

Illinois Department of Healthcare and Family Services
Directed Payment Calculation: High Medicaid Hospitals

Determination Period: January 1, 2025 - March 31, 2025

Data Period: July 1, 2024 - September 30, 2024

Inpatient

Hospital Old ID	Hospital Name	HFS Conf. Class	Admits	Relative Weight	Case Mix	Rate	Directed Payment
1003	OSF St Anthony's Health Center	High Medicaid	86	135.970	1.581	\$ 2,816.00	\$ 382,892
1007	Rush-Copley Medical Center	High Medicaid	698	751.917	1.077	\$ 2,816.00	\$ 2,117,399
2002	HSHS St Elizabeth's Hospital	High Medicaid	347	460.987	1.328	\$ 2,816.00	\$ 1,298,138
2006	MacNeal Hospital	High Medicaid	824	882.494	1.071	\$ 2,816.00	\$ 2,485,104
2015	Memorial Hospital	High Medicaid	901	1243.167	1.380	\$ 2,816.00	\$ 3,500,759
3005	Memorial Hosp of Carbondale	High Medicaid	938	867.726	0.925	\$ 2,816.00	\$ 2,443,515
3023	University of Chicago Medicine	High Medicaid	3,623	7645.052	2.110	\$ 2,816.00	\$ 21,528,466
3025	Ann & Robert H Lurie Child Hosp	High Medicaid	1,616	4183.809	2.589	\$ 2,816.00	\$ 11,781,607
3048	Rush University Medical Center	High Medicaid	1,841	3800.199	2.064	\$ 2,816.00	\$ 10,701,361
3073	Advocate Illinois Masonic MC	High Medicaid	554	890.093	1.607	\$ 2,816.00	\$ 2,506,501
3122	Northwestern Memorial Hospital	High Medicaid	2,005	4121.779	2.056	\$ 2,816.00	\$ 11,606,929
4001	OSF Sacred Heart	High Medicaid	164	174.243	1.062	\$ 2,816.00	\$ 490,668
4005	HSHS St Mary's Hospital	High Medicaid	66	113.135	1.714	\$ 2,816.00	\$ 318,589
5008	Elmhurst Hospital	High Medicaid	617	657.016	1.065	\$ 2,816.00	\$ 1,850,157
5011	NorthShore Univ HealthSystem	High Medicaid	1,022	1254.892	1.228	\$ 2,816.00	\$ 3,533,776
5012	Presence Saint Francis Hospital	High Medicaid	354	760.285	2.148	\$ 2,816.00	\$ 2,140,963
7002	OSF St Mary Medical Center	High Medicaid	286	279.162	0.976	\$ 2,816.00	\$ 786,121
8008	Herrin Hospital	High Medicaid	176	252.673	1.436	\$ 2,816.00	\$ 711,528
11001	Presence St Mary's Hospital	High Medicaid	336	399.064	1.188	\$ 2,816.00	\$ 1,123,765
11006	Riverside Medical Center	High Medicaid	682	647.709	0.950	\$ 2,816.00	\$ 1,823,950
13020	Centegra Hospital-McHenry	High Medicaid	777	952.670	1.226	\$ 2,816.00	\$ 2,682,720
13027	Loyola University Med Center	High Medicaid	1,152	2750.316	2.387	\$ 2,816.00	\$ 7,744,890
13046	Sarah Bush Lincoln Health Ctr	High Medicaid	472	481.052	1.019	\$ 2,816.00	\$ 1,354,643
13047	Anderson Hospital	High Medicaid	314	257.752	0.821	\$ 2,816.00	\$ 725,831

Illinois Department of Healthcare and Family Services
Directed Payment Calculation: High Medicaid Hospitals

