

104TH GENERAL ASSEMBLY State of Illinois 2025 and 2026 SB1617

Introduced 2/4/2025, by Sen. Celina Villanueva

SYNOPSIS AS INTRODUCED:

5 ILCS 100/5-45.65 new 20 ILCS 1705/55.5 new 20 ILCS 1705/74 305 ILCS 5/5-5.4 305 ILCS 5/5-5.4i

from Ch. 23, par. 5-5.4

Amends the Mental Health and Developmental Disabilities Administrative Act. Requires the Department of Human Services to establish reimbursement rates that build toward livable wages for front-line personnel in residential and day programs and service coordination agencies serving persons with intellectual and developmental disabilities. Provides that for community-based providers serving persons with intellectual or developmental disabilities, subject to federal approval, the rates taking effect for services delivered on or after July 1, 2025 shall be increased sufficiently to: (i) provide a minimum \$2.00 per hour wage increase over the wages in effect on June 30, 2025 for front-line personnel; and (ii) provide wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. Department of Labor's average wage as defined, by rule, by the Department. Amends the Illinois Public Aid Code. Provides that for ID/DD facilities and MC/DD facilities, the rates taking effect for services delivered on or after July 1, 2025, shall be increased sufficiently to: (i) provide a minimum \$2.00 per hour wage increase over the wages in effect on June 30, 2025 for front-line personnel; and (ii) provide wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. Department of Labor's average wage as defined, by rule, by the Department. Requires the same increase for front-line personnel employed at community-based providers serving persons with intellectual or developmental disabilities. Amends the Illinois Administrative Procedure Act. Grants the Departments of Human Services and Healthcare and Family Services emergency rulemaking authority. Effective immediately.

LRB104 11960 KTG 22053 b

1 AN ACT concerning care for persons with developmental

2 disabilities.

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

- Section 1. This Act may be referred to as the Community

 Disability Living Wage Act.
 - Section 2. Findings.
 - (1) An estimated 22,000 children and adults with intellectual and developmental disabilities are supported in community-based settings in Illinois; direct support professionals (DSPs), are trained paraprofessional staff who are engaged in activities of daily living and community support; too many of these employees earn wages that place them and their families below the poverty level.
 - (2) In Illinois, nearly half of direct care workers rely on public assistance to make ends meet, creating additional expenditures for State government; low wages are a consequence of the historically low reimbursement rates paid by the State of Illinois to community-based service providers.
 - (3) The lack of adequate wages for employees who perform the challenging work of supporting persons with

intellectual and developmental disabilities results in high employee turnover, which in turn negatively impacts the quality of services provided, higher wages are proven to reduce staff turnover, improving stability and quality of services while reducing employer training costs.

- (4) Rising wages in other sectors now means, despite modest wage increases and strenuous efforts to recruit new workers, agencies are struggling to fill positions and keep them filled with 90% of community providers experiencing staffing challenges. Excessive vacancies force employers to rely more on overtime, with providers reporting an average of 11,000 hours of staff overtime a month, leading to staff burnout and driving up costs.
- (5) A December 2020 report issued by an independent consulting group commissioned by the State to propose changes to the State's reimbursement for community disability agencies recommended that addressing DSP wages was the number one priority for ensuring compliance with the mandates of the Ligas Consent Decree, and further recommended that wages for DSPs should be fixed at 150% of the prevailing minimum wage plus additional funding for benefits.
- (6) The difference between 150% of the State minimum wage on January 1, 2025 and the hourly DSP wage rate set by the State amounts to \$2.00 per hour.
 - (7) The General Assembly finds that in order to reduce

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turnover, increase retention, fill vacancies, and ensure

DSPs are adequately compensated for the critically

important work they do, an increase in rates and

reimbursements to community-based service providers to

effectuate an increase in the hourly wage paid to DSPs is

needed.

Section 3. Purpose and intent. It is the purpose of this Act to increase the wages of DSPs and other front-line staff in community disability agencies beyond the poverty level and to a level competitive with rival employers and above the State minimum wage, in an effort to improve the lives of DSPs and the lives of the vulnerable persons they support.

It is the intent of the General Assembly to ensure that all funds resulting from rate increases provided to community disability agencies are allocated to front-line employee wages in order to address the current workforce crisis which is the primary obstacle to the availability of community-based services for people with disabilities.

