



## 104TH GENERAL ASSEMBLY

### State of Illinois

2025 and 2026

HB3271

Introduced 2/18/2025, by Rep. Anna Moeller

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5.4

from Ch. 23, par. 5-5.4

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for dates of service starting July 1, 2025, reimbursement calculations and direct payment for services provided by facilities licensed under the ID/DD Community Care Act are the responsibility of the Department of Healthcare and Family Services instead of the Department of Human Services. Requires appropriations for the facilities licensed under the ID/DD Community Care Act to be shifted from the Department of Human Services to the Department of Healthcare and Family Services. Provides that nothing shall prohibit the Department of Healthcare and Family Services from paying more than the rates specified in the Code. Requires the Department of Healthcare and Family Services to work with the Department of Human Services to study and review the reimbursement calculations and direct payments for facilities licensed under the ID/DD Community Care Act and for facilities licensed under the MC/DD Act. Effective July 1, 2025.

LRB104 10623 KTG 20699 b

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 5-5.4 as follows:

6 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)

7 Sec. 5-5.4. Standards of payment; Department of Healthcare  
8 and Family Services. The Department of Healthcare and Family  
9 Services shall develop standards of payment of nursing  
10 facility and ICF/DD services in facilities providing such  
11 services under this Article which:

12 (1) Provide for the determination of a facility's payment  
13 for nursing facility or ICF/DD services on a prospective  
14 basis. The amount of the payment rate for all nursing  
15 facilities certified by the Department of Public Health under  
16 the ID/DD Community Care Act or the Nursing Home Care Act as  
17 Intermediate Care for the Developmentally Disabled facilities,  
18 Long Term Care for Under Age 22 facilities, Skilled Nursing  
19 facilities, or Intermediate Care facilities under the medical  
20 assistance program shall be prospectively established annually  
21 on the basis of historical, financial, and statistical data  
22 reflecting actual costs from prior years, which shall be  
23 applied to the current rate year and updated for inflation,

1     except that the capital cost element for newly constructed  
2     facilities shall be based upon projected budgets. The annually  
3     established payment rate shall take effect on July 1 in 1984  
4     and subsequent years. No rate increase and no update for  
5     inflation shall be provided on or after July 1, 1994, unless  
6     specifically provided for in this Section. The changes made by  
7     Public Act 93-841 extending the duration of the prohibition  
8     against a rate increase or update for inflation are effective  
9     retroactive to July 1, 2004.

10     For facilities licensed by the Department of Public Health  
11     under the Nursing Home Care Act as Intermediate Care for the  
12     Developmentally Disabled facilities or Long Term Care for  
13     Under Age 22 facilities, the rates taking effect on July 1,  
14     1998 shall include an increase of 3%. For facilities licensed  
15     by the Department of Public Health under the Nursing Home Care  
16     Act as Skilled Nursing facilities or Intermediate Care  
17     facilities, the rates taking effect on July 1, 1998 shall  
18     include an increase of 3% plus \$1.10 per resident-day, as  
19     defined by the Department. For facilities licensed by the  
20     Department of Public Health under the Nursing Home Care Act as  
21     Intermediate Care Facilities for the Developmentally Disabled  
22     or Long Term Care for Under Age 22 facilities, the rates taking  
23     effect on January 1, 2006 shall include an increase of 3%. For  
24     facilities licensed by the Department of Public Health under  
25     the Nursing Home Care Act as Intermediate Care Facilities for  
26     the Developmentally Disabled or Long Term Care for Under Age

1 22 facilities, the rates taking effect on January 1, 2009  
2 shall include an increase sufficient to provide a \$0.50 per  
3 hour wage increase for non-executive staff. For facilities  
4 licensed by the Department of Public Health under the ID/DD  
5 Community Care Act as ID/DD Facilities the rates taking effect  
6 within 30 days after July 6, 2017 (the effective date of Public  
7 Act 100-23) shall include an increase sufficient to provide a  
8 \$0.75 per hour wage increase for non-executive staff. The  
9 Department shall adopt rules, including emergency rules under  
10 subsection (y) of Section 5-45 of the Illinois Administrative  
11 Procedure Act, to implement the provisions of this paragraph.  
12 For facilities licensed by the Department of Public Health  
13 under the ID/DD Community Care Act as ID/DD Facilities and  
14 under the MC/DD Act as MC/DD Facilities, the rates taking  
15 effect within 30 days after June 5, 2019 (the effective date of  
16 Public Act 101-10) shall include an increase sufficient to  
17 provide a \$0.50 per hour wage increase for non-executive  
18 front-line personnel, including, but not limited to, direct  
19 support persons, aides, front-line supervisors, qualified  
20 intellectual disabilities professionals, nurses, and  
21 non-administrative support staff. The Department shall adopt  
22 rules, including emergency rules under subsection (bb) of  
23 Section 5-45 of the Illinois Administrative Procedure Act, to  
24 implement the provisions of this paragraph.

