



## 101ST GENERAL ASSEMBLY

### State of Illinois

2019 and 2020

SB1820

Introduced 2/15/2019, by Sen. Mattie Hunter

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-36 new

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that a managed care organization that contracts with a safety-net hospitals shall: (i) be liable for 50% of the amount due on any unadjudicated claims properly submitted by the safety-net hospital; (ii) if pre-admission certification is required by the managed care organization prior to authorizing inpatient care, pay the full admission rate to any contracted safety-net hospital that does not receive such authorization within 24 hours after the safety-net hospital first made its request for authorization; (iii) update its provider roster within 48 hours of contracting with a safety-net hospital and pay the full amount on any claim properly submitted by a contracted safety-net hospital even if the managed care organization fails to update its provider roster as required; and (iv) equally share those costs incurred by a contracted safety-net hospital for services provided to a Medicaid enrollee beyond the enrollee's scheduled date of discharge or transfer to another facility, if the managed care organization fails to facilitate the enrollee's discharge or transfer by the scheduled date.

LRB101 08914 KTG 54004 b

1 AN ACT concerning public aid.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Illinois Public Aid Code is amended by  
5 adding Section 5-36 as follows:

6 (305 ILCS 5/5-36 new)

7 Sec. 5-36. Payment requirements; MCOs; safety-net  
8 hospital.

9 (a) As used in this Section, "safety-net hospital" means a  
10 hospital as defined in Section 5-5e.1 of this Code.

11 (b) The following requirements apply to all managed care  
12 organizations under contract with the Department:

13 (1) A managed care organization shall be liable for 50%  
14 of the amount due on any unadjudicated claims properly  
15 submitted by a safety-net hospital.

16 (2) Any managed care organization that requires  
17 pre-admission certification prior to authorizing inpatient  
18 care shall pay the full admission rate to any contracted  
19 safety-net hospital that does not receive authorization to  
20 provide inpatient care within 24 hours after the safety-net  
21 hospital first made its request for authorization.

22 (3) A managed care organization shall update its  
23 provider roster within 48 hours of contracting with a

1       safety-net hospital. Any managed care organization that  
2       fails to update its provider roster as required under this  
3       paragraph shall still be liable for and must pay the full  
4       amount on any claim for a reimbursable service properly  
5       submitted by a contracted safety-net hospital.

6           (4) A managed care organization shall equally share  
7       those costs incurred by a contracted safety-net hospital  
8       for services provided to a Medicaid enrollee beyond the  
9       enrollee's scheduled date of discharge or transfer to  
10       another facility for proper post-acute care, if the managed  
11       care organization fails to facilitate the enrollee's  
12       discharge or transfer by the scheduled discharge or  
13       transfer date.