Section 5. The Illinois Administrative Procedure Act is amended by adding Section 5-45.65 as follows:

21 (5 ILCS 100/5-45.65 new)

Sec. 5-45.65. Emergency rulemaking; Departments of Human
 Services and Healthcare and Family Services. To provide for

- the expeditious and timely implementation of changes made by 1
- 2 this amendatory Act of the 104th General Assembly to Section
- 3 74 of the Mental Health and Developmental Disabilities
- Administrative Act and to Sections 5-5.4 and 5-5.4i of the 4
- Illinois Public Aid Code, emergency rules implementing the 5
- changes made by this amendatory Act of the 104th General 6
- Assembly to Section 74 of the Mental Health and Developmental 7
- Disabilities Administrative Act and to Sections 5-5.4 and 8
- 9 5-5.4i of the Illinois Public Aid Code may be adopted in
- accordance with Section 5-45 by the respective Department. The 10
- 11 adoption of emergency rules authorized by Section 5-45 and
- 12 this Section is deemed to be necessary for the public
- interest, safety, and welfare. 13
- 14 This Section is repealed one year after the effective date
- of this amendatory Act of the 104th General Assembly. 15
- 16 Section 10. The Mental Health Developmental and
- Disabilities Administrative Act is amended by changing Section 17
- 74 and by adding Section 55.5 as follows: 18
- 19 (20 ILCS 1705/55.5 new)
- 20 Sec. 55.5. Increased wages for front-line personnel. As
- 21 used in this Section, "front-line personnel" means direct
- support professionals, aides, front-line supervisors, and 22
- 23 non-administrative support staff working in service settings
- 24 outlined in this Section.

The Department shall establish reimbursement rates that 1 2 build toward livable wages for front-line personnel in 3 residential and day programs and service coordination agencies serving persons with intellectual and developmental 4 5 disabilities under Section 54 of this Act, including, but not limited to, intermediate care for the developmentally disabled 6 7 facilities, medically complex for the developmentally disabled 8 facilities, community-integrated living arrangements, 9 community day services, employment, and other residential and 10 day programs for persons with intellectual and developmental 11 disabilities supported by State funds or funding under Title 12 XIX of the federal Social Security Act. 13 The Department shall increase rates and reimbursements so that by July 1, 2025 direct support professionals wages shall 14 be increased by \$2.00 per hour, and so that other front-line 15 16 personnel earn a commensurate wage.

- 17 (20 ILCS 1705/74)
- 18 Sec. 74. Rates and reimbursements.
- (a) Within 30 days after July 6, 2017 (the effective date 19 of Public Act 100-23), the Department shall increase rates and 20 21 reimbursements to fund a minimum of a \$0.75 per hour wage 22 increase for front-line personnel, including, but not limited professionals, aides, 23 to, direct support 24 qualified intellectual disabilities supervisors, 25 professionals, nurses, and non-administrative support staff

- 1 working in community-based provider organizations serving
- 2 individuals with developmental disabilities. The Department
- 3 shall adopt rules, including emergency rules under subsection
- 4 (y) of Section 5-45 of the Illinois Administrative Procedure
- 5 Act, to implement the provisions of this Section.
- 6 (b) Rates and reimbursements. Within 30 days after June 4,
- 7 2018 (the effective date of Public Act 100-587), the
- 8 Department shall increase rates and reimbursements to fund a
- 9 minimum of a \$0.50 per hour wage increase for front-line
- 10 personnel, including, but not limited to, direct support
- 11 professionals, aides, front-line supervisors, qualified
- 12 intellectual disabilities professionals, nurses, and
- 13 non-administrative support staff working in community-based
- 14 provider organizations serving individuals with developmental
- 15 disabilities. The Department shall adopt rules, including
- 16 emergency rules under subsection (bb) of Section 5-45 of the
- 17 Illinois Administrative Procedure Act, to implement the
- 18 provisions of this Section.
- 19 (c) Rates and reimbursements. Within 30 days after June 5,
- 20 2019 (the effective date of Public Act 101-10), subject to
- 21 federal approval, the Department shall increase rates and
- reimbursements in effect on June 30, 2019 for community-based
- providers for persons with Developmental Disabilities by 3.5%
- The Department shall adopt rules, including emergency rules
- 25 under subsection (jj) of Section 5-45 of the Illinois
- 26 Administrative Procedure Act, to implement the provisions of

this Section, including wage increases for direct care staff.

