**Section 132.60 Rate Setting**

a) The State agency shall compute rates of reimbursement for services under this Part. The rates will be effective only after approval by HFS in its capacity as the Medicaid single state agency. Providers and the public shall be informed of any changes in the methods and standards of determining payment rates for services funded under this Part pursuant to 42 CFR 447.205 (2003).

b) Rate calculation

1) For services authorized by this Part to be reimbursed at fractions of or multiples of service hours, the State agency shall calculate rates on an hourly basis. Rates shall be calculated for each of the direct care staff classifications (RSAs, MHPs, QMHPs, and RNs) as the sum of average annual direct care wages and salaries (including paid benefits) and annual per person overhead and administrative costs necessary for direct care staff divided by billable annual direct care staff hours.

2) Average annual direct care wages and salaries shall be obtained for each of the 4 direct care staff classifications from the most recent State of Illinois Consolidated Financial Reports, as submitted to meet the requirements in Section 132.80(b). Annual per person overhead and administrative costs necessary for direct care staff shall be calculated from a model of reasonable and efficient operation and include consideration of the cost of administrative staff, support staff, clinical supervisory staff, interpreters and site operation. Billable annual direct care staff hours shall be calculated from a model of reasonable and efficient operation and include the consideration of direct care staffing time necessary to produce billable services that are not themselves billable, such as training, travel, documentation, and missed appointments.

A) Hourly crisis service rates shall be calculated in the manner described in subsection (b)(1) and multiplied by a factor of 1.6 to compensate for availability of 24 hours per day, 7 days per week.

B) Hourly rates for services that may be provided for groups of clients shall be calculated in the manner described in subsection (b)(2) and divided by the maximum allowable group size as specified in Section 132.150, with an allowance for incomplete attendance or participation.

C) Off-site rates shall be calculated to compensate providers for staff time necessary for travel to off-site treatment locations.

(Source: Amended at 36 Ill. Reg. 18582, effective December 13, 2012)