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AN ACT in relation to 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 Public 8 Aid. The Department of Public Aid shall develop standards of 9 payment of skilled nursing and intermediate care services in 10 facilities providing such services under this Article which:

(1) Provide for the determination of a facility's payment 11 12 for skilled nursing and intermediate care services on a prospective basis. The amount of the payment rate for all 13 14 nursing facilities certified by the Department of Public Health 15 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities, Long Term Care for Under 16 17 Age 22 facilities, Skilled Nursing facilities, or Intermediate 18 Care facilities under the medical assistance program shall be 19 prospectively established annually on the basis of historical, 20 financial, and statistical data reflecting actual costs from 21 prior years, which shall be applied to the current rate year 22 and updated for inflation, except that the capital cost element for newly constructed facilities shall be based upon projected 23 budgets. The annually established payment rate shall take 24 25 effect on July 1 in 1984 and subsequent years. No rate increase 26 and no update for inflation shall be provided on or after July 1, 1994 and before July 1, 2004, unless specifically provided 27 28 for in this Section.

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, 1998

1 shall include an increase of 3%. For facilities licensed by the 2 Department of Public Health under the Nursing Home Care Act as 3 Skilled Nursing facilities or Intermediate Care facilities, 4 the rates taking effect on July 1, 1998 shall include an 5 increase of 3% plus \$1.10 per resident-day, as defined by the 6 Department.

For facilities licensed by the Department of Public Health 7 8 under the Nursing Home Care Act as Intermediate Care for the 9 Developmentally Disabled facilities or Long Term Care for Under 10 Age 22 facilities, the rates taking effect on July 1, 1999 11 shall include an increase of 1.6% plus \$3.00 per resident-day, as defined by the Department. For facilities licensed by the 12 13 Department of Public Health under the Nursing Home Care Act as Skilled Nursing facilities or Intermediate Care facilities, 14 15 the rates taking effect on July 1, 1999 shall include an 16 increase of 1.6% and, for services provided on or after October 17 1, 1999, shall be increased by \$4.00 per resident-day, as defined by the Department. 18

19 For facilities licensed by the Department of Public Health 20 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under 21 Age 22 facilities, the rates taking effect on July 1, 2000 22 23 shall include an increase of 2.5% per resident-day, as defined by the Department. For facilities licensed by the Department of 24 25 Public Health under the Nursing Home Care Act as Skilled 26 Nursing facilities or Intermediate Care facilities, the rates 27 taking effect on July 1, 2000 shall include an increase of 2.5% 28 per resident-day, as defined by the Department.

29 For facilities licensed by the Department of Public Health 30 under the Nursing Home Care Act as skilled nursing facilities 31 or intermediate care facilities, a new payment methodology must 32 be implemented for the nursing component of the rate effective July 1, 2003. The Department of Public Aid shall develop the 33 new payment methodology using the Minimum Data Set (MDS) as the 34 35 instrument to collect information concerning nursing home 36 resident condition necessary to compute the rate. The

1 Department of Public Aid shall develop the new payment 2 methodology to meet the unique needs of Illinois nursing home 3 residents while remaining subject to the appropriations provided by the General Assembly. A transition period from the 4 5 payment methodology in effect on June 30, 2003 to the payment 6 methodology in effect on July 1, 2003 shall be provided for a period not exceeding 2 years after implementation of the new 7 payment methodology as follows: 8

9 (A) For a facility that would receive a lower nursing 10 component rate per patient day under the new system than 11 the facility received effective on the date immediately 12 preceding the date that the Department implements the new 13 payment methodology, the nursing component rate per patient day for the facility shall be held at the level in 14 effect on the date immediately preceding the date that the 15 16 Department implements the new payment methodology until a 17 higher nursing component rate of reimbursement is achieved by that facility. 18

(B) For a facility that would receive a higher nursing 19 20 component rate per patient day under the payment methodology in effect on July 1, 2003 than the facility 21 received effective on the date immediately preceding the 22 23 date that the Department implements the new payment methodology, the nursing component rate per patient day for 24 25 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.