(d) For community-based providers serving persons with intellectual/developmental disabilities, subject to federal approval of any relevant Waiver Amendment, the rates taking effect for services delivered on or after January 1, 2022, shall include an increase in the rate methodology sufficient to provide a \$1.50 per hour wage increase for direct support professionals in residential settings and sufficient to provide wages for all residential non-executive direct care staff, excluding direct support professionals, at the federal Department of Labor, Bureau of Labor Statistics' average wage as defined in rule by the Department.

The establishment of and any changes to the rate methodologies for community-based services provided to persons with intellectual/developmental disabilities are subject to federal approval of any relevant Waiver Amendment and shall be defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this subsection (d).

(e) For community-based providers serving persons with intellectual/developmental disabilities, subject to federal approval of any relevant Waiver Amendment, the rates taking effect for services delivered on or after January 1, 2023, shall include an increase in the rate methodology sufficient to provide a \$1.00 per hour wage increase for all direct

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support professionals and all other frontline personnel who are not subject to the Bureau of Labor Statistics' average wage increases, who work in residential and community day services settings, with at least \$0.50 of those funds to be provided as a direct increase to base wages, with the remaining \$0.50 to be used flexibly for base wage increases. In addition, the rates taking effect for services delivered on or after January 1, 2023 shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding direct support professionals, at the federal Department of Labor, Bureau of Labor Statistics' average wage as defined in rule by the Department.

establishment of and any changes to the methodologies for community-based services provided to persons with intellectual/developmental disabilities are subject to federal approval of any relevant Waiver Amendment and shall be defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this subsection.

(f) For community-based providers serving persons with intellectual/developmental disabilities, subject to federal approval of any relevant Waiver Amendment, the rates taking effect for services delivered on or after January 1, 2024 shall include an increase in the rate methodology sufficient to provide a \$2.50 per hour wage increase for all direct

support professionals and all other frontline personnel who are not subject to the Bureau of Labor Statistics' average wage increases and who work in residential and community day services settings. At least \$1.25 of the per hour wage increase shall be provided as a direct increase to base wages, and the remaining \$1.25 of the per hour wage increase shall be used flexibly for base wage increases. In addition, the rates taking effect for services delivered on or after January 1, 2024 shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding direct support professionals, at the federal Department of Labor, Bureau of Labor Statistics' average wage as defined in rule by the Department.

The establishment of and any changes to the rate methodologies for community-based services provided to persons with intellectual/developmental disabilities are subject to federal approval of any relevant Waiver Amendment and shall be defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this subsection.

(g) For community-based providers serving persons with intellectual or developmental disabilities, subject to federal approval of any relevant Waiver Amendment, the rates taking effect for services delivered on or after January 1, 2025 shall include an increase in the rate methodology sufficient

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to provide a \$1 per hour wage rate increase for all direct support personnel and all other frontline personnel who are not subject to the Bureau of Labor Statistics' average wage increases and who work in residential and community day services settings, with at least \$0.75 of those funds to be provided as a direct increase to base wages and the remaining \$0.25 to be used flexibly for base wage increases. These increases shall not be used by community-based providers for operational or administrative expenses. In addition, the rates taking effect for services delivered on or after January 1, 2025 shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding direct support personnel, at the federal Department of Labor, Bureau of Labor Statistics' average wage as defined by rule by the Department. For services delivered on or after January 1, 2025. the rates shall include adjustments to employment-related expenses as defined by rule by the Department.

The establishment of and any changes to the rate methodologies for community-based services provided to persons with intellectual or developmental disabilities are subject to federal approval of any relevant Waiver Amendment and shall be defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this subsection.

