

Illinois Department of Healthcare and Family Services  
 Semi Annual Rate Maintenance Review: Safety Net Hospitals  
 July - December 2024 Review Period

<b>Annual IP Pool Amount</b>	<b>Initial Effective Rate</b>
\$255,001,220	\$956.02
95% of Original Effective Rate	\$908.22
<b>1/2 Annual Pool Amount</b>	<b>Actual Effective Rate</b>
\$127,500,610	\$1,269.98
95% of Initial Effective Rate Less Actual	(\$361.76)

<b>Annual OP Pool Amount</b>	<b>Initial Effective Rate</b>
\$291,431,527	\$430.65
95% of Original Effective Rate	\$409.12
<b>1/2 Annual Pool Amount</b>	<b>Actual Effective Rate</b>
\$145,715,764	\$425.35
95% of Initial Effective Rate Less Actual	(\$16.23)

IF the actual effective rate is less than 95% of the initial effective rate, the Department shall adjust the payment for each hospital to a level equal to no less than 95% of the initial rate.

Hospital Old ID	Hospital Name	HFS Class	July - Sept MCO Days	Oct - Dec MCO Days	Total Days	Additional Payment
			54,237	46,159	100,396	\$ -
3036	La Rabida Children's Hospital	Safety Net	1,306	1,202	2,508	\$ -
15010	OSF Saint Elizabeth Med Center	Safety Net	1,080	1,475	2,555	\$ -
3046	Humboldt Park Health	Safety Net	3,700	3,079	6,779	\$ -
5013	Touchette Regional Hospital	Safety Net	676	557	1,233	\$ -
3038	Loretto Hospital	Safety Net	2,062	1,574	3,636	\$ -
3075	Saint Anthony Hospital	Safety Net	3,142	2,987	6,129	\$ -
3102	Thorek Memorial Hospital	Safety Net	1,944	2,024	3,968	\$ -
3050	St Bernard Hosp & Hlth Care Ctr	Safety Net	3,260	2,524	5,784	\$ -
3071	Jackson Park Hospital & Med Ctr	Safety Net	3,489	2,592	6,081	\$ -
3068	South Shore Hospital	Safety Net	1,165	483	1,648	\$ -
3020	Methodist Hospital of Chicago	Safety Net	2,115	1,416	3,531	\$ -
3056	Swedish Covenant Hospital	Safety Net	3,978	2,955	6,933	\$ -
3107	Roseland Community Hospital	Safety Net	1,453	1,472	2,925	\$ -
7074	AMITA Adventist MC-GlenOaks	Safety Net	1,347	1,306	2,653	\$ -
3054	Presence Saint Mary Hospital	Safety Net	7,674	5,387	13,061	\$ -
1012	Presence Mercy Medical Center	Safety Net	1,976	805	2,781	\$ -
7007	Gateway Regional Medical Center	Safety Net	488	1,181	1,669	\$ -
3045	Mount Sinai Hospital	Safety Net	6,281	5,829	12,110	\$ -
3032	Holy Cross Hospital	Safety Net	2,237	1,966	4,203	\$ -
3011	St Mary's Hospital	Safety Net	886	762	1,648	\$ -
15001	West Suburban Med Ctr	Safety Net	1,804	2,456	4,260	\$ -
3042	Insight Hospital and Medical Center	Safety Net	1,336	1,419	2,755	\$ -
3085	Community First Medical Center	Safety Net	838	708	1,546	\$ -

July - Sept MCO OP Claims	Oct - Dec MCO OP Claims	Total Claims	Additional Payment	Total IP + OP
173,069	169,512	342,581	\$ -	\$ -
3,661	4,632	8,293	\$ -	\$ -
13,740	11,006	24,746	\$ -	\$ -
7,891	5,690	13,581	\$ -	\$ -
6,906	6,099	13,005	\$ -	\$ -
2,500	2,232	4,732	\$ -	\$ -
11,347	17,021	28,368	\$ -	\$ -
5,253	5,111	10,364	\$ -	\$ -
8,996	8,315	17,311	\$ -	\$ -
3,439	2,693	6,132	\$ -	\$ -
1,121	1,558	2,679	\$ -	\$ -
632	665	1,297	\$ -	\$ -
15,716	15,150	30,866	\$ -	\$ -
3,533	3,180	6,713	\$ -	\$ -
4,033	3,652	7,685	\$ -	\$ -
19,229	13,421	32,650	\$ -	\$ -
6,201	5,057	11,258	\$ -	\$ -
324	13,975	14,299	\$ -	\$ -
23,020	16,922	39,942	\$ -	\$ -
7,874	7,466	15,340	\$ -	\$ -
8,844	7,105	15,949	\$ -	\$ -
7,391	7,262	14,653	\$ -	\$ -
7,543	7,956	15,499	\$ -	\$ -
3,875	3,344	7,219	\$ -	\$ -

