

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 Long Term Acute Care Hospital Quality  
5 Improvement Transfer Program Act is amended by changing  
6 Sections 10, 15, 20, and 50 as follows:

7 (210 ILCS 155/10)

8 Sec. 10. Definitions. As used in this Act:

9 (a) "CARE tool" means the Continuity and Record Evaluation  
10 (CARE) tool. It is a patient assessment instrument that has  
11 been developed to document the medical, cognitive, functional,  
12 and discharge status of persons receiving health care services  
13 in acute and post-acute care settings. The data collected is  
14 able to document provider-level quality of care (patient  
15 outcomes) and characterize the clinical complexity of  
16 patients. For the purposes of this Act, the CARE tool must be  
17 identical to the most current version required by the federal  
18 Centers for Medicare and Medicaid Services.

19 (b) "Department" means the Illinois Department of  
20 Healthcare and Family Services.

21 (c) "Discharge" means the release of a patient from  
22 hospital care for any discharge disposition other than a leave  
23 of absence, even if for Medicare payment purposes the discharge

1 fits the definition of an interrupted stay.

2 (d) "FTE" means "full-time equivalent" or a person or  
3 persons employed in one full-time position.

4 (e) "Hospital" means an institution, place, building, or  
5 agency located in this State that is licensed as a general  
6 acute hospital by the Illinois Department of Public Health  
7 under the Hospital Licensing Act, whether public or private and  
8 whether organized for profit or not-for-profit.

9 (f) "ICU" means intensive care unit.

10 (g) "LTAC hospital" means an Illinois hospital that is  
11 designated by Medicare as a long term acute care hospital as  
12 described in Section 1886(d)(1)(B)(iv)(I) of the Social  
13 Security Act and has an average length of Medicaid inpatient  
14 stay greater than 25 days as reported on the hospital's 2008  
15 Medicaid cost report on file as of February 15, 2010, or a  
16 hospital that begins operations after January 1, 2009 and is  
17 designated by Medicare as a long term acute care hospital.

18 (h) "LTAC hospital criteria" means nationally recognized  
19 evidence-based evaluation criteria that have been publicly  
20 tested and includes criteria specific to an LTAC hospital for  
21 admission, continuing stay, and discharge. The criteria cannot  
22 include criteria derived or developed by or for a specific  
23 hospital or group of hospitals. Criteria and tools developed by  
24 hospitals or hospital associations or hospital-owned  
25 organizations are not acceptable and do not meet the  
26 requirements of this subsection.

1 (i) "Patient" means an individual who is admitted to a  
2 hospital for an inpatient stay.

3 (j) "Program" means the Long Term Acute Care Hospital  
4 Quality Improvement Transfer Program established by this Act.

5 (k) "STAC hospital" means a hospital that is not an LTAC  
6 hospital as defined in this Act or a psychiatric hospital or a  
7 rehabilitation hospital.

8 (Source: P.A. 96-1130, eff. 7-20-10; 97-662, eff. 1-13-12;  
9 97-667, eff. 1-13-12.)

10 (210 ILCS 155/15)

11 Sec. 15. Qualifying Hospitals.

12 (a) Beginning October 1, 2010, the Department shall  
13 establish the Long Term Acute Care Hospital Quality Improvement  
14 Transfer Program. Any hospital may participate in the program  
15 if it meets the requirements of this Section as determined by  
16 the Department.

17 (b) To participate in the program a hospital must do the  
18 following:

19 (1) Operate as an LTAC hospital.

20 (2) Employ one-half of an FTE (designated for case  
21 management) for every 15 patients admitted to the hospital.

22 (3) Maintain on-site physician coverage 24 hours a day,  
23 7 days a week.

24 (4) Maintain on-site respiratory therapy coverage 24  
25 hours a day, 7 days a week.

1 (c) A hospital must also execute a program participation  
2 agreement with the Department. The agreement must include:

3 (1) An attestation that the hospital complies with the  
4 criteria in subsection (b) of this Section.

