



STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
Med-QUEST Division  
Health Care Services Branch  
P. O. Box 700190  
Kapolei, Hawaii 96709-0190

September 15, 2008

MEMORANDUM

ACS M08-15

TO: Medicaid Hospice Providers

FROM: Kenneth S. Fink, MD, MGA, MPH, Med-QUEST Division Administrator *Kenneth S. Fink*

SUBJECT: NEW MEDICAID HOSPICE RATES EFFECTIVE  
OCTOBER 1, 2008 THROUGH SEPTEMBER 30, 2009

Please find the new Medicaid hospice reimbursement rates for participating providers below. The rates are effective for service dates starting on or after October 1, 2008.

**I. Oahu Hospice Providers**

| Services               | Daily Rates              |
|------------------------|--------------------------|
| Routine Home Care      | \$ 160.66                |
| Continuous Home Care   | \$ 936.87 (\$39.04/Hour) |
| Inpatient Respite Care | \$ 169.98                |
| General Inpatient Care | \$ 707.55                |

**II. Neighbor Island Hospice Providers**

| Services               | Daily Rates              |
|------------------------|--------------------------|
| Routine Home Care      | \$ 151.12                |
| Continuous Home Care   | \$ 881.22 (\$36.72/Hour) |
| Inpatient Respite Care | \$ 161.81                |
| General Inpatient Care | \$ 668.06                |

Should you have any questions, please feel free to contact Mr. Reuben Shimazu in the Med-QUEST Finance Office at 692-7983.

c: Reuben Shimazu