JOSH GREEN, M.D. GOVERNOR KE KIA'ĀINA



STATE OF HAWAII KA MOKU'ĀINA O HAWAI'I

DEPARTMENT OF HUMAN SERVICES

KA 'OIHANA MĀLAMA LAWELAWE KANAKA Med-QUEST Division - Finance Office P. O. Box 700190 Honolulu, Hawaii 96709-0190

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June 17, 2024

MEMORANDUM MEMO NO. QI-2411

TO: **QUEST Integration Health Plans**

Judy Mohr Peterson, PhD JP FROM:

Med-QUEST Division Administrator

SUBJECT: MEDICAID FEE-FOR-SERVICE HOSPICE INPATIENT NURSING FACILITY

RATES EFFECTIVE JULY 1, 2024 – DECEMBER 31, 2024

Please find the new Medicaid Fee-For-Service hospice nursing facility reimbursement rates for facilities listed below. These rates are effective for service date starting on or after July 1, 2024 for Hospice Inpatient Nursing Facility Care services – Revenue Codes 0658 and 0659.

PROVIDER NO.	PROVIDER NAME	DAILY RATE
055703	Hospice Hilo dba Hawaii Care Choices	\$395.09
251954	St. Francis Hospice	\$464.61

If you have any questions, please contact Ms. Myrna Maramag, Accountant at (808) 692-7983.