DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Center for Clinical Standards and Quality Survey & Operations Group Division of SF/Seattle Survey & Enforcement



FOR PUBLICATION: February 19, 2025

VALLEY BEST CARE, INC 6742 VAN NUYS BLVD SUITE 200A VAN NUYS, CA 91405

LEGAL NOTICE OF TERMINATION FROM MEDICARE PROGRAM

Effective on March 7, 2025, the Secretary of the Department of Health & Human Services will terminate its Medicare Provider Agreement with VALLEY BEST CARE, INC. at 6742 VAN NUYS BLVD SUITE 200A, VAN NUYS, CA 91405. This action is being taken because the hospice agency has not corrected the findings from their May 31, 2024, Medicare complaint validation survey which found noncompliance with requirements for participation in the Medicare and Medicaid programs as established by the Social Security Act (Section 1861) and its underlying regulations.

The Centers for Medicare & Medicaid Services has determined that VALLEY BEST CARE, INC was not in compliance with the following three (3) Medicare Conditions of Participation for Hospice Agencies under 42 Code of Federal Regulations (C.F.R.) Part 418:

42 C.F.R. §418.54 Initial & Comprehensive Assessment of Patient

42 C.F.R. §418.56 Interdisciplinary Group (IDG), Care Planning (CP) and Coordination of Services

42 C.F.R. §418.58 Quality Assessment & Performance Improvement

Medicare and Medicaid programs will not make payments for services furnished to patients who were admitted on or after March 7, 2025. For patients admitted prior to March 7, 2025, payment may be available for up to thirty (30) calendar days after the effective date of termination.

Benton Williams
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