



**Date:** June 26, 2013

**To:** DMAP Hospice Service providers

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**Subject:** July 1, 2013 DMAP updates Hospice-Nursing Facility rates

The Division of Medical Assistance Programs (DMAP) will update rates for revenue codes (658, 191, and 192) for nursing facility (NF) Room & Board (bundled rate) charges. Please see the updated hospice-NF rates on the attached Hospice Rates Chart. These new rates for revenue codes 658, 191, and 192 apply to NF care and services provided from July 1, 2013, through June 30, 2014. The revenue codes 658, 191, 192 and 199 are to be used in conjunction with hospice revenue code 651 (Routine Home Care), and hospice revenue code 652 (Continuous Home Care).

The full rate schedule is listed below. You can also find this on the OHP website at [www.dhs.state.or.us/policy/healthplan/guides/hospice/main.html](http://www.dhs.state.or.us/policy/healthplan/guides/hospice/main.html).

### Why is this happening?

On July 1, 2013, Aging and People with Disabilities (APD) will increase rates paid for NF services. These rate increases will also apply to NF rates when a client resides in a NF and is receiving hospice services.

### What you should do?

When billing DMAP for hospice-NF services:

- Nursing facilities will submit claims for hospice residents' room & board (bundled rate) to the hospice organization for payment, rather than billing DMAP directly.
- Hospice organizations will submit claims for their patients' nursing facility room & board to DMAP for reimbursement using the attached updated hospice and NF rate chart.
- *Remember, the added Revenue codes 658, 191, 192 and 199 are to be used in conjunction with hospice revenue code 651 (Routine Home Care), and hospice revenue code 652 (Continuous Home Care).*

### Questions?

Thank you for your continued support of the Oregon Health Plan. If you have any questions about this information, please contact:

- **Claims and billing questions:** DMAP Provider Services at [dmap.providerservices@state.or.us](mailto:dmap.providerservices@state.or.us) or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:30 p.m. and Friday 10 a.m. to 4:30 p.m. (phone lines closed 11:25 a.m. to 12:30 p.m. daily).
- **Policy questions:** Judith Van Osdol, DMAP Policy Analyst, 503-945-6743 or e-mail [judith.p.vanosdol@state.or.us](mailto:judith.p.vanosdol@state.or.us).



## Hospice Rate Chart

Effective July 1, 2013, follow CMS guidelines. When billing for hospice services:

- Bill the usual charge or the rate based upon the Cost-Based Statistical Area (CBSA) in which the care is furnished, whichever is lower.
- In the Value Code field on institutional claims, enter “61” as the value code, followed by the CBSA code as a dollar amount (e.g., enter CBSA code 13460 as 13460.00).

Cost-Based Statistical Area (CBSA) per Federal Register		Rates				
		Per diem				Per hour
Area (County)	CBSA Code	Routine Home Care (Rev 651, T2042)	Inpatient Respite Care (Rev 655, T2044)	General Inpatient Care (Rev 656, T2045)	In-Home Respite Care (Rev 659)	Continuous Home Care (Rev 652, T2043)
<b>Bend</b> Includes Deschutes	13460	\$171.65	\$182.49	\$757.09	\$179.17	\$41.70
<b>Corvallis</b> Includes Benton	18700	\$166.26	\$177.87	\$734.76	\$173.53	\$40.39
<b>Eugene- Springfield</b> Includes Lane	21660	\$173.73	\$184.27	\$765.69	\$181.35	\$42.21
<b>Medford</b> Includes Jackson	32780	\$159.97	\$172.49	\$708.76	\$166.98	\$38.78
<b>Portland-Beaverton</b> Includes Clackamas, Columbia, Multnomah, Washington & Yamhill	38900	\$172.29	\$183.04	\$759.75	\$179.85	\$41.86
<b>Salem</b> Includes Marion & Polk	41420	\$169.79	\$180.90	\$749.40	\$177.22	\$41.25
<b>All Other Areas</b>	38	\$160.17	\$172.66	\$709.59	\$167.19	\$38.91

## Hospice in a nursing facility

When a client resides in a NF and elects hospice services, bill the usual charge or rate for that client in that NF. Effective July 1, 2013, use the following **statewide “bundled” rates**:

Nursing Facility Rates (Per diem)			
Basic (Rev. 658*)	Complex medical (Rev. 191*)	Pediatric (Rev. 192*)	Special Contract (Rev. 199*)
\$256.47	\$359.06	\$403.86	Manually priced

*\*Note: Per Centers for Medicare and Medicaid Services, when hospice care is furnished to an individual residing in a nursing facility, the hospice will be paid an additional amount on Routine Home Care (651) and Continuous Home Care (652) days to take into account the room and board furnished by the facility.*

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