Illinois Department of Healthcare and Family Services  
Semi Annual Rate Maintenance Review: Public Hospitals  
July - December 2024 Review Period

<b>Annual IP Pool Amount</b>	<b>Initial Effective Rate</b>
\$9,278,527	\$2,165.86
95% of Original Effective Rate	\$2,057.57
<b>1/2 Annual Pool Amount</b>	<b>Actual Effective Rate</b>
\$4,639,264	\$2,663.18
95% of Initial Effective Rate Less Actual	(\$605.62)

<b>Annual OP Pool Amount</b>	<b>Initial Effective Rate</b>
\$18,807,693	\$125.32
95% of Original Effective Rate	\$119.05
<b>1/2 Annual Pool Amount</b>	<b>Actual Effective Rate</b>
\$9,403,847	\$107.28
95% of Initial Effective Rate Less Actual	\$11.77

IF the actual effective rate is less than 95% of the initial effective rate, the Department shall adjust the payment for each hospital to a level equal to no less than 95% of the initial rate.

Hospital Old ID	Hospital Name	HFS Class	Jan - Mar MCO Days	Oct - Dec MCO Days	Total Days	Additional Payment
			870	872	1,742	\$ -
2014	Franklin Hospital District	Public	0	11	11	\$ -
3062	Warner Hospital & Health Svcs	Public	0	0	-	\$ -
3091	Memorial Hospital	Public	2	3	5	\$ -
6003	Clay County Hospital	Public	25	11	36	\$ -
7004	Hammond-Henry Hospital	Public	8	3	11	\$ -
8015	Mason District Hospital	Public	5	7	12	\$ -
10005	Jersey Community Hospital	Public	18	0	18	\$ -
13012	Morrison Community Hospital	Public	6	0	6	\$ -
13013	Wabash General Hospital	Public	21	39	60	\$ -
13019	Massac Memorial Hospital	Public	12	3	15	\$ -
13021	McDonough District Hospital	Public	153	123	276	\$ -
13023	Hamilton Memorial Hosp District	Public	14	4	18	\$ -
14003	Washington County Hospital	Public	0	9	9	\$ -
16012	Pinckneyville Community Hosp	Public	2	10	12	\$ -
18010	Sarah D Culbertson Mem Hosp	Public	3	2	5	\$ -
18014	Crawford Memorial Hospital	Public	101	132	233	\$ -
19001	Salem Township Hospital	Public	2	22	24	\$ -
19010	CGH Medical Center	Public	491	481	972	\$ -
19023	Sparta Community Hospital	Public	7	12	19	\$ -

July - Sept MCO OP Claims	Oct - Dec MCO OP Claims	Total Claims	Additional Payment	Total IP + OP
50,211	37,444	87,655	\$ 1,031,832	\$ 1,031,832
2,258	1,973	4,231	\$ 49,805.27	\$ 49,805.27
1,035	934	1,969	\$ 23,178.11	\$ 23,178.11
1,086	817	1,903	\$ 22,401.19	\$ 22,401.19
2,199	1,929	4,128	\$ 48,592.80	\$ 48,592.80
1,977	1,605	3,582	\$ 42,165.56	\$ 42,165.56
1,593	1,101	2,694	\$ 31,712.45	\$ 31,712.45
3,044	1,716	4,760	\$ 56,032.40	\$ 56,032.40
879	1,600	2,479	\$ 29,181.58	\$ 29,181.58
4,414	2,963	7,377	\$ 86,838.44	\$ 86,838.44
2,252	1,748	4,000	\$ 47,086.05	\$ 47,086.05
4,572	3,278	7,850	\$ 92,406.37	\$ 92,406.37
1,398	1,027	2,425	\$ 28,545.92	\$ 28,545.92
671	503	1,174	\$ 13,819.75	\$ 13,819.75
1,002	808	1,810	\$ 21,306.44	\$ 21,306.44
1,416	1,378	2,794	\$ 32,889.60	\$ 32,889.60
3,773	3,207	6,980	\$ 82,165.15	\$ 82,165.15
3,045	1,905	4,950	\$ 58,268.98	\$ 58,268.98
8,747	7,543	16,290	\$ 191,757.93	\$ 191,757.93
4,850	1,409	6,259	\$ 73,677.89	\$ 73,677.89