- (h) For community-based providers serving persons with 1 intellectual or developmental disabilities, subject to federal 2 3 approval, the rates taking effect for services delivered on or after July 1, 2025 shall be increased sufficiently to provide 4 5 a minimum \$2.00 per hour wage increase over the wages in effect on June 30, 2025 for front-line personnel, including, but not 6 7 limited to, direct support professionals, aides, front-line 8 supervisors, and non-administrative support staff working in 9 community-based provider organizations serving individuals with developmental disabilities, and sufficient to provide 10 11 wages for all other residential non-executive direct care 12 staff, excluding direct support professionals, at the U.S. Department of Labor, Bureau of Labor Statistics' average wage 13 14 as defined, by rule, by the Department. The Department shall adopt rules, including emergency rules in accordance with the 15 16 Illinois Administrative Procedure Act, to implement the 17 provisions of this subsection. (Source: P.A. 102-16, eff. 6-17-21; 102-699, eff. 4-19-22; 18 102-830, eff. 1-1-23; 103-8, eff. 6-7-23; 103-154, eff. 19 6-30-23; 103-588, eff. 6-5-24.) 20
- 21 Section 15. The Illinois Public Aid Code is amended by 22 changing Sections 5-5.4 and 5-5.4i as follows:
- 23 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)
- 24 Sec. 5-5.4. Standards of payment; Department of Healthcare

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- and Family Services. The Department of Healthcare and Family
 Services shall develop standards of payment of nursing
 facility and ICF/DD services in facilities providing such
 services under this Article which:
 - (1) Provide for the determination of a facility's payment for nursing facility or ICF/DD services on a prospective The amount of the payment rate for all nursing basis. facilities certified by the Department of Public Health under the ID/DD Community Care Act or the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities, Long Term Care for Under Age 22 facilities, Skilled Nursing facilities, or Intermediate Care facilities under the medical assistance program shall be prospectively established annually on the basis of historical, financial, and statistical data reflecting actual costs from prior years, which shall be applied to the current rate year and updated for inflation, except that the capital cost element for newly constructed facilities shall be based upon projected budgets. The annually established payment rate shall take effect on July 1 in 1984 and subsequent years. No rate increase and no update for inflation shall be provided on or after July 1, 1994, unless specifically provided for in this Section. The changes made by Public Act 93-841 extending the duration of the prohibition against a rate increase or update for inflation are effective retroactive to July 1, 2004.

For facilities licensed by the Department of Public Health

under the Nursing Home Care Act as Intermediate Care for the 1 2 Developmentally Disabled facilities or Long Term Care for 3 Under Age 22 facilities, the rates taking effect on July 1, 1998 shall include an increase of 3%. For facilities licensed 5 by the Department of Public Health under the Nursing Home Care Skilled Nursing facilities or Intermediate Care 6 7 facilities, the rates taking effect on July 1, 1998 shall 8 include an increase of 3% plus \$1.10 per resident-day, as 9 defined by the Department. For facilities licensed by the 10 Department of Public Health under the Nursing Home Care Act as 11 Intermediate Care Facilities for the Developmentally Disabled 12 or Long Term Care for Under Age 22 facilities, the rates taking 13 effect on January 1, 2006 shall include an increase of 3%. For 14 facilities licensed by the Department of Public Health under 15 the Nursing Home Care Act as Intermediate Care Facilities for 16 the Developmentally Disabled or Long Term Care for Under Age 17 22 facilities, the rates taking effect on January 1, 2009 shall include an increase sufficient to provide a \$0.50 per 18 hour wage increase for non-executive staff. For facilities 19 20 licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities the rates taking effect 21 22 within 30 days after July 6, 2017 (the effective date of Public 23 Act 100-23) shall include an increase sufficient to provide a 24 \$0.75 per hour wage increase for non-executive staff. The 25 Department shall adopt rules, including emergency rules under subsection (y) of Section 5-45 of the Illinois Administrative 26

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Procedure Act, to implement the provisions of this paragraph. For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, the rates taking effect within 30 days after June 5, 2019 (the effective date of Public Act 101-10) shall include an increase sufficient to provide a \$0.50 per hour wage increase for non-executive front-line personnel, including, but not limited to, direct support persons, aides, front-line supervisors, qualified intellectual disabilities professionals, nurses, and non-administrative support staff. The Department shall adopt rules, including emergency rules under subsection (bb) of Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this paragraph.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval, the rates taking effect for services delivered on or after July 1, 2025, shall be increased sufficiently to provide a minimum \$2.00 per hour wage increase over the wages in effect on June 30, 2025 for front-line personnel, including, but not limited to, direct support professionals, aides, front-line supervisors, and non-administrative support staff working in community-based provider organizations serving individuals with developmental disabilities, and sufficient to provide wages for all other residential non-executive direct care

staff, excluding direct support professionals, at the U.S.

