



94TH GENERAL ASSEMBLY
State of Illinois
2005 and 2006
HB1144

Introduced 02/08/05, by Rep. Jack McGuire

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5.4

from Ch. 23, par. 5-5.4

Amends the Illinois Public Aid Code. Provides that the payment methodology for the nursing component that facilities licensed under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities must implement shall include, but is not limited to, specific adjustments for additional care and services required by persons with Alzheimer's Disease and related conditions.

LRB094 08965 RSP 39186 b

FISCAL NOTE ACT
MAY APPLY

1 AN ACT concerning public aid.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois Public Aid Code is amended by
5 changing Section 5-5.4 as follows:

6 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)

7 Sec. 5-5.4. Standards of Payment - Department of Public
8 Aid. The Department of Public Aid shall develop standards of
9 payment of skilled nursing and intermediate care services in
10 facilities providing such services under this Article which:

11 (1) Provide for the determination of a facility's payment
12 for skilled nursing and intermediate care services on a
13 prospective basis. The amount of the payment rate for all
14 nursing facilities certified by the Department of Public Health
15 under the Nursing Home Care Act as Intermediate Care for the
16 Developmentally Disabled facilities, Long Term Care for Under
17 Age 22 facilities, Skilled Nursing facilities, or Intermediate
18 Care facilities under the medical assistance program shall be
19 prospectively established annually on the basis of historical,
20 financial, and statistical data reflecting actual costs from
21 prior years, which shall be applied to the current rate year
22 and updated for inflation, except that the capital cost element
23 for newly constructed facilities shall be based upon projected
24 budgets. The annually established payment rate shall take
25 effect on July 1 in 1984 and subsequent years. No rate increase
26 and no update for inflation shall be provided on or after July
27 1, 1994 and before July 1, 2005, unless specifically provided
28 for in this Section. The changes made by this amendatory Act of
29 the 93rd General Assembly extending the duration of the
30 prohibition against a rate increase or update for inflation are
31 effective retroactive to July 1, 2004.

32 For facilities licensed by the Department of Public Health

1 under the Nursing Home Care Act as Intermediate Care for the
2 Developmentally Disabled facilities or Long Term Care for Under
3 Age 22 facilities, the rates taking effect on July 1, 1998
4 shall include an increase of 3%. For facilities licensed by the
5 Department of Public Health under the Nursing Home Care Act as
6 Skilled Nursing facilities or Intermediate Care facilities,
7 the rates taking effect on July 1, 1998 shall include an
8 increase of 3% plus \$1.10 per resident-day, as defined by the
9 Department.

10 For facilities licensed by the Department of Public Health
11 under the Nursing Home Care Act as Intermediate Care for the
12 Developmentally Disabled facilities or Long Term Care for Under
13 Age 22 facilities, the rates taking effect on July 1, 1999
14 shall include an increase of 1.6% plus \$3.00 per resident-day,
15 as defined by the Department. For facilities licensed by the
16 Department of Public Health under the Nursing Home Care Act as
17 Skilled Nursing facilities or Intermediate Care facilities,
18 the rates taking effect on July 1, 1999 shall include an
19 increase of 1.6% and, for services provided on or after October
20 1, 1999, shall be increased by \$4.00 per resident-day, as
21 defined by the Department.

22 For facilities licensed by the Department of Public Health
23 under the Nursing Home Care Act as Intermediate Care for the
24 Developmentally Disabled facilities or Long Term Care for Under
25 Age 22 facilities, the rates taking effect on July 1, 2000
26 shall include an increase of 2.5% per resident-day, as defined
27 by the Department. For facilities licensed by the Department of
28 Public Health under the Nursing Home Care Act as Skilled
29 Nursing facilities or Intermediate Care facilities, the rates
30 taking effect on July 1, 2000 shall include an increase of 2.5%
31 per resident-day, as defined by the Department.

32 For facilities licensed by the Department of Public Health
33 under the Nursing Home Care Act as skilled nursing facilities
34 or intermediate care facilities, a new payment methodology must
35 be implemented for the nursing component of the rate effective
36 July 1, 2003. The Department of Public Aid shall develop the

1 new payment methodology using the Minimum Data Set (MDS) as the
2 instrument to collect information concerning nursing home
3 resident condition necessary to compute the rate. The
4 Department of Public Aid shall develop the new payment
5 methodology to meet the unique needs of Illinois nursing home
6 residents while remaining subject to the appropriations
7 provided by the General Assembly. A transition period from the
8 payment methodology in effect on June 30, 2003 to the payment
9 methodology in effect on July 1, 2003 shall be provided for a
10 period not exceeding 2 years after implementation of the new
11 payment methodology as follows:

12 (A) For a facility that would receive a lower nursing
13 component rate per patient day under the new system than
14 the facility received effective on the date immediately
15 preceding the date that the Department implements the new
16 payment methodology, the nursing component rate per
17 patient day for the facility shall be held at the level in
18 effect on the date immediately preceding the date that the
19 Department implements the new payment methodology until a
20 higher nursing component rate of reimbursement is achieved
21 by that facility.

22 (B) For a facility that would receive a higher nursing
23 component rate per patient day under the payment
24 methodology in effect on July 1, 2003 than the facility
25 received effective on the date immediately preceding the
26 date that the Department implements the new payment
27 methodology, the nursing component rate per patient day for
28 the facility shall be adjusted.

29 (C) Notwithstanding paragraphs (A) and (B), the
30 nursing component rate per patient day for the facility
31 shall be adjusted subject to appropriations provided by the
32 General Assembly.

