

## 95TH GENERAL ASSEMBLY State of Illinois 2007 and 2008 SB1144

Introduced 2/8/2007, by Sen. Donne E. Trotter

## SYNOPSIS AS INTRODUCED:

225 ILCS 25/18 305 ILCS 5/5-5 from Ch. 111, par. 2318 from Ch. 23, par. 5-5

Amends the Dental Practice Act. Provides that dental hygienists may provide, without the supervision of a dentist, fluoride treatments and teeth cleaning and sealant services to children who are eligible participants in the State's Medicaid program. Requires any dental hygienist who provides such services to provide the eligible child's parent or guardian with the name of a licensed dentist who is a provider of medical services under the program. Requires any dental hygienist who provides such services and who practices in a public health clinic to refer for treatment any child with needs outside of the dental hygienist's scope of practice. Effective January 1, 2008.

LRB095 08626 RAS 28809 b

FISCAL NOTE ACT MAY APPLY 1 AN ACT concerning regulation.

## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Dental Practice Act is amended by changing Section 18 as follows:
- 6 (225 ILCS 25/18) (from Ch. 111, par. 2318)
- 7 (Section scheduled to be repealed on January 1, 2016)
- 8 Sec. 18. Acts constituting the practice of dental hygiene;
- 9 limitations.
- 10 (a) A person practices dental hygiene within the meaning of 11 this Act when he or she performs the following acts under the 12 supervision of a dentist:
- (i) the operative procedure of dental hygiene,
  consisting of oral prophylactic procedures;
- 15 (ii) the exposure and processing of X-Ray films of the teeth and surrounding structures;
- (iii) the application to the surfaces of the teeth
  or gums of chemical compounds designed to be
  desensitizing agents or effective agents in the
  prevention of dental caries or periodontal disease;
- 21 (iv) all services which may be performed by a 22 dental assistant as specified by rule pursuant to 23 Section 17;

1	(v) administration and monitoring of nitrous oxide
2	upon successful completion of a training program
3	approved by the Department;
4	(vi) administration of local anesthetics upon
5	successful completion of a training program approved
6	by the Department; and
7	(vii) such other procedures and acts as shall be
8	prescribed by rule or regulation of the Department.
9	(b) A dental hygienist may be employed or engaged only:
10	(1) by a dentist;
11	(2) by a federal, State, county, or municipal agency or
12	institution;
13	(3) by a public or private school; or
14	(4) by a public clinic operating under the direction of
15	a hospital or federal, State, county, municipal, or other
16	public agency or institution.
17	(c) When employed or engaged in the office of a dentist, a
18	dental hygienist may perform, under general supervision, those
19	procedures found in items (i) through (iv) of subsection (a) of
20	this Section, provided the patient has been examined by the
21	dentist within one year of the provision of dental hygiene
22	services, the dentist has approved the dental hygiene services
23	by a notation in the patient's record and the patient has been
24	notified that the dentist may be out of the office during the
25	provision of dental hygiene services.
26	(d) If a patient of record is unable to travel to a dental

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office because of illness, infirmity, or imprisonment, a dental hygienist may perform, under the general supervision of a dentist, those procedures found in items (i) through (iv) of subsection (a) of this Section, provided the patient is located in a long-term care facility licensed by the State of Illinois, a mental health or developmental disability facility, or a State or federal prison. The dentist shall personally examine and diagnose the patient and determine which services are necessary to be performed, which shall be contained in an order to the hygienist and a notation in the patient's record. Such order must be implemented within 120 days of its issuance, and an updated medical history and observation of oral conditions must be performed by the hygienist immediately prior to beginning the procedures to ensure that the patient's health has not changed in any manner to warrant a reexamination by the dentist.

(e) School-based oral health care, consisting of limited to oral prophylactic procedures, sealants, fluoride treatments, may be provided by a dental hygienist under the general supervision of a dentist. A dental hygienist may not provide other dental hygiene treatment school-based setting, including but limited not to nitrous administration monitoring of or oxide or administration of local anesthetics. The school-based procedures may be performed provided the patient is located at a public or private school and the program is being conducted

by a State, county or local public health department initiative or in conjunction with a dental school or dental hygiene program. The dentist shall personally examine and diagnose the patient and determine which services are necessary to be performed, which shall be contained in an order to the hygienist and a notation in the patient's record. Any such order for sealants must be implemented within 120 days after its issuance. Any such order for oral prophylactic procedures or fluoride treatments must be implemented within 180 days after its issuance. An updated medical history and observation of oral conditions must be performed by the hygienist immediately prior to beginning the procedures to ensure that the patient's health has not changed in any manner to warrant a reexamination by the dentist.

