Illinois Health and Hospital Association

The Health Facilities and Services Review Board (HFSRB) has adopted amendments to the Health Facilities and Services Review Narrative and Planning Policies (77 Ill. Adm. Code 1100) and Processing, Classification and Policies Review Criteria (77 Ill. Adm. Code 1110), (Sept. 18 *Illinois Register*, pages 13722 to 13816). The adopted amendments, which are now effective, focus on standards for cardiac catheterization standards, clean-up language, and the deletion of certain service lines from HFSRB's purview. The adopted rules come after over two years of development, which included significant and comprehensive stakeholder feedback from hospitals, ambulatory surgical centers, and other providers.

This memo serves as a summary of the key changes adopted.

1100.40 – Incorporated or Referenced Materials
Definitions and citations were added to this part, including Federal Regulations and Private and Professional Association Standards.

1100.220 – Definitions
HFSRB revised or removed several definitions with further detail placed on different types of cardiac catheterization and related procedures.

1100.620 – Cardiac Catheterization
Utilization standards have been clarified that after the first two years of a program the facility is to still maintain the 200-procedure-a-year standard.

1110.110 – Background of the Applicant, Purpose of Project, Safety Net Impact Statement, and Alternatives – Information Requirements
This section was amended to require applications to include the number of referrals made to the applicant's facility from Federally Qualified Health Centers, Qualified Health Center Look-Alikes, or Rural Health Clinics, and a list of other facilities in the same planning or geographic service area that are like the applicant's facility. In the case of a hospital or ambulatory surgical center, the applicant must list all the licensed hospitals or ambulatory surgical centers in those prescribed areas.

1110.25 – Cardiac Catheterization
HFSRB has revised the review criteria for the cardiac catheterization category of service by making the following changes:

- Inclusion of the applicant's participation in a national registry.
- Clarification of the physician referral standards to include an attestation that patient referrals have not been used for another pending or approved application.
- Guidelines for the steps applicants must take when seeking the impact of their proposed project on other facilities in the area, as well as how that information will be reported by the State Board staff.
- Clarification that an applicant proposing a modernization project must show that it is continuing to meet utilization standards.
- Clarification of staffing requirements.
- Clarification of accreditation standards.

Repeal

As part of this rulemaking, HFSRB has repealed the following categories of service due to low utilization or as an out-of-date service line:

- Selected organ transplantation;
- Kidney transplantation;
- Subacute Care Hospital Model; and
- Children's Respite Care Center Alternative Health Care Model.

If you have questions, please contact us.
