



November 2019

PROVIDER POLICY UPDATE NOTICE: Updates to Prior Authorization Requirements - Hospice Services

Effective immediately, CountyCare will no longer require submission of supporting clinical information or completed State forms with requests for hospice services for participating hospice providers. Requests for in-network hospice services will require only submission of a completed Prior Authorization form to the Utilization Management department, prior to services being rendered. Prior authorization form can be located here: <http://www.countycare.com/providers/prior-authorizations>

Initial requests for home hospice and hospice services in a nursing facility will be approved for up to six (6) months; initial requests for hospice in a participating inpatient acute care hospital will be approved for up to five (5) calendar days.

Requests that are not submitted prior to start of service or requests received from non-participating hospice providers are subject to an administrative denial.

Requests for additional hospice services beyond the 6-month timespan for home hospice or five (5) days for hospice in an acute care hospital may be subject to the request for additional documentation:

- a. Diagnosis of Terminal illness on Certificate of Terminal Illness signed by MD indicating end of life six (6) months of life or less; **and**
- b. Other relevant supporting clinical.

The [Prior Authorization form](#) can be found on the CountyCare website. Refer to the CountyCare Provider Manual for information on timely submission of Prior Authorization requests.

Contact Us

We encourage our providers to contact us via email at ProviderServices@countycare.com. The email queue is checked throughout the day and issues are triaged to the appropriate person for resolution. You will receive an email confirming that we have received and logged your issue within one (1) business day. You may also contact CountyCare Provider Services at 312-864-8200, Option 6.