

Utilization Management Department

# Los Angeles County Resource Guide LONG TERM ACUTE CARE FACILITY (LTAC) RESOURCES

	MAIN RESOURCES					
CA UM Inpatient Call Center:		M-F	8:30 AM – 5:30 PM	(866)-814-2221		
Emergency Department Support Unit		After H	ours, Weekends and	(844) 966-5462		
(EDSU):			Holiday Calls			
		FAX RE	SOURCE			
Fax clinical documentation:	(866) 553-9263					
	CARERE		INICIAN (CRC) RN			
Please call your a				on and discussion		
Brandon Him, CRC, Inpatient Review (RN) (562)-507-1923	COMMUNIT SOUTHERN (SOUTHERN SOUTHERN (SOUTHERN TORRANCE	TY HOSPITAL CA HOSP AT N CALIFORNI CA HOSP AT N CALIFORNI	1EDICAL CENTER OF HUNTINGTON PARK THOLLYWOOD- VAN NUYS A HOSPITAL AT CULVER C HOLLYWOOD- VAN NUYS A HOSPITAL AT HOLLYWO MEDICAL CENTER HOSPITAL	ITY) S- CULVER CITY - HOSP		
Camisha Loughridge, CRC, Inpatient Review (RN) (562)-491-4700	AHMC SAN ALHAMBRA ANTELOPE CALIFORNI GARFIELD N GLENDALE LA PALMA II LOS ALAMI	GABRIEL VA HOSPITAL M VALLEY HOS A HOSPITAL MEDICAL CEI MEMORIAL H NTERCOMMI	HOSPITAL & HEALTH CENT JNITY HOSPITAL	ER		
Caroline Kua Balbuena CRC, Inpatient Review (RN) (562) 456-4715	DHS-HARBA EAST VALLE EMANATE H EMANATE H FOOTHILL F HOAG MEM HUNTINGTO KECK HOSF LONG BEAO MILLER CHI NORTHRIDO OLYMPIA M PRIME HEA	EY HOSPITAL IEALTH INTE IEALTH QUE PRESBYTERIA IORIAL HOSF ON BEACH H PITAL OF USC CH MEMORIA ILDRENS HO GE HOSPITAI EDICAL CEN LTHCARE SE	EDICAL CENTER (GLENDORA HOSPITAL) RCOMMUNITY HOSPITAL EN OF THE VALLEY HOSPIT N HOSPITAL PITAL PRESBYTERIAN - NEW OSPITAL S L MEDICAL CENTER MEDICAL CENTER-ROSC	VPORT BEACH OE CAMPUS 1UNITY HOSPITAL		



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	ST JUDE MEDICAL CENTER (FULLERTON)		
	ST MARY MEDICAL CENTER (LONG BEACH)		
	WESTERN MEDICAL CENTER - SANTA ANA		
	(ORANGE COUNTY GLOBAL MEDICAL CENTER)		
Hien Huynh	ANTELOPE VALLEY HOSPITAL MEDICAL CENTER		
-	CEDARS SINAI MEDICAL CENTER		
CRC, Inpatient Review (RN)	CHILDRENS HOSPITAL OF LOS ANGELES		
(562) 549-3780	CHILDRENS HOSPITAL OF ORANGE COUNTY		
	COASTAL COMMUNITIES HOSPITAL INC (SOUTH COAST GLOBAL MEDICAL CENTER)		
	COLLEGE HOSPITAL OF CERRITOS (BHS)		
	COMMUNITY HOSPITAL OF LONG BEACH		
	FOUNTAIN VALLEY REGIONAL HOSPITAL		
	GREATER EL MONTE HOSPITAL		
	HOLLYWOOD PRESBYTERIAN MEDICAL CENTER		
	MARINA DEL REY HOSPITAL		
	LA DOWNTOWN MEDICAL CENTER LLC		
	MONTEREY PARK HOSPITAL		
	PRESBYTERIAN INTERCOMMUNITY HOSPITAL, INC (WHITTIER)		
	PROVIDENCE CEDARS-SINAI TARZANA MEDICAL CENTER		
	SHERMAN OAKS HOSPITAL		
	UCI MEDICAL CENTER (UC IRVINE MEDICAL CENTER)		
	USC VERDUGO HILLS HOSPITAL LLC		
	WEST ANAHEIM MEDICAL CENTER (ORANGE AVE)		
	WESTERN MEDICAL CENTER - ANAHEIM (ANAHEIM GLOBAL MEDICAL CENTER)		
	WHITTIER HOSPITAL MEDICAL CENTER		
Holly Handorf, CRC, Inpatient	CITY OF HOPE NATIONAL MEDICAL CENTER		
Review (RN)	HENRY MAYO NEWHALL HOSPITAL		
	HOLLYWOOD PRESBYTERIAN MEDICAL CENTER		
(562)-517-0484	HUNTINGTON MEMORIAL HOSPITAL		
	KAISER FOUNDATION HOSPITAL BALDWIN PARK		
	KAISER FOUNDATION HOSPITAL - DOWNEY		
	KAISER FOUNDATION HOSPITAL - PANORAMA CITY		
	KAISER FOUNDATION HOSPITAL HARBOR CITY/SOUTH BAY		
	KAISER FOUNDATION HOSPITAL SUNSET		
	KAISER FOUNDATION HOSPITAL WEST LOS ANGELES		
	MARTIN LUTHER KING JR COMMUNITY HOSPITAL		
MaryAnne Sarmiento CRC,	ADVENTIST HEALTH GLENDALE		
Inpatient Review (RN)	BEVERLY HOSPITAL (ADVENTIST HEALTH WHITE MEMORIAL MONTEBELLO) DHS LAC USC MEDICAL CENTER		
(562)-549-4134	PROVIDENCE MISSION HOSPITAL		
	PROVIDENCE MISSION HOSPITAL PROVIDENCE LITTLE COMPANY OF MARY - SAN PEDRO		
	PROVIDENCE ETTLE COMPANY OF MARY - SAN FEDRO		
	PROVIDENCE SI JOSEFH MEDICAL CENTER BORBANK		
	PROVIDENCE SAINT JOHNS HEALTH OTR		
	PROVIDENCE ST JOSEPH HOSPITAL ORANGE PROVIDENCE ST JOSEPH MEDICAL CENTER (Burbank)		
	WHITE MEMORIAL MEDICAL CENTER- HUR		
Merceditis Delmonte, CRC,	ALTA LOS ANGELES HOSPITALS INC (LOS ANGELES COMMUNITY HOSPITAL)		
	ALTA LOS ANGELES HOSPITALS INC (NORWALK COMMUNITY HOSPITAL)		
Inpatient Review (RN)	COLLEGE HOSPITAL OF COSTA MESA (BHS)		



