

Sen. William Delgado

Filed: 4/9/2008

	09500SB2173sam002 LRB095 15141 RPM 49144 a
1	AMENDMENT TO SENATE BILL 2173
2	AMENDMENT NO Amend Senate Bill 2173, AS AMENDED,
3	by replacing everything after the enacting clause with the
4	following:
5	"Section 5. The Children's Health Insurance Program Act is
6	amended by adding Section 65 as follows:
7	(215 ILCS 106/65 new)
8	Sec. 65. Fee schedule. Beginning on January, 1, 2009,
9	reimbursement for any physician service must not be lower than
10	60% of Medicare reimbursement in accordance with the Medicare
11	payment localities for Illinois. The physician fee schedule
12	rates must be adjusted to no lower than 80% of Medicare
13	reimbursement by January 1, 2010, and no lower than 100% of
14	Medicare reimbursement by January 1, 2011. All adjustments
15	shall be made without lowering any existing rates that may be
16	higher than the level required by this Section. Reimbursement

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1	rules and policies shall not be more restrictive than Medicare
2	physician payment rules and policies by January 1, 2010.
3	Payment for services must be made within 30 days after receipt
4	of a bill or claim for payment in accordance with Section 368a
5	of the Illinois Insurance Code.
6	Section 10. The Covering ALL KIDS Health Insurance Act is
7	amended by adding Section 52.5 as follows:

8 (215 ILCS 170/52.5 new)

9 Sec. 52.5. Fee schedule. Beginning on January, 1, 2009, the physician fee schedule for the Covering ALL KIDS Insurance 10 11 Program for any physician service must not be lower than 60% of 12 Medicare reimbursement in accordance with the Medicare payment 13 localities for Illinois. The physician fee schedule rates must 14 be adjusted to no lower than 80% of Medicare reimbursement by January 1, 2010, and no lower than 100% of Medicare 15 reimbursement by January 1, 2011. All adjustments shall be made 16 17 without lowering any existing rates that may be higher than the 18 level required by this Section. Reimbursement rules and 19 policies shall not be more restrictive than Medicare physician payment rules and policies by January 1, 2010. Payment for 20 services must be made within 30 days after receipt of a bill or 21 22 claim for payment in accordance with Section 368a of the 23 Illinois Insurance Code.

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1	Section 15. The Illinois Public Aid Code is amended by
2	adding Section 5-5.05 as follows:
3	(305 ILCS 5/5-5.05 new)
4	Sec. 5-5.05. Fee schedule. Notwithstanding any other
5	provision of this Article, beginning on January, 1, 2009,
6	reimbursement for any physician service must not be lower than
7	60% of Medicare reimbursement in accordance with the Medicare
8	payment localities for Illinois. The physician fee schedule
9	rates must be adjusted to no lower than 80% of Medicare
10	reimbursement by January 1, 2010, and no lower than 100% of
11	Medicare reimbursement by January 1, 2011. All adjustments
12	shall be made without lowering any existing rates that may be
13	higher than the level required by this Section. Reimbursement
14	rules and policies shall not be more restrictive than Medicare
15	physician payment rules and policies by January 1, 2010.
16	Payment for services must be made within 30 days after receipt
17	of a bill or claim or payment in accordance with Section 368a
18	of the Illinois Insurance Code.

19 Section 99. Effective date. This Act takes effect upon 20 becoming law.".