Department of Labor, Bureau of Labor Statistics' average wage

as defined, by rule, by the Department. The Department shall

adopt rules, including emergency rules in accordance with the

Illinois Administrative Procedure Act, to implement the

provisions of this paragraph.

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

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

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the rates taking effect on July 1, 2000 shall include an increase of 2.5% per resident-day, as defined by the Department.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, a new payment methodology must be implemented for the nursing component of the rate effective July 1, 2003. The Department of Public Aid (now Healthcare and Family Services) shall develop the new payment methodology using the Minimum Data Set (MDS) as the instrument to collect information concerning nursing home resident condition necessary to compute the rate. The Department shall develop the new payment methodology to meet the unique needs of Illinois nursing home residents while remaining subject to the appropriations provided by the General Assembly. A transition period from the payment methodology in effect on June 30, 2003 to the payment methodology in effect on July 1, 2003 shall be provided for a period not exceeding 3 years and 184 days after implementation of the new payment methodology as follows:

(A) For a facility that would receive a lower nursing component rate per patient day under the new system than the facility received effective on the date immediately preceding the date that the Department implements the new payment methodology, the nursing component rate per patient day for the facility shall be held at the level in

effect on the date immediately preceding the date that the Department implements the new payment methodology until a higher nursing component rate of reimbursement is achieved by that facility.

- (B) For a facility that would receive a higher nursing component rate per patient day under the payment methodology in effect on July 1, 2003 than the facility received effective on the date immediately preceding the date that the Department implements the new payment methodology, the nursing component rate per patient day for the facility shall be adjusted.
- (C) Notwithstanding paragraphs (A) and (B), the nursing component rate per patient day for the facility shall be adjusted subject to appropriations provided by the General Assembly.

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

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, except facilities participating in the Department's demonstration program pursuant to the

provisions of Title 77, Part 300, Subpart T of the Illinois Administrative Code, the numerator of the ratio used by the Department of Healthcare and Family Services to compute the rate payable under this Section using the Minimum Data Set (MDS) methodology shall incorporate the following annual amounts as the additional funds appropriated to the Department specifically to pay for rates based on the MDS nursing component methodology in excess of the funding in effect on December 31, 2006:

- 10 (i) For rates taking effect January 1, 2007, 11 \$60,000,000.
- 12 (ii) For rates taking effect January 1, 2008, \$110,000,000.
 - (iii) For rates taking effect January 1, 2009, \$194,000,000.
 - (iv) For rates taking effect April 1, 2011, or the first day of the month that begins at least 45 days after February 16, 2011 (the effective date of Public Act 96-1530), \$416,500,000 or an amount as may be necessary to complete the transition to the MDS methodology for the nursing component of the rate. Increased payments under this item (iv) are not due and payable, however, until (i) the methodologies described in this paragraph are approved by the federal government in an appropriate State Plan amendment and (ii) the assessment imposed by Section 5B-2 of this Code is determined to be a permissible tax under

1 Title XIX of the Social Security Act.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the support component of the rates taking effect on January 1, 2008 shall be computed using the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005, updated for inflation to January 1, 2006.

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

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

1 June 30, 2001.

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

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

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

Notwithstanding any other provision of this Section, for

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facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, effective January 1, 2009, the per diem support component of the rates effective on January 1, 2008, computed using the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005, updated for inflation to January 1, 2006, shall be increased to the amount that would have been derived using standard Department of Healthcare and Family Services methods, procedures, and inflators.

