



February 26, 2021

The Department of Healthcare and Family Services (HFS) has posted two separate provider notices related to COVID-19 issues. HFS posted a [Provider Notice](#) announcing the HFS CARES program reporting template is available, and posted a separate [Provider Notice](#) on Repricing Hospital Outpatient Claims Billed with COVID-19 Diagnosis and Procedure Codes.

[HFS CARES Program Reporting Template Available](#)

HFS issued a [notice](#) on February 24, 2021 to alert subrecipients of the HFS CARES Program supported by the Department of the Treasury Coronavirus Relief Fund (CRF) that the final reporting template is available. Post-award reporting will occur through the HFS CARES Portal. Links to additional details on the submission of a hospital's final report, the final reporting template and the template for the required cover letter can be found in the provider notice.

As stated in the [Provider Notice](#) dated January 15, 2021, subrecipients have until March 29, 2021 to submit the final reporting template and the supporting documentation. All unspent subaward funds must be returned to the Department.

[Repricing Hospital Outpatient Claims Billed with COVID-19 Diagnosis and Procedure Codes](#)

HFS issued a notice on February 25, 2021 to inform hospitals that certain outpatient claims containing COVID-19-related coding have been reprocessed. The information in this provider notice applies specifically to Medicaid fee-for-service claims; however, HealthChoice Illinois managed care plan claims have also been reprocessed.

A [Provider Notice](#) dated August 11, 2020 summarized two issues that allowed certain COVID-19 related outpatient claims to group and price incorrectly.

Questions regarding the HFS CARES Program reporting template may be directed to [IHA](#).

Questions regarding repricing hospital outpatient claims billed with COVID-19 diagnosis and procedure codes may be directed to [IHA](#).

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