5 (2) A process for the hospital to report its continuing  
6 compliance with subsection (b) of this Section. The  
7 hospital must submit a compliance report at least annually.

8 (3) A requirement that the hospital complete and  
9 electronically submit to the Department ~~the CARE tool (the~~  
10 ~~most currently available version or an equivalent tool~~  
11 ~~designated and approved for use by the Department)~~ for each  
12 patient no later than 13 ~~7~~ calendar days after discharge:—

13 (A) the CARE tool in the format required by the  
14 federal Centers for Medicare and Medicaid Services;  
15 and

16 (B) in an electronic format developed by the  
17 Department, (i) whether the patient was successfully  
18 weaned off invasive mechanical ventilation, (ii)  
19 whether the patient, if the patient was a ventilator  
20 patient, acquired pneumonia, and (iii) whether the  
21 patient fell and required an ancillary or surgical  
22 procedure (e.g., x-ray, MRI, sutures, or surgery).

23 (4) A requirement that the hospital use a patient  
24 satisfaction survey specifically designed for LTAC  
25 hospital settings. The hospital must submit survey results  
26 data to the Department at least annually.

1           (5) A requirement that the hospital accept all  
2 clinically approved patients for admission or transfer  
3 from a STAC hospital with the exception of STAC hospitals  
4 identified in paragraphs (1) and (2) under subsection (a)  
5 of Section 25 of this Act. The patient must be evaluated  
6 using LTAC hospital criteria approved by the Department for  
7 use in this program and meet the appropriate criteria.

8           (6) A requirement that the hospital report quality and  
9 outcome measurement data, as described in Section 20 of  
10 this Act, to the Department at least annually.

11           (7) A requirement that the hospital provide the  
12 Department full access to patient data and other data  
13 maintained by the hospital. Access must be in compliance  
14 with State and federal law.

15           (8) A requirement that the hospital use LTAC hospital  
16 criteria to evaluate patients that are admitted to the  
17 hospital to determine that the patient is in the most  
18 appropriate setting.

19 (Source: P.A. 96-1130, eff. 7-20-10.)

20 (210 ILCS 155/20)

21 Sec. 20. Quality and outcome measurement data.

22 (a) For proper evaluation and monitoring of the program,  
23 each LTAC hospital must provide quality and outcome measurement  
24 data ("measures") identical to Medicare as specified in  
25 Medicare's LTCH Quality Reporting Program Manual (version 2.0)

1 ~~and any subsequent revisions subsections (c) through (h) of~~  
2 ~~this Section to the Department for patients treated under this~~  
3 ~~program. The Department may develop measures in addition to the~~  
4 ~~minimum measures required under this Section.~~

5 (b) Two sets of measures must be calculated. The first set  
6 should only use data for medical assistance patients, and the  
7 second set should include all patients of the LTAC hospital  
8 regardless of payer.

9 (c) (Blank). ~~Average LTAC hospital length of stay for~~  
10 ~~patients discharged during the reporting period.~~

11 (d) (Blank). ~~Adverse outcomes rates: Percent of patients~~  
12 ~~who expired or whose condition worsens and requires treatment~~  
13 ~~in a STAC hospital.~~

14 (e) (Blank). ~~Ventilator weaning rate: Percent of patients~~  
15 ~~discharged during the reporting period who have been~~  
16 ~~successfully weaned off invasive mechanical ventilation.~~

17 (f) (Blank). ~~Central Line Infection Rate per 1000 central~~  
18 ~~line days: Number of patients discharged from an LTAC hospital~~  
19 ~~during the reporting period that had a central line in place~~  
20 ~~and developed a bloodstream infection 48 hours or more after~~  
21 ~~admission to the LTAC hospital.~~

22 (g) (Blank). ~~Acquired pressure ulcers per 1000 patient~~  
23 ~~days.~~

24 (h) (Blank). ~~Falls with injury per 1000 patient days:~~  
25 ~~Number of falls among discharged LTAC hospital patients~~  
26 ~~discharged during the reporting period, who fell during the~~

1 ~~LTAC hospital stay, regardless of distance fallen, that~~  
2 ~~required an ancillary or surgical procedure (i.e. x-ray, MRI,~~  
3 ~~sutures, surgery, etc.)~~

4 (Source: P.A. 96-1130, eff. 7-20-10.)

