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| (Craven, Jones, Pamlico Co.) * | 00D | 35100 | \$183.68 | \$145.15 | \$53.90 | \$454.80 | \$969.69 | \$13.47 |
| Myrtle Beach/Conway North Myrtle Beach, SC-NC (Brunswick Co.) * | 00E | 34820 | \$191.47 | \$151.31 | \$56.56 | \$472.44 | \$1,009.05 | \$14.14 |
| All Other Rural Counties | 53 | 99934 | \$184.78 | \$146.02 | \$54.28 | \$457.30 | \$975.27 | \$13.57 |

Key to Hospice Rate Table:

SC - Specialty Code

RC - Revenue Code

1. A minimum of eight hours of continuous home care per day must be provided.
2. There is a maximum of five consecutive days including the date of admission but not the date of discharge for inpatient respite care. Bill for the sixth day and any subsequent days at the routine home care rate.
3. When a Medicare/Medicaid recipient is in a nursing facility, Medicare is billed for routine or continuous home care, as appropriate, and Medicaid is billed for the appropriate long-term care rate. When a Medicaid only hospice recipient is in a nursing facility, the hospice may bill for the appropriate long-term care rate in addition to the home care rate provided in RC 0651 or RC 0652.
4. The hospice refunds any overpayments to the Medicaid program.
5. Date of Discharge: For the day of discharge from an inpatient unit, the appropriate home care rate must be billed instead of the inpatient care rate unless the recipient expires while inpatient. When the recipient is discharged as deceased, the inpatient care rate (general or respite) is billed for the discharge date.
6. Providers are expected to bill their usual and customary charges. Adjustments will not be accepted for rate changes.
7. Because the SBNF remains stable, CMS proposed to remove the factor to simplify the RHC payment rate updates.

<https://www.reginfo.gov/public/do/eAgendaViewRule?pubId=202004&RIN=0938-AU09>