25 For facilities licensed by the Department of Public Health  
26 under the Nursing Home Care Act as Intermediate Care for the

1 Developmentally Disabled facilities or Long Term Care for  
2 Under Age 22 facilities, the rates taking effect on July 1,  
3 1999 shall include an increase of 1.6% plus \$3.00 per  
4 resident-day, as defined by the Department. For facilities  
5 licensed by the Department of Public Health under the Nursing  
6 Home Care Act as Skilled Nursing facilities or Intermediate  
7 Care facilities, the rates taking effect on July 1, 1999 shall  
8 include an increase of 1.6% and, for services provided on or  
9 after October 1, 1999, shall be increased by \$4.00 per  
10 resident-day, as defined by the Department.

11 For facilities licensed by the Department of Public Health  
12 under the Nursing Home Care Act as Intermediate Care for the  
13 Developmentally Disabled facilities or Long Term Care for  
14 Under Age 22 facilities, the rates taking effect on July 1,  
15 2000 shall include an increase of 2.5% per resident-day, as  
16 defined by the Department. For facilities licensed by the  
17 Department of Public Health under the Nursing Home Care Act as  
18 Skilled Nursing facilities or Intermediate Care facilities,  
19 the rates taking effect on July 1, 2000 shall include an  
20 increase of 2.5% per resident-day, as defined by the  
21 Department.

22 For facilities licensed by the Department of Public Health  
23 under the Nursing Home Care Act as skilled nursing facilities  
24 or intermediate care facilities, a new payment methodology  
25 must be implemented for the nursing component of the rate  
26 effective July 1, 2003. The Department of Public Aid (now

1 Healthcare and Family Services) shall develop the new payment  
2 methodology using the Minimum Data Set (MDS) as the instrument  
3 to collect information concerning nursing home resident  
4 condition necessary to compute the rate. The Department shall  
5 develop the new payment methodology to meet the unique needs  
6 of Illinois nursing home residents while remaining subject to  
7 the appropriations provided by the General Assembly. A  
8 transition period from the payment methodology in effect on  
9 June 30, 2003 to the payment methodology in effect on July 1,  
10 2003 shall be provided for a period not exceeding 3 years and  
11 184 days after implementation of the new payment methodology  
12 as follows:

13 (A) For a facility that would receive a lower nursing  
14 component rate per patient day under the new system than  
15 the facility received effective on the date immediately  
16 preceding the date that the Department implements the new  
17 payment methodology, the nursing component rate per  
18 patient day for the facility shall be held at the level in  
19 effect on the date immediately preceding the date that the  
20 Department implements the new payment methodology until a  
21 higher nursing component rate of reimbursement is achieved  
22 by that facility.

23 (B) For a facility that would receive a higher nursing  
24 component rate per patient day under the payment  
25 methodology in effect on July 1, 2003 than the facility  
26 received effective on the date immediately preceding the

1 date that the Department implements the new payment  
2 methodology, the nursing component rate per patient day  
3 for the facility shall be adjusted.

4 (C) Notwithstanding paragraphs (A) and (B), the  
5 nursing component rate per patient day for the facility  
6 shall be adjusted subject to appropriations provided by  
7 the General Assembly.

8 For facilities licensed by the Department of Public Health  
9 under the Nursing Home Care Act as Intermediate Care for the  
10 Developmentally Disabled facilities or Long Term Care for  
11 Under Age 22 facilities, the rates taking effect on March 1,  
12 2001 shall include a statewide increase of 7.85%, as defined  
13 by the Department.

