103RD GENERAL ASSEMBLY

State of Illinois

2023 and 2024

HB4962

Introduced 2/7/2024, by Rep. Maurice A. West, II

SYNOPSIS AS INTRODUCED:

5 ILCS 100/5-45.55 new 20 ILCS 1705/55.5 new 20 ILCS 1705/74 305 ILCS 5/5-5.4 305 ILCS 5/5-5.4i

from Ch. 23, par. 5-5.4

Amends the Mental Health and Developmental Disabilities Administrative Act. Requires the Department of Human Services to establish reimbursement rates that build toward livable wages for front-line personnel in residential and day programs and service coordination agencies serving persons with intellectual and developmental disabilities. Provides that for community-based providers serving persons with intellectual or developmental disabilities, subject to federal approval, the rates taking effect for services delivered on or after July 1, 2024 shall be increased sufficiently to: (i) provide a minimum \$3.00 per hour wage increase over the wages in effect on June 30, 2024 for front-line personnel; and (ii) provide wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. Department of Labor's average wage as defined, by rule, by the Department. Amends the Illinois Public Aid Code. Provides that for ID/DD facilities and MC/DD facilities, the rates taking effect for services delivered on or after July 1, 2024, shall be increased sufficiently to: (i) provide a minimum \$3.00 per hour wage increase over the wages in effect on June 30, 2024 for front-line personnel; and (ii) provide wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. Department of Labor's average wage as defined, by rule, by the Department. Requires the same increase for front-line personnel employed at community-based providers serving persons with intellectual or developmental disabilities. Amends the Illinois Administrative Procedure Act. Grants the Departments of Human Services and Healthcare and Family Services emergency rulemaking authority. Effective immediately.

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A BILL FOR

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AN ACT concerning care for persons with developmental
 disabilities.

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

5 Section 1. This Act may be referred to as the Community6 Disability Living Wage Act.

7 Section 2. Findings.

(1) An estimated 22,000 children and adults with 8 9 intellectual and developmental disabilities are supported in community-based settings in Illinois; direct support 10 professionals (DSPs), are trained paraprofessional staff 11 are engaged in activities of daily living and 12 who 13 community support; too many of these employees earn wages 14 that place them and their families below the poverty level. 15

16 (2) In Illinois, nearly half of direct care workers
17 rely on public assistance to make ends meet, creating
18 additional expenditures for State government; low wages
19 are a consequence of the historically low reimbursement
20 rates paid by the State of Illinois to community-based
21 service providers.

(3) The lack of adequate wages for employees whoperform the challenging work of supporting persons with

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intellectual and developmental disabilities results in high employee turnover, which in turn negatively impacts the quality of services provided, higher wages are proven to reduce staff turnover, improving stability and quality of services while reducing employer training costs.

6 (4) Rising wages in other sectors now mean, despite 7 the modest wage increase and strenuous efforts to recruit 8 new workers, agencies are experiencing DSP vacancy rates 9 of 25%; excessive vacancies force employers to rely more 10 on overtime, leading to staff burnout and driving up 11 costs.

12 (5) A December 2020 report issued by an independent consulting group commissioned by the State to propose 13 14 changes to the State's reimbursement for community disability agencies recommended that addressing DSP wages 15 16 was the number one priority for ensuring compliance with 17 the mandates of the Ligas Consent Decree, and further recommended that wages for DSPs should be fixed at 150% of 18 19 the prevailing minimum wage plus additional funding for benefits. 20

(6) The difference between 150% of the State minimum
wage on January 1, 2025 and the hourly DSP wage rate set by
the State amounts to \$3.00 per hour.

(7) The General Assembly finds that in order to reduce
 turnover, increase retention, fill vacancies, and ensure
 DSPs are adequately compensated for the critically

1 important work they do, an increase in rates and 2 reimbursements to community-based service providers to 3 effectuate an increase in the hourly wage paid to DSPs is 4 needed.

5 Section 3. Purpose and intent. It is the purpose of this 6 Act to increase the wages of DSPs and other front-line staff in 7 community disability agencies beyond the poverty level and to 8 a level competitive with rival employers and above the State 9 minimum wage, in an effort to improve the lives of DSPs and the 10 lives of the vulnerable persons they support.

11 It is the intent of the General Assembly to ensure that all 12 funds resulting from rate increases provided to community 13 disability agencies are allocated to front-line employee wages 14 in order to address the current workforce crisis which is the 15 primary obstacle to the availability of community-based 16 services for people with disabilities.

