



Rep. Anna Moeller

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10300HB5095ham001

LRB103 39315 CES 70984 a

1 AMENDMENT TO HOUSE BILL 5095

2 AMENDMENT NO. _____. Amend House Bill 5095 by replacing
3 everything after the enacting clause with the following:

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) 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

1 Program and who is unable to pay for his or her care in the
2 facility without Medical Assistance only if:

3 (1) the facility, no later than at the time of
4 admission and at the time of the resident's contract
5 renewal, explains to the resident (unless he or she is
6 incompetent), and to the resident's representative, and to
7 the person making payment on behalf of the resident for
8 the resident's stay, in writing, that the facility may
9 discharge the resident if the resident is no longer able
10 to pay for his or her care in the facility without Medical
11 Assistance;

12 (2) the resident (unless he or she is incompetent),
13 the resident's representative, and the person making
14 payment on behalf of the resident for the resident's stay,
15 acknowledge in writing that they have received the written
16 explanation; ~~and-~~

17 (3) the facility provides notice to the resident and
18 to the resident's representative, if the resident has a
19 representative, that the resident's Medicare coverage is
20 likely to end in 10 days. This notification shall specify
21 that the resident will not be required to move under this
22 Section until the resident's Medicare coverage terminates.

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

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

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

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