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(562) 456-4634	DOCTORS HOSPITAL OF WEST COVINA		
	EAST LOS ANGELES DOCTORS HOSPITAL		
	ENCINO HOSPITAL MEDICAL CENTER		
	GARDEN GROVE HOSPITAL AND MEDICAL CENTER		
	LAKEWOOD REGIONAL MEDICAL CENTER		
	LOS ANGELES COMMUNITY HOSPITAL		
	MEMORIAL HOSPITAL OF GARDENA (GARDENA HOSPITAL)		
	PACIFICA HOSPITAL OF THE VALLEY CORPORATION		
	PALMDALE REGIONAL MEDICAL CENTER		
	PROVIDENCE LITTLE COMPANY OF MARY MEDICAL CENTER TORRANCE		
	RONALD REAGAN UCLA MEDICAL CENTER		
	SANTA MONICA UCLA MEDICAL CENTER		
	WEST HILLS HOSPITAL AND MEDICAL CENTER (MEDICAL CENTER DR)		
	WHITTIER HOSPITAL MEDICAL CENTER		
Traci Nichols	CHILDRENS HOSPITAL AT MISSION (MISSION VIEJO)		
CRC, Inpatient Review (RN)	COAST PLAZA HOSPITAL		
562-549-3743	COLLEGE MEDICAL CENTER LONG BEACH		
	DHS-RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER		
	GOOD SAMARITAN HOSPITAL - LOS ANGELES		
	LOS ANGELES COUNTY OLIVE VIEW UCLA MEDICAL CENTER		
	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA (USC ARCADIA HOSPITAL)		
	MISSION COMMUNITY HOSPITAL (PANORAMA CITY)		
	PIH HEALTH HOSPITAL – DOWNEY		
	POMONA VALLEY HOSPITAL MEDICAL CENTER		

Michele Ruffalo, Healthcare Services Manager (RN) – (562) 542-1625

Jessica Advocate, UM Supervisor (RN) – (562) 456-4015

**MEDICARE DISCHARGE PLANNING AUTHORIZATIONS** 

(844) 834-2152				
(Skilled Nursing Facility, Long Term Acute Care, Acute Inpatient Rehab or Higher Level of Care				
please contact your assigned CRC)				
(855) 322-4075 Option 4, Option 4,				
Option 2, Option 2, Option 2.				

## **DISCHARGE PLANNING**

The Molina CRC is available to assist with <u>Complex</u> Discharge Planning. Hospital to provide the following:

- Prior level of function
- Required Level of Care
- Skilled need
- Follow-up Care/Services required



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- Per CMS managed care requirement, please submit the Discharge Summary and/or patient discharge instruction sheet to Molina via fax.
- Notify and communicate with primary care and coordinate continuity of care with prior PCP and ECM providers, including sharing of discharge summaries, care plans, and medication lists.

