



**Please see [Web Announcement 1607](#)
for updated billing and claim resubmission
instructions.**

February 23, 2018

Web Announcement 1533

Attention Provider Type 64 (Hospice): Provider-Specific Rates Established

Note: The information in this web announcement supersedes the information communicated in Web Announcements 1250 and 1309.

The Division of Health Care Financing and Policy (DHCFP) has established provider-specific rates for provider type (PT) 64 (Hospice) in order to ensure they are reimbursed correctly. The established rates apply to revenue codes only.

As of October 2, 2017, PT 64 must bill using revenue codes only. Procedure codes or revenue/procedure code combinations can no longer be used by PT 64 for billing purposes.

PT 64 must use the following revenue codes when billing for hospice services:

Revenue Code	Description	Codes Replaced
0551	Service Intensity Add-On for the last 7 Days of Life (RN, LPN, Social Worker)	Replaces codes G0155, G0299 and G0300 with the U2 Modifier
0650	Routine Hospice Care Days 1-60	Replaces code Q5001 with the U2 Modifier
0651	Routine Hospice Care Days 61+	Replaces code Q5001
0652	Continuous Home Care	
0655	Inpatient Respite Care	
0656	General Inpatient Care	

Future web announcements will provide additional instructions regarding submitting/resubmitting claims for hospice services. The PT 64 Billing Guide is in the process of being updated to reflect the aforementioned changes. The updated Billing Guide will be posted on the [Providers Billing Information](#) webpage.