



Santa Clara  
Family Health Plan  
*The Spirit of Care*

**To:** Skilled Nursing Facilities  
**From:** Sandra Carlson, Director, Medical Management  
**Date:** January 30, 2018  
**Subject:** **Process for Issuing Notice of Medicare Non-Coverage to CMC Members**

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Dear Providers:

This memo is to clarify that the Notice of Medicare Non-Coverage (NOMNC) for SCFHP's Cal MediConnect members must be issued by our Utilization Management (UM) department, and **is not a delegated responsibility** of contracted and/or non-contracted Skilled Nursing Facilities (SNFs).

SCFHP's NOMNC includes the member's appeal rights with both SCFHP and the Quality Improvement Organization (QIO), Livanta. Our UM department follows CMS requirements regarding the timeframe for issuing the NOMNC to SNF providers. SNFs are responsible for:

- Delivering the NOMNC to the member or their representative
- Acquiring the signature of the member or their representative, and
- Faxing the signed NOMNC to SCFHP.

Please fax signed documents to SCFHP's UM department at **408-874-1957**.

Thank you for your continued support!