Notwithstanding any other provisions of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as intermediate care facilities that are federally defined as Institutions for Mental Disease, or facilities licensed by the Department of Public Health under the Specialized Mental Health Rehabilitation Act of 2013, a socio-development component rate equal to 6.6% facility's nursing component rate as of January 1, 2006 shall established and paid effective July 1, 2006. socio-development component of the rate shall be increased by a factor of 2.53 on the first day of the month that begins at least 45 days after January 11, 2008 (the effective date of Public 95-707). Act As of August 1, 2008, socio-development component rate shall be equal to 6.6% of the facility's nursing component rate as of January 1, 2006, multiplied by a factor of 3.53. For services provided on or

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after April 1, 2011, or the first day of the month that begins 1 2 at least 45 days after February 16, 2011 (the effective date of 96-1530), whichever is 3 Public Act later, the Illinois may by rule adjust these socio-development Department 5 component rates, and may use different adjustment methodologies for those facilities participating, and those 6 7 not participating, in the Illinois Department's demonstration 8 program pursuant to the provisions of Title 77, Part 300, 9 Subpart T of the Illinois Administrative Code, but in no case 10 may such rates be diminished below those in effect on August 1, 11 2008.

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

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

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under

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the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, effective January 1, 2005, facility rates shall be increased by the difference between (i) a facility's per diem property, liability, and malpractice insurance costs as reported in the cost report filed with the Department of Public Aid and used to establish rates effective July 1, 2001 and (ii) those same costs as reported in the facility's 2002 cost report. These costs shall be passed through to the facility without caps or limitations, except for adjustments required under normal auditing procedures.

Rates established effective each July 1 shall govern payment for services rendered throughout that fiscal year, except that rates established on July 1, 1996 shall be increased by 6.8% for services provided on or after January 1, 1997. Such rates will be based upon the rates calculated for the year beginning July 1, 1990, and for subsequent years thereafter until June 30, 2001 shall be based on the facility cost reports for the facility fiscal year ending at any point in time during the previous calendar year, updated to the midpoint of the rate year. The cost report shall be on file with the Department no later than April 1 of the current rate year. Should the cost report not be on file by April 1, the Department shall base the rate on the latest cost report filed by each skilled care facility and intermediate care facility, updated to the midpoint of the current rate year. determining rates for services rendered on and after July 1,

- 1 1985, fixed time shall not be computed at less than zero. The
- 2 Department shall not make any alterations of regulations which
- 3 would reduce any component of the Medicaid rate to a level
- 4 below what that component would have been utilizing in the
- 5 rate effective on July 1, 1984.
- 6 (2) Shall take into account the actual costs incurred by
- 7 facilities in providing services for recipients of skilled
- 8 nursing and intermediate care services under the medical
- 9 assistance program.
- 10 (3) Shall take into account the medical and psycho-social
- 11 characteristics and needs of the patients.
- 12 (4) Shall take into account the actual costs incurred by
- 13 facilities in meeting licensing and certification standards
- imposed and prescribed by the State of Illinois, any of its
- 15 political subdivisions or municipalities and by the U.S.
- 16 Department of Health and Human Services pursuant to Title XIX
- of the Social Security Act.
- 18 The Department of Healthcare and Family Services shall
- 19 develop precise standards for payments to reimburse nursing
- 20 facilities for any utilization of appropriate rehabilitative
- 21 personnel for the provision of rehabilitative services which
- 22 is authorized by federal regulations, including reimbursement
- 23 for services provided by qualified therapists or qualified
- 24 assistants, and which is in accordance with accepted
- 25 professional practices. Reimbursement also may be made for
- 26 utilization of other supportive personnel under appropriate

1 supervision.

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The Department shall develop enhanced payments to offset the additional costs incurred by a facility serving exceptional need residents and shall allocate at \$4,000,000 of the funds collected from the assessment established by Section 5B-2 of this Code for such payments. For the purpose of this Section, "exceptional needs" means, but need not be limited to, ventilator care and traumatic brain injury care. The enhanced payments for exceptional need residents under this paragraph are not due and payable, however, until (i) the methodologies described in this paragraph are approved by the federal government in an appropriate State Plan amendment and (ii) the assessment imposed by Section 5B-2 of this Code is determined to be a permissible tax under Title XIX of the Social Security Act.

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

No payment increase under this Section for the MDS methodology, exceptional care residents, or the socio-development component rate established by Public Act 96-1530 of the 96th General Assembly and funded by the assessment imposed under Section 5B-2 of this Code shall be due and payable until after the Department notifies the long-term care providers, in writing, that the payment

methodologies to long-term care providers required under this Section have been approved by the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services and the waivers under 42 CFR 433.68 for the assessment imposed by this Section, if necessary, have been granted by the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services. Upon notification to the Department of approval of the payment methodologies required under this Section and the waivers granted under 42 CFR 433.68, all increased payments otherwise due under this Section prior to the date of notification shall be due and payable within 90 days of the date federal approval is received.

