

9505.0446 HOSPICE CARE PAYMENT RATES AND PROCEDURES.

Subpart 1. **Rate categories.** Providers of hospice care as described in part 9505.0297 are paid at one of four fixed daily rates that apply to each of the four categories of services in subpart 3. The fixed daily rates apply to all services, except for certain physician services as described in subpart 5, and room and board in a long-term care facility as described in subparts 6 and 7.

Subp. 2. **Long-term care facility as residence.** For purposes of this part, a recipient who resides in a long-term care facility is considered to live at home.

Subp. 3. **Categories of service.** Except as otherwise provided by subparts 4 to 6, no payments shall be made for specific services provided by the hospice. Fixed daily rates are calculated under subpart 4 for each of the following categories of services:

A. Routine home care day, which is a day on which a recipient who has elected to receive hospice care is at home and is not receiving continuous care as defined in item B.

B. Continuous home care day, which is a day on which a recipient who has elected to receive hospice care has not been admitted to a facility that provides inpatient care, except when a long-term care facility is the recipient's residence under subpart 2, and the recipient receives hospice care consisting of nursing services, including home health aide or homemaker services, on a continuous basis at home, as provided by part 9505.0297, subpart 17. No fewer than eight hours a day of nursing care must be provided by a registered nurse or licensed practical nurse. Continuous home care may be furnished only during periods of crisis as described in part 9505.0297, subpart 17, and only as necessary to maintain the terminally ill recipient at home.

C. Inpatient respite care day, which is a day on which the recipient who has elected hospice care receives inpatient care in an inpatient facility certified for medical assistance on a short-term basis for respite. This item is subject to the limits provided by part 9505.0297, subpart 18. This item does not apply to a recipient whose residence is a long-term care facility under subpart 2.

D. General inpatient care day, which is a day on which a recipient who has elected hospice care receives general inpatient care in a hospital or skilled nursing facility that provides inpatient care for control of pain or management of acute or chronic symptoms that cannot be managed in other settings. This item does not apply to a recipient who receives inpatient care in a long-term care facility in which the recipient is a resident under subpart 2.

Subp. 4. **Payments and limitations.** Medical assistance will pay a hospice for each day a recipient is under the hospice's care. Payment is in the same amounts, uses the same methodology, and is subject to the same limits and cap amount used by Medicare under Code of Federal Regulations, title 42, sections 418.301 to 418.309, as amended

through October 1, 1987, except that the inpatient day limit on both inpatient respite care days and general inpatient care days does not apply to recipients afflicted with acquired immunodeficiency syndrome (AIDS), as provided by United States Code, title 42, section 1396d(o)(1)(B). The rates are determined by the Centers for Medicare and Medicaid Services (CMS), United States Department of Health and Human Services, as provided by Code of Federal Regulations, title 42, section 418.306, as amended through October 1, 1987, and as adjusted by CMS for the Medicare copay amounts not allowed under medical assistance. Payments to long-term care facilities under subparts 6 and 7 are not included in the cap amount. Changes in rates are announced in the Federal Register. No payment will be made for bereavement counseling under part 9505.0297, subpart 19.

Subp. 5. **Payment for physician services.** Physician services are paid according to items A to C.

A. The services specified in subitems (1) and (2) are included in the rates provided by subpart 4:

(1) general supervisory services of the hospice's medical director; and

(2) participation in the establishment of plans of care, supervision of care and services, periodic review and updating of plans of care, and establishment of governing policies by the physician member of the hospice's interdisciplinary group.

B. Other than for services described in item A, medical assistance shall pay the hospice for physician services furnished by physicians who are employees of the hospice or who provide services under arrangements with the hospice, at the rate provided by part 9505.0445, item E. Payment for these physician services is included in the amount subject to the cap amount in subpart 4. No payment will be made to the hospice for services donated by physicians who are employees of the hospice or who provide services under arrangements with the hospice.

C. Services of the recipient's attending physician, if the physician is not an employee of the hospice or is not providing services under arrangements with the hospice, are not considered hospice services and are not included in the amount subject to the cap amount in subpart 4. These services are reimbursed according to parts 9505.0345 and 9505.0445, item E.

Subp. 6. **Payment for room and board in long-term care facilities.** If a recipient resides in a long-term care facility under subpart 2 that is certified as a medical assistance provider and the recipient has elected medical assistance coverage of hospice services, the long-term care facility shall not be paid by medical assistance under parts 9549.0010 to 9549.0080, but shall be paid by the hospice at a rate negotiated by the long-term care facility and the hospice.

Subp. 7. **Payment to hospice for residents of long-term care facilities.** The commissioner shall establish the payments to hospices for the room and board of medical assistance recipients who reside in long-term care facilities certified by medical assistance, as provided by items A and B.

A. The daily room and board payment rate shall be either:

(1) 83 percent of the long-term care facility's daily payment rate for the recipient's resident class, as determined under parts 9549.0010 to 9549.0080; or

(2) 83 percent of the long-term care facility's daily payment rate for the recipient's certification level, if the long-term care facility is not subject to parts 9549.0010 to 9549.0080.

B. The payment to the hospice is the product of the hospice's daily room and board payment rate determined in item A and the number of days for which the recipient resides in the long-term care facility in the month, less the recipient's spend down amount for that month under part 9505.0065, subpart 11, item F.

Statutory Authority: *MS s 256B.02*

History: *13 SR 1861; L 2002 c 277 s 32*

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