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101 CMR 343.00: *Rates for Hospice Services*

Effective October 1, 2023

Updates to Hospice Rates

Summary

Pursuant to 101 CMR 343.00, the Executive Office of Health and Human Services (EOHHS) has updated the hospice service rates for MassHealth hospice providers to coincide with the Medicaid hospice rates for federal fiscal year (FFY) 2024 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 issues the MassHealth hospice rates, effective October 1, 2023, in accordance with CMS-established rates for hospice services.

CMS has 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 to CMS in a given year will incur a four-percentage point reduction to the market basket percentage increase.

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

Barnstable			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$237.32	\$228.12
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$187.34	\$180.07

Barnstable			Compliant Rate	Noncompliant Rate
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$71.61	\$68.84
T2043	Continuous Home Care	<i>Per Hour</i>	\$71.62	\$68.84
T2044	Inpatient Respite	<i>Per Diem</i>	\$576.71	\$554.33
T2045	General Inpatient	<i>Per Diem</i>	\$1,239.64	\$1,191.54

Berkshire			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$223.82	\$215.14
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$176.68	\$169.82
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$67.02	\$64.42
T2043	Continuous Home Care	<i>Per Hour</i>	\$67.02	\$64.42
T2044	Inpatient Respite	<i>Per Diem</i>	\$546.20	\$525.00
T2045	General Inpatient	<i>Per Diem</i>	\$1,171.56	\$1,126.11

Bristol			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$218.78	\$210.30
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$172.71	\$166.00
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$65.31	\$62.78
T2043	Continuous Home Care	<i>Per Hour</i>	\$65.31	\$62.78
T2044	Inpatient Respite	<i>Per Diem</i>	\$534.82	\$514.07
T2045	General Inpatient	<i>Per Diem</i>	\$1,146.18	\$1,101.71

Essex/Middlesex			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$225.56	\$216.81
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$178.06	\$171.15
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$67.62	\$64.99
T2043	Continuous Home Care	<i>Per Hour</i>	\$67.62	\$64.99
T2044	Inpatient Respite	<i>Per Diem</i>	\$550.14	\$528.79
T2045	General Inpatient	<i>Per Diem</i>	\$1,180.36	\$1,134.56

Franklin/Hampden/Hampshire			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$218.61	\$210.13
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$172.57	\$165.87
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$65.25	\$62.72
T2043	Continuous Home Care	<i>Per Hour</i>	\$65.25	\$62.72
T2044	Inpatient Respite	<i>Per Diem</i>	\$534.43	\$513.69
T2045	General Inpatient	<i>Per Diem</i>	\$1,145.31	\$1,100.87

Norfolk/Plymouth/Suffolk			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$241.23	\$231.88
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$190.43	\$180.04

Norfolk/Plymouth/Suffolk			Compliant Rate	Noncompliant Rate
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$72.94	\$70.12
T2043	Continuous Home Care	<i>Per Hour</i>	\$72.95	\$70.12
T2044	Inpatient Respite	<i>Per Diem</i>	\$585.55	\$562.82
T2045	General Inpatient	<i>Per Diem</i>	\$1,259.35	\$1,210.48

Worcester			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$229.20	\$220.31
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$180.93	\$173.91
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$68.85	\$66.18
T2043	Continuous Home Care	<i>Per Hour</i>	\$68.85	\$66.18
T2044	Inpatient Respite	<i>Per Diem</i>	\$558.36	\$536.69
T2045	General Inpatient	<i>Per Diem</i>	\$1,198.69	\$1,152.18

Rural: Dukes and Nantucket			Compliant Rate	Noncompliant Rate
T2042	Routine Home Care (1-60 days)	<i>Per Diem</i>	\$256.14	\$246.20
T2042 UD	Routine Home Care (61+ days)	<i>Per Diem</i>	\$202.20	\$194.34
G0299 (RN services) G0155 (Social Worker services)	Service Intensity Add-on	<i>Per Hour/Max four hours</i>	\$78.01	\$74.99
T2043	Continuous Home Care	<i>Per Hour</i>	\$78.02	\$74.99
T2044	Inpatient Respite	<i>Per Diem</i>	\$619.22	\$595.19
T2045	General Inpatient	<i>Per Diem</i>	\$1,334.47	\$1,282.69

Notes

Use modifier TN for T2042 and T2043 when billing for members outside the county in which the provider is located.

MassHealth-enrolled hospice providers located out of state must bill MassHealth using the TN modifier for all codes. When the TN modifier is used, the payment will be based on the rate applicable to the county in which the member resides. Absent use of the TN modifier, the payment for hospice services provided by an out-of-state hospice provider is the lowest applicable rate listed above.

Use modifier TN with T2042 UD when billing for Routine Home Care to members outside the county in which the provider is located for services provided on or after the 61st day in hospice care.