

Donald Ross, Manager  
DMAP Medicaid Policy and Planning Section

**Number:** DMAP-IM-13-072

**Authorized Signature**

**Issue Date:** 09/26/2013

**Topic:** Medical Benefits

**Subject: Provider announcement:** Fee-for-service rate changes effective October 1, 2013

**Applies to:**

- |  |   |
|--|---|
| <input type="checkbox"/> All DHS employees             | <input type="checkbox"/> County Mental Health Directors   |
| <input type="checkbox"/> Area Agencies on Aging        | <input type="checkbox"/> Aging and People with Disabilities   |
| <input type="checkbox"/> Children, Adults and Families | <input checked="" type="checkbox"/> Other (please specify): DHS and OHA staff and others identified on the APD, CAF, AMH and DMAP transmittal lists |
| <input type="checkbox"/> County DD Program Managers    |   |

**Message:**

DMAP will post the following [OHP provider announcements](#) and distribute via eSubscribe.

The letter to hospice providers (page 2) provides new rates effective October 1, 2013.

- It also explains a new federal requirement for hospice providers. Starting October 1, hospice providers who are not participating in the Centers for Medicare and Medicaid Services (CMS) [Hospice Quality Reporting Program](#) (HQRP) will be subject to a rate reduction.
- DMAP is working with CMS and the Oregon Hospice Association to identify Oregon hospice providers not participating in the HQRP. Those providers will be subject to reduced rates.

The letter to medical-surgical providers (page 4) provides new rates for surgical assists effective October 1.

*If you have any questions about hospice rates, contact:*

<b>Contact(s):</b>	Judith Van Osdol, Hospice Services Program Manager		
<b>Phone:</b>	503- 945-6743	<b>Fax:</b>	503-947-1119
<b>E-mail:</b>	<a href="mailto:judith.p.vanosdol@state.or.us">judith.p.vanosdol@state.or.us</a>		

*If you have any questions about medical-surgical rates, contact:*

<b>Contact(s):</b>	Nathan Roberts, Medical-Surgical Services Program Manager		
<b>Phone:</b>	503-945-6530	<b>Fax:</b>	503-947-1119
<b>E-mail:</b>	<a href="mailto:nathan.w.roberts@state.or.us">nathan.w.roberts@state.or.us</a>		



**Date:** September 26, 2013

**To:** Hospice providers

**From:** Don Ross, Manager  
Medicaid Policy and Planning Section, DMAP

**Subject:** Fee-for-service hospice rates effective October 1, 2013

The Division of Medical Assistance Programs (DMAP) has updated the fee-for-service payment rates for the Hospice Services program (listed below and posted on [the OHP website](#)).

- These rates are for care and services provided from October 1, 2013, through September 30, 2014.
- These rates indicate the Medicaid rates for hospice providers **who have complied** with quality reporting program requirements mandated by Section 3004 of the Affordable Care Act. Hospice providers who do not comply with these requirements will be subject to reduced rates.

### Why is this happening?

DMAP updates the Hospice Program rates annually, based on annual updates from the Centers for Medicare and Medicaid Services (CMS).

Effective October 1, 2013, CMS updated [Section 1814 \(i\)\(5\)\(A\)\(i\) of the Social Security Act](#) to authorize a quality reporting program for hospice providers. Hospice providers who fail to submit quality data to CMS as outlined in the Act will be subject to a 2 percentage point reduction of the market basket update for fiscal year 2014 and each subsequent year.

DMAP understands the majority of Oregon hospices are in compliance with this requirement. We will work with the Oregon Hospice Association to identify and contact hospice providers who are not in compliance.

### What you should do?

Please make sure you report quality data as outlined on the [CMS Hospice Quality Reporting Program website](#). When billing DMAP for hospice services:

- **For hospice services:** Bill the usual charge or the rate based on the Cost-Based Statistical Area (CBSA) where care is furnished, whichever is lower (see Oregon Administrative Rule 410-142-0300).
- **For room and board for nursing facility residents:** Also bill the appropriate bundled rate.
- **For all hospice claims:** Enter Value Code “61” in the “Code” field, followed by the CBSA code for your location as a dollar amount in the “Amount” field (*e.g.*, enter CBSA code 13460 as 13460.00).

### Questions?

- **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.vanosdol@state.or.us](mailto:judith.vanosdol@state.or.us).

**Help us improve future announcements:**

Please answer six [survey questions](#) about this provider announcement.



## Hospice Rate Chart

Effective October 1, 2013. 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)	Inpatient Respite Care (Rev 655)	General Inpatient Care (Rev 656)	In-Home Respite Care (Rev 659)	Continuous Home Care (Rev 652)
<b>Bend</b> Includes Deschutes	13460	\$170.48	\$182.10	\$753.02	\$177.94	\$41.42
<b>Corvallis</b> Includes Benton	18700	\$166.06	\$178.32	\$734.76	\$173.32	\$40.35
<b>Eugene-Springfield</b> Includes Lane	21660	\$174.14	\$185.23	\$768.17	\$181.77	\$42.31
<b>Medford</b> Includes Jackson	32780	\$162.62	\$175.37	\$720.50	\$169.74	\$39.51
<b>Portland-Beaverton</b> Includes Clackamas, Columbia, Multnomah, Washington & Yamhill	38900	\$176.53	\$187.29	\$778.08	\$184.27	\$42.89
<b>Salem</b> Includes Marion & Polk	41420	\$169.93	\$181.63	\$750.76	\$177.36	\$41.28
<b>All Other Areas</b>	38	\$152.77	\$166.93	\$679.75	\$159.47	\$37.12

## Room and board for nursing facility residents on hospice

To receive reimbursement for nursing facility room and board for residents you serve, 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*)
\$257.00	\$359.59	\$404.39	Manually priced

*\*Note: According to CMS guidelines, 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.*



HEALTH CARE PROGRAMS  
Division of Medical Assistance Programs

John A. Kitzhaber, MD, Governor



500 Summer St NE E35

Salem, OR, 97301

Voice: 1-800-336-6016

FAX: 503-945-6873

TTY: 711

[www.oregon.gov/OHA/healthplan](http://www.oregon.gov/OHA/healthplan)

**Date:** September 24, 2013

**To:** Medical-surgical providers

**From:** Don Ross, Manager  
Medicaid Policy and Planning Section, DMAP

**Subject:** Fee-for-service rate change for surgical assists, effective October 1, 2013

Starting October 1, 2013, the Division of Medical Assistance Programs (DMAP) will pay assistant surgeons at Relative Value Unit (RVU)-based rates. According to current RVU-based rates, DMAP will reimburse surgical assists at 16 percent (not 20 percent) of the full surgical rate for covered procedures.

Like other RVU-based rates, the surgical assist rate will change whenever DMAP applies future RVU weight updates.

### Why is this happening?

Oregon's Medicaid State Plan is approved to reimburse physicians according to federal RVU standards.

To align with the State Plan, Medicare standards and industry payment standards, DMAP has updated [Oregon Administrative Rule 410-120-1340 – Payment](#) to show that DMAP follows Medicare standards for all RVU-based rates, which includes surgical assists.

### What should you do?

No action is required on your part.

### Questions?

If you have any questions about this announcement, contact the Provider Services Unit 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 4:00 p.m. and Friday 10 a.m. to 4:00 p.m. (phone lines closed 11:30 a.m. to 12:30 p.m. daily).

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.

### Help us improve future announcements:

[Click here](#) to answer six survey questions about this announcement.