14 Notwithstanding any other provision of this Section, for  
15 facilities licensed by the Department of Public Health under  
16 the Nursing Home Care Act as skilled nursing facilities or  
17 intermediate care facilities, except facilities participating  
18 in the Department's demonstration program pursuant to the  
19 provisions of Title 77, Part 300, Subpart T of the Illinois  
20 Administrative Code, the numerator of the ratio used by the  
21 Department of Healthcare and Family Services to compute the  
22 rate payable under this Section using the Minimum Data Set  
23 (MDS) methodology shall incorporate the following annual  
24 amounts as the additional funds appropriated to the Department  
25 specifically to pay for rates based on the MDS nursing  
26 component methodology in excess of the funding in effect on

1 December 31, 2006:

2 (i) For rates taking effect January 1, 2007,  
3 \$60,000,000.

4 (ii) For rates taking effect January 1, 2008,  
5 \$110,000,000.

6 (iii) For rates taking effect January 1, 2009,  
7 \$194,000,000.

8 (iv) For rates taking effect April 1, 2011, or the  
9 first day of the month that begins at least 45 days after  
10 February 16, 2011 (the effective date of Public Act  
11 96-1530), \$416,500,000 or an amount as may be necessary to  
12 complete the transition to the MDS methodology for the  
13 nursing component of the rate. Increased payments under  
14 this item (iv) are not due and payable, however, until (i)  
15 the methodologies described in this paragraph are approved  
16 by the federal government in an appropriate State Plan  
17 amendment and (ii) the assessment imposed by Section 5B-2  
18 of this Code is determined to be a permissible tax under  
19 Title XIX of the Social Security Act.

20 Notwithstanding any other provision of this Section, for  
21 facilities licensed by the Department of Public Health under  
22 the Nursing Home Care Act as skilled nursing facilities or  
23 intermediate care facilities, the support component of the  
24 rates taking effect on January 1, 2008 shall be computed using  
25 the most recent cost reports on file with the Department of  
26 Healthcare and Family Services no later than April 1, 2005,

1 updated for inflation to January 1, 2006.

2 For facilities licensed by the Department of Public Health  
3 under the Nursing Home Care Act as Intermediate Care for the  
4 Developmentally Disabled facilities or Long Term Care for  
5 Under Age 22 facilities, the rates taking effect on April 1,  
6 2002 shall include a statewide increase of 2.0%, as defined by  
7 the Department. This increase terminates on July 1, 2002;  
8 beginning July 1, 2002 these rates are reduced to the level of  
9 the rates in effect on March 31, 2002, as defined by the  
10 Department.

11 For facilities licensed by the Department of Public Health  
12 under the Nursing Home Care Act as skilled nursing facilities  
13 or intermediate care facilities, the rates taking effect on  
14 July 1, 2001 shall be computed using the most recent cost  
15 reports on file with the Department of Public Aid no later than  
16 April 1, 2000, updated for inflation to January 1, 2001. For  
17 rates effective July 1, 2001 only, rates shall be the greater  
18 of the rate computed for July 1, 2001 or the rate effective on  
19 June 30, 2001.

20 Notwithstanding any other provision of this Section, for  
21 facilities licensed by the Department of Public Health under  
22 the Nursing Home Care Act as skilled nursing facilities or  
23 intermediate care facilities, the Illinois Department shall  
24 determine by rule the rates taking effect on July 1, 2002,  
25 which shall be 5.9% less than the rates in effect on June 30,  
26 2002.

1           Notwithstanding any other provision of this Section, for  
2 facilities licensed by the Department of Public Health under  
3 the Nursing Home Care Act as skilled nursing facilities or  
4 intermediate care facilities, if the payment methodologies  
5 required under Section 5A-12 and the waiver granted under 42  
6 CFR 433.68 are approved by the United States Centers for  
7 Medicare and Medicaid Services, the rates taking effect on  
8 July 1, 2004 shall be 3.0% greater than the rates in effect on  
9 June 30, 2004. These rates shall take effect only upon  
10 approval and implementation of the payment methodologies  
11 required under Section 5A-12.

12           Notwithstanding any other provisions of this Section, for  
13 facilities licensed by the Department of Public Health under  
14 the Nursing Home Care Act as skilled nursing facilities or  
15 intermediate care facilities, the rates taking effect on  
16 January 1, 2005 shall be 3% more than the rates in effect on  
17 December 31, 2004.