Section 5. The Illinois Administrative Procedure Act is amended by adding Section 5-45.55 as follows:

19	(5 ILCS 100/5-45.55 new)
20	Sec. 5-45.55 Emergency rulemaking; Departments of Human
21	Services and Healthcare and Family Services. To provide for
22	the expeditious and timely implementation of changes made by
23	this amendatory Act of the 103rd General Assembly to Section

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1 74 of the Mental Health and Developmental Disabilities 2 Administrative Act and to Sections 5-5.4 and 5-5.4i of the Illinois Public Aid Code, emergency rules implementing the 3 4 changes made by this amendatory Act of the 103rd General 5 Assembly to Section 74 of the Mental Health and Developmental Disabilities Administrative Act and to Sections 5-5.4 and 6 7 5-5.4i of the Illinois Public Aid Code may be adopted in accordance with Section 5-45 by the respective Department. The 8 9 adoption of emergency rules authorized by Section 5-45 and this Section is deemed to be necessary for the public 10 11 interest, safety, and welfare.

12 <u>This Section is repealed one year after the effective date</u> 13 <u>of this amendatory Act of the 103rd General Assembly.</u>

Section 10. The Mental Health and Developmental Disabilities Administrative Act is amended by changing Section 74 and by adding Section 55.5 as follows:

17 (20 ILCS 1705/55.5 new)

Sec. 55.5. Increased wages for front-line personnel. As used in this Section, "front-line personnel" means direct support professionals, aides, front-line supervisors, and non-administrative support staff working in service settings outlined in this Section.
The Department shall establish reimbursement rates that

24 build toward livable wages for front-line personnel in

1	residential and day programs and service coordination agencies
2	serving persons with intellectual and developmental
3	disabilities under Section 54 of this Act, including, but not
4	limited to, intermediate care for the developmentally disabled
5	facilities, medically complex for the developmentally disabled
6	facilities, community-integrated living arrangements,
7	community day services, employment, and other residential and
8	day programs for persons with intellectual and developmental
9	disabilities supported by State funds or funding under Title
10	XIX of the federal Social Security Act.

11 The Department shall increase rates and reimbursements so 12 that by July 1, 2024 direct support professionals wages shall 13 be increased by \$3.00 per hour, and so that other front-line 14 personnel earn a commensurate wage.

15 (20 ILCS 1705/74)

16 Sec. 74. Rates and reimbursements.

17 (a) Within 30 days after July 6, 2017 (the effective date of Public Act 100-23), the Department shall increase rates and 18 19 reimbursements to fund a minimum of a \$0.75 per hour wage 20 increase for front-line personnel, including, but not limited 21 to, direct support professionals, aides, front-line disabilities 22 qualified intellectual supervisors, professionals, nurses, and non-administrative support staff 23 24 working in community-based provider organizations serving individuals with developmental disabilities. The Department 25

shall adopt rules, including emergency rules under subsection
 (y) of Section 5-45 of the Illinois Administrative Procedure
 Act, to implement the provisions of this Section.

(b) Rates and reimbursements. Within 30 days after June 4, 4 5 2018 (the effective date of Public Act 100-587), the Department shall increase rates and reimbursements to fund a 6 7 minimum of a \$0.50 per hour wage increase for front-line 8 personnel, including, but not limited to, direct support 9 professionals, aides, front-line supervisors, qualified 10 intellectual disabilities professionals, nurses, and 11 non-administrative support staff working in community-based 12 provider organizations serving individuals with developmental 13 disabilities. The Department shall adopt rules, including emergency rules under subsection (bb) of Section 5-45 of the 14 Illinois Administrative Procedure Act, to implement the 15 16 provisions of this Section.

17 (c) Rates and reimbursements. Within 30 days after June 5, 2019 (the effective date of Public Act 101-10), subject to 18 19 federal approval, the Department shall increase rates and 20 reimbursements in effect on June 30, 2019 for community-based providers for persons with Developmental Disabilities by 3.5% 21 22 The Department shall adopt rules, including emergency rules 23 under subsection (jj) of Section 5-45 of the Illinois 24 Administrative Procedure Act, to implement the provisions of 25 this Section, including wage increases for direct care staff. 26 (d) For community-based providers serving persons with

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intellectual/developmental disabilities, subject to federal 1 2 approval of any relevant Waiver Amendment, the rates taking effect for services delivered on or after January 1, 2022, 3 shall include an increase in the rate methodology sufficient 4 5 to provide a \$1.50 per hour wage increase for direct support professionals in residential settings and sufficient to 6 7 provide wages for all residential non-executive direct care 8 staff, excluding direct support professionals, at the federal 9 Department of Labor, Bureau of Labor Statistics' average wage 10 as defined in rule by the Department.

