



Hospice Notification Worksheet

Fax notification to: 888-633-4052

This form is to be completed by the hospice agency to notify South Country Health Alliance of a member's hospice admission dates.

Member Information					
Member Name:		Member ID (PMI) Number:		Date of Birth: (MM/DD/YYYY)	
Admit Date/Certification Begin Date (MM/DD/YYYY):			Discharge Date/Certification End date: (MM/DD/YYYY):		
Other Payer:					
Primary Care Provider Information					
Provider Name:		Provider NPI:		Provider TIN:	
Clinic:			Address:		
Hospice Facility/Provider					
Name:			Address:		
Phone Number:		Facility NPI:		Facility TIN:	
Place of Service					
<input type="checkbox"/> Inpatient Hospital <input type="checkbox"/> Home <input type="checkbox"/> Skilled Nursing Facility <input type="checkbox"/> Other					
Hospice Diagnosis Code:			Procedure/Service Code:		

***Please contact the Provider Contact Center at 888-633-4055 for questions related to claims.
Please contact Utilization Management at 888-633-4051 for questions related to the notification worksheet.***

****If your facility has never billed South Country Health Alliance, you will need to submit additional documents with this form. These documents can be found on our website at <https://mnscha.org>.**

This faxed information is intended only for the individual or entity to which it is addressed and contains information that is confidential. Furthermore, this information may be protected by Federal law relating to confidentiality (42 CFR Part 2) prohibiting any further disclosure. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering this message to the intended recipient, you are hereby notified that any review, dissemination, distribution, or copying of this communication is strictly prohibited. If you have reviewed this communication in error, please notify us immediately by telephone and return the original message to us by the above address via mail. Thank you.

South Country Health Alliance
6380 West Frontage Road
Medford, MN 55049

Utilization Management: 888-633-4051 (Phone)
Contact Center: 888-633-4055(Phone)
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