18           Notwithstanding any other provision of this Section, for  
19 facilities licensed by the Department of Public Health under  
20 the Nursing Home Care Act as skilled nursing facilities or  
21 intermediate care facilities, effective January 1, 2009, the  
22 per diem support component of the rates effective on January  
23 1, 2008, computed using the most recent cost reports on file  
24 with the Department of Healthcare and Family Services no later  
25 than April 1, 2005, updated for inflation to January 1, 2006,  
26 shall be increased to the amount that would have been derived

1 using standard Department of Healthcare and Family Services  
2 methods, procedures, and inflators.

3 Notwithstanding any other provisions of this Section, for  
4 facilities licensed by the Department of Public Health under  
5 the Nursing Home Care Act as intermediate care facilities that  
6 are federally defined as Institutions for Mental Disease, or  
7 facilities licensed by the Department of Public Health under  
8 the Specialized Mental Health Rehabilitation Act of 2013, a  
9 socio-development component rate equal to 6.6% of the  
10 facility's nursing component rate as of January 1, 2006 shall  
11 be established and paid effective July 1, 2006. The  
12 socio-development component of the rate shall be increased by  
13 a factor of 2.53 on the first day of the month that begins at  
14 least 45 days after January 11, 2008 (the effective date of  
15 Public Act 95-707). As of August 1, 2008, the  
16 socio-development component rate shall be equal to 6.6% of the  
17 facility's nursing component rate as of January 1, 2006,  
18 multiplied by a factor of 3.53. For services provided on or  
19 after April 1, 2011, or the first day of the month that begins  
20 at least 45 days after February 16, 2011 (the effective date of  
21 Public Act 96-1530), whichever is later, the Illinois  
22 Department may by rule adjust these socio-development  
23 component rates, and may use different adjustment  
24 methodologies for those facilities participating, and those  
25 not participating, in the Illinois Department's demonstration  
26 program pursuant to the provisions of Title 77, Part 300,

1 Subpart T of the Illinois Administrative Code, but in no case  
2 may such rates be diminished below those in effect on August 1,  
3 2008.

4 For facilities licensed by the Department of Public Health  
5 under the Nursing Home Care Act as Intermediate Care for the  
6 Developmentally Disabled facilities or as long-term care  
7 facilities for residents under 22 years of age, the rates  
8 taking effect on July 1, 2003 shall include a statewide  
9 increase of 4%, as defined by the Department.

10 For facilities licensed by the Department of Public Health  
11 under the Nursing Home Care Act as Intermediate Care for the  
12 Developmentally Disabled facilities or Long Term Care for  
13 Under Age 22 facilities, the rates taking effect on the first  
14 day of the month that begins at least 45 days after January 11,  
15 2008 (the effective date of Public Act 95-707) shall include a  
16 statewide increase of 2.5%, as defined by the Department.

17 Notwithstanding any other provision of this Section, for  
18 facilities licensed by the Department of Public Health under  
19 the Nursing Home Care Act as skilled nursing facilities or  
20 intermediate care facilities, effective January 1, 2005,  
21 facility rates shall be increased by the difference between  
22 (i) a facility's per diem property, liability, and malpractice  
23 insurance costs as reported in the cost report filed with the  
24 Department of Public Aid and used to establish rates effective  
25 July 1, 2001 and (ii) those same costs as reported in the  
26 facility's 2002 cost report. These costs shall be passed

1 through to the facility without caps or limitations, except  
2 for adjustments required under normal auditing procedures.

3 Rates established effective each July 1 shall govern  
4 payment for services rendered throughout that fiscal year,  
5 except that rates established on July 1, 1996 shall be  
6 increased by 6.8% for services provided on or after January 1,  
7 1997. Such rates will be based upon the rates calculated for  
8 the year beginning July 1, 1990, and for subsequent years  
9 thereafter until June 30, 2001 shall be based on the facility  
10 cost reports for the facility fiscal year ending at any point  
11 in time during the previous calendar year, updated to the  
12 midpoint of the rate year. The cost report shall be on file  
13 with the Department no later than April 1 of the current rate  
14 year. Should the cost report not be on file by April 1, the  
15 Department shall base the rate on the latest cost report filed  
16 by each skilled care facility and intermediate care facility,  
17 updated to the midpoint of the current rate year. In  
18 determining rates for services rendered on and after July 1,  
19 1985, fixed time shall not be computed at less than zero. The  
20 Department shall not make any alterations of regulations which  
21 would reduce any component of the Medicaid rate to a level  
22 below what that component would have been utilizing in the  
23 rate effective on July 1, 1984.

