

LOUISIANA MEDICAID MANAGEMENT INFORMATION SYSTEM
LOUISIANA DEPARTMENT OF HEALTH - BUREAU OF HEALTH SERVICES - FINANCING
HOSPICE FEE SCHEDULE
FEES EFFECTIVE FOR DOS ON AND AFTER OCTOBER 01, 2023

MSA CODE	BEG DATE	HR651 DAY 1-60	HR651 DAY 61+	HR652	HR655	HR656	HR659
10780	10/01/2023	204.27	161.25	60.38	502.03	1073.02	60.37
12940	10/01/2023	192.09	151.64	56.23	474.51	1011.64	56.23
25220	10/01/2023	189.75	149.79	55.44	469.23	999.86	55.44
26380	10/01/2023	187.53	148.04	54.68	464.21	988.66	54.68
29180	10/01/2023	189.75	149.79	55.44	469.23	999.86	55.44
29340	10/01/2023	190.35	150.26	55.64	470.57	1002.84	55.64
33740	10/01/2023	189.75	149.79	55.44	535.23	1146.11	55.44
35380	10/01/2023	192.44	151.91	56.35	535.25	1146.13	56.35
43340	10/01/2023	190.86	150.67	55.82	535.24	1146.12	55.81
99919	10/01/2023	186.58	147.28	54.36	535.21	1146.09	54.36