Illinois Department of Healthcare and Family Services  
Semi Annual Rate Maintenance Review: Critical Access Hospitals  
July - December 2024 Review Period

<b>Annual IP Pool Amount</b> \$14,690,794	<b>Initial Effective Rate</b> \$2,441.14
<b>95% of Original Effective Rate</b>	<b>\$2,319.08</b>
<b>1/2 Annual Pool Amount</b> \$7,345,397	<b>Actual Effective Rate</b> \$3,230.17
<b>95% of Initial Effective Rate Less Actual</b>	<b>(\$911.08)</b>

<b>Annual OP Pool Amount</b> \$68,202,158	<b>Initial Effective Rate</b> \$229.01
<b>95% of Original Effective Rate</b>	<b>\$217.56</b>
<b>1/2 Annual Pool Amount</b> \$34,101,079	<b>Actual Effective Rate</b> \$195.96
<b>95% of Initial Effective Rate Less Actual</b>	<b>\$21.60</b>

IF the actual effective rate is less than 95% of the initial effective rate, the Department shall adjust the payment for each hospital to a level equal to no less than 95% of the initial rate.

Hospital Old ID	Hospital Name	HFS Class	July - Sept MCO Days	Oct - Dec MCO Days	Total Days	Additional Payment
			1,110	1,164	2,274	\$ -
1001	Genesis Medical Center	Critical Acce	9	2	11	\$ -
1006	Union County Hospital	Critical Acce	23	21	44	\$ -
3007	Carlinville Area Hospital	Critical Acce	20	35	55	\$ -
3009	Thomas H Boyd Memorial Hospital	Critical Acce	6	0	6	\$ -
3010	Memorial Hospital	Critical Acce	14	18	32	\$ -
4009	Marshall Browning Hospital	Critical Acce	14	12	26	\$ -
5004	Ferrell Hospital	Critical Acce	35	32	67	\$ -
5009	Advocate Eureka Hospital	Critical Acce	2	6	8	\$ -
6002	Fairfield Memorial Hospital	Critical Acce	8	31	39	\$ -
7006	Gibson Area Hosp & Hlth Servcs	Critical Acce	89	104	193	\$ -
7009	Midwest Medical Center	Critical Acce	12	0	12	\$ -
8005	Mercyhealth Hosp-Harvard Campus	Critical Acce	7	2	9	\$ -
8009	HSHS St Joseph's Hospital	Critical Acce	47	30	77	\$ -
8011	Hillsboro Area Hospital	Critical Acce	32	10	42	\$ -
8014	Hopedale Medical Complex	Critical Acce	0	0	-	\$ -
8018	Carle Hoopeston Region Hlth Ctr	Critical Acce	3	6	9	\$ -
10002	Memorial Hospital Jacksonville	Critical Acce	283	330	613	\$ -
11004	OSF Saint Luke Medical Center	Critical Acce	8	41	49	\$ -
12004	Lawrence County Memorial Hosp	Critical Acce	6	16	22	\$ -
12005	Abraham Lincoln Memorial Hosp	Critical Acce	36	22	58	\$ -
12007	HSHS St Francis Hospital	Critical Acce	149	104	253	\$ -
13005	OSF Saint Paul Medical Center	Critical Acce	40	48	88	\$ -
13009	OSF Holy Family Medical Center	Critical Acce	12	19	31	\$ -
13010	Kirby Medical Center	Critical Acce	6	5	11	\$ -
13024	St Joseph Memorial Hospital	Critical Acce	32	19	51	\$ -
16001	Pana Community Hospital	Critical Acce	3	2	5	\$ -
16002	Paris Community Hospital	Critical Acce	30	19	49	\$ -
16009	Illini Community Hospital	Critical Acce	22	0	22	\$ -
16011	OSF St. Clare	Critical Acce	22	35	57	\$ -
18001	Red Bud Regional Hospital	Critical Acce	0	51	51	\$ -
18004	Rochelle Community Hospital	Critical Acce	32	14	46	\$ -

