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# **Territory Name: ILLINOIS**

# State Plan Amendment (SPA) #: 22-0038

This file contains the following documents in the order

listed:) Approval Letter2) 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

December 20, 2022

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

RE: State Plan Amendment 22-0038

Dear Ms. Eagleson:

We have reviewed the proposed amendment to your Medicaid State plan submitted under transmittal number IL-22-0038. This amendment provides for an add-on payment for general acute care hospitals for Outpatient Psychiatric Medicaid Services.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), and 1902(a)(30) 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 January 1, 2023.

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



Todd McMillion Director Division of Reimbursement Review

Enclosure

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER     2. STATE $2$ $2$ $0$ $0$ $3$ $8$ $1$ $1$ $1$ $1$		
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT O XIX O XXI		
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE January 1, 2023		
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 440.20	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2023 \$ 1,312,500 b FFY 2024 \$ 1,750,000		
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B, Page 11.1	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B, Page 11.1		
9. SUBJECT OF AMENDMENT Hospital Outpatient Psychiatric Services Add-On			
10. GOVERNOR'S REVIEW (Check One) O GOVERNOR'S OFFICE REPORTED NO COMMENT O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED:		
	15. RETURN TO Department of Healthcare and Family Services		
2. TYPED NAME heresa Eagleson 3. TITLE Bureau of Program and Policy Coordination Attn: Mary Doran 201 South Grand Avenue East			
Director of Healthcare and Family Services 14. DATE SUBMITTED 10/27/22	Springfield, IL 62763-0001		
FOR CMS US	SEONLY		
October 27, 2022	17. DATE APPROVED December 20, 2022		
PLAN APPROVED - ON			
January 1, 2023	19. SIGNATURE OF APPROVING OFFICIAL		
	. TITLE OF APPROVING OFFICIAL irector, Division of Reimbursement Review		
22. REMARKS	· · · · · · · · · · · · · · · · · · ·		

### 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

	b.	c., am	APG PPS reimbursement. Reimbursement under EAPG PPS, described in subsectio , shall be all-inclusive for all services provided by the hospital, without regard to the mount charged by a hospital. Except as provided in subsection b.iii., no separate embursement will be made for ancillary services or the services of hospital personnel		
		i.	Ou	tpatient hospital services reimbursed through the EAPG PPS shall include:	
			A.	Surgical services.	
07/20			B.	Diagnostic and therapeutic	
			C.	Emergency department services.	
			D.	Observation services.	
			E.	Psychiatric treatment services.	
		ii.	Re	served.	
07/20		iii.	Exe	ceptions to all-inclusive EAPG PPS rate.	
			A.	A hospital may bill separately for professional services of a physician who provided direct patient care.	
			B.	For the purpose of subsection iii.A., a physician means:	
				1. A physician salaried by the hospital. Physicians salaried by the hospital do not include radiologists, pathologists, nurse practitioners, or certified registered nurse anesthetists; no separate reimbursement will be allowed for such providers.	
				2. A physician who is reimbursed by the hospital through a contractual arrangement to provide direct patient care.	
				3. A group of physicians with a financial contract to provide emergency department care.	
01/23			C.	A general acute care hospital that provides more than 500 outpatient psychiatric Medicaid services to persons under 19 years of age in any calendar year prior to the rate year shall be paid a \$113 add-on payment effective with dates of service on or after January 1, 2023. Rate year means the calendar year beginning January 1, with the first rate year being calendar year 2023.	