



Sen. Heather Steans

Filed: 4/24/2009

09600HB2343sam001

LRB096 09202 RPM 25607 a

1 AMENDMENT TO HOUSE BILL 2343

2 AMENDMENT NO. _____. Amend House Bill 2343 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Covering ALL KIDS Health Insurance Act is
5 amended by adding Section 52.5 as follows:

6 (215 ILCS 170/52.5 new)

7 Sec. 52.5. Specialty physician services; fee schedule.

8 (a) Beginning January 1, 2010, the physician fee schedule
9 for the Covering ALL KIDS Health Insurance Program must
10 increase to become competitive with those of non-governmental,
11 third-party health insurance programs. By January 1, 2012, the
12 payment for a pediatric specialty physician service must not be
13 lower than Medicare reimbursement in accordance with the
14 Medicare payment localities for Illinois. Payment for services
15 must be made within 30 days after receipt of a bill or claim
16 meeting the requirements of the Department of Healthcare and

1 Family Services.

2 (b) For payments made or authorized by the Department of
3 Healthcare and Family Services, the Department shall annually
4 increase pediatric specialty physician payments under
5 subsection (a) by an amount approximately equal to one-third of
6 the difference between the actual rates available for such
7 purposes on January 1, 2009 and the Medicare reimbursement
8 rates effective on January 1, 2007. If the General Assembly
9 determines that resources are not available to fully fund the
10 fee schedule for pediatric specialty physician care required by
11 this subsection (b), then, until such time as the General
12 Assembly determines that such funding is available, the
13 Department shall increase any payment for physicians who
14 provide pediatric specialty care services under the Covering
15 ALL KIDS Health Insurance Program by an amount proportionately
16 equivalent to any other increases for physicians, federally
17 qualified health centers, rural health centers, or other
18 non-institutional providers providing services to children for
19 any services provided under this Act.

20 Section 10. The Illinois Public Aid Code is amended by
21 adding Section 5-5.06 as follows:

22 (305 ILCS 5/5-5.06 new)

23 Sec. 5-5.06. Specialty physician services; fee schedule.

24 (a) Notwithstanding any other provisions of this Article,

1 beginning January 1, 2010, the physician fee schedule for
2 pediatric physician specialists must increase to become
3 competitive with those of non-governmental, third-party health
4 insurance programs. By January 1, 2012, the payment for a
5 pediatric specialty physician service must not be lower than
6 Medicare reimbursement in accordance with the Medicare payment
7 localities for Illinois. Payment for services must be made
8 within 30 days after receipt of a bill or claim meeting the
9 requirements of the Department of Healthcare and Family
10 Services.

11 (b) For payments made or authorized by the Department of
12 Healthcare and Family Services, the Department shall annually
13 increase pediatric specialty physician payments under
14 subsection (a) by an amount approximately equal to one-third of
15 the difference between the actual rates available for such
16 purposes on January 1, 2009 and the Medicare reimbursement
17 rates effective on January 1, 2007. If the General Assembly
18 determines that resources are not available to fully fund the
19 fee schedule for pediatric specialty physician care required by
20 this subsection (b), then, until such time as the General
21 Assembly determines that such funding is available, the
22 Department shall increase any payment for physicians who
23 provide pediatric specialty care services under the medical
24 assistance program by an amount proportionately equivalent to
25 any other increases for physicians, federally qualified health
26 centers, rural health centers, or other non-institutional

1 providers providing services to children for any services
2 provided under this Article.".