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

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval, the rates taking effect for services delivered on or after August 1, 2019 shall be increased by 3.5% over the rates in effect on June 30, 2019. The Department shall adopt rules, including emergency rules under subsection (ii) of Section 5-45 of the Illinois Administrative Procedure Act, to

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implement the provisions of this Section, including wage increases for direct care staff.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval, the rates taking effect on the latter of the approval date of the State Plan Amendment for these facilities or the Waiver Amendment for the home and community-based services settings shall include an increase sufficient to provide a \$0.26 per hour wage increase to the base wage for non-executive staff. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement provisions of this Section, including wage increases direct care staff.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval of the State Plan Amendment and the Waiver Amendment for the home and community-based services settings, the rates taking effect for the services delivered on or after July 1, 2020 shall include an increase sufficient to provide a \$1.00 per hour wage increase for non-executive staff. For services delivered on or after January 1, 2021, subject to federal approval of the State Plan Amendment and the Waiver Amendment for the home and community-based services settings, shall

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include an increase sufficient to provide a \$0.50 per hour increase for non-executive staff. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this Section, including wage increases for direct care staff.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval of the State Plan Amendment, the rates taking effect for the residential services delivered on or after July 1, 2021, shall include an increase sufficient to provide a \$0.50 per hour increase for aides in the rate methodology. For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD Facilities and under the MC/DD Act as MC/DD Facilities, subject to federal approval of the State Plan Amendment, the rates taking effect for the residential services delivered on or after January 1, 2022 shall include an increase sufficient to provide a \$1.00 per hour increase for aides in the rate methodology. In addition, for residential services delivered on or after January 1, 2022 such rates shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding aides, at the federal Department of Labor, Bureau of Labor Statistics' average wage as defined in rule by the Department. The Department shall adopt rules, including

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emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this Section.

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval of the State Plan Amendment, the rates taking effect for services delivered on or after January 1, 2023, shall include a \$1.00 per hour wage increase for all direct support personnel and all other frontline personnel who are not subject to the Bureau of Labor Statistics' average wage increases, who work in residential and community day services settings, with at least \$0.50 of those funds to be provided as a direct increase to all aide base wages, with the remaining \$0.50 to be used flexibly for base wage increases to the rate methodology for aides. In addition, for residential services delivered on or after January 1, 2023 the rates shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding aides, at the federal Department of Labor, Bureau of Labor Statistics' average wage as determined by the Department. Also, for services delivered on or after January 1, 2023, the rates will include adjustments to employment-related expenses as defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the

provisions of this Section.

2 For facilities licensed by the Department of Public Health 3 under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal 5 approval of the State Plan Amendment, the rates taking effect for services delivered on or after January 1, 2024 shall 6 7 include a \$2.50 per hour wage increase for all direct support 8 personnel and all other frontline personnel who are not 9 subject to the Bureau of Labor Statistics' average wage 10 increases and who work in residential and community day 11 services settings. At least \$1.25 of the per hour wage 12 increase shall be provided as a direct increase to all aide base wages, and the remaining \$1.25 of the per hour wage 13 14 increase shall be used flexibly for base wage increases to the 15 rate methodology for aides. In addition, for residential 16 services delivered on or after January 1, 2024, the rates 17 shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding aides, 18 19 the federal Department of Labor, Bureau of 20 Statistics' average wage as determined by the Department. Also, for services delivered on or after January 1, 2024, the 21 22 rates will include adjustments to employment-related expenses 23 as defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by 24 25 Section 5-45 of the Illinois Administrative Procedure Act, to 26 implement the provisions of this Section.

