



## 104TH GENERAL ASSEMBLY

### State of Illinois

2025 and 2026

HB4846

by Rep. Lindsey LaPointe

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5e.1

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that a safety-net hospital includes a behavioral health safety-net provider that: (i) is licensed or certified by the Department of Human Services, or otherwise authorized under State law, to provide behavioral health or substance use disorder treatment services; (ii) meets specified federal requirements for being designated a disproportionate share hospital, as defined by the Department of Healthcare and Family Services; (iii) accepts admissions 24 hours a day, 7 days a week, with no blackout periods; (iv) accepts patients who only need mental health or substance use disorder treatment; and (v) has a MIUR of at least 40% and a charity percent of at least 4%, or a MIUR of at least 50%.

LRB104 19791 KTG 33241 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 changing Section 5-5e.1 as follows:

6 (305 ILCS 5/5-5e.1)

7 Sec. 5-5e.1. Safety-Net Hospitals.

8 (a) A Safety-Net Hospital is an Illinois hospital that:

9 (1) is licensed by the Department of Public Health as  
10 a general acute care or pediatric hospital; and

11 (2) is a disproportionate share hospital, as described  
12 in Section 1923 of the federal Social Security Act, as  
13 determined by the Department; and

14 (3) meets one of the following:

15 (A) has a MIUR of at least 40% and a charity  
16 percent of at least 4%; or

17 (B) has a MIUR of at least 50%.

18 (a-5) "Safety-Net Hospital" includes a behavioral health  
19 safety-net provider. A behavioral health safety-net provider  
20 is a provider that:

21 (1) is licensed or certified by the Department of  
22 Human Services, or otherwise authorized under State law,  
23 to provide behavioral health or substance use disorder

1 treatment services;

2 (2) meets the requirements of subsection (b) of  
3 Section 1923 of the federal Social Security Act for being  
4 designated a disproportionate share hospital, as defined  
5 by the Department of Healthcare and Family Services;

6 (3) accepts admissions 24 hours a day, 7 days a week,  
7 with no blackout periods;

8 (4) accepts patients who only need mental health or  
9 substance use disorder treatment, and do not need  
10 hospitalization or medical assistance for any other  
11 reason; and

12 (5) meets one of the following:

13 (A) has a MIUR of at least 40% and a charity  
14 percent of at least 4%; or

15 (B) has a MIUR of at least 50%.

16 (b) Definitions. As used in this Section:

17 (1) "Charity percent" means the ratio of (i) the  
18 hospital's charity charges for services provided to  
19 individuals without health insurance or another source of  
20 third party coverage to (ii) the Illinois total hospital  
21 charges, each as reported on the hospital's OBRA form.

22 (2) "MIUR" means Medicaid Inpatient Utilization Rate  
23 and is defined as a fraction, the numerator of which is the  
24 number of a hospital's inpatient days provided in the  
25 hospital's fiscal year ending 3 years prior to the rate  
26 year, to patients who, for such days, were eligible for

1 Medicaid under Title XIX of the federal Social Security  
2 Act, 42 USC 1396a et seq., excluding those persons  
3 eligible for medical assistance pursuant to 42 U.S.C.  
4 1396a(a)(10)(A)(i)(VIII) as set forth in paragraph 18 of  
5 Section 5-2 of this Article, and the denominator of which  
6 is the total number of the hospital's inpatient days in  
7 that same period, excluding those persons eligible for  
8 medical assistance pursuant to 42 U.S.C.  
9 1396a(a)(10)(A)(i)(VIII) as set forth in paragraph 18 of  
10 Section 5-2 of this Article.

11 (3) "OBRA form" means form HFS-3834, OBRA '93 data  
12 collection form, for the rate year.

13 (4) "Rate year" means the 12-month period beginning on  
14 October 1.

15 (c) Beginning July 1, 2012 and ending on December 31,  
16 2026, a hospital that would have qualified for the rate year  
17 beginning October 1, 2011 or October 1, 2012 shall be a  
18 Safety-Net Hospital.

19 (c-5) Beginning July 1, 2020 and ending on December 31,  
20 2026, a hospital that would have qualified for the rate year  
21 beginning October 1, 2020 and was designated a federal rural  
22 referral center under 42 CFR 412.96 as of October 1, 2020 shall  
23 be a Safety-Net Hospital.

24 (d) No later than August 15 preceding the rate year, each  
25 hospital shall submit the OBRA form to the Department. Prior  
26 to October 1, the Department shall notify each hospital

1 whether it has qualified as a Safety-Net Hospital.

2 (e) The Department may promulgate rules in order to  
3 implement this Section.

4 (f) Nothing in this Section shall be construed as limiting  
5 the ability of the Department to include the Safety-Net  
6 Hospitals in the hospital rate reform mandated by Section  
7 14-11 of this Code and implemented under Section 14-12 of this  
8 Code and by administrative rulemaking.

9 (Source: P.A. 101-650, eff. 7-7-20; 101-669, eff. 4-2-21;  
10 102-886, eff. 5-17-22.)