

State of Maine

Department of Health & Human Services

Section 43 - Hospice Services, Rates/Fee Schedule

Effective October 1, 2016 - September 30, 2017

Procedure Code	Code Description	Units	Androscoggin County Rate	Cumberland County Rate	Penobscot County Rate	Sagadahoc County Rate	York County Rate	Rural Rate (All Other Counties)	Start Date	End Date
T2042	Routine Home Care (per diem) 1-60 days	Per Diem	\$210.19	\$235.86	\$234.36	\$235.86	\$235.86	\$210.13		
T2042	Routine Home Care (per diem) 61+ days	Per Diem	\$165.26	\$185.44	\$184.26	\$185.44	\$185.44	\$165.20		
T2043	Continuous Home Care	Hourly	\$36.00	\$40.40	\$40.16	\$40.40	\$40.40	\$36.00		
T2044	Inpatient Respite Care	Per Diem	\$165.17	\$180.68	\$179.78	\$180.68	\$180.68	\$165.13		
T2045	General Inpatient Care	Per Diem	\$663.48	\$738.37	\$734.00	\$738.37	\$738.37	\$663.29		
G0299	Service Intensity Add-On (Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting)	15 Minutes	\$9.00	\$10.10	\$10.04	\$10.10	\$10.10	\$9.00		
G0155	Service Intensity Add-On (Services of a clinical social worker in the home health or hospice setting)	15 Minutes	\$9.00	\$10.10	\$10.04	\$10.10	\$10.10	\$9.00		