Determination Period: January 1, 2025 - March 31, 2025

Data Period: July 1, 2024 - September 30, 2024

Outpatient

Hospital Old ID	Hospital Name	HFS Conf. Class	EAGPs	Relative Weight	Case Mix	Rate	Directed Payment
1003	OSF St Anthony's Health Center	High Medicaid	16,118	3455.282	0.214	\$ 856.00	\$ 2,957,721
1007	Rush-Copley Medical Center	High Medicaid	24,385	8807.827	0.361	\$ 856.00	\$ 7,539,500
2002	HSHS St Elizabeth's Hospital	High Medicaid	7,784	2421.466	0.311	\$ 856.00	\$ 2,072,775
2006	MacNeal Hospital	High Medicaid	15,563	5832.680	0.375	\$ 856.00	\$ 4,992,774
2015	Memorial Hospital	High Medicaid	31,839	6970.117	0.219	\$ 856.00	\$ 5,966,420
3005	Memorial Hosp of Carbondale	High Medicaid	17,770	6702.919	0.377	\$ 856.00	\$ 5,737,698
3023	University of Chicago Medicine	High Medicaid	74,249	24641.698	0.332	\$ 856.00	\$ 21,093,294
3025	Ann & Robert H Lurie Child Hosp	High Medicaid	112,011	38130.088	0.340	\$ 856.00	\$ 32,639,356
3048	Rush University Medical Center	High Medicaid	83,596	24851.124	0.297	\$ 856.00	\$ 21,272,562
3073	Advocate Illinois Masonic MC	High Medicaid	28,066	10777.981	0.384	\$ 856.00	\$ 9,225,951
3122	Northwestern Memorial Hospital	High Medicaid	88,426	14933.812	0.169	\$ 856.00	\$ 12,783,343
4001	OSF Sacred Heart	High Medicaid	12,027	2567.516	0.213	\$ 856.00	\$ 2,197,793
4005	HSHS St Mary's Hospital	High Medicaid	6,672	1740.398	0.261	\$ 856.00	\$ 1,489,780
5008	Elmhurst Hospital	High Medicaid	50,404	8425.284	0.167	\$ 856.00	\$ 7,212,043
5011	NorthShore Univ HealthSystem	High Medicaid	75,866	14827.798	0.195	\$ 856.00	\$ 12,692,595
5012	Presence Saint Francis Hospital	High Medicaid	17,791	4414.059	0.248	\$ 856.00	\$ 3,778,434
7002	OSF St Mary Medical Center	High Medicaid	23,995	3107.470	0.130	\$ 856.00	\$ 2,659,995
8008	Herrin Hospital	High Medicaid	35,256	5492.269	0.156	\$ 856.00	\$ 4,701,382
11001	Presence St Mary's Hospital	High Medicaid	15,749	5109.747	0.324	\$ 856.00	\$ 4,373,943
11006	Riverside Medical Center	High Medicaid	39,817	9007.201	0.226	\$ 856.00	\$ 7,710,164
13020	Centegra Hospital-McHenry	High Medicaid	22,341	7709.338	0.345	\$ 856.00	\$ 6,599,193
13027	Loyola University Med Center	High Medicaid	89,356	15759.309	0.176	\$ 856.00	\$ 13,489,968
13046	Sarah Bush Lincoln Health Ctr	High Medicaid	39,206	9719.711	0.248	\$ 856.00	\$ 8,320,073
13047	Anderson Hospital	High Medicaid	15,405	3816.934	0.248	\$ 856.00	\$ 3,267,296

Illinois Department of Healthcare and Family Services
Directed Payment Calculation: High Medicaid Hospitals

Determination Period: January 1, 2025 - March 31, 2025

Data Period: July 1, 2024 - September 30, 2024

Hospital Old ID	Hospital Name	HFS Conf. Class	Total Qtr Directed Payments	Monthly Payment
1003	OSF St Anthony's Health Center	High Medicaid	\$ 3,340,613	\$ 1,113,538
1007	Rush-Copley Medical Center	High Medicaid	\$ 9,656,899	\$ 3,218,966
2002	HSHS St Elizabeth's Hospital	High Medicaid	\$ 3,370,914	\$ 1,123,638
2006	MacNeal Hospital	High Medicaid	\$ 7,477,878	\$ 2,492,626
2015	Memorial Hospital	High Medicaid	\$ 9,467,180	\$ 3,155,727
3005	Memorial Hosp of Carbondale	High Medicaid	\$ 8,181,214	\$ 2,727,071
3023	University of Chicago Medicine	High Medicaid	\$ 42,621,760	\$ 14,207,253
3025	Ann & Robert H Lurie Child Hosp	High Medicaid	\$ 44,420,962	\$ 14,806,987
3048	Rush University Medical Center	High Medicaid	\$ 31,973,923	\$ 10,657,974
3073	Advocate Illinois Masonic MC	High Medicaid	\$ 11,732,452	\$ 3,910,817
3122	Northwestern Memorial Hospital	High Medicaid	\$ 24,390,272	\$ 8,130,091
4001	OSF Sacred Heart	High Medicaid	\$ 2,688,461	\$ 896,154
4005	HSHS St Mary's Hospital	High Medicaid	\$ 1,808,369	\$ 602,790
5008	Elmhurst Hospital	High Medicaid	\$ 9,062,200	\$ 3,020,733
5011	NorthShore Univ HealthSystem	High Medicaid	\$ 16,226,371	\$ 5,408,790
5012	Presence Saint Francis Hospital	High Medicaid	\$ 5,919,397	\$ 1,973,132
7002	OSF St Mary Medical Center	High Medicaid	\$ 3,446,115	\$ 1,148,705
8008	Herrin Hospital	High Medicaid	\$ 5,412,910	\$ 1,804,303
11001	Presence St Mary's Hospital	High Medicaid	\$ 5,497,709	\$ 1,832,570
11006	Riverside Medical Center	High Medicaid	\$ 9,534,114	\$ 3,178,038
13020	Centegra Hospital-McHenry	High Medicaid	\$ 9,281,913	\$ 3,093,971
13027	Loyola University Med Center	High Medicaid	\$ 21,234,858	\$ 7,078,286
13046	Sarah Bush Lincoln Health Ctr	High Medicaid	\$ 9,674,715	\$ 3,224,905
13047	Anderson Hospital	High Medicaid	\$ 3,993,127	\$ 1,331,042

