

SB3315



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

SB3315

Introduced 2/3/2026, by Sen. Meg Loughran Cappel

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-2b

Amends the Medical Assistance Article of the Illinois Public Aid Code. In provisions concerning coverage for medically fragile and technology dependent children, provides that subject to federal approval, on and after July 1, 2026 the reimbursement rates paid to providers of private duty nursing services for children eligible for medical assistance shall be 25% higher than the reimbursement rates in effect for nursing services on June 30, 2026. Effective July 1, 2026.

LRB104 17706 KTG 31137 b

A BILL FOR

1 AN ACT concerning public aid.

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

4 Section 5. The Illinois Public Aid Code is amended by
5 changing Section 5-2b as follows:

6 (305 ILCS 5/5-2b)

7 Sec. 5-2b. Medically fragile and technology dependent
8 children eligibility and program; provider reimbursement
9 rates.

10 (a) Notwithstanding any other provision of law except as
11 provided in Section 5-30a, on and after September 1, 2012,
12 subject to federal approval, medical assistance under this
13 Article shall be available to children who qualify as persons
14 with a disability, as defined under the federal Supplemental
15 Security Income program and who are medically fragile and
16 technology dependent. The program shall allow eligible
17 children to receive the medical assistance provided under this
18 Article in the community and must maximize, to the fullest
19 extent permissible under federal law, federal reimbursement
20 and family cost-sharing, including co-pays, premiums, or any
21 other family contributions, except that the Department shall
22 be permitted to incentivize the utilization of selected
23 services through the use of cost-sharing adjustments. The

1 Department shall establish the policies, procedures,
2 standards, services, and criteria for this program by rule.

3 (b) Notwithstanding any other provision of this Code,
4 subject to federal approval, on and after January 1, 2024, the
5 reimbursement rates for nursing paid through Nursing and
6 Personal Care Services for non-waiver customers and to
7 providers of private duty nursing services for children
8 eligible for medical assistance under this Section shall be
9 20% higher than the reimbursement rates in effect for nursing
10 services on December 31, 2023.

11 (c) Notwithstanding any other provision of this Code,
12 subject to federal approval, on and after January 1, 2025, the
13 reimbursement rates for nursing paid through Nursing and
14 Personal Care Services for non-waiver customers and to
15 providers of private duty nursing services for children
16 eligible for medical assistance under this Section shall be 7%
17 higher than the reimbursement rates in effect for nursing
18 services on December 31, 2024.

19 (c-5) Notwithstanding any other provision of this Code,
20 subject to federal approval, on and after July 1, 2026 the
21 reimbursement rates paid to providers of private duty nursing
22 services for children eligible for medical assistance under
23 this Section shall be 25% higher than the reimbursement rates
24 in effect for nursing services on June 30, 2026.

25 (d) The Department shall conduct an evaluation to study
26 the program, including service provision and design, waiver

1 operations, and methodologies and policies for setting rates
2 and reimbursements for services and supports that are provided
3 to (i) individuals under the age of 21 who are approved by the
4 Department for in-home shift nursing services and (ii)
5 individuals over the age of 21 who are receiving in-home shift
6 nursing services under the Home and Community-Based Services
7 Waiver for Medically Fragile and Technology Dependent
8 Children, including, but not limited to, in-home shift nursing
9 services and related home and community-based services and
10 supports, made to nursing agencies for such services. As
11 needed, the Department shall consult with Department-enrolled
12 providers of in-home shift nursing services to ensure accurate
13 information is considered in the evaluation, and the
14 Department may, to the extent it deems necessary and
15 appropriate, contract with an outside entity to assist or
16 provide further analysis in the support of the evaluation.

17 (Source: P.A. 103-102, eff. 1-1-24; 103-593, eff. 6-7-24;
18 104-9, eff. 6-16-25.)

19 Section 99. Effective date. This Act takes effect July 1,
20 2026.