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State/Territory Name: IL

State Plan Amendment (SPA) #: 12-011

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
233 North Michigan Avenue, Suite 600
Chicago, Illinois 60601-5519



June 16, 2014

Julie Hamos, Director
Illinois Department of Healthcare and Family Services (HFS)
Prescott E. Bloom Building
201 South Grand Avenue East
Springfield, Illinois 62763-0001

ATTN: Theresa Eagleson

RE: TN 12-011

Dear Ms. Hamos:

Enclosed for your records is an approved copy of the following State Plan Amendment (SPA).

Transmittal #12-011 - Approves Illinois' request to revise the fee schedule for the cost of drugs provided by a non-pharmacy provider beginning July 21, 2012.

--Effective Date: April 1, 2012

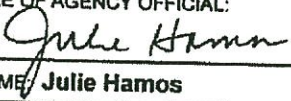
If you have any questions, please have a member of your staff contact Cathy Song at (312) 353-5184 or by email at Catherine.Song1@cms.hhs.gov.

Sincerely,

/s/

Verlon Johnson
Associate Regional Administrator
Division of Medicaid and Children's Health Operations

cc: Mary Doran, HFS
Teresa Hursey, HFS

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTER FOR MEDICARE AND MEDICAID SERVICES	1. TRANSMITTAL NUMBER 12-011	2. STATE: ILLINOIS
	3. PROGRAM IDENTIFICATION: Title XIX of the Social Security Act (Medicaid)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE: April 1, 2012	
5. TYPE OF PLAN MATERIAL (Check One) <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION: Section 1902(a) Social Security Act	7. FEDERAL BUDGET IMPACT a. FFY 2012—(\$3.0) million b. FFY 2013—(\$6.0) million	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B pages 33, 34 33C	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 4.19-B pages 33, 34 New Page	
10. SUBJECT OF AMENDMENT: Provider fee schedule updates.		
11. GOVERNOR'S REVIEW (Check One) <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <input checked="" type="checkbox"/> 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: Greg Wilson, Chief 201 South Grand Avenue East Springfield, IL 62763-0001	
13. TYPED NAME: Julie Hamos		
14. TITLE: Director of Healthcare and Family Services		
15. DATE SUBMITTED: 6/29/12		
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED: 06/29/12	18. DATE APPROVED: 06/16/14	
PLAN APPROVED—ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL: 04/01/12	20. SIGNATURE OF REGIONAL OFFICIAL: /s/	
21. TYPED NAME: Verlon Johnson	22. TITLE: Associate Regional Administrator	
23. REMARKS:		

State: **Illinois**

STATE PLAN UNDER TITLE XIX OF THE *SOCIAL SECURITY ACT*

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

#7. Physician Services, continued:

04/12 Effective April 1, 2012, the reimbursement for the cost of drugs provided by a non-pharmacy provider shall be at a rate equal to the lowest of the provider's usual and customary charge to the public, or:

- The Average Sales Price (ASP) plus 6 percent; or
- Beginning July 21, 2012, the state upper limit.
- In cases in which ASP is not available, and beginning July 21, 2012, no state upper limit has been developed, the Department's lowest maximum allowable price for all covered NDC's assigned to the HCPCS billing code determined in accordance with Section 4(a) of this attachment.

All rates are published on the Department's website in the Practitioner Fee Schedule located at www.hfs.illinois.gov/feeschedule/