11 The establishment of and any changes to the rate 12 methodologies for community-based services provided to persons 13 with intellectual/developmental disabilities are subject to federal approval of any relevant Waiver Amendment and shall be 14 15 defined in rule by the Department. The Department shall adopt 16 rules, including emergency rules as authorized by Section 5-45 17 of the Illinois Administrative Procedure Act, to implement the provisions of this subsection (d). 18

(e) For community-based providers serving persons with 19 intellectual/developmental disabilities, subject to federal 20 21 approval of any relevant Waiver Amendment, the rates taking 22 effect for services delivered on or after January 1, 2023, 23 shall include an increase in the rate methodology sufficient to provide a \$1.00 per hour wage increase for all direct 24 25 support professionals and all other frontline personnel who 26 are not subject to the Bureau of Labor Statistics' average

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wage increases, who work in residential and community day 1 2 services settings, with at least \$0.50 of those funds to be 3 provided as a direct increase to base wages, with the remaining \$0.50 to be used flexibly for base wage increases. 4 5 In addition, the rates taking effect for services delivered on or after January 1, 2023 shall include an increase sufficient 6 7 to provide wages for all residential non-executive direct care 8 staff, excluding direct support professionals, at the federal 9 Department of Labor, Bureau of Labor Statistics' average wage 10 as defined in rule by the Department.

11 The establishment of and any changes to the rate 12 methodologies for community-based services provided to persons 13 with intellectual/developmental disabilities are subject to federal approval of any relevant Waiver Amendment and shall be 14 15 defined in rule by the Department. The Department shall adopt 16 rules, including emergency rules as authorized by Section 5-45 17 of the Illinois Administrative Procedure Act, to implement the provisions of this subsection. 18

(f) For community-based providers serving persons with 19 20 intellectual/developmental disabilities, subject to federal approval of any relevant Waiver Amendment, the rates taking 21 22 effect for services delivered on or after January 1, 2024 23 shall include an increase in the rate methodology sufficient to provide a \$2.50 per hour wage increase for all direct 24 25 support professionals and all other frontline personnel who 26 are not subject to the Bureau of Labor Statistics' average

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wage increases and who work in residential and community day 1 2 services settings. At least \$1.25 of the per hour wage increase shall be provided as a direct increase to base wages, 3 and the remaining \$1.25 of the per hour wage increase shall be 4 5 used flexibly for base wage increases. In addition, the rates taking effect for services delivered on or after January 1, 6 7 2024 shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding 8 9 direct support professionals, at the federal Department of 10 Labor, Bureau of Labor Statistics' average wage as defined in 11 rule by the Department.

12 establishment of and any changes to The the rate 13 methodologies for community-based services provided to persons 14 with intellectual/developmental disabilities are subject to 15 federal approval of any relevant Waiver Amendment and shall be 16 defined in rule by the Department. The Department shall adopt 17 rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the 18 19 provisions of this subsection.

20 (g) For community-based providers serving persons with 21 intellectual or developmental disabilities, subject to federal 22 approval, the rates taking effect for services delivered on or 23 after July 1, 2024 shall be increased sufficiently to provide 24 a minimum \$3.00 per hour wage increase over the wages in effect 25 on June 30, 2024 for front-line personnel, including, but not 26 limited to, direct support professionals, aides, front-line

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1 supervisors, and non-administrative support staff working in 2 community-based provider organizations serving individuals 3 with developmental disabilities, and sufficient to provide wages for all other residential non-executive direct care 4 5 staff, excluding direct support professionals, at the U.S. Department of Labor, Bureau of Labor Statistics' average wage 6 7 as defined, by rule, by the Department. The Department shall 8 adopt rules, including emergency rules in accordance with the 9 Illinois Administrative Procedure Act, to implement the 10 provisions of this subsection.

11 (Source: P.A. 102-16, eff. 6-17-21; 102-699, eff. 4-19-22; 12 102-830, eff. 1-1-23; 103-8, eff. 6-7-23; 103-154, eff. 13 6-30-23.)

14 Section 15. The Illinois Public Aid Code is amended by 15 changing Sections 5-5.4 and 5-5.4i as follows:

16 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)

17 Sec. 5-5.4. Standards of Payment - Department of 18 Healthcare and Family Services. The Department of Healthcare 19 and Family Services shall develop standards of payment of 20 nursing facility and ICF/DD services in facilities providing 21 such services under this Article which:

(1) Provide for the determination of a facility's payment
 for nursing facility or ICF/DD services on a prospective
 basis. The amount of the payment rate for all nursing

facilities certified by the Department of Public Health under 1 2 the ID/DD Community Care Act or the Nursing Home Care Act as 3 Intermediate Care for the Developmentally Disabled facilities, Long Term Care for Under Age 22 facilities, Skilled Nursing 4 5 facilities, or Intermediate Care facilities under the medical assistance program shall be prospectively established annually 6 7 on the basis of historical, financial, and statistical data 8 reflecting actual costs from prior years, which shall be 9 applied to the current rate year and updated for inflation, 10 except that the capital cost element for newly constructed 11 facilities shall be based upon projected budgets. The annually 12 established payment rate shall take effect on July 1 in 1984 and subsequent years. No rate increase and no update for 13 14 inflation shall be provided on or after July 1, 1994, unless 15 specifically provided for in this Section. The changes made by 16 Public Act 93-841 extending the duration of the prohibition 17 against a rate increase or update for inflation are effective retroactive to July 1, 2004. 18

