

**FY 2024 Hospice Rates for Compliant Hospices
October 1, 2023 thru September 30, 2024**

[*Physician Fee Schedules](#)

[**Medicaid Nursing Facility Rates](#)

Montana and Out of State Providers										
Rev Code	Description	Daily Rate	Hrly Rate	Index	Wage Component Subject to Index	Non-Weighted	Wage Adjusted Rate	Hospice Rate	Hour	15 Min
651	Routine Home Care 1-60 days	\$ 218.61		0.8273	\$ 144.28	\$ 74.33	\$ 119.36	\$ 193.69		
651	Routine Home Care 61+days	\$ 172.57		0.8273	\$ 113.90	\$ 58.67	\$ 94.23	\$ 152.90		
652	Continuous Home Care	\$ 1,566.07		0.8273	\$ 1,177.69	\$ 388.38	\$ 974.30	\$ 1,362.68	\$ 56.78	\$ 14.20
655	Inpatient Respite Care	\$ 534.43		0.8273	\$ 326.00	\$ 208.43	\$ 269.70	\$ 478.13		
656	General Inpatient Care	\$ 1,145.31		0.8273	\$ 727.27	\$ 418.04	\$ 601.67	\$ 1,019.71		
657	Hospice Pre-Counseling	*Based on Physician's Fee Schedule								
659	Nursing Facility (Room And Board)	**Based on Medicaid Nursing Facility Rate								
551	Service Intensity Add On Rate - Nurse		\$ 65.25	0.8273	\$ 49.07	\$ 16.18	\$ 40.60	\$ 56.78	\$ 56.78	\$ 14.20
561	Service Intensity Add On Rate - Social Worker		\$ 65.25	0.8273	\$ 49.07	\$ 16.18	\$ 40.60	\$ 56.78	\$ 56.78	\$ 14.20
Billings/Yellowstone County/Carbon/Stillwater										
Rev Code	Description	Daily Rate	Hrly Rate	Index	Wage Component Subject to Index	Non-Weighted	Wage Adjusted Rate	Hospice Rate	Hour	15 Min
651	Routine Home Care 1-60 days	\$ 218.61		0.8992	\$ 144.28	\$ 74.33	\$ 129.74	\$ 204.07		
651	Routine Home Care 61+days	\$ 172.57		0.8992	\$ 113.90	\$ 58.67	\$ 102.42	\$ 161.09		
652	Continuous Home Care	\$ 1,566.07		0.8992	\$ 1,177.69	\$ 388.38	\$ 1,058.98	\$ 1,447.36	\$ 60.30	\$ 15.08
655	Inpatient Respite Care	\$ 534.43		0.8992	\$ 326.00	\$ 208.43	\$ 293.14	\$ 501.57		
656	General Inpatient Care	\$ 1,145.31		0.8992	\$ 727.27	\$ 418.04	\$ 653.96	\$ 1,072.00		
657	Hospice Pre-Counseling	*Based on Physician's Fee Schedule								
659	Nursing Facility (Room And Board)	**Based on Medicaid Nursing Facility Rate								
551	Service Intensity Add On Rate - Nurse		\$ 65.25	0.8992	\$ 49.07	\$ 16.18	\$ 44.12	\$ 60.30	\$ 60.30	\$ 15.08
561	Service Intensity Add On Rate - Social Worker		\$ 65.25	0.8992	\$ 49.07	\$ 16.18	\$ 44.12	\$ 60.30	\$ 60.30	\$ 15.08
Great Falls/Cascade County										
Rev Code	Description	Daily Rate	Hrly Rate	Index	Wage Component Subject to Index	Non-Weighted	Wage Adjusted Rate	Hospice Rate	Hour	15 Min
651	Routine Home Care 1-60 days	\$ 218.61		0.8000	\$ 144.28	\$ 74.33	\$ 115.42	\$ 189.75		
651	Routine Home Care 61+days	\$ 172.57		0.8000	\$ 113.90	\$ 58.67	\$ 91.12	\$ 149.79		
652	Continuous Home Care	\$ 1,566.07		0.8000	\$ 1,177.69	\$ 388.38	\$ 942.15	\$ 1,330.53	\$ 55.44	\$ 13.86
655	Inpatient Respite Care	\$ 534.43		0.8000	\$ 326.00	\$ 208.43	\$ 260.80	\$ 469.23		
656	General Inpatient Care	\$ 1,145.31		0.8000	\$ 727.27	\$ 418.04	\$ 581.82	\$ 999.86		
657	Hospice Pre-Counseling	*Based on Physician's Fee Schedule								
659	Nursing Facility (Room And Board)	**Based on Medicaid Nursing Facility Rate								
551	Service Intensity Add On Rate - Nurse		\$ 65.25	0.8000	\$ 49.07	\$ 16.18	\$ 39.26	\$ 55.44	\$ 55.44	\$ 13.86
561	Service Intensity Add On Rate - Social Worker		\$ 65.25	0.8000	\$ 49.07	\$ 16.18	\$ 39.26	\$ 55.44	\$ 55.44	\$ 13.86

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Missoula/Missoula County										
Rev Code	Description	Daily Rate	Hrly Rate	Index	Wage Component Subject to Index	Non-Weighted	Wage Adjusted Rate	Hospice Rate	Hour	15 Min
651	Routine Home Care 1-60 days	\$ 218.61		0.9089	\$ 144.28	\$ 74.33	\$ 131.14	\$ 205.47		
651	Routine Home Care 61+days	\$ 172.57		0.9089	\$ 113.90	\$ 58.67	\$ 103.52	\$ 162.19		
652	Continuous Home Care	\$ 1,566.07		0.9089	\$ 1,177.69	\$ 388.38	\$ 1,070.40	\$ 1,458.78	\$ 60.78	\$ 15.20
655	Inpatient Respite Care	\$ 534.43		0.9089	\$ 326.00	\$ 208.43	\$ 296.30	\$ 504.73		
656	General Inpatient Care	\$ 1,145.31		0.9089	\$ 727.27	\$ 418.04	\$ 661.02	\$ 1,079.06		
657	Hospice Pre-Counseling	*Based on	Physician's	Fee	Schedule					
659	Nursing Facility (Room And Board)	**Based on	Medicaid	Nursing	Facility Rate					
551	Service Intensity Add On Rate - Nurse		\$ 65.25	0.9089	\$ 49.07	\$ 16.18	\$ 44.60	\$ 60.78	\$ 60.78	\$ 15.20
561	Service Intensity Add On Rate - Social Worker		\$ 65.25	0.9089	\$ 49.07	\$ 16.18	\$ 44.60	\$ 60.78	\$ 60.78	\$ 15.20

