



State of Utah

GARY R. HERBERT
Governor

GREG BELL
Lieutenant Governor

**Utah Department of Health
Executive Director's Office**

David N. Sundwall, M.D.
Executive Director

Michael Hales
Director, Medicaid and Health Financing

Tonya Hales
Director, Long Term Care Bureau

June 29, 2010

Dear Hospice Provider:

This letter is being generated to inform you of some changes that are being made to the prior authorization process for Medicaid hospice care. Please provide your prior authorization staff with the following important information which will be in effect as of July 1, 2010.

The Department has made some modifications to the **Prior Authorization Request Form** to bring it in line with requirements contained in R414-14A, Hospice Care. A hard copy of the updated form is attached to this letter for your convenience. In the near future, an electronic copy will be posted on the Long Term Care Bureau website which can be accessed at this address: <http://health.utah.gov/ltc/Hospice/HospiceHome.html>. Please be sure to use the form with the effective date of "July 1, 2010" at the bottom.

In addition, effective immediately the Department will not consider prior authorization requests without the following documents:

1. A copy of the hospice election statement which has been filed and signed by the hospice client or the client's legal representative. Providers must indicate on the **Prior Authorization Request Form** whether the election statement was signed by the hospice client or by the client's legal representative.
2. A copy of the hospice plan of care which has been signed and dated by the attending physician. The attending physician's name must also be included on the **Prior Authorization Request Form**.

These documents are required when providers request prior authorization for new clients or for clients who have revoked hospice benefits and wish to reelect hospice care. It is not necessary to send the plan of care or the election statement when requesting prior authorization for a change to hospice services for an existing Medicaid hospice client.

Please continue to contact Suzanne Slaughter at (801) 538-6634 for authorizations and notifications of transfers or hospice service terminations, and please feel free to contact me at (801) 538-6861 with any questions.

Sincerely,

Trecia Carpenter
Health Program Specialist

