

# HB0648



## 98TH GENERAL ASSEMBLY

### State of Illinois

2013 and 2014

**HB0648**

Introduced 1/25/2013, by Rep. Michael J. Madigan

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-16

from Ch. 23, par. 5-16

Amends the Illinois Public Aid Code. Makes a technical change in a Section concerning managed care.

LRB098 03471 KTG 33486 b

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 5-16 as follows:

6 (305 ILCS 5/5-16) (from Ch. 23, par. 5-16)

7 Sec. 5-16. Managed Care. ~~The~~ The Illinois Department may  
8 develop and implement a Primary Care Sponsor System consistent  
9 with the provisions of this Section. The purpose of this  
10 managed care delivery system shall be to contain the costs of  
11 providing medical care to Medicaid recipients by having one  
12 provider responsible for managing all aspects of a recipient's  
13 medical care. This managed care system shall have the following  
14 characteristics:

15 (a) The Department, by rule, shall establish criteria  
16 to determine which clients must participate in this  
17 program;

18 (b) Providers participating in the program may be paid  
19 an amount per patient per month, to be set by the Illinois  
20 Department, for managing each recipient's medical care;

21 (c) Providers eligible to participate in the program  
22 shall be physicians licensed to practice medicine in all  
23 its branches, and the Illinois Department may terminate a

1 provider's participation if the provider is determined to  
2 have failed to comply with any applicable program standard  
3 or procedure established by the Illinois Department;

4 (d) Each recipient required to participate in the  
5 program must select from a panel of primary care providers  
6 or networks established by the Department in their  
7 communities;

8 (e) A recipient may change his designated primary care  
9 provider:

10 (1) when the designated source becomes  
11 unavailable, as the Illinois Department shall  
12 determine by rule; or

13 (2) when the designated primary care provider  
14 notifies the Illinois Department that it wishes to  
15 withdraw from any obligation as primary care provider;  
16 or

17 (3) in other situations, as the Illinois  
18 Department shall provide by rule;

19 (f) The Illinois Department shall, by rule, establish  
20 procedures for providing medical services when the  
21 designated source becomes unavailable or wishes to  
22 withdraw from any obligation as primary care provider  
23 taking into consideration the need for emergency or  
24 temporary medical assistance and ensuring that the  
25 recipient has continuous and unrestricted access to  
26 medical care from the date on which such unavailability or

1 withdrawal becomes effective until such time as the  
2 recipient designates a primary care source;

3 (g) Only medical care services authorized by a  
4 recipient's designated provider, except for emergency  
5 services, services performed by a provider that is owned or  
6 operated by a county and that provides non-emergency  
7 services without regard to ability to pay and such other  
8 services as provided by the Illinois Department, shall be  
9 subject to payment by the Illinois Department. The Illinois  
10 Department shall enter into an intergovernmental agreement  
11 with each county that owns or operates such a provider to  
12 develop and implement policies to minimize the provision of  
13 medical care services provided by county owned or operated  
14 providers pursuant to the foregoing exception.

15 The Illinois Department shall seek and obtain necessary  
16 authorization provided under federal law to implement such a  
17 program including the waiver of any federal regulations.

18 The Illinois Department may implement the amendatory  
19 changes to this Section made by this amendatory Act of 1991  
20 through the use of emergency rules in accordance with the  
21 provisions of Section 5.02 of the Illinois Administrative  
22 Procedure Act. For purposes of the Illinois Administrative  
23 Procedure Act, the adoption of rules to implement the  
24 amendatory changes to this Section made by this amendatory Act  
25 of 1991 shall be deemed an emergency and necessary for the  
26 public interest, safety and welfare.

1           The Illinois Department may establish a managed care system  
2 demonstration program, on a limited basis, as described in this  
3 Section. The demonstration program shall terminate on June 30,  
4 1997. Within 30 days after the end of each year of the  
5 demonstration program's operation, the Illinois Department  
6 shall report to the Governor and the General Assembly  
7 concerning the operation of the demonstration program.

8           (Source: P.A. 87-14; 88-490.)