- (f) Without the supervision of a dentist, a dental hygienist may (i) perform dental health education functions, (ii) and may record case histories and oral conditions observed, and (iii) provide fluoride treatments and teeth cleaning and sealant services, if appropriate, to children who are eligible participants in the State's Medicaid program, pursuant to Section 5-5 of the Illinois Public Aid Code.
- (f-5) Any dental hygienist who provides services to eligible children under item (iii) of subsection (f) of this Section shall attempt to identify and provide to the child's parent or guardian the name of a licensed dentist who is a provider of medical services under the State's Medicaid

- 1 program. Any dental hygienist who provides services to eligible
- 2 children under item (iii) of subsection (f) of this Section and
- 3 who practices in a public health clinic as set forth in
- 4 subdivision (4) of subsection (b) of this Section shall refer
- 5 for treatment any child with needs outside of the dental
- 6 hygienist's scope of practice.
- 7 (g) The number of dental hygienists practicing in a dental
- 8 office shall not exceed, at any one time, 4 times the number of
- 9 dentists practicing in the office at the time.
- 10 (Source: P.A. 93-113, eff. 1-1-04; 93-821, eff. 7-28-04.)
- 11 Section 10. The Illinois Public Aid Code is amended by
- 12 changing Section 5-5 as follows:
- 13 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)
- 14 Sec. 5-5. Medical services. The Illinois Department, by
- rule, shall determine the quantity and quality of and the rate
- of reimbursement for the medical assistance for which payment
- will be authorized, and the medical services to be provided,
- 18 which may include all or part of the following: (1) inpatient
- 19 hospital services; (2) outpatient hospital services; (3) other
- 20 laboratory and X-ray services; (4) skilled nursing home
- 21 services; (5) physicians' services whether furnished in the
- office, the patient's home, a hospital, a skilled nursing home,
- or elsewhere; (6) medical care, or any other type of remedial
- 24 care furnished by licensed practitioners; (7) home health care

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(8) private duty nursing service; (9) clinic services; (10) dental services, including prevention and services; treatment of periodontal disease and dental caries disease for pregnant women and fluoride treatments and teeth cleaning and sealant services provided to children by dental hygienists; (11) physical therapy and related services; (12) prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in the diseases of the eye, or by an optometrist, whichever the person may select; (13) other diagnostic, screening, preventive, and rehabilitative services; (14) transportation and such other expenses as may be necessary; (15) medical treatment of sexual assault survivors, as defined in Section 1a of the Sexual Assault Survivors Emergency Treatment Act, for injuries sustained as a result of the sexual assault, including examinations and laboratory tests to discover evidence which may be used in criminal proceedings arising from the sexual assault; (16) the diagnosis and treatment of sickle cell anemia; and (17) any other medical care, and any other type of remedial care recognized under the laws of this State, but not including abortions, or induced miscarriages or premature births, unless, in the opinion of a physician, such procedures are necessary for the preservation of the life of the woman seeking such treatment, or except an induced premature birth intended to produce a live viable child and such procedure is necessary for the health of the mother or her unborn child. The Illinois Department, by rule, shall

prohibit any physician from providing medical assistance to anyone eligible therefor under this Code where such physician has been found guilty of performing an abortion procedure in a wilful and wanton manner upon a woman who was not pregnant at the time such abortion procedure was performed. The term "any other type of remedial care" shall include nursing care and nursing home service for persons who rely on treatment by spiritual means alone through prayer for healing.

Notwithstanding any other provision of this Section, a comprehensive tobacco use cessation program that includes purchasing prescription drugs or prescription medical devices approved by the Food and Drug administration shall be covered under the medical assistance program under this Article for persons who are otherwise eligible for assistance under this Article.

Notwithstanding any other provision of this Code, the Illinois Department may not require, as a condition of payment for any laboratory test authorized under this Article, that a physician's handwritten signature appear on the laboratory test order form. The Illinois Department may, however, impose other appropriate requirements regarding laboratory test order documentation.

The Illinois Department of Healthcare and Family Services

Public Aid shall provide the following services to persons

eligible for assistance under this Article who are

participating in education, training or employment programs

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- operated by the Department of Human Services as successor to the Department of Public Aid:
- 3 (1) dental services, which shall include but not be limited to prosthodontics; and
- 5 (2) eyeglasses prescribed by a physician skilled in the 6 diseases of the eye, or by an optometrist, whichever the 7 person may select.

The Illinois Department, by rule, may distinguish and classify the medical services to be provided only in accordance with the classes of persons designated in Section 5-2.

The Illinois Department shall authorize the provision of, and shall authorize payment for, screening by low-dose mammography for the presence of occult breast cancer for women 35 years of age or older who are eligible for medical assistance under this Article, as follows: a baseline mammogram for women 35 to 39 years of age and an annual mammogram for women 40 years of age or older. All screenings shall include a physical breast exam, instruction on self-examination and information regarding the frequency of self-examination and its value as a preventative tool. As used in this Section, "low-dose mammography" means the x-ray examination of the breast using equipment dedicated specifically for mammography, including the x-ray tube, filter, compression device, image receptor, and cassettes, with an average radiation exposure delivery of less than one rad mid-breast, with 2 views for each breast.