# **FREQUENTLY ASKED QUESTIONS - FAQS**

- Hospital must notify Molina within 24 hours of inpatient admission, including preauthorized surgeries/procedures.
- The Molina Concurrent Review Clinician RN will review the admission applying InterQual/MCG criteria for medical necessity. Ultimately, denial decisions are made by Molina Medical Director using sound clinical judgment.
  - DRG facilities: Admissions that meet criteria will be authorized per DRG. Molina will require clinical updates every seven (7) days identifying member condition change and discharge planning/needs. Complete medical records are not required for this clinical update. If you have received a denial and there is a change in condition or further information it is imperative that you send this to us right away while the member is still in house.
  - Per Diem facilities: Admissions that meet criteria will be authorized for day of admission. Hospital <u>must</u> submit to Molina **minimal** supporting documentation substantiating medical necessity for continued stay daily. Molina CRC will perform daily medical necessity reviews through discharge. Ultimately, denial decisions are made by Molina Medical Director using sound clinical judgment.
  - Molina will not accept InterQual, any other medical necessity criteria screenshot, or a case management summary, in lieu of clinical documentation.
- Molina is available to assist with complex discharge planning.

### **CLINICAL REVIEW CHECKLIST**

- INITIAL REVIEW:
  - o ER Report
  - History and Physical
  - Admitting orders
  - Specialty Consultations
  - Supporting clinical documentation

### • CONCURRENT REVIEW:

o Physician orders



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- Specialty Consultations
- Supporting clinical documentation

Upon receipt of notification of admission, a *reference number* will be assigned. Upon completion of Molina review and decision the reference number will become the *authorization number* or *denial number*.

### LATE NOTIFICATION

• When the Hospital fails to notify Molina Healthcare of an admission <u>within 24 hours</u>, the authorization request <u>may</u> become subject to administrative denial. The Molina CRC will review the admission. If the admission meets criteria and is approved, the Molina CRC will review for continued stay. If the member was discharged prior to late notification of less than 30 days, Molina UM staff will notify the hospital. If EMR is unavailable, please submit via fax, *ER Report*, *H&P*, *Admitting orders*, *dictated specialty consultations*, *documentation supporting the inpatient admission and continued stay*, *D/C orders*, *and D/C Summary* for Retro Review to:

#### FAX (866) 553-9263

If the member was discharged prior to late notification of 30 days or more, please submit a claim to Molina via **SSI with payer ID 38333**. *You will be notified of the specific medical records required to support the request for inpatient stay by the Retro Review team.* 

#### **RE-EVALUATIONS UPON DENIAL**

- <u>Medi-Cal and Marketplace Re-evaluation</u>: Upon denial, Molina allows the provider 5 calendar days to submit *minimal* additional clinical information to support medical necessity or 5 calendar days from the Notice of Action letter to request and schedule peer-to-peer review for cases in which the member has not been discharged for more than 2 days. For cases in which the member has been discharged, the length of stay must be less than 2 days OR have been a weekend admit/discharge in order to be eligible for re-evaluation.
- For Re-evaluation, please submit specific documentation requested to support approval of the admission or continued stay to and fax to (866) 553-9263.
- To request a peer-to-peer review, please call toll-free (866) 814-2221.

### MEDICARE DOES NOT ALLOW RE-EVALUATIONS AFTER THE MEMBER HAS BEEN DISCHARGED

• If the Medicare member has NOT been discharged and additional supporting documentation is available, **please call and discuss the case with your assigned** 



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**CRC listed on the first page** and please fax to **(866) 553-9263**. A Molina MD is also available to conduct a peer-to-peer on the case at **(866) 814-2221**.

• If the Medicare member has been discharged, the hospital must follow the Medical Claims Review process for Medicare which is outlined in the Molina Provider Manual. Please submit minimal additional clinical information to support medical necessity with the claim via the Molina Provider Portal at <u>provider.molinahealthcare.com/</u>.

### **RETROSPECTIVE REVIEW**

• When notification of a **Medi-Cal** or **Marketplace** (Covered California) member admission is not submitted to Molina timely, but in less than 30 days, the hospital should utilize the <u>Retrospective Review Process</u>. Please submit, via fax, a service request form to:

### FAX: (866) 553-9263

- If EMR is unavailable, please submit via fax, ER Report, H&P, Admitting orders, dictated specialty consultations, documentation supporting the inpatient admission and continued stay, D/C orders, and D/C Summary for the duration of the hospital stay.
- There is no Retrospective Review process for Medicare and MMP, therefore, please submit a medical claim and **minimal** medical records supporting medical necessity of the admission and continued stay, ER Report, H&P, Admitting orders, dictated specialty consultations, documentation supporting the inpatient admission and continued stay, D/C orders, and DC Summary via the Molina Provider Portal at <u>provider.molinahealthcare.com/</u>.

### **PHARMACY**

• For pharmacy questions related to discharge needs during business hours, please contact **Molina Pharmacy Dept. at (855) 322-4075—follow the prompts for line of business and pharmacy. After hours,** please contact **Caremark Nurse Advice Intake Line at (888) 543-5897.** 

### **CONTRACTED PROVIDERS**

 Please see Molina Healthcare website for complete listing here: molina.sapphirethreesixtyfive.com/?ci=camolina&network\_id=13&geo\_location=33.9571,-118.4041&locale=en