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State/Territory Name: Illinois

State Plan Amendment (SPA) #: 24-0008

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

December 4, 2024

Elizabeth Whitehorn
Director
Illinois Department of Healthcare and Family Services
201 South Grand Avenue East
3rd Floor
Springfield, IL 62763-0001

Re: Illinois State Plan Amendment (SPA) 24-0008

Dear Director Whitehorn:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) IL-24-0008. This amendment proposes to add coverage of home-visiting services in order to provide informational support, screening, and care coordination to pregnant and parenting individuals and young children through pregnancy and beyond.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 440.130. This letter informs you that Illinois' Medicaid SPA IL-24-0008 was approved on December 3, 2024, with an effective date of September 5, 2024.

If you have any questions, please contact Courtenay Savage at 312-353-3721 or via email at Courtenay.Savage@cms.hhs.gov.

Sincerely,

Ruth A. Hughes, Acting Director
Division of Program Operations

Enclosures

cc: Kelly Cunningham
Annet Godiksen
Kati Hinshaw

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 4 — 0 0 0 8

2. STATE

I L3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
SECURITY ACT

XIX



XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

September 5, 2024

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 440.130(c)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2024 \$ 2,175,000b. FFY 2025 \$ 26,100,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Appendix to Attachment 3.1-A, pages 13(A)(6) and 13(A)(7) (new
pages)

Attachment 4.19-B, Introduction page 2 and page 48(1)

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Attachment 4.19-B, Introduction page 2 and page 48(1)

9. SUBJECT OF AMENDMENT

Coverage of home visiting services

10. GOVERNOR'S REVIEW (Check One)



GOVERNOR'S OFFICE REPORTED NO

COMMENT COMMENTS OF GOVERNOR'S

OFFICE ENCLOSED NO REPLY RECEIVED



OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Signature]

12. TYPED NAME

Kelly Cunningham

13. TITLE

Medicaid Administrator

14. DATE SUBMITTED

September 26, 2024

15. RETURN TO

Department of Healthcare and Family Services

Bureau of Program and Policy Coordination

Attn: Kati Hinshaw

201 South Grand Avenue East

Springfield, IL 62763-0001

FOR CMS USE ONLY

16. DATE RECEIVED

September 26, 2024

17. DATE APPROVED

December 3, 2024

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

September 5, 2024

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Ruth A. Hughes

21. TITLE OF APPROVING OFFICIAL

Acting Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: **Illinois**

AMOUNT, DURATION, AND SCOPE OF SERVICES

09/24 13c. Preventive Services – Home Visiting Services

- A. **Service Description.** Home visiting services offer informational support, facilitate screening, and provide care coordination to pregnant and parenting individuals as needed to support healthy outcomes through pregnancy and beyond. Pursuant to 42 C.F.R. Section 440.130(c), home visiting services are provided as preventive services and must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice under state law to prevent disease or disability, prolong life, and/or promote the physical and mental health of the beneficiary.

Home visiting services will be covered when delivered in accordance with one of the State-approved research-informed or evidence-based models and include the following components:

1. Prenatal home visits:
 - i. Education about prenatal health warning signs and referrals or connections to healthcare providers;
 - ii. Monitoring for high blood pressure or other complications of pregnancy;
 - iii. Diet and nutritional education;
 - iv. Stress management;
 - v. Sexually Transmitted Diseases (STD) prevention education;
 - vi. Tobacco use screening and cessation education;
 - vii. Alcohol and other substance misuse screening and counseling;
 - viii. Depression screening;
 - ix. Domestic and intimate partner violence screening and education;
 - x. Pregnancy education;
 - xi. Linkage to medical benefits and community or other resources that can improve birth-related outcomes such as transportation; housing; alcohol, tobacco and drug cessation; WIC and SNAP, intimate partner violence resources, and HRSN services; and
 - xii. Referrals for services above when appropriate.
2. Postpartum home visits:
 - i. Education about postpartum health warning signs and symptoms, and referrals or connections to healthcare providers as needed;
 - ii. Diet and nutritional education;
 - iii. Stress management;
 - iv. Sexually Transmitted Diseases (STD) prevention education;
 - v. Tobacco use screening and cessation education;
 - vi. Alcohol and other substance misuse screening and counseling;
 - vii. Depression screening;
 - viii. Postpartum depression education;
 - ix. Domestic and intimate partner violence screening and education;
 - x. Breastfeeding support and education;