19 For facilities licensed by the Department of Public Health 20 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for 21 22 Under Age 22 facilities, the rates taking effect on July 1, 23 1998 shall include an increase of 3%. For facilities licensed by the Department of Public Health under the Nursing Home Care 24 25 Skilled Nursing facilities or Intermediate Care Act as 26 facilities, the rates taking effect on July 1, 1998 shall

include an increase of 3% plus \$1.10 per resident-day, as 1 2 defined by the Department. For facilities licensed by the 3 Department of Public Health under the Nursing Home Care Act as Intermediate Care Facilities for the Developmentally Disabled 4 5 or Long Term Care for Under Age 22 facilities, the rates taking 6 effect on January 1, 2006 shall include an increase of 3%. For 7 facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care Facilities for 8 9 the Developmentally Disabled or Long Term Care for Under Age 10 22 facilities, the rates taking effect on January 1, 2009 11 shall include an increase sufficient to provide a \$0.50 per 12 hour wage increase for non-executive staff. For facilities 13 licensed by the Department of Public Health under the ID/DD 14 Community Care Act as ID/DD Facilities the rates taking effect within 30 days after July 6, 2017 (the effective date of Public 15 16 Act 100-23) shall include an increase sufficient to provide a 17 \$0.75 per hour wage increase for non-executive staff. The Department shall adopt rules, including emergency rules under 18 subsection (y) of Section 5-45 of the Illinois Administrative 19 20 Procedure Act, to implement the provisions of this paragraph. 21 For facilities licensed by the Department of Public Health 22 under the ID/DD Community Care Act as ID/DD Facilities and 23 under the MC/DD Act as MC/DD Facilities, the rates taking effect within 30 days after June 5, 2019 (the effective date of 24 25 Public Act 101-10) shall include an increase sufficient to 26 provide a \$0.50 per hour wage increase for non-executive

front-line personnel, including, but not limited to, direct support persons, aides, front-line supervisors, qualified intellectual disabilities professionals, nurses, and non-administrative support staff. The Department shall adopt rules, including emergency rules under subsection (bb) of Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this paragraph.

8 For facilities licensed by the Department of Public Health 9 under the ID/DD Community Care Act as ID/DD facilities and 10 under the MC/DD Act as MC/DD facilities, subject to federal 11 approval, the rates taking effect for services delivered on or 12 after July 1, 2024, shall be increased sufficiently to provide a minimum \$3.00 per hour wage increase over the wages in effect 13 14 on June 30, 2024 for front-line personnel, including, but not limited to, direct support professionals, aides, front-line 15 16 supervisors, and non-administrative support staff working in 17 community-based provider organizations serving individuals with developmental disabilities, and sufficient to provide 18 19 wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. 20 Department of Labor, Bureau of Labor Statistics' average wage 21 22 as defined, by rule, by the Department. The Department shall 23 adopt rules, including emergency rules in accordance with the Illinois Administrative Procedure Act, to implement the 24 25 provisions of this paragraph.

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For facilities licensed by the Department of Public Health

under the Nursing Home Care Act as Intermediate Care for the 1 2 Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on July 1, 3 1999 shall include an increase of 1.6% plus \$3.00 per 4 5 resident-day, as defined by the Department. For facilities licensed by the Department of Public Health under the Nursing 6 Home Care Act as Skilled Nursing facilities or Intermediate 7 8 Care facilities, the rates taking effect on July 1, 1999 shall 9 include an increase of 1.6% and, for services provided on or 10 after October 1, 1999, shall be increased by \$4.00 per 11 resident-day, as defined by the Department.

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 Long Term Care for 15 Under Age 22 facilities, the rates taking effect on July 1, 16 2000 shall include an increase of 2.5% per resident-day, as 17 defined by the Department. For facilities licensed by the Department of Public Health under the Nursing Home Care Act as 18 Skilled Nursing facilities or Intermediate Care facilities, 19 20 the rates taking effect on July 1, 2000 shall include an increase of 2.5% per resident-day, as 21 defined by the 22 Department.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, a new payment methodology must be implemented for the nursing component of the rate

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effective July 1, 2003. The Department of Public Aid (now 1 2 Healthcare and Family Services) shall develop the new payment 3 methodology using the Minimum Data Set (MDS) as the instrument to collect information concerning nursing home resident 4 5 condition necessary to compute the rate. The Department shall 6 develop the new payment methodology to meet the unique needs 7 of Illinois nursing home residents while remaining subject to 8 the appropriations provided by the General Assembly. A 9 transition period from the payment methodology in effect on 10 June 30, 2003 to the payment methodology in effect on July 1, 11 2003 shall be provided for a period not exceeding 3 years and 12 184 days after implementation of the new payment methodology as follows: 13

(A) For a facility that would receive a lower nursing 14 15 component rate per patient day under the new system than 16 the facility received effective on the date immediately 17 preceding the date that the Department implements the new payment methodology, the nursing component rate per 18 19 patient day for the facility shall be held at the level in 20 effect on the date immediately preceding the date that the 21 Department implements the new payment methodology until a 22 higher nursing component rate of reimbursement is achieved 23 by that facility.

