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State/Territory Name: IL

State Plan Amendment (SPA) #: 24-0010

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S3-14-28 Baltimore, Maryland 21244-1850



Financial Management Group

June 24, 2024

Elizabeth M. Whitehorn, Director Illinois Department of Healthcare and Family Services 201 South Grand Avenue East, 3rd Floor Springfield, IL 62763-0001

RE: TN 24-0010

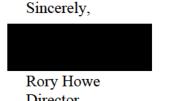
Dear Ms. Whitehorn:

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed Illinois state plan amendment (SPA) to Attachment 4.19-A IL-24-0010, which proposes to increase Graduate Medical Education (GME) payments to freestanding children's hospitals.

We reviewed your SPA submission for compliance with statutory requirements, including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2) of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of April 1, 2024. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Fred Sebree at via email at fredrick.sebree@cms.hhs.gov.



Director Financial Management Group

Enclosures

	1. TRANSMITTAL NUMBER 2. STATE
TRANSMITTAL AND NOTICE OF APPROVAL OF	
STATE PLAN MATERIAL	2 4 - 0 0 1 0 1 L
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE
CENTERS FOR MEDICAID & CHIP SERVICES	April 1, 2024
DEPARTMENT OF HEALTH AND HUMAN SERVICES	
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2024 \$ 2,650,000
42 CFR 447 Subpart C	b. FFY 2025 \$ 5,300,000
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
Attachment 4.19-A, page 136	OR ATTACHMENT (If Applicable)
	Attachment 4.19-a, page 136
9. SUBJECT OF AMENDMENT	
Increase in GME payments to freestanding children's hospitals.	
10. GOVERNOR'S REVIEW (Check One)	
O GOVERNOR'S OFFICE REPORTED NO COMMENT	• OTHER, AS SPECIFIED:
O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
<u> </u>	
	15. RETURN TO
	Department of Healthcare and Family Services Bureau of Program and Policy Coordination
12. TYPED NAME	Attn: Kati Hinshaw
Kelly Cunningnam	201 South Grand Avenue East Springfield, IL 62763-0001
13. TITLE	, J
Administrator Division of Medical Programs	
14. DATE SUBMITTED March 28, 2024	
FOR CMS USE ONLY	
	17. DATE APPROVED
3/28/2024	June 24, 2024
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL	19. SIGNATURE OF APPROVING OFFICIAL
4/1/2024	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
	Director, FMG
-	
22. REMARKS	

State: Illinois

METHODS AND STANDARDS FOR ESTABLISHING INPATIENT RATES FOR HOSPTIAL REIMBURSEMENT; MEDICAL ASSISTANCE-GRANT (MAG) and MEDICAL ASSISTANCE-NO GRANT (MANG)

- C. Payment. A qualifying hospital shall receive a payment that is the product of the following factors:
 - 1. the lesser of:
 - a. the sum of the hospital's annualized Medicaid Intern Resident Cost and annualized Medicaid IME payment, or
 - b. the product of:
 - i. the number of interns and residents as reported on Worksheet S3, Part 1, Col 9, line 14, and
 - ii. 120% of the statewide average cost per intern and resident for all eligible hospitals
 - 2. For payments through December 31, 2022, 22.6 percent.
 - 3. For payments on or after January 1, 2023:

a. 35 percent for safety net hospitals or hospitals with 100 or more Full Time Equivalent Residents and Interns, as reported on the hospital's Medicare cost report ending in Calendar year 2018; or

- b. 30 percent.
- 4. For payments on or after April 1, 2024, for a children's hospital, as defined in Chapter II.C.3.a, 100 percent.