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: **Illinois**

AMOUNT, DURATION, AND SCOPE OF SERVICES

- xi. Guidance and education to obtain recommended preventive services, including well woman visits;
- xii. Medical assessment of the postpartum person and infant, within the scope of the model or provider's license or certification;
- xiii. Child development education;
- xiv. Maternal-infant safety assessment and education;
- xv. Counseling regarding postpartum recovery, family planning, and needs of a newborn;
- xvi. Assistance for the family in establishing a primary source of care and a primary care provider;
- xvii. Parenting skills, parent-child relationship building, and confidence building; and
- xviii. Linkage to medical benefits and community or other resources that can improve birth-related outcomes such as transportation; housing; alcohol, tobacco and drug cessation; WIC and SNAP, intimate partner violence resources, and HRSN services; and
- xix. Referrals for services above when appropriate.

3. Child Home Visits:

- i. Education about infant health warning signs and symptoms, when applicable, and referrals or connections to healthcare providers as needed;
- ii. Child developmental screening at major developmental milestones;
- iii. Parenting skills, parent-child relationship building, and confidence building;
- iv. Providing resources for breastfeeding support and education, including referrals to lactation consultant services;
- v. Linkage to medical benefits and community or other resources that can improve birth-related outcomes such as transportation; housing; alcohol, tobacco and drug cessation; WIC and SNAP, intimate partner violence resources, and HRSN services; and
- vi. Referral for services above when appropriate.

B. Qualified Provider Specifications. Home visiting services shall be provided by program sites that are fully accredited or meet standards designated by their national program offices. Home visitors employed by these accredited programs must meet national program education and experience standards, and receive comprehensive program specific training to become qualified practitioners able to provide all medically necessary prenatal, postpartum, or child home visiting services.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: **Illinois**

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES—
OTHER TYPE OF CARE—BASIS FOR REIMBURSEMENT**

<i>Preventive Services, Lactation Support Services</i>	<i>p. 48</i>	<i>Lactation Consultant</i>	<i>January 1, 2024</i>
Preventive Services, Doula Services	p. 48(1)	Doula	February 1, 2024
Preventive Services, Home Visiting	p. 48(1)	Home Visiting	September 5, 2024

Payment methodologies are listed in the Attachment 4.19-B, Methods and Standards for Establishing Payment Rates, pages that follow.

STATE PLAN UNDER TITLE XIX OF THE *SOCIAL SECURITY ACT*

State: **Illinois**

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES—
OTHER TYPE OF CARE—BASIS FOR REIMBURSEMENT**

02/24

- C. Doula Services. For services found under Appendix to Attachment 3.1-A, Doula Services, the state pays the lessor of: 1) provider charges, or 2) the maximum fee schedule rate for doula services. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of doula services. The agency's fee schedule rates were set as of the date on the Attachment 4.19-B Introduction Page and are published at: <https://hfs.illinois.gov/medicalproviders/medicaidreimbursement.html>.
- a. Doulas are eligible to receive quality incentive payments for improving the delivery of follow-up postpartum care.
- i. A \$50 quality incentive payment will be made when the doula facilitates and attends a postpartum visit with a practitioner in support of the birthing parent. Doula will receive a separate \$50 quality incentive payment if they facilitate and attend a second postpartum visit in support of the birthing parent.
- ii. A separate \$50 quality incentive payment will be made when the doula facilitates and attends the first newborn visit with a practitioner in support of the birthing parent.
- D. Home Visiting Services. For services found under Appendix to Attachment 3.1-A, Home Visiting Services, the state pays the lessor of: 1) provider charges, or 2) the maximum fee schedule rate established for the specific research-informed or evidence-based home visiting model. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of home visiting services. The agency's fee schedule rates were set as of the date on the Attachment 4.19-B Introduction Page and are published at: <https://hfs.illinois.gov/medicalproviders/medicaidreimbursement.html>.
- d. Rehabilitation – Reserved