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Administrative Bulletin 19-21 101 CMR 343.00: Hospice Services

Effective October 1, 2019

Updates to the Hospice Rates

Pursuant to 101 CMR 343.00, the Executive Office of Health and Human Services (EOHHS) has updated the hospice per diem and per hour rates for MassHealth hospice providers to coincide with the Medicaid hospice rates established by the Centers for Medicare & Medicaid Services (CMS). In accordance with 101 CMR 343.01(4) and 343.04(3)(b), this administrative bulletin announces the MassHealth hospice rates effective October 1, 2019, in accordance with CMS established rates for hospice services.

In 2014, CMS instituted a two-rate system for the Medicaid national components for compliance and noncompliance with federal quality reporting standards. Hospice providers that fail to submit required quality data in a given year will incur a two percentage point reduction to the market basket percentage increase.

The hospice per diem or per hour rates by county, are as follows:

Barnstable County

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$229.57	\$225.10
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$181.44	\$177.90
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$68.57	\$67.24
T2043	Continuous Home Care	Per Hour	\$68.57	\$67.24
T2044	Inpatient Respite	Per Diem	\$540.52	\$529.98
T2045	General Inpatient	Per Diem	\$1,191.34	\$1,168.13



Berkshire County

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$206.16	\$202.15
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$162.94	\$159.76
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$61.58	\$60.38
T2043	Continuous Home Care	Per Hour	\$61.58	\$60.38
T2044	Inpatient Respite	Per Diem	\$495.67	\$486.00
T2045	General Inpatient	Per Diem	\$1,077.01	\$1,056.02

Bristol County

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$199.57	\$195.68
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$157.73	\$154.65
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$59.61	\$58.45
T2043	Continuous Home Care	Per Hour	\$59.61	\$58.45
T2044	Inpatient Respite	Per Diem	\$483.02	\$473.60
T2045	General Inpatient	Per Diem	\$1,044.78	\$1,024.42

Essex/Middlesex Counties

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$208.47	\$204.41
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$164.76	\$161.55
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$62.27	\$61.06
T2043	Continuous Home Care	Per Hour	\$62.27	\$61.06
T2044	Inpatient Respite	Per Diem	\$500.08	\$490.32
T2045	General Inpatient	Per Diem	\$1,088.25	\$1,067.05

Hampden/Hampshire Counties

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$196.62	\$192.80
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$155.40	\$152.37
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$58.73	\$57.59
T2043	Continuous Home Care	Per Hour	\$58.73	\$57.59
T2044	Inpatient Respite	Per Diem	\$477.38	\$468.07
T2045	General Inpatient	Per Diem	\$1,030.40	\$1,010.32

Norfolk/Plymouth/Suffolk Counties

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$227.21	\$222.79
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$179.58	\$176.08
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$67.87	\$66.55
T2043	Continuous Home Care	Per Hour	\$67.87	\$66.55
T2044	Inpatient Respite	Per Diem	\$536.01	\$525.55
T2045	General Inpatient	Per Diem	\$1,179.84	\$1,156.85

Worcester County

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$215.85	\$211.65
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$170.60	\$167.27
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$64.47	\$63.22
T2043	Continuous Home Care	Per Hour	\$64.48	\$63.22
T2044	Inpatient Respite	Per Diem	\$514.23	\$504.21
T2045	General Inpatient	Per Diem	\$1,124.34	\$1,102.43

Dukes, Franklin, and Nantucket Counties

Code	Service	Per Hour/Per Diem	Compliant Rate	Non-Compliant Rate
T2042	Routine Home Care (1-60 days)	Per Diem	\$208.92	\$204.86
T2042 UD	Routine Home Care (61+ days)	Per Diem	\$165.12	\$161.90
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	Per Hour/Max four hours	\$62.40	\$61.19
T2043	Continuous Home Care	Per Hour	\$62.41	\$61.19
T2044	Inpatient Respite	Per Diem	\$500.95	\$491.18
T2045	General Inpatient	Per Diem	\$1,090.48	\$1,069.23