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For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval of a State Plan Amendment, the rates taking effect for services delivered on or after January 1, 2025 shall include a \$1.00 per hour wage increase for all direct support personnel and all other frontline personnel who are not subject to the Bureau of Labor Statistics' average wage increases and who work in residential and community day services settings, with at least \$0.75 of those funds to be provided as a direct increase to all aide base wages and the remaining \$0.25 to be used flexibly for base wage increases to the rate methodology for aides. These increases shall not be bv facilities for operational and administrative expenses. In addition, for residential services delivered on or after January 1, 2025, the rates shall include an increase sufficient to provide wages for all residential non-executive direct care staff, excluding aides, at the federal Department Labor, Bureau of Labor Statistics' average wage as determined by the Department. Also, for services delivered on or after January 1, 2025, the rates will include adjustments to employment-related expenses as defined in rule by the Department. The Department shall adopt rules, including emergency rules as authorized by Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this Section.

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

For facilities licensed by the Department of Public Health under the ID/DD Community Care Act as ID/DD facilities and under the MC/DD Act as MC/DD facilities, subject to federal approval, the rates taking effect for services delivered on or after July 1, 2025, shall be increased sufficiently to provide a minimum \$2.00 per hour wage increase over the wages in effect on June 30, 2025 for front-line personnel, including, but not limited to, direct support professionals, aides, front-line supervisors, and non-administrative support staff working in community-based provider organizations serving individuals with developmental disabilities, and sufficient to provide wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. Department of Labor, Bureau of Labor Statistics' average wage as defined, by rule, by the Department. The Department shall adopt rules, including emergency rules in accordance with the Illinois Administrative Procedure Act, to implement the provisions of this paragraph.

26 (Source: P.A. 102-16, eff. 6-17-21; 102-699, eff. 4-19-22;

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1 103-8, eff. 6-7-23; 103-588, eff. 7-1-24.)

- 2 (305 ILCS 5/5-5.4i)
- 3 Sec. 5-5.4i. Rates and reimbursements.
- (a) Within 30 days after July 6, 2017 (the effective date 4 5 of Public Act 100-23), the Department shall increase rates and reimbursements to fund a minimum of a \$0.75 per hour wage 6 7 increase for front-line personnel, including, but not limited to, direct support persons, aides, front-line supervisors, 8 9 qualified intellectual disabilities professionals, nurses, and 10 non-administrative support staff working in community-based 11 provider organizations serving individuals with developmental 12 disabilities. The Department shall adopt rules, including emergency rules under subsection (y) of Section 5-45 of the 1.3 Illinois Administrative Procedure Act, to implement 14 15 provisions of this Section.
 - (b) Within 30 days after June 4, 2018 (the effective date of Public Act 100-587), the Department shall increase rates and reimbursements to fund a minimum of a \$0.50 per hour wage increase for front-line personnel, including, but not limited to, direct support persons, aides, front-line supervisors, qualified intellectual disabilities professionals, nurses, and non-administrative support staff working in community-based provider organizations serving individuals with developmental disabilities. The Department shall adopt rules, including emergency rules under subsection (bb) of Section 5-45 of the

- 1 Illinois Administrative Procedure Act, to implement the 2 provisions of this Section.
 - (c) Within 30 days after the effective date of this amendatory Act of the 101st General Assembly, subject to federal approval, the Department shall increase rates and reimbursements in effect on June 30, 2019 for community-based providers for persons with Developmental Disabilities by 3.5%. The Department shall adopt rules, including emergency rules under subsection (ii) of Section 5-45 of the Illinois Administrative Procedure Act, to implement the provisions of this Section, including wage increases for direct care staff.
 - (d) For community-based providers serving persons with intellectual or developmental disabilities, subject to federal approval, the rates taking effect for services delivered on or after July 1, 2025, shall be increased sufficiently to provide a minimum \$2.00 per hour wage increase over the wages in effect on June 30, 2025 for front-line personnel, including, but not limited to, direct support professionals, aides, front-line supervisors, and non-administrative support staff working in community-based provider organizations serving individuals with developmental disabilities, and sufficient to provide wages for all other residential non-executive direct care staff, excluding direct support professionals, at the U.S. Department of Labor, Bureau of Labor Statistics' average wage as defined, by rule, by the Department. The Department shall adopt rules, including emergency rules in accordance with the

- 1 <u>Illinois Administrative Procedure Act, to implement the</u>
- 2 provisions of this subsection.
- 3 (Source: P.A. 100-23, eff. 7-6-17; 100-587, eff. 6-4-18;
- 4 101-10, eff. 6-5-19.)
- 5 Section 99. Effective date. This Act takes effect upon
- 6 becoming law.