## LRB093 03235 RLC 17272 a

- 1 AMENDMENT TO SENATE BILL 740
- 2 AMENDMENT NO. \_\_\_\_. Amend Senate Bill 740 by replacing
- 3 the title with the following:
- 4 "AN ACT concerning public assistance."; and
- 5 by replacing everything after the enacting clause with the
- 6 following:
- 7 "Section 5. The Illinois Public Aid Code is amended by
- 8 changing Section 5-5.02 as follows:
- 9 (305 ILCS 5/5-5.02) (from Ch. 23, par. 5-5.02)
- 10 Sec. 5-5.02. Hospital reimbursements.
- 11 (a) Reimbursement to Hospitals; July 1, 1992 through
- 12 September 30, 1992. Notwithstanding any other provisions of
- 13 this Code or the Illinois Department's Rules promulgated
- 14 under the Illinois Administrative Procedure Act,
- 15 reimbursement to hospitals for services provided during the
- 16 period July 1, 1992 through September 30, 1992, shall be as
- 17 follows:
- 18 (1) For inpatient hospital services rendered, or if
- 19 applicable, for inpatient hospital discharges occurring,
- on or after July 1, 1992 and on or before September 30,

1992, the Illinois Department shall reimburse hospitals inpatient services under the reimbursement for methodologies in effect for each hospital, and at the inpatient payment rate calculated for each hospital, of June 30, 1992. For purposes of this paragraph, "reimbursement methodologies" means all reimbursement methodologies that pertain to the provision of inpatient hospital services, including, but not limited to, any adjustments for disproportionate share, targeted access, critical care access and uncompensated care, as defined by the Illinois Department on June 30, 1992.

- (2) For the purpose of calculating the inpatient payment rate for each hospital eligible to receive quarterly adjustment payments for targeted access and critical care, as defined by the Illinois Department on June 30, 1992, the adjustment payment for the period July 1, 1992 through September 30, 1992, shall be 25% of the annual adjustment payments calculated for each eligible hospital, as of June 30, 1992. The Illinois Department shall determine by rule the adjustment payments for targeted access and critical care beginning October 1, 1992.
- payment rate for each hospital eligible to receive quarterly adjustment payments for uncompensated care, as defined by the Illinois Department on June 30, 1992, the adjustment payment for the period August 1, 1992 through September 30, 1992, shall be one-sixth of the total uncompensated care adjustment payments calculated for each eligible hospital for the uncompensated care rate year, as defined by the Illinois Department, ending on July 31, 1992. The Illinois Department shall determine by rule the adjustment payments for uncompensated care beginning October 1, 1992.

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- Inpatient payments. For inpatient services provided on or after October 1, 1993, in addition to rates paid for hospital inpatient services pursuant to the Illinois Health Finance Reform Act, as now or hereafter amended, or Illinois Department's prospective reimbursement methodology, or any other methodology used by the Illinois Department services, the Illinois Department shall make inpatient adjustment payments, in an amount calculated pursuant to the methodology described in paragraph (c) of this Section, to hospitals that the Illinois Department determines satisfy any one of the following requirements:
  - (1) Hospitals that are described in Section 1923 of the federal Social Security Act, as now or hereafter amended; or
  - (2) Illinois hospitals that have a Medicaid inpatient utilization rate which is at least one-half a standard deviation above the mean Medicaid inpatient utilization rate for all hospitals in Illinois receiving Medicaid payments from the Illinois Department; or
  - (3) Illinois hospitals that on July 1, 1991 had a Medicaid inpatient utilization rate, as defined in paragraph (h) of this Section, that was at least the mean Medicaid inpatient utilization rate for all hospitals in Illinois receiving Medicaid payments from the Illinois Department and which were located in a planning area with one-third or fewer excess beds as determined by the Illinois Health Facilities Planning Board, and that, as of June 30, 1992, were located in a federally designated Health Manpower Shortage Area; or

## (4) Illinois hospitals that:

(A) have a Medicaid inpatient utilization rate that is at least equal to the mean Medicaid inpatient utilization rate for all hospitals in Illinois receiving Medicaid payments from the

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- (B) also have a Medicaid obstetrical inpatient utilization rate that is at least one standard deviation above the mean Medicaid obstetrical inpatient utilization rate for all hospitals in Illinois receiving Medicaid payments from the Department for obstetrical services; or
- Any children's hospital, which means a hospital devoted exclusively to caring for children. A hospital which includes a facility devoted exclusively to caring for children that-is-separately-licensed-as-a-hospital-by a--municipality--prior--to--September--30,--1998 shall be considered a children's hospital to the degree that the hospital's Medicaid care is provided to children if either (i) the facility devoted exclusively to caring for children is separately licensed as a hospital by a municipality prior to September 30, 1998 or (ii) the hospital has been designated by the State as a Level III perinatal care facility, has a Medicaid Inpatient Utilization rate greater than 55% for the rate year 2003 disproportionate share determination, and has more than 10,000 qualified children days as defined by the Department in rulemaking.
- (c) Inpatient adjustment payments. The adjustment payments required by paragraph (b) shall be calculated based upon the hospital's Medicaid inpatient utilization rate as follows:
  - (1) hospitals with a Medicaid inpatient utilization rate below the mean shall receive a per day adjustment payment equal to \$25;
  - (2) hospitals with a Medicaid inpatient utilization rate that is equal to or greater than the mean Medicaid inpatient utilization rate but less than one standard deviation above the mean Medicaid inpatient

