	POLICIES AND PROCEDURES
Policy #: 404-1529	Lead Department: UM/Complex Case Management
Title: Post Discharge Meal Delivery Program Benefit	
Original Date: 11/17/2020	Policy Hub Approval Date: 01/14/2021
Approved by: Utilization Management Work Group (UMWG)	

Purpose:

To provide an overview of Central California Alliance for Health’s (the Alliance’s) Post-Discharge Meal Delivery Benefit.

Policy:


The Alliance covers member enrollment in the Post-Discharge Meal Delivery Program (PDMDP) for Medi-Cal as an Alliance-only benefit (not a Medi-Cal benefit). The benefit provides medically tailored meal (MTM) delivery service to an eligible Alliance Medi-Cal member’s residence upon their discharge from the hospital. Eligibility is determined by Utilization Management / Complex Case Management (UM/CCM) Staff using established criteria. MTM delivery services will be provided by Alliance-contracted MTM Providers. These providers must follow program, billing, and reimbursement guidelines as outlined in this policy and in their Alliance administrative contract. All services will be available in the Alliance’s threshold and concentration languages, either directly or through a qualified interpreter (Alliance Policy 401-4103– Interpreter Services).

Definitions:

Grievance: An oral or written expression of dissatisfaction, including any complaint, dispute, request for reconsideration, or appeal made by a member.

Medically Tailored Meals (MTM): Meals approved by a Registered Dietitian that reflect appropriate dietary therapy based on evidence-based nutrition practice guidelines to address a medical diagnosis, symptoms, allergies, medication management and side effects to ensure the best possible nutrition-related health outcomes. (Source: Food Is Medicine Coalition for the *Medically Tailored Meals Pilot Program* administered by California Department of Health Care Services.)

Medically Tailored Meal (MTM) Provider: A service provider who meets criteria and has been contracted by the Alliance to provide meal delivery

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services to Alliance Medi-Cal members authorized to receive the PDMDP benefit.

Medically Tailored Meal (MTM) Delivery Service: Delivery of 12 weeks of ready-made, nutritious meals to Medi-Cal members recovering from an inpatient hospital stay.


Post-Discharge Meal Delivery Program (PDMDP) Eligibility Assessment Form: Form completed by UM/CCM Staff in Essette attached to Inpatient Authorization that documents member eligibility and information for MTM delivery service.

Post-Discharge Meal Delivery Program (PDMDP) Enrollment Form: Form sent by UM/CCM Staff containing member information instructing MTM Provider to begin meal delivery service.

Procedures:

Member Eligibility: The Alliance PDMDP benefit is available to Alliance Medi-Cal members who meet the criteria outlined below. Eligible members may receive the PDMDP benefit once per calendar year. Eligible members are allowed a second opportunity to complete the PDMDP benefit within the same calendar year if they are readmitted to the hospital while receiving the benefit and unable to complete the full 12-week program under their first program enrollment.

Members must meet the following criteria to be eligible:

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- Alliance Medi-Cal member with no other primary health care coverage at time of program enrollment;
- Have a diagnosis of diabetes, congestive heart failure (CHF), and/or chronic obstructive pulmonary disease (COPD);
- Identified as high risk for hospital readmission (LACE score 10+);
- Is not following a renal diet;
- Has no food allergies (except gluten);
- Not already enrolled in a meal delivery program, receiving more than 7 meals per week;
- Discharged to a place where the member plans to stay at for at least 3 months and member (or family/caregiver) can receive deliveries consistently, safely store and heat the prepared meals.

Eligibility Screening: Alliance Medi-Cal members to be screened for PDMDP eligibility are identified during their hospital stay by the Alliance’s UM/CCM Staff through the daily hospital census. Members are disqualified from eligibility screening if they have completed the full 12-week benefit in the calendar year and/or if they have been enrolled twice in the benefit in the calendar year. UM/CCM Staff contact each eligible member and complete a PDMDP Eligibility Assessment in Essette.

Member Enrollment: If a member meets eligibility criteria and expresses interest in receiving the benefit, they sign a member consent form (or give verbal consent to UM/CCM Staff) and are enrolled in PDMDP. UM/CCM Staff create a Prior Authorization and faxes a PDMDP Enrollment Form to the MTM Provider serving the member’s county.

MTM Delivery Service Requirements

- A. MTM Provider shall deliver the first meal within seventy-two (72) business hours of receipt of the PDMPD Enrollment Form from Alliance for meal delivery services.

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- B. MTM Provider will employ the expertise of a registered dietitian nutritionist (RDN) to ensure meals adhere to nutrition guidelines noted above, and all other meal guidelines noted in this section. Daily nutrition will comply with the Evidence-based Nutrition Practice Guidelines from the Academy of Nutrition and Dietetics Evidence Analysis Library, and shall:
 - a. Meet the serving amounts of each food group as per the Dietary Approaches to Stop Hypertension (DASH) diet patterns, unless other medical needs require otherwise; or
 - b. Follow guidelines of the American Heart Association and National Institutes of Health for heart-friendly and lower sodium meals.
- C. Meals shall be delivered by MTM Provider at least once per week to the enrolled Member’s residence.


Billing and Reimbursement Guidelines

- A. MTM Provider will submit claims to the Alliance to bill for services rendered (HCPC code S5170) each month per the requirement outlined in the MTM Provider’s administrative contract.
- B. Alliance Claims Staff will process the claims and payment per the terms and payment rate outlined in the MTM Provider’s administrative contract.

Responsibilities:

MTM Provider:

- A. MTM Provider must ensure efficient meal delivery per the terms of the MTM Provider’s administrative contract.
- B. MTM Provider must ensure member satisfaction is maintained through means outlined in the MTM Provider’s administrative contract.
- C. MTM Provider will notify the Alliance within 24 hours of receipt of a member grievance (oral or written), per the terms outlined in the MTM Provider’s administrative contract. MTM Provider shall comply with all final determinations made by Alliance through the member grievance system.

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- D. MTM Provider will have a contingency plan to ensure all members receive meals during kitchen malfunctions, weather-related conditions, and other potential operational barriers.

Alliance:

- A. Oversight of MTM Providers will be managed by the UM/CCM Department.
- B. Alliance UM/CCM Staff will identify and screen members for PDMDP eligibility and refer eligible members to MTM Provider via fax.
- C. The Alliance will resolve member grievances pursuant to Alliance’s Member Grievance procedures.

References:

Alliance Policies:

- 401-4103 – Interpreter Services
- 600-1001 – Claims Processing
- 600-1017 – Provider Inquiry and Dispute Resolution
- 701-3000 – Administrative Contracts – Vendor Agreements
- 701-3001 – Administrative Contracts – Business Associate Agreements

Departments:

- Claims
- Member Services

Regulatory:

Legislative:

Contractual:

- Alliance Administrative Contract #8215 Mom’s Meals, SOW #2
- Alliance Administrative Contract #8216 Teen Kitchen Project, SOW #2

DHCS All Plan or Policy Letter:

NCQA:

Supersedes:

Other References:



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Lines of Business This Policy Applies To

- Medi-Cal
- Alliance Care IHSS

LOB Effective Dates

- (01/01/1996 – present)
- (07/01/2005 – present)

Revision History:

Review Date	Revised Date	Changes Made By	Approved By
12/22/2020	12/22/2020	Viki Doolittle, RN UM/CCM Manager	UMWG