

1 AN ACT concerning regulation.

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

4 Section 5. The Nursing Home Care Act is amended by
5 changing Section 3-401.1 as follows:

6 (210 ILCS 45/3-401.1) (from Ch. 111 1/2, par. 4153-401.1)

7 Sec. 3-401.1. (a) A facility participating in the Medical
8 Assistance Program is prohibited from failing or refusing to
9 retain as a resident any person because he or she is a
10 recipient of or an applicant for the Medical Assistance
11 Program.

12 (a-5) ~~A After the effective date of this amendatory Act of~~
13 ~~1997,~~ a facility of which only a distinct part is certified to
14 participate in the Medical Assistance Program may refuse to
15 retain as a resident any person who resides in a part of the
16 facility that does not participate in the Medical Assistance
17 Program and who is unable to pay for his or her care in the
18 facility without Medical Assistance only if:

19 (1) the facility, no later than at the time of
20 admission and at the time of the resident's contract
21 renewal, explains to the resident (unless he or she is
22 incompetent), and to the resident's representative, and to
23 the person making payment on behalf of the resident for

1 the resident's stay, in writing, that the facility may
2 discharge the resident if the resident is no longer able
3 to pay for his or her care in the facility without Medical
4 Assistance;

5 (2) the resident (unless he or she is incompetent),
6 the resident's representative, and the person making
7 payment on behalf of the resident for the resident's stay,
8 acknowledge in writing that they have received the written
9 explanation;

10 (3) in circumstances where the Medicare coverage is
11 ending prior to the full 100-day benefit period, the
12 facility provides notice to the resident and to the
13 resident's representative that the resident's Medicare
14 coverage will likely end in 5 days. This notification
15 shall specify that the resident shall not be required to
16 move under this Section until these 5 days are up. In cases
17 where the facility is notified in a shorter time frame
18 than 5 days by a managed care organization or the time
19 frame is shorter than 5 days due to inaccurate reporting
20 by an outside entity, the facility must provide a minimum
21 of 2 days' notification.

22 (a-10) For the purposes of this Section, a recipient or
23 applicant shall be considered a resident in the facility
24 during any hospital stay totaling 10 days or less following a
25 hospital admission. The Department of Healthcare and Family
26 Services shall recoup funds from a facility when, as a result

1 of the facility's refusal to readmit a recipient after
2 hospitalization for 10 days or less, the recipient incurs
3 hospital bills in an amount greater than the amount that would
4 have been paid by that Department (formerly the Illinois
5 Department of Public Aid) for care of the recipient in the
6 facility. The amount of the recoupment shall be the difference
7 between the Department of Healthcare and Family Services'
8 (formerly the Illinois Department of Public Aid's) payment for
9 hospital care and the amount that Department would have paid
10 for care in the facility.

11 (b) A facility which violates this Section shall be guilty
12 of a business offense and fined not less than \$500 nor more
13 than \$1,000 for the first offense and not less than \$1,000 nor
14 more than \$5,000 for each subsequent offense.

15 (Source: P.A. 95-331, eff. 8-21-07.)