Any medical or health care provider shall immediately recommend, to any pregnant woman who is being provided prenatal services and is suspected of drug abuse or is addicted as defined in the Alcoholism and Other Drug Abuse and Dependency Act, referral to a local substance abuse treatment provider licensed by the Department of Human Services or to a licensed hospital which provides substance abuse treatment services. The Department of <a href="Healthcare">Healthcare</a> and <a href="Family Services">Family Aid</a> shall assure coverage for the cost of treatment of the drug abuse or addiction for pregnant recipients in accordance with the Illinois Medicaid Program in conjunction with the Department of Human Services.

All medical providers providing medical assistance to pregnant women under this Code shall receive information from the Department on the availability of services under the Drug Free Families with a Future or any comparable program providing case management services for addicted women, including information on appropriate referrals for other social services that may be needed by addicted women in addition to treatment for addiction.

The Illinois Department, in cooperation with the Departments of Human Services (as successor to the Department of Alcoholism and Substance Abuse) and Public Health, through a public awareness campaign, may provide information concerning treatment for alcoholism and drug abuse and addiction, prenatal health care, and other pertinent programs directed at reducing

the number of drug-affected infants born to recipients of medical assistance.

Neither the Illinois Department of <u>Healthcare and Family</u>

<u>Services Public Aid</u> nor the Department of Human Services shall sanction the recipient solely on the basis of her substance abuse.

The Illinois Department shall establish such regulations governing the dispensing of health services under this Article as it shall deem appropriate. The Department should seek the advice of formal professional advisory committees appointed by the Director of the Illinois Department for the purpose of providing regular advice on policy and administrative matters, information dissemination and educational activities for medical and health care providers, and consistency in procedures to the Illinois Department.

The Illinois Department may develop and contract with Partnerships of medical providers to arrange medical services for persons eligible under Section 5-2 of this Code. Implementation of this Section may be by demonstration projects in certain geographic areas. The Partnership shall be represented by a sponsor organization. The Department, by rule, shall develop qualifications for sponsors of Partnerships. Nothing in this Section shall be construed to require that the sponsor organization be a medical organization.

The sponsor must negotiate formal written contracts with medical providers for physician services, inpatient and

- outpatient hospital care, home health services, treatment for alcoholism and substance abuse, and other services determined necessary by the Illinois Department by rule for delivery by Partnerships. Physician services must include prenatal and obstetrical care. The Illinois Department shall reimburse medical services delivered by Partnership providers to clients in target areas according to provisions of this Article and the Illinois Health Finance Reform Act, except that:
  - (1) Physicians participating in a Partnership and providing certain services, which shall be determined by the Illinois Department, to persons in areas covered by the Partnership may receive an additional surcharge for such services.
  - (2) The Department may elect to consider and negotiate financial incentives to encourage the development of Partnerships and the efficient delivery of medical care.
  - (3) Persons receiving medical services through Partnerships may receive medical and case management services above the level usually offered through the medical assistance program.

Medical providers shall be required to meet certain qualifications to participate in Partnerships to ensure the delivery of high quality medical services. These qualifications shall be determined by rule of the Illinois Department and may be higher than qualifications for participation in the medical assistance program. Partnership

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sponsors may prescribe reasonable additional qualifications 1

for participation by medical providers, only with the prior

written approval of the Illinois Department. 3

> Nothing in this Section shall limit the free choice of practitioners, hospitals, and other providers of medical services by clients. In order to ensure patient freedom of choice, the Illinois Department shall immediately promulgate all rules and take all other necessary actions so that provided services may be accessed from therapeutically certified optometrists to the full extent of the Illinois Optometric Practice Act of 1987 without discriminating between service providers.

> The Department shall apply for a waiver from the United States Health Care Financing Administration to allow for the implementation of Partnerships under this Section.

