facility, the hospice provider shall **not** be required to submit a new prior authorization request for the member until the original authorization expires. The member shall be allowed to continue to receive the hospice services that were previously authorized by the plan, and the hospice provider shall be paid for those previously authorized services (meaning a plan cannot deny payment to a hospice provider in these circumstances).

Plans that require hospice providers to be in-network to provide services shall allow hospice providers to enter into single-case agreements while establishing a contract. Furthermore, to allow time for hospice providers to be informed and make any necessary adjustments, plans shall pay hospice providers for any claims submitted with dates of service between July 1, 2019 to October 15, 2019 regardless of if a prior authorization is on file. Beginning October 16, 2019, for any member newly receiving hospice services, plans may deny payment to hospice providers if a prior authorization for services was not requested by the provider as required by their plan.

Additionally, plans should outreach to hospice providers, such as a message on remittance advice, where members are receiving services to inform the provider of the need to establish a formal relationship with the plan (e.g. a contract).