PROPOSED CHANGES IN METHODS AND STANDARDS FOR ESTABLISHING MEDICAL ASSISTANCE PAYMENT RATES

STATE OF ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

The Illinois Department of Healthcare and Family Services (HFS) is proposing a change in the methods and standards of payment to providers. The proposed change is effective for dates of service January 1, 2019, and after.

<u>Public Act 100-1102</u> requires the Department to cover medically necessary expenses for standard fertility preservation services when a necessary medical treatment may directly or indirectly cause iatrogenic infertility. Medically necessary fertility preservation services will be covered for participants ages 14 through 45 and will be limited to office visits, pelvic ultrasounds, sperm and oocyte cryopreservation and storage, medications/injectables and laboratory testing.

The payments apply to the physician, pharmacy and laboratory benefit categories. These proposed changes is estimated to increase expenditures by approximately \$5 million annually.

Any interested party may submit questions or comments concerning these proposed changes in reimbursement methods and standards. All questions or comments must be submitted in writing within thirty (30) days of the publication date of this notice and addressed to:

Bureau of Program and Policy Coordination
Division of Medical Programs
Healthcare and Family Services
201 South Grand Avenue East
Springfield, IL 62763-0001
E-mail address: HFS.bpra@illinois.gov

This notice may be viewed at the DHS local offices (except in Cook County). In Cook County, the notice may be reviewed at the Office of the Director, Illinois Department of Healthcare and Family Services, 401 South Clinton Street, 1st Floor, Chicago, Illinois. Comments received regarding this notice shall be published on the HFS web site at http://www.illinois.gov/hfs/info/legal/PublicNotices/Pages/.

This notice is being provided in accordance with federal requirements found at 42 CFR 447.205.