Illinois Department of Healthcare and Family Services
Directed Payment Calculation: High Medicaid Hospitals

Determination Period: January 1, 2025 - March 31, 2025

Data Period: July 1, 2024 - September 30, 2024

Inpatient

Hospital Old ID	Hospital Name	HFS Conf. Class	Admits	Relative Weight	Case Mix	Rate	Directed Payment
14002	Edward Hospital	High Medicaid	506	723.085	1.429	\$ 2,816.00	\$ 2,036,206
15008	Advocate Christ Medical Center	High Medicaid	2,254	4756.569	2.110	\$ 2,816.00	\$ 13,394,499
16006	UnityPoint Health - Methodist	High Medicaid	1,173	1193.631	1.018	\$ 2,816.00	\$ 3,361,265
16007	OSF Saint Francis Medical Ctr	High Medicaid	1,722	3713.367	2.156	\$ 2,816.00	\$ 10,456,843
18005	Mercyhealth Hosp-Rockton Ave	High Medicaid	270	493.994	1.830	\$ 2,816.00	\$ 1,391,087
18006	SwedishAmerican Hospital	High Medicaid	1,746	1988.551	1.139	\$ 2,816.00	\$ 5,599,760
19006	Memorial Medical Center	High Medicaid	848	1494.859	1.763	\$ 2,816.00	\$ 4,209,522
19007	HSHS St John's Hospital	High Medicaid	1,189	1984.875	1.669	\$ 2,816.00	\$ 5,589,409
21002	Carle Foundation Hospital	High Medicaid	1,826	2794.055	1.530	\$ 2,816.00	\$ 7,868,059
23003	Vista Medical Center East	High Medicaid	304	441.116	1.451	\$ 2,816.00	\$ 1,242,184
23008	NW Med Central DuPage Hospital	High Medicaid	742	1026.519	1.383	\$ 2,816.00	\$ 2,890,677
31000	Franciscan Health Oly Fl/Chg	High Medicaid	666	838.931	1.260	\$ 2,816.00	\$ 2,362,431
3052	Presence Saint Joseph Hospital	High Medicaid	642	656.112	1.022	\$ 2,816.00	\$ 1,847,612
5006	Advocate Sherman Hospital	High Medicaid	446	470.577	1.055	\$ 2,816.00	\$ 1,325,145
18007	OSF Saint Anthony Medical Ctr	High Medicaid	455	861.722	1.894	\$ 2,816.00	\$ 2,426,610
21001	OSF Heart of Mary(Prev. Presence Covenant M	High Medicaid	173	216.978	1.254	\$ 2,816.00	\$ 611,009
4004	Decatur Memorial Hospital	High Medicaid	382	464.440	1.216	\$ 2,816.00	\$ 1,307,863

Illinois Department of Healthcare and Family Services
Directed Payment Calculation: High Medicaid Hospitals

