



Rep. Elizabeth Hernandez

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LRB095 15983 DRJ 51584 a

1 AMENDMENT TO SENATE BILL 2348

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 2348, AS AMENDED,  
3 by replacing everything after the enacting clause with the  
4 following:

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

7 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

8 Sec. 5-5. Medical services. The Illinois Department, by  
9 rule, shall determine the quantity and quality of and the rate  
10 of reimbursement for the medical assistance for which payment  
11 will be authorized, and the medical services to be provided,  
12 which may include all or part of the following: (1) inpatient  
13 hospital services; (2) outpatient hospital services; (3) other  
14 laboratory and X-ray services; (4) skilled nursing home  
15 services; (5) physicians' services whether furnished in the

1 office, the patient's home, a hospital, a skilled nursing home,  
2 or elsewhere; (6) medical care, or any other type of remedial  
3 care furnished by licensed practitioners; (7) home health care  
4 services; (8) private duty nursing service; (9) clinic  
5 services; (10) dental services, including prevention and  
6 treatment of periodontal disease and dental caries disease for  
7 pregnant women; (11) physical therapy and related services;  
8 (12) prescribed drugs, dentures, and prosthetic devices; and  
9 eyeglasses prescribed by a physician skilled in the diseases of  
10 the eye, or by an optometrist, whichever the person may select;  
11 (13) other diagnostic, screening, preventive, and  
12 rehabilitative services; (14) transportation and such other  
13 expenses as may be necessary; (15) medical treatment of sexual  
14 assault survivors, as defined in Section 1a of the Sexual  
15 Assault Survivors Emergency Treatment Act, for injuries  
16 sustained as a result of the sexual assault, including  
17 examinations and laboratory tests to discover evidence which  
18 may be used in criminal proceedings arising from the sexual  
19 assault; (16) the diagnosis and treatment of sickle cell  
20 anemia; and (17) any other medical care, and any other type of  
21 remedial care recognized under the laws of this State, but not  
22 including abortions, or induced miscarriages or premature  
23 births, unless, in the opinion of a physician, such procedures  
24 are necessary for the preservation of the life of the woman  
25 seeking such treatment, or except an induced premature birth  
26 intended to produce a live viable child and such procedure is

1 necessary for the health of the mother or her unborn child. The  
2 Illinois Department, by rule, shall prohibit any physician from  
3 providing medical assistance to anyone eligible therefor under  
4 this Code where such physician has been found guilty of  
5 performing an abortion procedure in a wilful and wanton manner  
6 upon a woman who was not pregnant at the time such abortion  
7 procedure was performed. The term "any other type of remedial  
8 care" shall include nursing care and nursing home service for  
9 persons who rely on treatment by spiritual means alone through  
10 prayer for healing.

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

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

25 The Department of Healthcare and Family Services shall  
26 provide the following services to persons eligible for

1 assistance under this Article who are participating in  
2 education, training or employment programs operated by the  
3 Department of Human Services as successor to the Department of  
4 Public Aid:

5 (1) dental services, which shall include but not be  
6 limited to prosthodontics; and

7 (2) eyeglasses prescribed by a physician skilled in the  
8 diseases of the eye, or by an optometrist, whichever the  
9 person may select.

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

13 The Department of Healthcare and Family Services must  
14 provide coverage and reimbursement for amino acid-based  
15 elemental formulas, regardless of delivery method, for the  
16 diagnosis and treatment of (i) eosinophilic disorders and (ii)  
17 short bowel syndrome when the prescribing physician has issued  
18 a written order stating that the amino acid-based elemental  
19 formula is medically necessary.

20 The Illinois Department shall authorize the provision of,  
21 and shall authorize payment for, screening by low-dose  
22 mammography for the presence of occult breast cancer for women  
23 35 years of age or older who are eligible for medical  
24 assistance under this Article, as follows: a baseline mammogram  
25 for women 35 to 39 years of age and an annual mammogram for  
26 women 40 years of age or older. All screenings shall include a

1 physical breast exam, instruction on self-examination and  
2 information regarding the frequency of self-examination and  
3 its value as a preventative tool. As used in this Section,  
4 "low-dose mammography" means the x-ray examination of the  
5 breast using equipment dedicated specifically for mammography,  
6 including the x-ray tube, filter, compression device, image  
7 receptor, and cassettes, with an average radiation exposure  
8 delivery of less than one rad mid-breast, with 2 views for each  
9 breast.

10 Any medical or health care provider shall immediately  
11 recommend, to any pregnant woman who is being provided prenatal  
12 services and is suspected of drug abuse or is addicted as  
13 defined in the Alcoholism and Other Drug Abuse and Dependency  
14 Act, referral to a local substance abuse treatment provider  
15 licensed by the Department of Human Services or to a licensed  
16 hospital which provides substance abuse treatment services.  
17 The Department of Healthcare and Family Services shall assure  
18 coverage for the cost of treatment of the drug abuse or  
19 addiction for pregnant recipients in accordance with the  
20 Illinois Medicaid Program in conjunction with the Department of  
21 Human Services.

