

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Illinois

**AMOUNT, DURATION, AND SCOPE OF SERVICES**

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17. NURSE-MIDWIFE SERVICES

See definition of Advanced Practice Nursing under Section 25 of this Appendix.

18. HOSPICE SERVICES

=10/95 Hospice is a covered service for all eligible clients, including residents of intermediate and skilled care facilities, when provided by a Medicare certified hospice provider and in accordance with provisions contained in 42 CFR 418.1 through 418.405.

Covered services include:

- Nursing care;
- Physician services;
- Medical social services;
- Short term inpatient care;
- Medical appliances, supplies, drugs and biologicals;
- Home health aide services;
- Occupational therapy, physical therapy and speech-language pathology services to control symptoms; and
- Counseling services.

All services or treatments, which are medically necessary to correct or lessen health problems detected or suspected by the screening process, will be provided to EPSDT recipients.

12/10 In compliance with Section 2302 of the Patient Protection and Affordable Care Act, hospice services are available for children without foregoing any other service to which a child is entitled under Medicaid for treatment of a terminal condition.

19. CASE MANAGEMENT SERVICES

12/10 Case management services are defined in, and targeted to the groups specified in, Supplement 1 to Attachment 3.1-A.

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22. **HOSPICE PAYMENT RATES:** When the individual resides in a long term care facility, the Department shall provide payment of an add-on amount to the hospice for routine home care and continuous home care days at 95% of the facility's per diem rate established in accordance with procedures contained in the Medicaid State Plan and Attachment 4.19-D.
- 12/10 On or after October 1, 2010, the Medicaid hospice payment rates for care and services subject to the wage index will be published and updated annually by CMS for the following services:
1. Routine Home Care Day
  2. Continuous Home Care Day
  3. Inpatient Respite Day
  4. General Inpatient Day
23. **ADVANCED PRACTICE NURSING RATES:** Payment for Advanced Practice Nursing will be made as if the service was provided by a physician.