July - Sept MCO OP Claims	Oct - Dec MCO OP Claims	Total Claims	Additional Payment	Total IP + OP
94,698	79,319	174,017	\$ 3,757,973	\$ 3,757,973
914	1,126	2,040	\$ 44,054.68	\$ 44,054.68
2,244	2,847	5,091	\$ 109,942.35	\$ 109,942.35
3,181	1,913	5,094	\$ 110,007.14	\$ 110,007.14
1,078	469	1,547	\$ 33,408.14	\$ 33,408.14
2,110	1,598	3,708	\$ 80,075.87	\$ 80,075.87
1,628	1,162	2,790	\$ 60,251.26	\$ 60,251.26
4,307	2,813	7,120	\$ 153,759.48	\$ 153,759.48
1,117	860	1,977	\$ 42,694.17	\$ 42,694.17
2,708	2,956	5,664	\$ 122,316.53	\$ 122,316.53
4,851	3,643	8,494	\$ 183,431.61	\$ 183,431.61
1,136	702	1,838	\$ 39,692.41	\$ 39,692.41
961	772	1,733	\$ 37,424.89	\$ 37,424.89
1,445	1,074	2,519	\$ 54,398.90	\$ 54,398.90
1,502	1,268	2,770	\$ 59,819.35	\$ 59,819.35
117	66	183	\$ 3,951.96	\$ 3,951.96
5,702	5,283	10,985	\$ 237,225.83	\$ 237,225.83
5,442	4,925	10,367	\$ 223,879.86	\$ 223,879.86
3,462	3,273	6,735	\$ 145,445.24	\$ 145,445.24
3,130	2,723	5,853	\$ 126,398.07	\$ 126,398.07
2,688	2,441	5,129	\$ 110,762.98	\$ 110,762.98
3,225	2,665	5,890	\$ 127,197.10	\$ 127,197.10
2,347	2,243	4,590	\$ 99,123.04	\$ 99,123.04
3,062	2,535	5,597	\$ 120,869.64	\$ 120,869.64
1,947	1,491	3,438	\$ 74,245.10	\$ 74,245.10
4,206	4,475	8,681	\$ 187,469.96	\$ 187,469.96
2,185	1,718	3,903	\$ 84,286.98	\$ 84,286.98
5,247	4,543	9,790	\$ 211,419.29	\$ 211,419.29
1,813	1,128	2,941	\$ 63,512.17	\$ 63,512.17
3,173	3,307	6,480	\$ 139,938.41	\$ 139,938.41
846	1,089	1,935	\$ 41,787.16	\$ 41,787.16
2,155	1,484	3,639	\$ 78,585.78	\$ 78,585.78

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			1,110	1,164	2,274	\$ -
18013	Hardin County General Hospital	Critical Acce	16	5	21	\$ -
19009	Community Hospital of Staunton	Critical Acce	0	7	7	\$ -
19028	NW Med Valley West Hospital	Critical Acce	17	48	65	\$ -
20001	Taylorville Memorial Hospital	Critical Acce	12	8	20	\$ -
22002	Fayette County Hospital & LTC	Critical Acce	22	41	63	\$ -
23001	Iroquois Mem Hosp & Res Home	Critical Acce	5	11	16	\$ -
19004	HSBS Good Shepherd Hospital	Critical Acce	36	10	46	\$ -

July - Sept MCO OP Claims	Oct - Dec MCO OP Claims	Total Claims	Additional Payment	Total IP + OP
94,698	79,319	174,017	\$ 3,757,973	\$ 3,757,973
1,179	972	2,151	\$ 46,451.78	\$ 46,451.78
1,464	1,021	2,485	\$ 53,664.65	\$ 53,664.65
2,267	1,865	4,132	\$ 89,232.33	\$ 89,232.33
2,394	1,901	4,295	\$ 92,752.39	\$ 92,752.39
3,867	1,896	5,763	\$ 124,454.48	\$ 124,454.48
2,175	2,131	4,306	\$ 92,989.94	\$ 92,989.94
1,423	941	2,364	\$ 51,051.60	\$ 51,051.60