| From:        | Dalia Galvan Morales  |  |
|--------------|---|--|
| To:          | <u>HFS.BPPC</u>   |  |
| Subject:     | [External] Public Comment on Proposed Changes in Methods and Standards for Establishing Medical Assistance<br>Payment Rates |  |
| Date:        | Wednesday, November 29, 2023 4:43:16 PM   |  |
| Attachments: | image173214.png   |  |
|              | image191383.png   |  |
|              | image125019.png   |  |
|              | image216262.png   |  |
|              | image380952.png   |  |
|              | image751417.png   |  |

Bureau of Program and Policy Coordination Division of Medical Programs Healthcare and Family Services 201 South Grand Avenue East Springfield, IL 62763-0001

Re: Proposed Changes in Methods and Standards for Establishing Medical Assistance Payment Rates

Erie Family Health Centers (Erie) is a federally qualified health center providing primary health care, behavioral health care, oral health care, and other enabling services to over 88,000 patients at 13 locations across Chicago, Evanston, and Waukegan, IL. Seventy-three percent of Erie's patients have health coverage through Medicaid, forty-five percent are children under the age of 18 and sixty-two percent of patients are female.

Erie appreciates the opportunity to comment on The Illinois Department of Healthcare and Family Services (HFS) proposal to implement PA 103-0102. Erie had the opportunity to work with the Illinois Primary Health Care Association and partner FQHCs to advocate for this rate increase and to allow billing of mid-level behavioral health providers under the supervision of a clinical supervisor. Increasing Prospective Payment System rates for FQHCs, like Erie, by 11% will better equip Erie to continue providing health care services to underserved communities. Expanding the definition of billable behavioral health providers will help Erie have access to a wider pool of candidates to address workforce shortages.

Erie strongly supports HFS' proposed changes to implement PA 103-0102 and urges the federal Centers for Medicare and Medicaid Services to approve them. Questions about our comments may be directed to Nicole Kazee, Senior VP of Strategy and Business Development, at nkazee@eriefamilyhealth.org

Best regards,

## **Erie Family Health Centers**

1701 W Superior ST Chicago, Illinois 60622 Tel: 312-432-2762

Email: dmorales@eriefamilyhealth.org



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| From:        | Stefanie Garman   |
|--------------|---|
| То:          | HFS.BPPC  |
| Cc:          | Iris Wesley; Christina Smith; Andrea Peterson               |
| Subject:     | [External] Questions in Regard to proposed BH visit billing |
| Date:        | Tuesday, November 21, 2023 11:35:57 AM                      |
| Attachments: | image001.png  |

## Good Afternoon,

I am reaching out with a few questions in regard to the "Proposed Changes in Methods and Standards for Establishing Medical Assistance Payment Rates" for FQHC's. My questions specifically relate to the billing that is rendered by a sub-clinical behavioral health professional operating under the direct supervision of a psychiatrist, nurse practitioner with a psychiatric specialty, LCP, LCSW, LCPC, or LMFT.

When this is how the service is rendered, do we:

- Need to apply a modifier to show that they services were rendered by a sub-clinical behavioral health professional?
- Use the sub-clinical behavioral health professional as the "Performing Provider"?
  - If so.
    - Do we need to apply a supervisor Attestation to the documentation?
    - If not,
      - Do we apply to the direct supervisor as billing and performing provider?

We appreciate any further guidance that will help us to approach our billing appropriately and as compliant as we need to be with this new billing process.

Thank you,



Stefanie Garman, CPC, CH-CBS Deputy Director of FQHC Patient Billing & Coding SIU School of Medicine Department of Center for Family Medicine (P) 217-757-8123 (Email) <u>sgarman39@siumed.edu</u>



November 29, 2023

Bureau of Program and Policy Coordination Division of Medical Programs Healthcare and Family Services 201 South Grand Avenue East Springfield, IL 62736-001

## Comments on Public Notice of Proposed Changes in Methods and Standards for Establishing Medical Assistance Payment Rates

On behalf of the 54 community health center organizations it represents, the Illinois Primary Health Care Association (IPHCA) appreciates the opportunity to comment on the Illinois Department of Healthcare and Family Services' proposed changes to the methods and standards by which it reimburses community health centers (federally qualified health centers and health center look-alikes) to implement PA 103-0102, thereby increasing health center reimbursement rates by 11% and expanding the types of billable behavioral health providers.

IPHCA is a statewide trade association representing all 54 of Illinois' community health centers that care for 1.5 million patients annually across more than 400 service sites. These community-based clinics provide comprehensive primary and preventative medical care, mental health and substance use treatment as well as oral health services to babies, children, adults, and seniors in medically underserved communities.

Recognizing the inadequacy of community health center reimbursement rates in Illinois, especially compared to their counterparts in other states, including those closest to Illinois, IPHCA advocated strongly this past legislative session for a rate increase investment. Similarly, to meet the growing demand for behavioral health services, as well as the difficulty in attracting and retaining a workforce with enough capacity to meet the growth in demand, IPHCA also advocated for an expansion of billable behavioral health providers.

IPHCA is grateful that both of our legislative initiatives were included in PA 103-0102. Under this legislation, \$50 million will be used to increase community health center rates by 11% and \$10 million to allow certain mid-level behavioral health providers operating under the supervision of a clinical supervisor to bill for services. Combined, both measures will go a long way in supporting the community health center mission of providing high-quality, person-centered care to underserved communities throughout our state.

IPHCA strongly supports the Department's proposed changes to implement PA 103-0102 and urges the federal Centers for Medicare and Medicaid Services to approve them. Any questions regarding our comments may be directed to IPHCA's Chief Public Affairs Officer, Cyrus Winnett, at <u>cwinnett@iphca.org</u> or 217-541-7300.

Sincerely,

(CEmas

Ollie Idowu President + CEO