(B) For a facility that would receive a higher nursing
 component rate per patient day under the payment
 methodology in effect on July 1, 2003 than the facility

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received effective on the date immediately preceding the date that the Department implements the new payment methodology, the nursing component rate per patient day for the facility shall be adjusted.

5 (C) Notwithstanding paragraphs (A) and (B), the 6 nursing component rate per patient day for the facility 7 shall be adjusted subject to appropriations provided by 8 the General Assembly.

9 For facilities licensed by the Department of Public Health 10 under the Nursing Home Care Act as Intermediate Care for the 11 Developmentally Disabled facilities or Long Term Care for 12 Under Age 22 facilities, the rates taking effect on March 1, 13 2001 shall include a statewide increase of 7.85%, as defined 14 by the Department.

Notwithstanding any other provision of this Section, for 15 16 facilities licensed by the Department of Public Health under 17 the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, except facilities participating 18 in the Department's demonstration program pursuant to the 19 20 provisions of Title 77, Part 300, Subpart T of the Illinois Administrative Code, the numerator of the ratio used by the 21 22 Department of Healthcare and Family Services to compute the 23 rate payable under this Section using the Minimum Data Set 24 (MDS) methodology shall incorporate the following annual 25 amounts as the additional funds appropriated to the Department 26 specifically to pay for rates based on the MDS nursing HB4962 - 17 - LRB103 37191 KTG 67310 b component methodology in excess of the funding in effect on December 31, 2006:

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3 (i) For rates taking effect January 1, 2007,
 4 \$60,000,000.

5 (ii) For rates taking effect January 1, 2008,
6 \$110,000,000.

7 (iii) For rates taking effect January 1, 2009, 8 \$194,000,000.

9 (iv) For rates taking effect April 1, 2011, or the 10 first day of the month that begins at least 45 days after 11 February 16, 2011 (the effective date of Public Act 12 96-1530), \$416,500,000 or an amount as may be necessary to 13 complete the transition to the MDS methodology for the 14 nursing component of the rate. Increased payments under 15 this item (iv) are not due and payable, however, until (i) 16 the methodologies described in this paragraph are approved 17 by the federal government in an appropriate State Plan amendment and (ii) the assessment imposed by Section 5B-2 18 19 of this Code is determined to be a permissible tax under 20 Title XIX of the Social Security Act.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the support component of the rates taking effect on January 1, 2008 shall be computed using the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005,
 updated for inflation to January 1, 2006.

3 For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the 4 5 Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on April 1, 6 7 2002 shall include a statewide increase of 2.0%, as defined by 8 the Department. This increase terminates on July 1, 2002; 9 beginning July 1, 2002 these rates are reduced to the level of 10 the rates in effect on March 31, 2002, as defined by the 11 Department.

12 For facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities 13 14 or intermediate care facilities, the rates taking effect on 15 July 1, 2001 shall be computed using the most recent cost 16 reports on file with the Department of Public Aid no later than 17 April 1, 2000, updated for inflation to January 1, 2001. For rates effective July 1, 2001 only, rates shall be the greater 18 of the rate computed for July 1, 2001 or the rate effective on 19 20 June 30, 2001.

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

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1 2002.

2 Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under 3 the Nursing Home Care Act as skilled nursing facilities or 4 5 intermediate care facilities, if the payment methodologies required under Section 5A-12 and the waiver granted under 42 6 CFR 433.68 are approved by the United States Centers for 7 8 Medicare and Medicaid Services, the rates taking effect on 9 July 1, 2004 shall be 3.0% greater than the rates in effect on 10 June 30, 2004. These rates shall take effect only upon 11 approval and implementation of the payment methodologies 12 required under Section 5A-12.

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

Notwithstanding any other provision of this Section, for 19 20 facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or 21 22 intermediate care facilities, effective January 1, 2009, the 23 per diem support component of the rates effective on January 24 1, 2008, computed using the most recent cost reports on file 25 with the Department of Healthcare and Family Services no later 26 than April 1, 2005, updated for inflation to January 1, 2006,

shall be increased to the amount that would have been derived
 using standard Department of Healthcare and Family Services
 methods, procedures, and inflators.

