



Rep. Greg Harris

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10200SB2294ham003

LRB102 10643 KTG 27329 a

1 AMENDMENT TO SENATE BILL 2294

2 AMENDMENT NO. _____. Amend Senate Bill 2294, AS AMENDED,
3 with reference to page and line numbers of House Amendment No.
4 2, on page 8, by replacing lines 16 through 25 with the
5 following:

6 "(305 ILCS 5/5-41 new)

7 Sec. 5-41. Inpatient hospitalization for opioid-related
8 overdose or withdrawal patients. Due to the disproportionately
9 high opioid-related fatality rates among African Americans in
10 under-resourced communities in Illinois, the lack of community
11 resources, the comorbidities experienced by these patients,
12 and the high rate of hospital inpatient recidivism associated
13 with this population when improperly treated, the Department
14 shall ensure that patients, whether enrolled under the Medical
15 Assistance Fee For Service program or enrolled with a Medicaid
16 Managed Care Organization, experiencing opioid-related
17 overdose or withdrawal are admitted on an inpatient status and

1 the provider shall be reimbursed accordingly, when deemed
2 medically necessary, as determined by either the patient's
3 primary care physician, or the physician or other practitioner
4 responsible for the patient's care at the hospital to which
5 the patient presents, using criteria established by the
6 American Society of Addiction Medicine. If it is determined by
7 the physician or other practitioner responsible for the
8 patient's care at the hospital to which the patient presents,
9 that a patient does not meet medical necessity criteria for
10 the admission, then the patient may be treated via observation
11 and the provider shall seek reimbursement accordingly. Nothing
12 in this Section shall diminish the requirements of a provider
13 to document medical necessity in the patient's record."; and

14 on page 9, by deleting lines 1 through 19; and

15 on page 12, by replacing lines 1 through 16 with the following:

16 " (305 ILCS 5/5-5.4k new)
17 Sec. 5-5.4k. Payments for long-acting injectable
18 medications for mental health or substance use disorders.
19 Notwithstanding any other provision of this Code, effective
20 for dates of service on and after January 1, 2022, the medical
21 assistance program shall separately reimburse at the
22 prevailing fee schedule, for long-acting injectable
23 medications administered for mental health or substance use

1 disorder in the hospital inpatient setting, and which are
2 compliant with the prior authorization requirements of this
3 Section. The Department, in consultation with a statewide
4 association representing a majority of hospitals and Managed
5 Care Organizations shall implement, by rule, reimbursement
6 policy and prior authorization criteria for the use of
7 long-acting injectable medications administered in the
8 hospital inpatient setting for the treatment of mental health
9 disorders."; and

10 on page 169, by deleting lines 4 through 23; and

11 by deleting pages 170 through 198; and

12 on page 199, by deleting lines 1 through 7.