

SB0781



97TH GENERAL ASSEMBLY

State of Illinois

2011 and 2012

SB0781

Introduced 2/8/2011, by Sen. John J. Cullerton

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-24

Amends the Illinois Public Aid Code. Makes a technical change in a Section concerning disease management programs and services for chronic conditions.

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A BILL FOR

1 AN ACT concerning public aid.

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

4 Section 5. The Illinois Public Aid Code is amended by
5 changing Section 5-24 as follows:

6 (305 ILCS 5/5-24)

7 (Section scheduled to be repealed on January 1, 2014)

8 Sec. 5-24. Disease management programs and services for
9 chronic conditions; pilot project.

10 (a) In this Section, "disease management programs and ~~and~~
11 services" means services administered to patients in order to
12 improve their overall health and to prevent clinical
13 exacerbations and complications, using cost-effective,
14 evidence-based practice guidelines and patient self-management
15 strategies. Disease management programs and services include
16 all of the following:

17 (1) A population identification process.

18 (2) Evidence-based or consensus-based clinical
19 practice guidelines, risk identification, and matching of
20 interventions with clinical need.

21 (3) Patient self-management and disease education.

22 (4) Process and outcomes measurement, evaluation,
23 management, and reporting.

1 (b) Subject to appropriations, the Department of
2 Healthcare and Family Services may undertake a pilot project to
3 study patient outcomes, for patients with chronic diseases or
4 patients at risk of low birth weight or premature birth,
5 associated with the use of disease management programs and
6 services for chronic condition management. "Chronic diseases"
7 include, but are not limited to, diabetes, congestive heart
8 failure, and chronic obstructive pulmonary disease. Low birth
9 weight and premature birth include all medical and other
10 conditions that lead to poor birth outcomes or problematic
11 pregnancies.

12 (c) The disease management programs and services pilot
13 project shall examine whether chronic disease management
14 programs and services for patients with specific chronic
15 conditions do any or all of the following:

16 (1) Improve the patient's overall health in a more
17 expeditious manner.

18 (2) Lower costs in other aspects of the medical
19 assistance program, such as hospital admissions, days in
20 skilled nursing homes, emergency room visits, or more
21 frequent physician office visits.

22 (d) In carrying out the pilot project, the Department of
23 Healthcare and Family Services shall examine all relevant
24 scientific literature and shall consult with health care
25 practitioners including, but not limited to, physicians,
26 surgeons, registered pharmacists, and registered nurses.

1 (e) The Department of Healthcare and Family Services shall
2 consult with medical experts, disease advocacy groups, and
3 academic institutions to develop criteria to be used in
4 selecting a vendor for the pilot project.

5 (f) The Department of Healthcare and Family Services may
6 adopt rules to implement this Section.

7 (g) This Section is repealed 10 years after the effective
8 date of this amendatory Act of the 93rd General Assembly.

9 (Source: P.A. 95-331, eff. 8-21-07; 96-799, eff. 10-28-09.)