22 All medical providers providing medical assistance to  
23 pregnant women under this Code shall receive information from  
24 the Department on the availability of services under the Drug  
25 Free Families with a Future or any comparable program providing  
26 case management services for addicted women, including

1 information on appropriate referrals for other social services  
2 that may be needed by addicted women in addition to treatment  
3 for addiction.

4 The Illinois Department, in cooperation with the  
5 Departments of Human Services (as successor to the Department  
6 of Alcoholism and Substance Abuse) and Public Health, through a  
7 public awareness campaign, may provide information concerning  
8 treatment for alcoholism and drug abuse and addiction, prenatal  
9 health care, and other pertinent programs directed at reducing  
10 the number of drug-affected infants born to recipients of  
11 medical assistance.

12 Neither the Department of Healthcare and Family Services  
13 nor the Department of Human Services shall sanction the  
14 recipient solely on the basis of her substance abuse.

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

24 Notwithstanding any other provision of law, a medical or  
25 health care provider under the medical assistance program may  
26 elect, in lieu of receiving direct payment for goods or

1 services provided under that program, to participate in the  
2 Illinois State Employees Deferred Compensation Plan adopted  
3 under Article 24 of the Illinois Pension Code. A medical or  
4 health care provider who elects to participate in that Plan  
5 shall, for purposes of that participation, be deemed an  
6 "employee" as defined in Section 24-102 of the Illinois Pension  
7 Code. A medical or health care provider who elects to  
8 participate in the Plan does not have a cause of action against  
9 the State for any damages allegedly suffered by the provider as  
10 a result of any delay by the State in crediting the amount of  
11 any contribution to the provider's Plan account.

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

21 The sponsor must negotiate formal written contracts with  
22 medical providers for physician services, inpatient and  
23 outpatient hospital care, home health services, treatment for  
24 alcoholism and substance abuse, and other services determined  
25 necessary by the Illinois Department by rule for delivery by  
26 Partnerships. Physician services must include prenatal and

1 obstetrical care. The Illinois Department shall reimburse  
2 medical services delivered by Partnership providers to clients  
3 in target areas according to provisions of this Article and the  
4 Illinois Health Finance Reform Act, except that:

5 (1) Physicians participating in a Partnership and  
6 providing certain services, which shall be determined by  
7 the Illinois Department, to persons in areas covered by the  
8 Partnership may receive an additional surcharge for such  
9 services.

10 (2) The Department may elect to consider and negotiate  
11 financial incentives to encourage the development of  
12 Partnerships and the efficient delivery of medical care.

13 (3) Persons receiving medical services through  
14 Partnerships may receive medical and case management  
15 services above the level usually offered through the  
16 medical assistance program.

17 Medical providers shall be required to meet certain  
18 qualifications to participate in Partnerships to ensure the  
19 delivery of high quality medical services. These  
20 qualifications shall be determined by rule of the Illinois  
21 Department and may be higher than qualifications for  
22 participation in the medical assistance program. Partnership  
23 sponsors may prescribe reasonable additional qualifications  
24 for participation by medical providers, only with the prior  
25 written approval of the Illinois Department.

26 Nothing in this Section shall limit the free choice of



1 practitioners, hospitals, and other providers of medical  
2 services by clients. In order to ensure patient freedom of  
3 choice, the Illinois Department shall immediately promulgate  
4 all rules and take all other necessary actions so that provided  
5 services may be accessed from therapeutically certified  
6 optometrists to the full extent of the Illinois Optometric  
7 Practice Act of 1987 without discriminating between service  
8 providers.

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

12 The Illinois Department shall require health care  
13 providers to maintain records that document the medical care  
14 and services provided to recipients of Medical Assistance under  
15 this Article. The Illinois Department shall require health care  
16 providers to make available, when authorized by the patient, in  
17 writing, the medical records in a timely fashion to other  
18 health care providers who are treating or serving persons  
19 eligible for Medical Assistance under this Article. All  
20 dispensers of medical services shall be required to maintain  
21 and retain business and professional records sufficient to  
22 fully and accurately document the nature, scope, details and  
23 receipt of the health care provided to persons eligible for  
24 medical assistance under this Code, in accordance with  
25 regulations promulgated by the Illinois Department. The rules  
26 and regulations shall require that proof of the receipt of

1 prescription drugs, dentures, prosthetic devices and  
2 eyeglasses by eligible persons under this Section accompany  
3 each claim for reimbursement submitted by the dispenser of such  
4 medical services. No such claims for reimbursement shall be  
5 approved for payment by the Illinois Department without such  
6 proof of receipt, unless the Illinois Department shall have put  
7 into effect and shall be operating a system of post-payment  
8 audit and review which shall, on a sampling basis, be deemed  
9 adequate by the Illinois Department to assure that such drugs,  
10 dentures, prosthetic devices and eyeglasses for which payment  
11 is being made are actually being received by eligible  
12 recipients. Within 90 days after the effective date of this  
13 amendatory Act of 1984, the Illinois Department shall establish  
14 a current list of acquisition costs for all prosthetic devices  
15 and any other items recognized as medical equipment and  
16 supplies reimbursable under this Article and shall update such  
17 list on a quarterly basis, except that the acquisition costs of  
18 all prescription drugs shall be updated no less frequently than  
19 every 30 days as required by Section 5-5.12.

