**Section 148.300 Payment**

Effective for dates of service on or after July 1, 2014:

a) The Department will adjust rate methodologies used to reimburse hospitals to assure compliance with applicable aggregate and hospital-specific federal payment limitations.

b) Effect of Change of Ownership on Payments. When a hospital's ownership changes, payment for hospital services for each patient, including payment adjustments, will be made to the entity that is the legal owner on the date of discharge. Payment will not be prorated between the buyer and seller.

1) The owner on the date of discharge is entitled to submit a bill for all inpatient hospital services furnished regardless of when the client's coverage began or ended during a stay, or how long the stay lasted.

2) Each bill submitted must include all information necessary for the Department to compute the payment amount, whether some of the information is attributable to a period during which a different party legally owned the hospital.

c) Notwithstanding any other provisions of 89 Ill. Adm. Code 148, 149 or 152, a hospital that is located in a county of the State in which the Department mandates some or all of the beneficiaries of the Medical Assistance Program residing in the county to enroll in a Care Coordination Program, as defined in Section 5-30 of the Illinois Public Aid Code, shall not be eligible for any non-claims based payments not mandated by Article V-A of the Illinois Public Aid Code that it would otherwise be qualified to receive, unless the hospital is a Coordinated Care Participating Hospital, as defined in Section 148.25(f), no later than August 14, 2012, or 60 days after the first mandatory enrollment of a beneficiary in a Coordinated Care Program.

(Source: Amended at 38 Ill. Reg. 15165, effective July 2, 2014)