> The Illinois Department shall require health providers to maintain records that document the medical care and services provided to recipients of Medical Assistance under this Article. The Illinois Department shall require health care providers to make available, when authorized by the patient, in writing, the medical records in a timely fashion to other health care providers who are treating or serving persons eligible for Medical Assistance under this Article. All dispensers of medical services shall be required to maintain and retain business and professional records sufficient to fully and accurately document the nature, scope, details and

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receipt of the health care provided to persons eligible for medical assistance under this Code, in accordance with regulations promulgated by the Illinois Department. The rules and regulations shall require that proof of the receipt of prescription drugs, dentures, prosthetic devices eyeglasses by eligible persons under this Section accompany each claim for reimbursement submitted by the dispenser of such medical services. No such claims for reimbursement shall be approved for payment by the Illinois Department without such proof of receipt, unless the Illinois Department shall have put into effect and shall be operating a system of post-payment audit and review which shall, on a sampling basis, be deemed adequate by the Illinois Department to assure that such drugs, dentures, prosthetic devices and eyeglasses for which payment being made are actually being received by eligible recipients. Within 90 days after the effective date of this amendatory Act of 1984, the Illinois Department shall establish a current list of acquisition costs for all prosthetic devices and any other items recognized as medical equipment and supplies reimbursable under this Article and shall update such list on a quarterly basis, except that the acquisition costs of all prescription drugs shall be updated no less frequently than every 30 days as required by Section 5-5.12.

The rules and regulations of the Illinois Department shall require that a written statement including the required opinion of a physician shall accompany any claim for reimbursement for

abortions, or induced miscarriages or premature births. This statement shall indicate what procedures were used in providing such medical services.

The Illinois Department shall require all dispensers of medical services, other than an individual practitioner or group of practitioners, desiring to participate in the Medical Assistance program established under this Article to disclose all financial, beneficial, ownership, equity, surety or other interests in any and all firms, corporations, partnerships, associations, business enterprises, joint ventures, agencies, institutions or other legal entities providing any form of health care services in this State under this Article.

The Illinois Department may require that all dispensers of medical services desiring to participate in the medical assistance program established under this Article disclose, under such terms and conditions as the Illinois Department may by rule establish, all inquiries from clients and attorneys regarding medical bills paid by the Illinois Department, which inquiries could indicate potential existence of claims or liens for the Illinois Department.

Enrollment of a vendor that provides non-emergency medical transportation, defined by the Department by rule, shall be conditional for 180 days. During that time, the Department of <a href="Healthcare">Healthcare</a> and <a href="Family Services">Family Services</a> <a href="Public Aid">Public Aid</a> may terminate the vendor's eligibility to participate in the medical assistance program without cause. That termination of eligibility is not

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subject to the Department's hearing process.

The Illinois Department shall establish policies, procedures, standards and criteria by rule for the acquisition, repair and replacement of orthotic and prosthetic devices and durable medical equipment. Such rules shall provide, but not be limited to, the following services: (1) immediate repair or replacement of such devices by recipients without medical rental, lease, authorization; and (2) purchase or lease-purchase of durable medical equipment а cost-effective manner, taking into consideration the recipient's medical prognosis, the extent of the recipient's needs, and the requirements and costs for maintaining such equipment. Such rules shall enable a recipient to temporarily acquire and use alternative or substitute devices or equipment pending repairs or replacements of any device or equipment previously authorized for such recipient by the Department.

The Department shall execute, relative to the nursing home prescreening project, written inter-agency agreements with the Department of Human Services and the Department on Aging, to effect the following: (i) intake procedures and common eligibility criteria for those persons who are receiving non-institutional services; and (ii) the establishment and development of non-institutional services in areas of the State where they are not currently available or are undeveloped.

The Illinois Department shall develop and operate, in cooperation with other State Departments and agencies and in

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- 1 compliance with applicable federal laws and regulations,
- 2 appropriate and effective systems of health care evaluation and
- 3 programs for monitoring of utilization of health care services
- 4 and facilities, as it affects persons eligible for medical
- 5 assistance under this Code.
- 6 The Illinois Department shall report annually to the
- 7 General Assembly, no later than the second Friday in April of
- 8 1979 and each year thereafter, in regard to:
- 9 (a) actual statistics and trends in utilization of 10 medical services by public aid recipients;
  - (b) actual statistics and trends in the provision of the various medical services by medical vendors;
  - (c) current rate structures and proposed changes in those rate structures for the various medical vendors; and
  - (d) efforts at utilization review and control by the Illinois Department.

The period covered by each report shall be the 3 years ending on the June 30 prior to the report. The report shall include suggested legislation for consideration by the General Assembly. The filing of one copy of the report with the Speaker, one copy with the Minority Leader and one copy with the Clerk of the House of Representatives, one copy with the President, one copy with the Minority Leader and one copy with the Secretary of the Senate, one copy with the Legislative Research Unit, and such additional copies with the State Government Report Distribution Center for the General Assembly

- 1 as is required under paragraph (t) of Section 7 of the State
- 2 Library Act shall be deemed sufficient to comply with this
- 3 Section.
- 4 (Source: P.A. 92-16, eff. 6-28-01; 92-651, eff. 7-11-02;
- 5 92-789, eff. 8-6-02; 93-632, eff. 2-1-04; 93-841, eff. 7-30-04;
- 6 93-981, eff. 8-23-04; revised 12-15-05.)
- 7 Section 99. Effective date. This Act takes effect January
- 8 1, 2008.