Provider Type 64 Hospice Services Reimbursement Rates for Compliant Providers

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Code	Description	Rate
0551	Service Intensity Add On - Last 7 Days	\$58.45
0650	Hospice Service - Routine - Home Care - Days 1-60	\$195.69
0651	Hospice Service - Routine - Home Care - Days 61+	\$154.66
0652	Hospice Service - Continuous Home Care	\$14.61
0655	Hospice Service - Respite - Inpatient Respite Care	\$475.59
0656	Hospice Service - General Inpatient Care	\$1025.83
0551	Service Intensity Add On - Last 7 Days	\$54.13
0650	Hospice Service - Routine - Home Care - Days 1-60	\$181.21
0651	Hospice Service - Routine - Home Care - Days 61+	\$143.22
0652	Hospice Service - Continuous Home Care	\$13.53
0655	Hospice Service - Respite - Inpatient Respite Care	\$447.84
0656	Hospice Service - General Inpatient Care	\$955.10
0551	Service Intensity Add On - Last 7 Days	\$65.86
0650	Hospice Service - Routine - Home Care - Days 1-60	\$220.50
0651	Hospice Service - Routine - Home Care - Days 61+	\$174.27
0652	Hospice Service - Continuous Home Care	\$16.47
0655	Hospice Service - Respite - Inpatient Respite Care	\$523.13
0656	Hospice Service - General Inpatient Care	\$1147.02
0551	Service Intensity Add On - Last 7 Days	\$55.01
0650	Hospice Service - Routine - Home Care - Days 1-60	\$184.18
0651	Hospice Service - Routine - Home Care - Days 61+	\$145.56
0652	Hospice Service - Continuous Home Care	\$13.75
0655	Hospice Service - Respite - Inpatient Respite Care	\$453.53
0656	Hospice Service - General Inpatient Care	\$969.61
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