## STATE OF **LOUISIANA**

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED LIMITATION ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS

## **Hospice Reimbursement**

CITATION Section 1905(a)(18) of the Social Security Act

## **Reimbursement Methodology**

Reimbursement for hospice services is made to a designated hospice provider based on the Medicaid rates published annually in a memorandum issued by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), Center for Medicaid and CHIP Services. These rates are effective from October 1st of each year through September 30th of the following year.

Payment for hospice care will be made at predetermined rates for each day in which a beneficiary is under the care of the hospice provider. The daily rate is applicable to the type and intensity of services furnished to the beneficiary on that day as follows:

- 1. Routine home care The hospice is paid at one of two routine home care rates for each day the patient is under the care of the hospice and no other hospice rate is paid. This rate is paid without regard to the volume or intensity of services provided on any given day.
  - a. Days 1 through 60; and
  - b. Days 61 and longer
- 2. Continuous home care Only one rate is applicable for each day. The amount of payment is determined based on the number of hours of continuous care furnished to the beneficiary on that day.
- 3. Inpatient respite care Only one rate is applicable for each day.
- 4. General inpatient care The State pays at the general inpatient rate when general inpatient care is provided.
- 5. Service intensity add-on (SIA) An SIA payment is reimbursable for a visit by a registered nurse or a social worker, when provided during routine home care in the last seven days of a patient's life. The SIA payment is made in addition to the routine home care rate.
- 6. Except as otherwise noted in the State Plan, state-developed rates are the same for both governmental and private providers.

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Hospice nursing facility room and board per diem rates are reimbursed to the hospice provider at the rate equal to 95 percent of the skilled nursing facility rate, less any post-eligibility treatment of income (PETI) amount, for Medicaid beneficiaries receiving hospice care services.

Hospice providers that are not in compliance with Medicare quality reporting requirements established under section 1814(i)(5)(A)(i) of the Social Security Act, are subject to a four percent reduction to the market basket percentage increase for the rate period that began October 1, 2023.

The Medicaid hospice payment rates are calculated based on the annual hospice rates established under Medicare. These rates are authorized by section 1814(i)(1)(C)(ii) of the Social Security Act (the Act), which also provides for an annual increase in payment rates for hospice care services. Rates for hospice physician services are not increased under this provision.

Physician rendered professional services that are unrelated to the hospice diagnosis and not included in the composite hospice rate may be reimbursed in accordance with Medicaid reimbursement for physician services based on the lower of the actual charge or the Medicaid maximum allowable amount for the specific service.