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AN ACT in relation to public aid.

- Be it enacted by the People of the State of Illinois,represented in the General Assembly:
- Section 5. The Illinois Public Aid Code is amended by
 changing Section 14-8 as follows:
- 6 (305 ILCS 5/14-8) (from Ch. 23, par. 14-8)
- 7 Sec. 14-8. Disbursements to Hospitals.

8 (a) For inpatient hospital services rendered on and after September 1, 1991, the Illinois Department shall 9 reimburse hospitals for inpatient services at an inpatient 10 payment rate calculated for each hospital based upon the 11 Medicare Prospective Payment System as set forth in Sections 12 13 1886(b), (d), (g), and (h) of the federal Social Security and the regulations, policies, and procedures 14 Act, promulgated thereunder, except as modified by this Section. 15 16 Payment rates for inpatient hospital services rendered on or after September 1, 1991 and on or before September 30, 1992 17 18 shall be calculated using the Medicare Prospective Payment rates in effect on September 1, 1991. 19 Payment rates for 20 inpatient hospital services rendered on or after October 1, 1992 and on or before March 31, 1994 shall be calculated 21 22 using the Medicare Prospective Payment rates in effect on September 1, 1992. Payment rates for inpatient hospital 23 services rendered on or after April 1, 1994 shall 24 be 25 calculated using the Medicare Prospective Payment rates (including the Medicare grouping methodology and weighting 26 27 factors as adjusted pursuant to paragraph (1) of this subsection) in effect 90 (ninety) days prior to the date of 28 For services rendered on or after July 1, 1995, 29 admission. 30 the reimbursement methodology implemented under this subsection shall not include those costs referred to in 31

1 Sections 1886(d)(5)(B) and 1886(h) of the Social Security 2 Act. The additional payment amounts required under Section 1886(d)(5)(F) of the Social Security Act, for hospitals 3 4 serving a disproportionate share of low-income or indigent patients, are not required under this Section. For hospital 5 inpatient services rendered on or after July 1, 1995, the 6 7 Illinois Department shall reimburse hospitals using the relative weighting factors and the base payment 8 rates 9 calculated for each hospital that were in effect on June 30, 1995, less the portion of such rates attributed by the 10 11 Illinois Department to the cost of medical education.

(1) The weighting factors established under Section
13 1886(d)(4) of the Social Security Act shall not be used
14 in the reimbursement system established under this
15 Section. Rather, the Illinois Department shall establish
16 by rule Medicaid weighting factors to be used in the
17 reimbursement system established under this Section.

(2) The Illinois Department shall define by rule 18 19 those hospitals or distinct parts of hospitals that shall 20 be exempt from the reimbursement system established under 21 this Section. In defining such hospitals, the Illinois Department shall take into consideration those hospitals 22 23 exempt from the Medicare Prospective Payment System as of September 1, 1991. For hospitals defined as exempt under 24 25 this subsection, the Illinois Department shall by rule establish a reimbursement system for payment of inpatient 26 hospital services rendered on and after September 1, 27 1991. For all hospitals that are children's hospitals as 28 defined in Section 5-5.02 of this Code, the reimbursement 29 30 methodology shall, through June 30, 1992, net of all applicable fees, at least equal each children's hospital 31 1990 ICARE payment rates, indexed to the current year by 32 application of the DRI hospital cost index from 1989 to 33 34 the year in which payments are made. Excepting county

1 providers as defined in Article XV of this Code, 2 hospitals licensed under the University of Illinois Hospital Act, and facilities operated by the Department 3 4 of Mental Health and Developmental Disabilities (or its successor, the Department of Human Services) for hospital 5 inpatient services rendered on or after July 1, 1995, the 6 7 Illinois Department shall reimburse children's hospitals, 8 as defined in 89 Illinois Administrative Code Section 9 149.50(c)(3), at the rates in effect on June 30, 1995, and shall reimburse all other hospitals at the rates in 10 11 effect on June 30, 1995, less the portion of such rates attributed by the Illinois Department to the cost of 12 medical education. For inpatient hospital 13 services provided on or after August 1, 1998, the Illinois 14 Department may establish by rule a means of adjusting the 15 16 rates of children's hospitals, as defined in 89 Illinois Administrative Code Section 149.50(c)(3), that did not 17 that definition on June 30, 1995, in order for the 18 meet inpatient hospital rates of such hospitals to take into 19 account the average inpatient hospital rates of those 20 21 children's hospitals that did meet the definition of 22 children's hospitals on June 30, 1995.

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(3) (Blank)

(4) Notwithstanding any other provision of this
Section, hospitals that on August 31, 1991, have a
contract with the Illinois Department under Section 3-4
of the Illinois Health Finance Reform Act may elect to
continue to be reimbursed at rates stated in such
contracts for general and specialty care.

30 (5) In addition to any payments made under this 31 subsection (a), the Illinois Department shall make the 32 adjustment payments required by Section 5-5.02 of this 33 Code; provided, that in the case of any hospital 34 reimbursed under a per case methodology, the Illinois Department shall add an amount equal to the product of the hospital's average length of stay, less one day, multiplied by 20, for inpatient hospital services rendered on or after September 1, 1991 and on or before September 30, 1992.

