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State/Territory Name: Illinois

State Plan Amendment (SPA) #: 21-0007

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

Department of Health & Human Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



FINANCIAL MANAGEMENT GROUP
Division of Reimbursement Review

September 15, 2021

Theresa Eagleson, Director
Illinois Department of Healthcare and Family Services
201 South Grand Avenue East, 3rd Floor
Springfield, IL 62763-0001

RE: State Plan Amendment 21-0007

Dear Ms. Eagleson:

We have reviewed the proposed amendment to your Medicaid State plan submitted under transmittal number 21-0007. This amendment proposes to increase encounter rates for FQHCs.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. We have found that the proposed reimbursement methodology complies with applicable requirements and therefore have approved them with an effective date of April 1, 2021.

If you have any questions, please contact Debi Benson at Deborah.Benson@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Todd McMillion.

Todd McMillion
Director
Division of Reimbursement Review

Enclosure

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTER FOR MEDICARE AND MEDICAID SERVICES	1. TRANSMITTAL NUMBER 21-0007	2. STATE: ILLINOIS
	3. PROGRAM IDENTIFICATION: Title XIX of the <i>Social Security Act</i> (Medicaid)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE: April 1, 2021	

5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: Section 1902 of the Social Security Act 42 CFR 440.365	7. FEDERAL BUDGET IMPACT a. FFY 2021 - 23.4 million \$23.4 million b. FFY 2022 - 31.2 million \$31.2 million
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B, Page 31B3	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 4.19-B, Page 31B3

10. SUBJECT OF AMENDMENT
Reimbursement rate increase for federally qualified health centers.

11. GOVERNOR'S REVIEW (Check One)
 GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
 OTHER, AS SPECIFIED: Not submitted for review by prior approval.

12. SIGNATURE OF AGENCY OFFICIAL: 	16. RETURN TO: Department of Healthcare and Family Services Bureau of Program and Reimbursement Analysis Attn: Mary Doran 201 South Grand Avenue East Springfield, IL 62763-0001
13. TYPED NAME: <input checked="" type="checkbox"/> Theresa Eagleson	
14. TITLE: Director of Healthcare and Family Services	
15. DATE SUBMITTED: 6/25/2021	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: June 25, 2021	18. DATE APPROVED: September 15, 2021
PLAN APPROVED—ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: April 1, 2021	20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPED NAME: Todd McMillion	22. TITLE: Director, Division of Reimbursement Review
23. REMARKS: Pen and ink change made by the state	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Illinois

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES—
OTHER TYPE OF CARE—BASIS FOR REIMBURSEMENT**

xii. Alternative Payment Methodology and Managed Care Organizations

Beginning January 1, 2018, Centers providing care through a contractual arrangement with managed care organizations (MCOs) have the option to elect to receive payments from the MCOs that are at least equal to their FFS provider specific PPS rate. If a Center does not elect this option, the Department will make supplemental payments to the Center at least quarterly that equals the difference between the payment under the PPS rate and the payment provided by the MCO.

- 04/21
- xiii. Encounter rates for dates of service April 1, 2021 through June 30, 2021 will be set at a level 25.9% above the rates in effect on March 31, 2021.
 - xiv. Encounter rates for dates of service beginning July 1, 2021 and after, will be set at a level 11.5% above the rates in effect on March 31, 2021.
 - xv. At the end of each calendar year, rates as established in subsection xiv. will be trended annually effective January 1 of the next year by the MEI published by CMS for the most recent year.