



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
*www.mass.gov/masshealth*

**MassHealth**  
**Hospice Bulletin 13**  
**September 2018**

**TO:** Hospice Providers Participating in MassHealth  
**FROM:** Daniel Tsai, Assistant Secretary for MassHealth DT  
**RE:** **Change in Phone Number for Hospice Election Status**

### **Summary**

This bulletin transmits a new phone number that providers must use when inquiring on the status of the Hospice Election Form (HOS-1) submitted on behalf of MassHealth members seeking to elect, revoke, or terminate hospice services, or change hospice providers. The new number is **(833) 251-2768** and is effective immediately.

### **Background and procedures**

Hospice providers must complete the MassHealth HOS-1 according to the instructions on the form (see 130 CMR 437.412(C)), and submit the form to the MassHealth Hospice Enrollment Unit (see address below).

Questions or inquiries about the HOS-1 status also may be directed to the MassHealth Hospice Enrollment Unit in any of the following ways.

- Call (833) 251-2768;
- Email to [MassHealthHospiceEnrollment@umassmed.edu](mailto:MassHealthHospiceEnrollment@umassmed.edu);
- Fax to (617) 886-8402; or
- Mail to the MassHealth Hospice Enrollment Unit, UMMS-CHCF, 529 Main St., Suite 320, Charlestown, MA 02129

### **MassHealth website**

This bulletin is available on the MassHealth website at [www.mass.gov/masshealth-provider-bulletins](http://www.mass.gov/masshealth-provider-bulletins).

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to [join-masshealth-provider-pubs@listserv.state.ma.us](mailto:join-masshealth-provider-pubs@listserv.state.ma.us). No text in the body or subject line is needed.

### **Questions**

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Services Center at (800) 841-2900, email your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to (617) 988-8974.

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