**Section 140.459 Payment for Therapy Services**

a) Therapy services shall be paid at an all-inclusive rate that shall be the lower of the following. The rate shall not exceed the upper limits set in federal regulations at 42 CFR 447.321 (2012) and reimbursement is based upon the applicable modifier billed by the provider.

1) The provider's usual and customary charge for services.

2) The maximum reimbursement rate established by the Department.

b) Maximum Reimbursement Rates. The maximum reimbursement rate:

1) Effective July 1, 2020, therapy outpatient services provided by a hospital are reimbursed as defined in 148.140.

2) For all other therapy services (paid per quarter hour), rates shall be as published on the Department's website in the Therapy Fee Schedule located at http://www2.illinois/gov/hfs/MedicalProviders/MedicaidReimbursement/Pages/TherapyFeeSchedule.aspx.

(Source: Amended at 46 Ill. Reg. 5725, effective March 25, 2022)