24 (2) Shall take into account the actual costs incurred by  
25 facilities in providing services for recipients of skilled  
26 nursing and intermediate care services under the medical

1 assistance program.

2 (3) Shall take into account the medical and psycho-social  
3 characteristics and needs of the patients.

4 (4) Shall take into account the actual costs incurred by  
5 facilities in meeting licensing and certification standards  
6 imposed and prescribed by the State of Illinois, any of its  
7 political subdivisions or municipalities and by the U.S.  
8 Department of Health and Human Services pursuant to Title XIX  
9 of the Social Security Act.

10 The Department of Healthcare and Family Services shall  
11 develop precise standards for payments to reimburse nursing  
12 facilities for any utilization of appropriate rehabilitative  
13 personnel for the provision of rehabilitative services which  
14 is authorized by federal regulations, including reimbursement  
15 for services provided by qualified therapists or qualified  
16 assistants, and which is in accordance with accepted  
17 professional practices. Reimbursement also may be made for  
18 utilization of other supportive personnel under appropriate  
19 supervision.

20 The Department shall develop enhanced payments to offset  
21 the additional costs incurred by a facility serving  
22 exceptional need residents and shall allocate at least  
23 \$4,000,000 of the funds collected from the assessment  
24 established by Section 5B-2 of this Code for such payments.  
25 For the purpose of this Section, "exceptional needs" means,  
26 but need not be limited to, ventilator care and traumatic

1 brain injury care. The enhanced payments for exceptional need  
2 residents under this paragraph are not due and payable,  
3 however, until (i) the methodologies described in this  
4 paragraph are approved by the federal government in an  
5 appropriate State Plan amendment and (ii) the assessment  
6 imposed by Section 5B-2 of this Code is determined to be a  
7 permissible tax under Title XIX of the Social Security Act.

8 Beginning January 1, 2014 the methodologies for  
9 reimbursement of nursing facility services as provided under  
10 this Section 5-5.4 shall no longer be applicable for services  
11 provided on or after January 1, 2014.

12 No payment increase under this Section for the MDS  
13 methodology, exceptional care residents, or the  
14 socio-development component rate established by Public Act  
15 96-1530 of the 96th General Assembly and funded by the  
16 assessment imposed under Section 5B-2 of this Code shall be  
17 due and payable until after the Department notifies the  
18 long-term care providers, in writing, that the payment  
19 methodologies to long-term care providers required under this  
20 Section have been approved by the Centers for Medicare and  
21 Medicaid Services of the U.S. Department of Health and Human  
22 Services and the waivers under 42 CFR 433.68 for the  
23 assessment imposed by this Section, if necessary, have been  
24 granted by the Centers for Medicare and Medicaid Services of  
25 the U.S. Department of Health and Human Services. Upon  
26 notification to the Department of approval of the payment

1 methodologies required under this Section and the waivers  
2 granted under 42 CFR 433.68, all increased payments otherwise  
3 due under this Section prior to the date of notification shall  
4 be due and payable within 90 days of the date federal approval  
5 is received.

6 On and after July 1, 2012, the Department shall reduce any  
7 rate of reimbursement for services or other payments or alter  
8 any methodologies authorized by this Code to reduce any rate  
9 of reimbursement for services or other payments in accordance  
10 with Section 5-5e.

11 For facilities licensed by the Department of Public Health  
12 under the ID/DD Community Care Act as ID/DD Facilities and  
13 under the MC/DD Act as MC/DD Facilities, subject to federal  
14 approval, the rates taking effect for services delivered on or  
15 after August 1, 2019 shall be increased by 3.5% over the rates  
16 in effect on June 30, 2019. The Department shall adopt rules,  
17 including emergency rules under subsection (ii) of Section  
18 5-45 of the Illinois Administrative Procedure Act, to  
19 implement the provisions of this Section, including wage  
20 increases for direct care staff.

