



Post-Discharge Meals Benefit Frequently Asked Questions

What is the Post-Discharge Meals Benefit?

The Post-Discharge Meals program is a benefit designed to provide home-delivered meals to eligible members who are recovering from an inpatient hospital stay or skilled nursing facility stay greater than two days.

Who is Eligible for the Post-Discharge Meals Benefit?

Medicare Advantage Plans

- Inpatient hospital stay or skilled nursing facility stay greater than two days
 - Life Improvement Plan (HMO SNP) (LIP)
 - 65 Plus Plan (HMO) (65+)
 - Increased Benefits Plan (HMO) (IBP)
 - Signature (HMO)

- Inpatient hospital stay greater than two days
 - Coordinated Benefits Plan (HMO) (CBP)

Note: Members with CompleteCare (HMO SNP) or Senior Health Partners Managed Long-Term Care Medicaid Plan may have a home-delivered meal benefit or other options within their respective plan. They can be referred to their Care Manager.

Does this Benefit Require Prior Authorization?

Yes. After our Utilization Management department reviews your submission, you will receive notification if you were approved.

All prior-authorization requests must be submitted to Mom's Meals, or a call must be placed to Mom's Meals with the Post-Discharge Meal Packet that includes the instructions on how to fill out the form, referral form (post-discharge form), and doctor prescription form prior to review. The provider can also submit discharge paperwork in place of the doctor's prescription form. Missing documentation that is not received within 10 days from request of authorization can result in an adverse determination or a delay in processing.

Frequently Asked Questions

Who Can Request this Benefit?

- Members or Member Designees
- Providers

Note: The Post-Discharge Meals benefit must be requested within 14 days of discharge from hospital to home or from skilled nursing facility to home.

How Is Preauthorization Requested?

- Members or Member Designees
 - Complete Online Post-Discharge Meal Benefit Packet at:
 - Website: HFMedicareMaterials.org
 - Member Portal: MyHFNY.org
 - Provider Portal: hfproviderportal.org
 - Fax Post-Discharge Meal Benefit Packet with a provider's prescription or discharge paperwork to **1-866-942-7873**
- Providers
 - Via the Provider Portal: hfproviderportal.org
 - Fax the Post-Discharge Meal Benefit Packet with a prescription or order to **1-866-942-7873**
 - Complete Web Authorization Tool
 - Contact Provider Services at **1-888-394-4327**

Note: A doctor's prescription or discharge paperwork is required before the benefit can be reviewed.

Which Vendors Can Provide Post-Discharge Meals?

- Mom's Meals (all five boroughs and Westchester, Nassau, Orange, and Sullivan counties)
 - Customer Service: **1-866-224-9485**

The vendor selected would provide all meals throughout the benefit period of 28 days (14 days for CBP). Vendor will reach out to member if the prior authorization is approved.

Frequently Asked Questions

What Meals Are Available?

- The vendor will reach out to the member to discuss nutritional needs. The following are examples of the type of meal plans available:
 - Diabetes Friendly
 - Heart Friendly
 - Lower Sodium
 - Renal Friendly
 - Cancer Support
 - Gluten Free
 - Vegetarian (not vegan)
 - Pureed
 - General Wellness
 - Other

Are the Meals Delivered Hot or Cold?

The meals will arrive refrigerated. No meals come hot, but they can be microwaved.

How Many Meals Are Included?

- 84 meals (3 meals per day)
 - Meals are delivered one to two times per week for the benefit period of 28 days.
 - Life Improvement Plan (LIP)
 - 65 Plus Plan (65+)
 - Increased Benefits Plan (IBP)
 - Signature
- 42 meals (3 meals per day)
 - Meals are delivered one to two times per week for the benefit period of 14 days.
 - Coordinated Benefits Plan (CBP)

Note: This benefit is available with each admission that lasts longer than two days. However, the beneficiary must go through the preauthorization process for every discharge.