5 (210 ILCS 155/50)

6 Sec. 50. Duties of the Department.

7 (a) The Department is responsible for implementing,  
8 monitoring, and evaluating the program. This includes but is  
9 not limited to:

10 (1) Collecting data required under Section 15 and data  
11 necessary to calculate the measures under Section 20 of  
12 this Act. The Department must make every effort to collect  
13 this data with the minimal amount of administrative burden  
14 to participating LTAC hospitals.

15 (2) Setting annual benchmarks or targets for the  
16 measures in Section 20 of this Act ~~or other measures beyond~~  
17 ~~the minimum required under Section 20.~~ The Department must  
18 consult participating LTAC hospitals when setting these  
19 benchmarks and targets.

20 (3) Monitoring compliance with all requirements of  
21 this Act.

22 (b) The Department shall include specific information on  
23 the Program in its annual medical programs report.

24 (c) The Department must establish monitoring procedures  
25 that ensure the LTAC supplemental payment is only paid for

1 patients who upon admission meet the LTAC hospital criteria.  
2 The Department must notify qualified LTAC hospitals of the  
3 procedures and establish an appeals process as part of those  
4 procedures. The Department must recoup any LTAC supplemental  
5 payments that are identified as being paid for patients who do  
6 not meet the LTAC hospital criteria.

7 (d) The Department must implement the program by October 1,  
8 2010.

9 (e) The Department must create and distribute to LTAC  
10 hospitals the agreement required under subsection (c) of  
11 Section 15 no later than September 1, 2010.

12 (f) The Department must notify Illinois hospitals which  
13 LTAC hospital criteria are approved for use under the program.  
14 The Department may limit LTAC hospital criteria to the most  
15 strict criteria that meet the definitions of this Act.

16 (g) (Blank). ~~The Department must identify discharge tools~~  
17 ~~that are considered equivalent to the CARE tool and approved~~  
18 ~~for use under the program. The Department must notify LTAC~~  
19 ~~hospitals which tools are approved for use under the program.~~

20 (h) The Department must notify Illinois LTAC hospitals of  
21 the program and inform them how to apply for qualification and  
22 what the qualification requirements are as described under  
23 Section 15 of this Act.

24 (i) The Department must notify Illinois STAC hospitals  
25 about the operation and implementation of the program  
26 established by this Act. The Department must also notify LTAC



1 hospitals that accepting transfers from the STAC hospitals  
2 identified in paragraphs (1) and (2) under subsection (a) of  
3 Section 25 of this Act are not required under paragraph (5) of  
4 subsection (c) of Section 15 of this Act. The Department must  
5 notify LTAC hospitals that accepting transfers from the STAC  
6 hospitals identified in paragraphs (1) and (2) under subsection  
7 (a) of Section 25 of this Act shall negatively impact the  
8 savings calculations under the Program evaluation required by  
9 Section 40 of this Act and shall in turn require the Department  
10 to initiate the penalty described in subsection (d) of Section  
11 40 of this Act.

12 (j) The Department shall deem LTAC hospitals qualified  
13 under Section 15 of this Act as qualifying for expedited  
14 payments.

15 (k) The Department may use up to \$500,000 of funds  
16 contained in the Public Aid Recoveries Trust Fund per State  
17 fiscal year to operate the program under this Act. The  
18 Department may expand existing contracts, issue new contracts,  
19 issue personal service contracts, or purchase other services,  
20 supplies, or equipment.

21 (l) The Department may promulgate rules as allowed by the  
22 Illinois Administrative Procedure Act to implement this Act;  
23 however, the requirements under this Act shall be implemented  
24 by the Department even if the Department's proposed rules are  
25 not yet adopted by the implementation date of October 1, 2010.

26 (Source: P.A. 96-1130, eff. 7-20-10.)

1           Section 99. Effective date. This Act takes effect upon  
2           becoming law.