Determination Period: January 1, 2025 - March 31, 2025

Data Period: July 1, 2024 - September 30, 2024

Outpatient

Hospital Old ID	Hospital Name	HFS Conf. Class	EAGPs	Relative Weight	Case Mix	Rate	Directed Payment
14002	Edward Hospital	High Medicaid	39,027	8227.009	0.211	\$ 856.00	\$ 7,042,320
15008	Advocate Christ Medical Center	High Medicaid	47,526	19561.576	0.412	\$ 856.00	\$ 16,744,709
16006	UnityPoint Health - Methodist	High Medicaid	38,193	6730.575	0.176	\$ 856.00	\$ 5,761,372
16007	OSF Saint Francis Medical Ctr	High Medicaid	90,335	20834.448	0.231	\$ 856.00	\$ 17,834,288
18005	Mercyhealth Hosp-Rockton Ave	High Medicaid	13,374	2505.053	0.187	\$ 856.00	\$ 2,144,325
18006	SwedishAmerican Hospital	High Medicaid	77,920	17281.593	0.222	\$ 856.00	\$ 14,793,043
19006	Memorial Medical Center	High Medicaid	64,510	12354.584	0.192	\$ 856.00	\$ 10,575,524
19007	HSHS St John's Hospital	High Medicaid	24,844	8864.771	0.357	\$ 856.00	\$ 7,588,244
21002	Carle Foundation Hospital	High Medicaid	126,980	26481.186	0.209	\$ 856.00	\$ 22,667,895
23003	Vista Medical Center East	High Medicaid	12,081	2865.510	0.237	\$ 856.00	\$ 2,452,876
23008	NW Med Central DuPage Hospital	High Medicaid	165,246	14406.429	0.087	\$ 856.00	\$ 12,331,903
31000	Franciscan Health Oly Fl/Chg	High Medicaid	13,917	3979.523	0.286	\$ 856.00	\$ 3,406,472
3052	Presence Saint Joseph Hospital	High Medicaid	10,951	2113.999	0.193	\$ 856.00	\$ 1,809,583
5006	Advocate Sherman Hospital	High Medicaid	25,757	5179.330	0.201	\$ 856.00	\$ 4,433,506
18007	OSF Saint Anthony Medical Ctr	High Medicaid	24,315	4720.005	0.194	\$ 856.00	\$ 4,040,325
21001	OSF Heart of Mary(Prev. Presence Covenant M	High Medicaid	6,077	1430.944	0.235	\$ 856.00	\$ 1,224,888
4004	Decatur Memorial Hospital	High Medicaid	25,928	6326.840	0.244	\$ 856.00	\$ 5,415,775

Illinois Department of Healthcare and Family Services
Directed Payment Calculation: High Medicaid Hospitals

Determination Period: January 1, 2025 - March 31, 2025

Data Period: July 1, 2024 - September 30, 2024

Hospital Old ID	Hospital Name	HFS Conf. Class	Total Qtr Directed Payments	Monthly Payment
14002	Edward Hospital	High Medicaid	\$ 9,078,526	\$ 3,026,175
15008	Advocate Christ Medical Center	High Medicaid	\$ 30,139,208	\$ 10,046,403
16006	UnityPoint Health - Methodist	High Medicaid	\$ 9,122,637	\$ 3,040,879
16007	OSF Saint Francis Medical Ctr	High Medicaid	\$ 28,291,130	\$ 9,430,377
18005	Mercyhealth Hosp-Rockton Ave	High Medicaid	\$ 3,535,412	\$ 1,178,471
18006	SwedishAmerican Hospital	High Medicaid	\$ 20,392,803	\$ 6,797,601
19006	Memorial Medical Center	High Medicaid	\$ 14,785,046	\$ 4,928,349
19007	HSHS St John's Hospital	High Medicaid	\$ 13,177,653	\$ 4,392,551
21002	Carle Foundation Hospital	High Medicaid	\$ 30,535,954	\$ 10,178,651
23003	Vista Medical Center East	High Medicaid	\$ 3,695,060	\$ 1,231,687
23008	NW Med Central DuPage Hospital	High Medicaid	\$ 15,222,580	\$ 5,074,193
31000	Franciscan Health Oly Fl/Chg	High Medicaid	\$ 5,768,903	\$ 1,922,968
3052	Presence Saint Joseph Hospital	High Medicaid	\$ 3,657,195	\$ 1,219,065
5006	Advocate Sherman Hospital	High Medicaid	\$ 5,758,652	\$ 1,919,551
18007	OSF Saint Anthony Medical Ctr	High Medicaid	\$ 6,466,934	\$ 2,155,645
21001	OSF Heart of Mary(Prev. Presence Covenant M	High Medicaid	\$ 1,835,896	\$ 611,965
4004	Decatur Memorial Hospital	High Medicaid	\$ 6,723,638	\$ 2,241,213