21 For facilities licensed by the Department of Public Health  
22 under the ID/DD Community Care Act as ID/DD Facilities and  
23 under the MC/DD Act as MC/DD Facilities, subject to federal  
24 approval, the rates taking effect on the latter of the  
25 approval date of the State Plan Amendment for these facilities  
26 or the Waiver Amendment for the home and community-based

1 services settings shall include an increase sufficient to  
2 provide a \$0.26 per hour wage increase to the base wage for  
3 non-executive staff. The Department shall adopt rules,  
4 including emergency rules as authorized by Section 5-45 of the  
5 Illinois Administrative Procedure Act, to implement the  
6 provisions of this Section, including wage increases for  
7 direct care staff.

8 For facilities licensed by the Department of Public Health  
9 under the ID/DD Community Care Act as ID/DD Facilities and  
10 under the MC/DD Act as MC/DD Facilities, subject to federal  
11 approval of the State Plan Amendment and the Waiver Amendment  
12 for the home and community-based services settings, the rates  
13 taking effect for the services delivered on or after July 1,  
14 2020 shall include an increase sufficient to provide a \$1.00  
15 per hour wage increase for non-executive staff. For services  
16 delivered on or after January 1, 2021, subject to federal  
17 approval of the State Plan Amendment and the Waiver Amendment  
18 for the home and community-based services settings, shall  
19 include an increase sufficient to provide a \$0.50 per hour  
20 increase for non-executive staff. The Department shall adopt  
21 rules, including emergency rules as authorized by Section 5-45  
22 of the Illinois Administrative Procedure Act, to implement the  
23 provisions of this Section, including wage increases for  
24 direct care staff.

25 For facilities licensed by the Department of Public Health  
26 under the ID/DD Community Care Act as ID/DD Facilities and

1 under the MC/DD Act as MC/DD Facilities, subject to federal  
2 approval of the State Plan Amendment, the rates taking effect  
3 for the residential services delivered on or after July 1,  
4 2021, shall include an increase sufficient to provide a \$0.50  
5 per hour increase for aides in the rate methodology. For  
6 facilities licensed by the Department of Public Health under  
7 the ID/DD Community Care Act as ID/DD Facilities and under the  
8 MC/DD Act as MC/DD Facilities, subject to federal approval of  
9 the State Plan Amendment, the rates taking effect for the  
10 residential services delivered on or after January 1, 2022  
11 shall include an increase sufficient to provide a \$1.00 per  
12 hour increase for aides in the rate methodology. In addition,  
13 for residential services delivered on or after January 1, 2022  
14 such rates shall include an increase sufficient to provide  
15 wages for all residential non-executive direct care staff,  
16 excluding aides, at the federal Department of Labor, Bureau of  
17 Labor Statistics' average wage as defined in rule by the  
18 Department. The Department shall adopt rules, including  
19 emergency rules as authorized by Section 5-45 of the Illinois  
20 Administrative Procedure Act, to implement the provisions of  
21 this Section.

22 For facilities licensed by the Department of Public Health  
23 under the ID/DD Community Care Act as ID/DD facilities and  
24 under the MC/DD Act as MC/DD facilities, subject to federal  
25 approval of the State Plan Amendment, the rates taking effect  
26 for services delivered on or after January 1, 2023, shall

1 include a \$1.00 per hour wage increase for all direct support  
2 personnel and all other frontline personnel who are not  
3 subject to the Bureau of Labor Statistics' average wage  
4 increases, who work in residential and community day services  
5 settings, with at least \$0.50 of those funds to be provided as  
6 a direct increase to all aide base wages, with the remaining  
7 \$0.50 to be used flexibly for base wage increases to the rate  
8 methodology for aides. In addition, for residential services  
9 delivered on or after January 1, 2023 the rates shall include  
10 an increase sufficient to provide wages for all residential  
11 non-executive direct care staff, excluding aides, at the  
12 federal Department of Labor, Bureau of Labor Statistics'  
13 average wage as determined by the Department. Also, for  
14 services delivered on or after January 1, 2023, the rates will  
15 include adjustments to employment-related expenses as defined  
16 in rule by the Department. The Department shall adopt rules,  
17 including emergency rules as authorized by Section 5-45 of the  
18 Illinois Administrative Procedure Act, to implement the  
19 provisions of this Section.

