**Section 148.423 Hospital Outpatient Adjustment**

a) Qualifying Criteria. Effective July 1, 2020, the following categories of non-large public hospitals located in Illinois shall qualify for a Hospital Outpatient Adjustment Payment:

1) General Acute Care Hospitals, as defined in Section 148.25;

2) Safety-Net Hospitals, as defined in subsection (c)(2);

3) Psychiatric Hospitals, as defined in Section 148.25(d)(1); and

4) Critical Access Hospitals, as defined 42 CFR 485, Subpart F.

b) Payment. Each qualifying hospital shall receive an annual payment equal to the product of:

1) The hospital's calendar year 2019 outpatient claims; and

2) The rate assigned to the group to which the hospital qualifies:

A) General Acute Care Hospitals: $620;

B) Safety-Net Hospitals: $625;

C) Psychiatric Hospitals: $130; and

D) Critical Access Hospitals: $530.

c) Definitions. For purposes of this Section:

1) "Outpatient claims" means, for a given hospital, the sum of fee-for-service outpatient hospital claims accepted by the Department for outpatient services provided to recipients of medical assistance under Title XIX of the Social Security Act for general acute care, psychiatric care, and rehabilitation care, excluding days for individuals eligible for Medicare under Title XVIII of the Social Security Act (Medicaid/Medicare crossover claims), as tabulated from the Department's paid claims data for services occurring during calendar year 2019 as of May 11, 2020.

2) "Safety-Net Hospital" means a hospital, as defined in 89 Ill. Adm. Code 149.100(f)(4), except that stand-alone children's hospitals that are not specialty children's hospitals will not be included.

(Source: Added at 44 Ill. Reg. 19767, effective December 11, 2020)