Wisconsin Medicaid and BadgerCare Information for Providers

To:
Hospice
Providers
HMOs and
Other
Managed
Care
Programs

Hospice Reimbursement Rate Changes

Wisconsin Medicaid hospice service reimbursement rates will change effective for dates of service on and after October 1, 2007.

Wisconsin Medicaid hospice reimbursement rates are based on hourly and per diem rates established by the federal government for all covered hospice services.

Medicaid hospice rates for federal fiscal year 2008, effective October 1, 2007, are based on annual hospice rates established under Medicare. Although these rates provide an annual change in payment rates for hospice care services, hospice physician services are not changed under this provision. Beginning with federal fiscal year 2006, the Centers for Medicare and Medicaid Services changed its methodology for determining the wage index portion of the rate; therefore, some county groupings have changed. The Attachment of this Wisconsin Medicaid and BadgerCare Update gives the new Medicaid hospice rates that are effective for dates of service on and after October 1, 2007.

Information Regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The Wisconsin Medicaid and BadgerCare Update is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at *dhfs.wisconsin.gov/medicaid/*.

PHC 1250

ATTACHMENT

Wisconsin Medicaid Hospice Reimbursement Rates

Effective for Dates of Service on and After October 1, 2007.

	Revenue Code			
	0651		0655	
Recipient's	(Daily)	0652 (Hourly)	(Daily)	0656 (Daily)
County of	Routine	Continuous	Inpatient	General
Residence	Home	Home	Respite	Inpatient
Brown	\$139.19	\$33.85	\$143.09	\$617.95
Calumet	\$135.90	\$33.05	\$140.40	\$604.29
Chippewa	\$137.63	\$33.47	\$141.82	\$611.48
Columbia	\$142.97	\$36.38	\$151.58	\$661.15
Dane	\$149.62	\$36.38	\$151.58	\$661.15
Douglas	\$141.72	\$34.46	\$145.15	\$628.41
Eau Claire	\$137.63	\$33.47	\$141.82	\$611.48
Fond du Lac	\$141.92	\$34.51	\$145.31	\$629.26
Iowa	\$149.62	\$36.38	\$151.58	\$661.15
Kenosha	\$146.95	\$35.73	\$149.41	\$650.07
Kewaunee	\$139.19	\$33.85	\$143.09	\$617.95
La Crosse	\$135.61	\$32.98	\$140.17	\$603.10
Marathon	\$138.54	\$33.69	\$142.56	\$615.25
Milwaukee	\$143.46	\$34.89	\$146.56	\$635.61
Oconto	\$139.19	\$33.85	\$143.09	\$617.95
Outagamie	\$135.90	\$33.05	\$140.40	\$604.29
Ozaukee	\$143.46	\$34.89	\$146.56	\$635.61
Pierce	\$150.67	\$36.64	\$152.44	\$665.50
Racine	\$134.92	\$32.81	\$139.61	\$600.25
Rock	\$137.89	\$33.53	\$142.02	\$612.52
Sheboygan	\$131.66	\$32.02	\$136.95	\$586.71
St. Croix	\$150.67	\$36.64	\$152.44	\$665.50
Washington	\$143.46	\$34.89	\$146.56	\$635.61
Waukesha	\$143.46	\$34.89	\$146.56	\$635.61
Winnebago	\$134.52	\$32.71	\$139.28	\$598.56
Rural WI*	\$136.87	\$33.29	\$141.20	\$608.33
Rural IA	\$128.24	\$31.19	\$134.16	\$572.55
Rural IL	\$124.67	\$30.32	\$131.25	\$557.74
Rural MI	\$132.01	\$32.10	\$137.23	\$588.17
Rural MN	\$132.91	\$32.32	\$137.97	\$591.90

^{*}All counties in Wisconsin not otherwise listed.