

February 26, 2021

The Department of Healthcare and Family Services (HFS) has posted two separate provider notices related to COVID-19 issues. HFS posted a <u>Provider Notice</u> announcing the HFS CARES program reporting template is available, and posted a separate <u>Provider Notice</u> on Repricing Hospital Outpatient Claims Billed with COVID-19 Diagnosis and Procedure Codes.

HFS CARES Program Reporting Template Available

HFS issued a <u>notice</u> on February 24, 2021 to alert subrecipients of the HFS CARES Program supported by the Department of the Treasury Coronavirus Relief Fund (CRF) that the final reporting template is available. Post-award reporting will occur through the HFS CARES Portal. Links to additional details on the submission of a hospital's final report, the final reporting template and the template for the required cover letter can be found in the provider notice.

As stated in the <u>Provider Notice</u> dated January 15, 2021, subrecipients have until March 29, 2021 to submit the final reporting template and the supporting documentation. All unspent subaward funds must be returned to the Department.

Repricing Hospital Outpatient Claims Billed with COVID-19 Diagnosis and Procedure Codes

HFS issued a notice on February 25, 2021 to inform hospitals that certain outpatient claims containing COVID-19-related coding have been reprocessed. The information in this provider notice applies specifically to Medicaid fee-for-service claims; however, HealthChoice Illinois managed care plan claims have also been reprocessed.

A <u>Provider Notice</u> dated August 11, 2020 summarized two issues that allowed certain COVID-19 related outpatient claims to group and price incorrectly.

Questions regarding the HFS CARES Program reporting template may be directed to IHA.

Questions regarding repricing hospital outpatient claims billed with COVID-19 diagnosis and procedure codes may be directed to IHA.

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