Notwithstanding any other provisions of this Section, for 4 5 facilities licensed by the Department of Public Health under the Nursing Home Care Act as intermediate care facilities that 6 7 are federally defined as Institutions for Mental Disease, or 8 facilities licensed by the Department of Public Health under 9 the Specialized Mental Health Rehabilitation Act of 2013, a 10 socio-development component rate equal to 6.6% of the 11 facility's nursing component rate as of January 1, 2006 shall 12 established and paid effective July 1, 2006. be The socio-development component of the rate shall be increased by 13 a factor of 2.53 on the first day of the month that begins at 14 least 45 days after January 11, 2008 (the effective date of 15 16 Public Act 95-707). As of August 1, 2008, the 17 socio-development component rate shall be equal to 6.6% of the facility's nursing component rate as of January 1, 2006, 18 multiplied by a factor of 3.53. For services provided on or 19 20 after April 1, 2011, or the first day of the month that begins at least 45 days after February 16, 2011 (the effective date of 21 22 Public Act 96-1530), whichever is later, the Illinois 23 adjust these socio-development Department may by rule 24 component rates, and may use different adjustment 25 methodologies for those facilities participating, and those 26 not participating, in the Illinois Department's demonstration

program pursuant to the provisions of Title 77, Part 300, Subpart T of the Illinois Administrative Code, but in no case may such rates be diminished below those in effect on August 1, 2008.

5 For facilities licensed by the Department of Public Health 6 under the Nursing Home Care Act as Intermediate Care for the 7 Developmentally Disabled facilities or as long-term care 8 facilities for residents under 22 years of age, the rates 9 taking effect on July 1, 2003 shall include a statewide 10 increase of 4%, as defined by the Department.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on the first day of the month that begins at least 45 days after January 11, 2008 (the effective date of Public Act 95-707) shall include a statewide increase of 2.5%, as defined by the Department.

Notwithstanding any other provision of this Section, for 18 19 facilities licensed by the Department of Public Health under 20 the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, effective January 1, 2005, 21 22 facility rates shall be increased by the difference between 23 (i) a facility's per diem property, liability, and malpractice insurance costs as reported in the cost report filed with the 24 25 Department of Public Aid and used to establish rates effective 26 July 1, 2001 and (ii) those same costs as reported in the

1 facility's 2002 cost report. These costs shall be passed 2 through to the facility without caps or limitations, except 3 for adjustments required under normal auditing procedures.

Rates established effective each July 1 shall govern 4 5 payment for services rendered throughout that fiscal year, except that rates established on July 1, 1996 shall be 6 7 increased by 6.8% for services provided on or after January 1, 8 1997. Such rates will be based upon the rates calculated for 9 the year beginning July 1, 1990, and for subsequent years 10 thereafter until June 30, 2001 shall be based on the facility 11 cost reports for the facility fiscal year ending at any point 12 in time during the previous calendar year, updated to the 13 midpoint of the rate year. The cost report shall be on file 14 with the Department no later than April 1 of the current rate 15 year. Should the cost report not be on file by April 1, the 16 Department shall base the rate on the latest cost report filed 17 by each skilled care facility and intermediate care facility, updated to the midpoint of the current rate year. 18 In determining rates for services rendered on and after July 1, 19 20 1985, fixed time shall not be computed at less than zero. The Department shall not make any alterations of regulations which 21 22 would reduce any component of the Medicaid rate to a level 23 below what that component would have been utilizing in the rate effective on July 1, 1984. 24

(2) Shall take into account the actual costs incurred by
 facilities in providing services for recipients of skilled

nursing and intermediate care services under the medical
 assistance program.

3 (3) Shall take into account the medical and psycho-social4 characteristics and needs of the patients.

5 (4) Shall take into account the actual costs incurred by 6 facilities in meeting licensing and certification standards 7 imposed and prescribed by the State of Illinois, any of its 8 political subdivisions or municipalities and by the U.S. 9 Department of Health and Human Services pursuant to Title XIX 10 of the Social Security Act.

The Department of Healthcare and Family Services shall 11 12 develop precise standards for payments to reimburse nursing 13 facilities for any utilization of appropriate rehabilitative personnel for the provision of rehabilitative services which 14 15 is authorized by federal regulations, including reimbursement 16 for services provided by qualified therapists or qualified 17 assistants, and which is in accordance with accepted professional practices. Reimbursement also may be made for 18 utilization of other supportive personnel under appropriate 19 20 supervision.

The Department shall develop enhanced payments to offset the additional costs incurred by a facility serving exceptional need residents and shall allocate at least \$4,000,000 of the funds collected from the assessment established by Section 5B-2 of this Code for such payments. For the purpose of this Section, "exceptional needs" means,

but need not be limited to, ventilator care and traumatic 1 2 brain injury care. The enhanced payments for exceptional need 3 residents under this paragraph are not due and payable, however, until (i) the methodologies described in this 4 5 paragraph are approved by the federal government in an appropriate State Plan amendment and (ii) the assessment 6 imposed by Section 5B-2 of this Code is determined to be a 7 8 permissible tax under Title XIX of the Social Security Act.

9 Beginning January 1, 2014 the methodologies for 10 reimbursement of nursing facility services as provided under 11 this Section 5-5.4 shall no longer be applicable for services 12 provided on or after January 1, 2014.

