



HFS

**Illinois Department of
Healthcare and Family Services**

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December 3, 2024

ST ANTHONYS-ROCKFORD

ATTN: Michelle Carrothers

5666 East State Street

Rockford, IL 61108

Dear Michelle:

RE: **ST ANTHONYS-ROCKFORD - 18007**

This letter is in response to an appeal of the 2025 disproportionate share hospital (DSH) adjustment determination. In accordance with 89 Illinois Administrative Code, Section 148.120(c), the Department utilizes cost report information supplied by the hospitals as well as certain days not available from the cost report, to determine the Medicaid inpatient utilization rates for all hospitals. After reviewing the additional data supplied upon appeal, the results are as follows:

Additional Medicaid eligible days requested for inclusion in the MIUR calculation for the annual DSH determination: 7,286

Additional Medicaid eligible days allowed per HFS review: 2,600

Final MIUR, DSH, MPA and MHVA rates after review:

		Rate Effective Date
Revised MIUR:	32.99%	10/01/2024 – 09/30/2025
Revised DSH Rate:	\$ 0.00	10/01/2024 – 09/30/2025
Revised MPA Rate:	\$ 0.00	01/01/2025 – 12/31/2025
Revised MHVA Rate:	\$ 0.00	01/01/2025 – 12/31/2025

Any claims paid with the original RY 2025 rates will be retroactively adjusted. This is the final decision by the Department regarding this matter.

Please contact our office at 217/785-0710 if you have questions.

Sincerely,

Dan Jenkins
Deputy Administrator
Division of Medical Programs