20 The rules and regulations of the Illinois Department shall  
21 require that a written statement including the required opinion  
22 of a physician shall accompany any claim for reimbursement for  
23 abortions, or induced miscarriages or premature births. This  
24 statement shall indicate what procedures were used in providing  
25 such medical services.

26 The Illinois Department shall require all dispensers of

1 medical services, other than an individual practitioner or  
2 group of practitioners, desiring to participate in the Medical  
3 Assistance program established under this Article to disclose  
4 all financial, beneficial, ownership, equity, surety or other  
5 interests in any and all firms, corporations, partnerships,  
6 associations, business enterprises, joint ventures, agencies,  
7 institutions or other legal entities providing any form of  
8 health care services in this State under this Article.

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

17 Enrollment of a vendor that provides non-emergency medical  
18 transportation, defined by the Department by rule, shall be  
19 conditional for 180 days. During that time, the Department of  
20 Healthcare and Family Services may terminate the vendor's  
21 eligibility to participate in the medical assistance program  
22 without cause. That termination of eligibility is not subject  
23 to the Department's hearing process.

24 The Illinois Department shall establish policies,  
25 procedures, standards and criteria by rule for the acquisition,  
26 repair and replacement of orthotic and prosthetic devices and

1 durable medical equipment. Such rules shall provide, but not be  
2 limited to, the following services: (1) immediate repair or  
3 replacement of such devices by recipients without medical  
4 authorization; and (2) rental, lease, purchase or  
5 lease-purchase of durable medical equipment in a  
6 cost-effective manner, taking into consideration the  
7 recipient's medical prognosis, the extent of the recipient's  
8 needs, and the requirements and costs for maintaining such  
9 equipment. Such rules shall enable a recipient to temporarily  
10 acquire and use alternative or substitute devices or equipment  
11 pending repairs or replacements of any device or equipment  
12 previously authorized for such recipient by the Department.

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

21 The Illinois Department shall develop and operate, in  
22 cooperation with other State Departments and agencies and in  
23 compliance with applicable federal laws and regulations,  
24 appropriate and effective systems of health care evaluation and  
25 programs for monitoring of utilization of health care services  
26 and facilities, as it affects persons eligible for medical

1 assistance under this Code.

2 The Illinois Department shall report annually to the  
3 General Assembly, no later than the second Friday in April of  
4 1979 and each year thereafter, in regard to:

5 (a) actual statistics and trends in utilization of  
6 medical services by public aid recipients;

7 (b) actual statistics and trends in the provision of  
8 the various medical services by medical vendors;

9 (c) current rate structures and proposed changes in  
10 those rate structures for the various medical vendors; and

11 (d) efforts at utilization review and control by the  
12 Illinois Department.

13 The period covered by each report shall be the 3 years  
14 ending on the June 30 prior to the report. The report shall  
15 include suggested legislation for consideration by the General  
16 Assembly. The filing of one copy of the report with the  
17 Speaker, one copy with the Minority Leader and one copy with  
18 the Clerk of the House of Representatives, one copy with the  
19 President, one copy with the Minority Leader and one copy with  
20 the Secretary of the Senate, one copy with the Legislative  
21 Research Unit, and such additional copies with the State  
22 Government Report Distribution Center for the General Assembly  
23 as is required under paragraph (t) of Section 7 of the State  
24 Library Act shall be deemed sufficient to comply with this  
25 Section.

26 Notwithstanding any other rulemaking authority that may

1 exist, neither the Governor nor any agency or agency head under  
2 the jurisdiction of the Governor has any authority to make or  
3 promulgate rules to implement or enforce the provisions of this  
4 amendatory Act of the 95th General Assembly. If, however, the  
5 Governor believes that rules are necessary to implement or  
6 enforce the provisions of this amendatory Act of the 95th  
7 General Assembly, the Governor may suggest rules to the General  
8 Assembly by filing them with the Clerk of the House and  
9 Secretary of the Senate and by requesting that the General  
10 Assembly authorize such rulemaking by law, enact those  
11 suggested rules into law, or take any other appropriate action  
12 in the General Assembly's discretion. Nothing contained in this  
13 amendatory Act of the 95th General Assembly shall be  
14 interpreted to grant rulemaking authority under any other  
15 Illinois statute where such authority is not otherwise  
16 explicitly given. For the purposes of this amendatory Act of  
17 the 95th General Assembly, "rules" is given the meaning  
18 contained in Section 1-70 of the Illinois Administrative  
19 Procedure Act, and "agency" and "agency head" are given the  
20 meanings contained in Sections 1-20 and 1-25 of the Illinois  
21 Administrative Procedure Act to the extent that such  
22 definitions apply to agencies or agency heads under the  
23 jurisdiction of the Governor.

24 (Source: P.A. 95-331, eff. 8-21-07; 95-520, eff. 8-28-07.)".