13 No payment increase under this Section for the MDS 14 methodology, exceptional care residents, or the 15 socio-development component rate established by Public Act 16 96-1530 of the 96th General Assembly and funded by the 17 assessment imposed under Section 5B-2 of this Code shall be due and payable until after the Department notifies the 18 19 long-term care providers, in writing, that the payment 20 methodologies to long-term care providers required under this Section have been approved by the Centers for Medicare and 21 22 Medicaid Services of the U.S. Department of Health and Human 23 and the waivers under 42 CFR 433.68 for the Services assessment imposed by this Section, if necessary, have been 24 25 granted by the Centers for Medicare and Medicaid Services of 26 the U.S. Department of Health and Human Services. Upon

notification to the Department of approval of the payment methodologies required under this Section and the waivers granted under 42 CFR 433.68, all increased payments otherwise due under this Section prior to the date of notification shall be due and payable within 90 days of the date federal approval is received.

7 On and after July 1, 2012, the Department shall reduce any 8 rate of reimbursement for services or other payments or alter 9 any methodologies authorized by this Code to reduce any rate 10 of reimbursement for services or other payments in accordance 11 with Section 5-5e.

12 For facilities licensed by the Department of Public Health 13 under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal 14 15 approval, the rates taking effect for services delivered on or 16 after August 1, 2019 shall be increased by 3.5% over the rates 17 in effect on June 30, 2019. The Department shall adopt rules, including emergency rules under subsection (ii) of Section 18 Illinois Administrative Procedure Act, 19 5-45 of the to 20 implement the provisions of this Section, including wage increases for direct care staff. 21

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval, the rates taking effect on the latter of the approval date of the State Plan Amendment for these facilities

or the Waiver Amendment for the home and community-based 1 2 services settings shall include an increase sufficient to 3 provide a \$0.26 per hour wage increase to the base wage for non-executive staff. The Department shall adopt rules, 4 5 including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to 6 implement the 7 provisions of this Section, including wage increases for 8 direct care staff.

9 For facilities licensed by the Department of Public Health 10 under the ID/DD Community Care Act as ID/DD Facilities and 11 under the MC/DD Act as MC/DD Facilities, subject to federal 12 approval of the State Plan Amendment and the Waiver Amendment 13 for the home and community-based services settings, the rates 14 taking effect for the services delivered on or after July 1, 15 2020 shall include an increase sufficient to provide a \$1.00 16 per hour wage increase for non-executive staff. For services 17 delivered on or after January 1, 2021, subject to federal approval of the State Plan Amendment and the Waiver Amendment 18 for the home and community-based services settings, shall 19 20 include an increase sufficient to provide a \$0.50 per hour increase for non-executive staff. The Department shall adopt 21 22 rules, including emergency rules as authorized by Section 5-45 23 of the Illinois Administrative Procedure Act, to implement the provisions of this Section, including wage increases for 24 25 direct care staff.

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under the ID/DD Community Care Act as ID/DD Facilities and 1 2 under the MC/DD Act as MC/DD Facilities, subject to federal 3 approval of the State Plan Amendment, the rates taking effect for the residential services delivered on or after July 1, 4 5 2021, shall include an increase sufficient to provide a \$0.50 per hour increase for aides in the rate methodology. For 6 7 facilities licensed by the Department of Public Health under 8 the ID/DD Community Care Act as ID/DD Facilities and under the 9 MC/DD Act as MC/DD Facilities, subject to federal approval of 10 the State Plan Amendment, the rates taking effect for the 11 residential services delivered on or after January 1, 2022 12 shall include an increase sufficient to provide a \$1.00 per 13 hour increase for aides in the rate methodology. In addition, 14 for residential services delivered on or after January 1, 2022 15 such rates shall include an increase sufficient to provide 16 wages for all residential non-executive direct care staff, 17 excluding aides, at the federal Department of Labor, Bureau of Labor Statistics' average wage as defined in rule by the 18 19 Department. The Department shall adopt rules, including 20 emergency rules as authorized by Section 5-45 of the Illinois 21 Administrative Procedure Act, to implement the provisions of 22 this Section.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval of the State Plan Amendment, the rates taking effect

for services delivered on or after January 1, 2023, shall 1 2 include a \$1.00 per hour wage increase for all direct support 3 personnel and all other frontline personnel who are not subject to the Bureau of Labor Statistics' average wage 4 5 increases, who work in residential and community day services settings, with at least \$0.50 of those funds to be provided as 6 7 a direct increase to all aide base wages, with the remaining 8 \$0.50 to be used flexibly for base wage increases to the rate 9 methodology for aides. In addition, for residential services delivered on or after January 1, 2023 the rates shall include 10 11 an increase sufficient to provide wages for all residential 12 non-executive direct care staff, excluding aides, at the 13 federal Department of Labor, Bureau of Labor Statistics' 14 average wage as determined by the Department. Also, for 15 services delivered on or after January 1, 2023, the rates will 16 include adjustments to employment-related expenses as defined 17 in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the 18 19 Illinois Administrative Procedure Act, to implement the 20 provisions of this Section.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval of the State Plan Amendment, the rates taking effect for services delivered on or after January 1, 2024 shall include a \$2.50 per hour wage increase for all direct support