20 For facilities licensed by the Department of Public Health  
21 under the ID/DD Community Care Act as ID/DD facilities and  
22 under the MC/DD Act as MC/DD facilities, subject to federal  
23 approval of the State Plan Amendment, the rates taking effect  
24 for services delivered on or after January 1, 2024 shall  
25 include a \$2.50 per hour wage increase for all direct support  
26 personnel and all other frontline personnel who are not

1 subject to the Bureau of Labor Statistics' average wage  
2 increases and who work in residential and community day  
3 services settings. At least \$1.25 of the per hour wage  
4 increase shall be provided as a direct increase to all aide  
5 base wages, and the remaining \$1.25 of the per hour wage  
6 increase shall be used flexibly for base wage increases to the  
7 rate methodology for aides. In addition, for residential  
8 services delivered on or after January 1, 2024, the rates  
9 shall include an increase sufficient to provide wages for all  
10 residential non-executive direct care staff, excluding aides,  
11 at the federal Department of Labor, Bureau of Labor  
12 Statistics' average wage as determined by the Department.  
13 Also, for services delivered on or after January 1, 2024, the  
14 rates will include adjustments to employment-related expenses  
15 as defined in rule by the Department. The Department shall  
16 adopt rules, including emergency rules as authorized by  
17 Section 5-45 of the Illinois Administrative Procedure Act, to  
18 implement the provisions of this Section.

19 For facilities licensed by the Department of Public Health  
20 under the ID/DD Community Care Act as ID/DD facilities and  
21 under the MC/DD Act as MC/DD facilities, subject to federal  
22 approval of a State Plan Amendment, the rates taking effect  
23 for services delivered on or after January 1, 2025 shall  
24 include a \$1.00 per hour wage increase for all direct support  
25 personnel and all other frontline personnel who are not  
26 subject to the Bureau of Labor Statistics' average wage

1 increases and who work in residential and community day  
2 services settings, with at least \$0.75 of those funds to be  
3 provided as a direct increase to all aide base wages and the  
4 remaining \$0.25 to be used flexibly for base wage increases to  
5 the rate methodology for aides. These increases shall not be  
6 used by facilities for operational and administrative  
7 expenses. In addition, for residential services delivered on  
8 or after January 1, 2025, the rates shall include an increase  
9 sufficient to provide wages for all residential non-executive  
10 direct care staff, excluding aides, at the federal Department  
11 of Labor, Bureau of Labor Statistics' average wage as  
12 determined by the Department. Also, for services delivered on  
13 or after January 1, 2025, the rates will include adjustments  
14 to employment-related expenses as defined in rule by the  
15 Department. The Department shall adopt rules, including  
16 emergency rules as authorized by Section 5-45 of the Illinois  
17 Administrative Procedure Act, to implement the provisions of  
18 this Section.

19 Notwithstanding any other provision of this Section to the  
20 contrary, any regional wage adjuster for facilities located  
21 outside of the counties of Cook, DuPage, Kane, Lake, McHenry,  
22 and Will shall be no lower than 1.00, and any regional wage  
23 adjuster for facilities located within the counties of Cook,  
24 DuPage, Kane, Lake, McHenry, and Will shall be no lower than  
25 1.15.

26 (5) For dates of service starting July 1, 2025,

1 reimbursement calculations and direct payment for services  
2 provided by facilities licensed under the ID/DD Community Care  
3 Act are the responsibility of the Department of Healthcare and  
4 Family Services instead of the Department of Human Services.  
5 Appropriations for the facilities licensed under the ID/DD  
6 Community Care Act must be shifted from the Department of  
7 Human Services to the Department of Healthcare and Family  
8 Services. Nothing in this Section shall prohibit the  
9 Department of Healthcare and Family Services from paying more  
10 than the rates specified in this Section. The rates in this  
11 Section must be interpreted as a minimum amount.

12 (6) Beginning on the effective date of this amendatory Act  
13 of the 104th General Assembly, the Department of Healthcare  
14 and Family Services shall work with the Department of Human  
15 Services to study and review the reimbursement calculations  
16 and direct payments for facilities licensed under the ID/DD  
17 Community Care Act and for facilities licensed under the MC/DD  
18 Act. This work shall include requesting any cost reports and  
19 rate information directly from the facilities as needed.

20 (Source: P.A. 102-16, eff. 6-17-21; 102-699, eff. 4-19-22;  
21 103-8, eff. 6-7-23; 103-588, eff. 7-1-24.)

22 Section 99. Effective date. This Act takes effect July 1,  
23 2025.