

**PROPOSED CHANGES IN METHODS AND STANDARDS
FOR ESTABLISHING MEDICAL ASSISTANCE PAYMENT RATES**

**STATE OF ILLINOIS
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES**

The Illinois Department of Healthcare and Family Services (HFS) is proposing a change in the methods and standards of payment to providers. The proposed change is effective for dates of service December 7, 2018, and after.

Critical Clinic Providers defined in 89 Illinois Administrative Code, Section 140.461 (h) (1) will be reimbursed under a per encounter rate system for medical, dental and behavioral health services.

These proposed changes will be budget neutral based upon current utilization patterns for the providers enrolled as critical clinic providers.

The proposed change is subject to approval by the federal Centers for Medicare and Medicaid Services and may be modified or revised during the approval process.

Any interested party may submit questions or comments concerning these proposed changes in reimbursement methods and standards. All questions or comments must be submitted in writing within thirty (30) days of the publication date of this notice and addressed to:

Bureau of Program and Policy Coordination
Division of Medical Programs
Healthcare and Family Services
201 South Grand Avenue East
Springfield, IL 62763-0001
E-mail address: HFS.bpra@illinois.gov

This notice may be viewed at the DHS local offices (except in Cook County). In Cook County, the notice may be reviewed at the Office of the Director, Illinois Department of Healthcare and Family Services, 401 South Clinton Street, 1st Floor, Chicago, Illinois. Comments received regarding this notice shall be published on the HFS web site at <http://www.illinois.gov/hfs/info/legal/PublicNotices/Pages/>.

This notice is being provided in accordance with federal requirements found at 42 *CFR* 447.205.