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utilization rate shall receive a per day adjustment payment equal to the sum of \$25 plus \$1 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds the mean Medicaid inpatient utilization rate;

- (3) hospitals with a Medicaid inpatient utilization rate that is equal to or greater than one standard deviation above the mean Medicaid inpatient utilization rate but less than 1.5 standard deviations above the mean Medicaid inpatient utilization rate shall receive a per day adjustment payment equal to the sum of \$40 plus \$7 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds one standard deviation above the mean Medicaid inpatient utilization rate; and
- (4) hospitals with а Medicaid inpatient utilization rate that is equal to or greater than 1.5 standard deviations above the mean Medicaid inpatient utilization rate shall receive a per day adjustment payment equal to the sum of \$90 plus \$2 for each one percent that the hospital's Medicaid utilization rate exceeds 1.5 standard deviations above the mean Medicaid inpatient utilization rate.
- Supplemental adjustment payments. In addition to the adjustment payments described in paragraph (c), hospitals as defined in clauses (1) through (5) of paragraph (b), excluding county hospitals (as defined in subsection (c) of Section 15-1 of this Code) and a hospital organized under the University of Illinois Hospital Act, shall be paid supplemental inpatient adjustment payments of \$60 per day. For purposes of Title XIX of the federal Social Security Act, these supplemental adjustment payments shall not be classified as adjustment payments to disproportionate share hospitals.

- 1 (e) The inpatient adjustment payments described 2 paragraphs (c) and (d) shall be increased on October 1, 1993 and annually thereafter by a percentage equal to the lesser 3 4 the increase in the DRI hospital cost index for the (i) 5 most recent 12 month period for which data are available, 6 the percentage increase in the statewide average 7 hospital payment rate over the previous year's statewide 8 average hospital payment rate. The sum of the inpatient 9 adjustment payments under paragraphs (c) and (d) hospital, other than a county hospital (as defined in 10 11 subsection (c) of Section 15-1 of this Code) or a hospital organized under the University of Illinois Hospital Act, 12 however, shall not exceed \$275 per day; that limit shall be 13 increased on October 1, 1993 and annually thereafter by a 14 15 percentage equal to the lesser of (i) the increase in the DRI 16 hospital cost index for the most recent 12-month period for which data are available or (ii) the percentage increase in 17 18 the statewide average hospital payment rate over the previous 19 year's statewide average hospital payment rate.
- 20 (f) Children's hospital inpatient adjustment payments.
  21 For children's hospitals, as defined in clause (5) of
  22 paragraph (b), the adjustment payments required pursuant to
  23 paragraphs (c) and (d) shall be multiplied by 2.0.
- 24 (g) County hospital inpatient adjustment payments. For 25 county hospitals, as defined in subsection (c) of Section 26 15-1 of this Code, there shall be an adjustment payment as 27 determined by rules issued by the Illinois Department.
- 28 (h) For the purposes of this Section the following 29 terms shall be defined as follows:
- 30 (1) "Medicaid inpatient utilization rate" means a 31 fraction, the numerator of which is the number of a 32 hospital's inpatient days provided in a given 12-month 33 period to patients who, for such days, were eligible for 34 Medicaid under Title XIX of the federal Social Security

Act, and the denominator of which is the total number of the hospital's inpatient days in that same period.

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- (2) "Mean Medicaid inpatient utilization rate" means the total number of Medicaid inpatient days provided by all Illinois Medicaid-participating hospitals divided by the total number of inpatient days provided by those same hospitals.
- 8 (3) "Medicaid obstetrical inpatient utilization 9 rate" means the ratio of Medicaid obstetrical inpatient 10 days to total Medicaid inpatient days for all Illinois 11 hospitals receiving Medicaid payments from the Illinois 12 Department.
- 13 (i) Inpatient adjustment payment limit. In order to
  14 meet the limits of Public Law 102-234 and Public Law 103-66,
  15 the Illinois Department shall by rule adjust disproportionate
  16 share adjustment payments.
- (j) University of Illinois Hospital inpatient adjustment payments. For hospitals organized under the University of Illinois Hospital Act, there shall be an adjustment payment as determined by rules adopted by the Illinois Department.
- 21 (k) The Illinois Department may by rule establish 22 criteria for and develop methodologies for adjustment 23 payments to hospitals participating under this Article.
- 24 (Source: P.A. 90-588, eff. 7-1-98; 91-533, eff. 8-13-99.)
- 25 Section 99. Effective date. This Act takes effect upon 26 becoming law.".