

**Louisiana Medicaid**

**Hospice rates listed below will be effective for dates of service October 1, 2012 and thereafter.**

Revenue Code	Description	Metropolitan Statistical Area								
		220	760	3350	3880	3960	5200	5560	7680	9919
HR 651	Routine Home Care	\$135.11	\$140.51	\$131.11	\$138.29	\$134.82	\$134.45	\$145.95	\$140.31	\$132.54
HR 652	Continuous Home Care	\$32.83	\$34.14	\$32.34	\$33.60	\$32.75	\$32.66	\$35.46	\$34.09	\$32.20
HR 655	Inpatient Respite Care	\$151.19	\$155.81	\$149.47	\$153.91	\$150.94	\$167.89	\$168.00	\$167.94	\$167.87
HR 656	General Inpatient Care	\$605.87	\$628.19	\$597.56	\$619.02	\$606.64	\$683.41	\$683.52	\$683.46	\$683.39