6 (b) (Blank)

(b-5) Excepting county providers as defined in Article 7 this Code, hospitals licensed under the University of 8 XV of 9 Illinois Hospital Act, and facilities operated by the Illinois Department of Mental Health and Developmental 10 11 Disabilities (or its successor, the Department of Human Services), for outpatient services rendered on or after July 12 1, 1995 and before July 1, 1998 the Illinois Department shall 13 reimburse children's hospitals, as defined in the Illinois 14 Administrative Code Section 149.50(c)(3), at the rates in 15 16 effect on June 30, 1995, less that portion of such rates attributed by the Illinois Department to the outpatient 17 18 indigent volume adjustment and shall reimburse all other 19 hospitals at the rates in effect on June 30, 1995, less the portions of such rates attributed by the Illinois Department 20 to the cost of medical education and attributed by the 21 22 Illinois Department to the outpatient indigent volume 23 adjustment. For outpatient services provided on or after July 1, 1998, reimbursement rates shall be established by 24 25 rule.

In addition to any other payments under this Code, 26 (C) 27 the Illinois Department shall develop hospital а disproportionate share reimbursement methodology that, 28 effective July 1, 1991, through September 29 30, 1992, shall 30 reimburse hospitals sufficiently to expend the fee monies described in subsection (b) of Section 14-3 of this Code and 31 federal matching funds received by the Illinois 32 the Department as a result of expenditures made by the 33 Illinois Department as required by this subsection (c) and Section 34

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14-2 that are attributable to fee monies deposited in the
 Fund, less amounts applied to adjustment payments under
 Section 5-5.02.

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4 (d) Critical Care Access Payments.

5 (1) In addition to any other payments made under 6 this Code, the Illinois Department shall develop a 7 reimbursement methodology that shall reimburse Critical 8 Care Access Hospitals for the specialized services that 9 qualify them as Critical Care Access Hospitals. No 10 adjustment payments shall be made under this subsection 11 on or after July 1, 1995.

12 (2) "Critical Care Access Hospitals" includes, but
13 is not limited to, hospitals that meet at least one of
14 the following criteria:

15 (A) Hospitals located outside of a
16 metropolitan statistical area that are designated as
17 Level II Perinatal Centers and that provide a
18 disproportionate share of perinatal services to
19 recipients; or

20 (B) Hospitals that are designated as Level I
21 Trauma Centers (adult or pediatric) and certain
22 Level II Trauma Centers as determined by the
23 Illinois Department; or

24 (C) Hospitals located outside of a
25 metropolitan statistical area and that provide a
26 disproportionate share of obstetrical services to
27 recipients.

Inpatient high volume adjustment. For hospital 28 (e) inpatient services, effective with rate periods beginning on 29 30 or after October 1, 1993, in addition to rates paid for inpatient services by the Illinois Department, the Illinois 31 32 Department shall make adjustment payments for inpatient services furnished by Medicaid high volume hospitals. 33 The Illinois Department shall establish by rule criteria for 34

qualifying as a Medicaid high volume hospital and shall
 establish by rule a reimbursement methodology for calculating
 these adjustment payments to Medicaid high volume hospitals.
 No adjustment payment shall be made under this subsection for
 services rendered on or after July 1, 1995.

(f) The Illinois Department shall modify its current 6 7 rules governing adjustment payments for targeted access, 8 critical care access, and uncompensated care to classify 9 adjustment payments as not being payments to those disproportionate share hospitals under Title XIX of the 10 11 federal Social Security Act. Rules adopted under this subsection shall not be effective with respect to services 12 rendered on or after July 1, 1995. The Illinois Department 13 has no obligation to adopt or implement any rules or make any 14 payments under this subsection for services rendered on or 15 16 after July 1, 1995.

(f-5) The State recognizes that adjustment payments to 17 hospitals providing certain services or incurring certain 18 19 costs may be necessary to assure that recipients of medical 20 assistance have adequate access necessary medical to 21 services. These adjustments include payments for teaching 22 costs and uncompensated care, trauma center payments, 23 rehabilitation hospital payments, perinatal center payments, obstetrical care payments, targeted access payments, Medicaid 24 25 high volume payments, and outpatient indigent volume or before April 1, 1995, the Illinois On 26 payments. Department shall issue recommendations 27 regarding (i) reimbursement mechanisms or adjustment payments to reflect 28 29 these costs and services, including methods by which the 30 payments may be calculated and the method by which the payments may be financed, and (ii) reimbursement mechanisms 31 32 or adjustment payments to reflect costs and services of federally qualified health centers with respect to recipients 33 of medical assistance. 34

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1 (g) If one or more hospitals file suit in any court 2 challenging any part of this Article XIV, payments to 3 hospitals under this Article XIV shall be made only to the 4 extent that sufficient monies are available in the Fund and 5 only to the extent that any monies in the Fund are not 6 prohibited from disbursement under any order of the court.

7 (h) Payments under the disbursement methodology
8 described in this Section are subject to approval by the
9 federal government in an appropriate State plan amendment.

(i) The Illinois Department may by rule establish
criteria for and develop methodologies for adjustment
payments to hospitals participating under this Article.

13 (Source: P.A. 89-21, eff. 7-1-95; 89-499, eff. 6-28-96; 14 89-507, eff. 7-1-97; 90-9, eff. 7-1-97; 90-14, eff. 7-1-97; 15 90-588, eff. 7-1-98.)

Section 99. Effective date. This Act takes effect upon becoming law.