



May 3, 2018

#### IHA Update: HFS Notices and Notifications Released March and April

**Alert: Managed Care Expansion Will NOT Be Delayed; Statewide Transition Continuing to Take Place Starting April 1, 2018**

The Illinois Dept. of Healthcare and Family Services (HFS) released a notice to inform providers that may have recently received erroneous information about a supposed delay in the April 1, 2018 statewide expansion of Medicaid managed care. This information, originating from a medical association, is inaccurate. As scheduled, managed care is expanding to every county in Illinois as of April 1, 2018.

[Click here to review the notice.](#)

#### HealthChoice Illinois Expansion - Schedule Update

HFS released a notice that effective immediately the HealthChoice Illinois program for dual-eligible individuals receiving long-term care and who are not enrolled in the Medicare-Medicaid Alignment Initiative (MMAI) or individuals receiving waiver services in the expansion counties has been postponed. This change affects only individuals receiving services in one of the following programs and who recently selected or were assigned to a health plan in the HealthChoice Illinois program in the expansion counties for an April 1, 2018 or later effective date.

- Community Care Program (Elderly Waiver)
- Home Services Program (Division of Rehabilitation Services Waivers)
- Supportive Living Program (SLP Waiver)
- Nursing home or long-term care facility (non-MMAI dual eligible).

See the [notice](#) for further details.

#### Hospital Cost Report Forms and Instructions

HFS issued a notice announcing that the Medicaid hospital cost report forms and instructions are available on its [Cost Report webpage](#). The Medicaid hospital cost report and related Medicare cost report are due within five months after the close of the hospital's fiscal year. No extension of the Medicaid hospital cost report due date will be granted by HFS unless the Centers for Medicare and Medicaid Services (CMS) grants an extension of the due date for the related Medicare cost report. Should CMS extend the Medicare cost report due date, the Department will extend the Medicaid cost report due date by an equivalent period of time.

[Click here to review the notice](#) for more details.

#### Continuity of Care Requirements for HealthChoice Illinois Managed Care Health Plans

HFS released a notice to remind providers of the requirements for health plans (MCOs) providing care to enrollees under the continuity of care provision in the HealthChoice Illinois contract.

Providers are reminded that MCOs must offer an initial 90-day transition period for enrollees new to a health plan, during which enrollees may maintain a current course of treatment with a provider who is not part of the health plan's provider network. This applies to all providers, including those providing behavioral health services and long-term services and supports.

See [notice](#) for further details.

Illinois Medicaid Program Advanced Cloud Technology (IMPACT) - Provider Daily Office Hours, Modifications and Licensure Renewal Information

This notice is a reminder to providers that the IMPACT system serves as the enrollment system for all Illinois Medical Programs providers to manage, monitor and update their own information. As IMPACT is a cloud-based technology system, there is no need to send paper enrollment documentation to the Department. The notice provides details about new information required in the IMPACT system, provider responsibility for routine changes via IMPACT and licensure or certification renewal specific information.

[Click here to review the notice](#) for more details.

Updated Practitioner Fee Schedule

[Click here for the fee schedule.](#)

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