personnel and all other frontline personnel who are not 1 2 subject to the Bureau of Labor Statistics' average wage increases and who work in residential and community day 3 services settings. At least \$1.25 of the per hour wage 4 5 increase shall be provided as a direct increase to all aide base wages, and the remaining \$1.25 of the per hour wage 6 increase shall be used flexibly for base wage increases to the 7 8 rate methodology for aides. In addition, for residential 9 services delivered on or after January 1, 2024, the rates 10 shall include an increase sufficient to provide wages for all 11 residential non-executive direct care staff, excluding aides, 12 the federal Department of Labor, Bureau of at Labor 13 Statistics' average wage as determined by the Department. Also, for services delivered on or after January 1, 2024, the 14 15 rates will include adjustments to employment-related expenses 16 as defined in rule by the Department. The Department shall 17 adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to 18 19 implement the provisions of this Section.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval, the rates taking effect for services delivered on or after July 1, 2024, shall be increased sufficiently to provide a minimum \$3.00 per hour wage increase over the wages in effect on June 30, 2024 for front-line personnel, including, but not

limited to, direct support professionals, aides, front-line 1 2 supervisors, and non-administrative support staff working in 3 community-based provider organizations serving individuals with developmental disabilities, and sufficient to provide 4 wages for all other residential non-executive direct care 5 staff, excluding direct support professionals, at the U.S. 6 7 Department of Labor, Bureau of Labor Statistics' average wage 8 as defined, by rule, by the Department. The Department shall 9 adopt rules, including emergency rules in accordance with the Illinois Administrative Procedure Act, to implement the 10 11 provisions of this paragraph.

12 (Source: P.A. 102-16, eff. 6-17-21; 102-699, eff. 4-19-22; 13 103-8, eff. 6-7-23.)

14 (305 ILCS 5/5-5.4i)

15

Sec. 5-5.4i. Rates and reimbursements.

16 (a) Within 30 days after July 6, 2017 (the effective date of Public Act 100-23), the Department shall increase rates and 17 reimbursements to fund a minimum of a \$0.75 per hour wage 18 increase for front-line personnel, including, but not limited 19 to, direct support persons, aides, front-line supervisors, 20 21 qualified intellectual disabilities professionals, nurses, and 22 non-administrative support staff working in community-based provider organizations serving individuals with developmental 23 24 disabilities. The Department shall adopt rules, including 25 emergency rules under subsection (y) of Section 5-45 of the

Illinois Administrative Procedure Act, to implement the
 provisions of this Section.

(b) Within 30 days after June 4, 2018 (the effective date 3 of Public Act 100-587), the Department shall increase rates 4 5 and reimbursements to fund a minimum of a \$0.50 per hour wage increase for front-line personnel, including, but not limited 6 7 to, direct support persons, aides, front-line supervisors, 8 qualified intellectual disabilities professionals, nurses, and 9 non-administrative support staff working in community-based 10 provider organizations serving individuals with developmental 11 disabilities. The Department shall adopt rules, including 12 emergency rules under subsection (bb) of Section 5-45 of the 13 Illinois Administrative Procedure Act, to implement the provisions of this Section. 14

(c) Within 30 days after the effective date of this 15 16 amendatory Act of the 101st General Assembly, subject to 17 federal approval, the Department shall increase rates and reimbursements in effect on June 30, 2019 for community-based 18 providers for persons with Developmental Disabilities by 3.5%. 19 20 The Department shall adopt rules, including emergency rules under subsection (ii) of Section 5-45 of the 21 Illinois 22 Administrative Procedure Act, to implement the provisions of 23 this Section, including wage increases for direct care staff.

24 (d) For community-based providers serving persons with
 25 intellectual or developmental disabilities, subject to federal
 26 approval, the rates taking effect for services delivered on or

1	after July 1, 2024, shall be increased sufficiently to provide
2	a minimum \$3.00 per hour wage increase over the wages in effect
3	on June 30, 2024 for front-line personnel, including, but not
4	limited to, direct support professionals, aides, front-line
5	supervisors, and non-administrative support staff working in
6	community-based provider organizations serving individuals
7	with developmental disabilities, and sufficient to provide
8	wages for all other residential non-executive direct care
9	staff, excluding direct support professionals, at the U.S.
10	Department of Labor, Bureau of Labor Statistics' average wage
11	as defined, by rule, by the Department. The Department shall
12	adopt rules, including emergency rules in accordance with the
13	Illinois Administrative Procedure Act, to implement the
14	provisions of this subsection.
15	(Source: P.A. 100-23, eff. 7-6-17; 100-587, eff. 6-4-18;
16	101-10, eff. 6-5-19.)

Section 99. Effective date. This Act takes effect uponbecoming law.