33 The payment methodology established under this Section shall
34 include, but is not limited to, specific adjustments for
35 additional care and services required by persons with
36 Alzheimer's Disease and related conditions.

1 For facilities licensed by the Department of Public Health
2 under the Nursing Home Care Act as Intermediate Care for the
3 Developmentally Disabled facilities or Long Term Care for Under
4 Age 22 facilities, the rates taking effect on March 1, 2001
5 shall include a statewide increase of 7.85%, as defined by the
6 Department.

7 For facilities licensed by the Department of Public Health
8 under the Nursing Home Care Act as Intermediate Care for the
9 Developmentally Disabled facilities or Long Term Care for Under
10 Age 22 facilities, the rates taking effect on April 1, 2002
11 shall include a statewide increase of 2.0%, as defined by the
12 Department. This increase terminates on July 1, 2002; beginning
13 July 1, 2002 these rates are reduced to the level of the rates
14 in effect on March 31, 2002, as defined by the Department.

15 For facilities licensed by the Department of Public Health
16 under the Nursing Home Care Act as skilled nursing facilities
17 or intermediate care facilities, the rates taking effect on
18 July 1, 2001 shall be computed using the most recent cost
19 reports on file with the Department of Public Aid no later than
20 April 1, 2000, updated for inflation to January 1, 2001. For
21 rates effective July 1, 2001 only, rates shall be the greater
22 of the rate computed for July 1, 2001 or the rate effective on
23 June 30, 2001.

24 Notwithstanding any other provision of this Section, for
25 facilities licensed by the Department of Public Health under
26 the Nursing Home Care Act as skilled nursing facilities or
27 intermediate care facilities, the Illinois Department shall
28 determine by rule the rates taking effect on July 1, 2002,
29 which shall be 5.9% less than the rates in effect on June 30,
30 2002.

31 Notwithstanding any other provision of this Section, for
32 facilities licensed by the Department of Public Health under
33 the Nursing Home Care Act as skilled nursing facilities or
34 intermediate care facilities, if the payment methodologies
35 required under Section 5A-12 and the waiver granted under 42
36 CFR 433.68 are approved by the United States Centers for

1 Medicare and Medicaid Services, the rates taking effect on July
2 1, 2004 shall be 3.0% greater than the rates in effect on June
3 30, 2004. These rates shall take effect only upon approval and
4 implementation of the payment methodologies required under
5 Section 5A-12.

6 Notwithstanding any other provisions of this Section, for
7 facilities licensed by the Department of Public Health under
8 the Nursing Home Care Act as skilled nursing facilities or
9 intermediate care facilities, the rates taking effect on
10 January 1, 2005 shall be 3% more than the rates in effect on
11 December 31, 2004.

12 For facilities licensed by the Department of Public Health
13 under the Nursing Home Care Act as Intermediate Care for the
14 Developmentally Disabled facilities or as long-term care
15 facilities for residents under 22 years of age, the rates
16 taking effect on July 1, 2003 shall include a statewide
17 increase of 4%, as defined by the Department.

18 Rates established effective each July 1 shall govern
19 payment for services rendered throughout that fiscal year,
20 except that rates established on July 1, 1996 shall be
21 increased by 6.8% for services provided on or after January 1,
22 1997. Such rates will be based upon the rates calculated for
23 the year beginning July 1, 1990, and for subsequent years
24 thereafter until June 30, 2001 shall be based on the facility
25 cost reports for the facility fiscal year ending at any point
26 in time during the previous calendar year, updated to the
27 midpoint of the rate year. The cost report shall be on file
28 with the Department no later than April 1 of the current rate
29 year. Should the cost report not be on file by April 1, the
30 Department shall base the rate on the latest cost report filed
31 by each skilled care facility and intermediate care facility,
32 updated to the midpoint of the current rate year. In
33 determining rates for services rendered on and after July 1,
34 1985, fixed time shall not be computed at less than zero. The
35 Department shall not make any alterations of regulations which
36 would reduce any component of the Medicaid rate to a level

1 below what that component would have been utilizing in the rate
2 effective on July 1, 1984.

3 (2) Shall take into account the actual costs incurred by
4 facilities in providing services for recipients of skilled
5 nursing and intermediate care services under the medical
6 assistance program.

7 (3) Shall take into account the medical and psycho-social
8 characteristics and needs of the patients.

9 (4) Shall take into account the actual costs incurred by
10 facilities in meeting licensing and certification standards
11 imposed and prescribed by the State of Illinois, any of its
12 political subdivisions or municipalities and by the U.S.
13 Department of Health and Human Services pursuant to Title XIX
14 of the Social Security Act.

15 The Department of Public Aid shall develop precise
16 standards for payments to reimburse nursing facilities for any
17 utilization of appropriate rehabilitative personnel for the
18 provision of rehabilitative services which is authorized by
19 federal regulations, including reimbursement for services
20 provided by qualified therapists or qualified assistants, and
21 which is in accordance with accepted professional practices.
22 Reimbursement also may be made for utilization of other
23 supportive personnel under appropriate supervision.

24 (Source: P.A. 92-10, eff. 6-11-01; 92-31, eff. 6-28-01; 92-597,
25 eff. 6-28-02; 92-651, eff. 7-11-02; 92-848, eff. 1-1-03; 93-20,
26 eff. 6-20-03; 93-649, eff. 1-8-04; 93-659, eff. 2-3-04; 93-841,
27 eff. 7-30-04.)