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For facilities licensed by the Department of Public Health

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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.

8 For facilities licensed by the Department of Public Health 9 under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the rates taking effect on 10 July 1, 2001 shall be computed using the most recent cost 11 12 reports on file with the Department of Public Aid no later than April 1, 2000, updated for inflation to January 1, 2001. For 13 rates effective July 1, 2001 only, rates shall be the greater 14 15 of the rate computed for July 1, 2001 or the rate effective on 16 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 24 facilities licensed by the Department of Public Health under 25 26 the Nursing Home Care Act as skilled nursing facilities or 27 intermediate care facilities, the Illinois Department shall 28 determine by rule the rates taking effect on July 1, 2003, 29 which shall be 3.0% less than the rates in effect on June 30, 30 2002. This rate shall take effect only upon approval and 31 implementation of the payment methodologies required under 32 Section 5A-12.

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

1 taking effect on July 1, 2003 shall include a statewide 2 increase of 4%, as defined by the Department.

3 Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under 4 5 the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, effective July 1, 2004, facility 6 rates shall be increased by the difference between (i) a 7 facility's per diem property, liability, and malpractice 8 9 insurance costs as reported in the cost report filed with the Department of Public Aid and used to establish rates effective 10 11 July 1, 2001 and (ii) those same costs as reported in the facility's 2002 cost report. These costs shall be passed 12 13 through to the facility without caps or limitations, except for adjustments required under normal auditing procedures. 14

15 Rates established effective each July 1 shall govern payment for services rendered throughout that fiscal year, 16 17 except that rates established on July 1, 1996 shall be increased by 6.8% for services provided on or after January 1, 18 19 1997. Such rates will be based upon the rates calculated for the year beginning July 1, 1990, and for subsequent years 20 thereafter until June 30, 2001 shall be based on the facility 21 22 cost reports for the facility fiscal year ending at any point 23 in time during the previous calendar year, updated to the 24 midpoint of the rate year. The cost report shall be on file with the Department no later than April 1 of the current rate 25 26 year. Should the cost report not be on file by April 1, the 27 Department shall base the rate on the latest cost report filed by each skilled care facility and intermediate care facility, 28 29 to the midpoint of the current rate year. updated In 30 determining rates for services rendered on and after July 1, 31 1985, fixed time shall not be computed at less than zero. The 32 Department shall not make any alterations of regulations which 33 would reduce any component of the Medicaid rate to a level below what that component would have been utilizing in the rate 34 35 effective on July 1, 1984.

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(2) Shall take into account the actual costs incurred by

1 facilities in providing services for recipients of skilled 2 nursing and intermediate care services under the medical 3 assistance program.

4 (3) Shall take into account the medical and psycho-social5 characteristics and needs of the patients.

6 (4) Shall take into account the actual costs incurred by 7 facilities in meeting licensing and certification standards 8 imposed and prescribed by the State of Illinois, any of its 9 political subdivisions or municipalities and by the U.S. 10 Department of Health and Human Services pursuant to Title XIX 11 of the Social Security Act.

12 The Department of Public Aid shall develop precise 13 standards for payments to reimburse nursing facilities for any utilization of appropriate rehabilitative personnel for the 14 15 provision of rehabilitative services which is authorized by 16 federal regulations, including reimbursement for services 17 provided by qualified therapists or qualified assistants, and which is in accordance with accepted professional practices. 18 19 Reimbursement also may be made for utilization of other 20 supportive personnel under appropriate supervision.

21 (Source: P.A. 92-10, eff. 6-11-01; 92-31, eff. 6-28-01; 92-597, 22 eff. 6-28-02; 92-651, eff. 7-11-02; 92-848, eff. 1-1-03; 93-20, 23 eff. 6-20-03; 93-649, eff. 1-8-04; 93-659, eff. 2-3-04; revised 24 2-3-04.)

25 Section 99. Effective date. This Act takes effect July 1, 26 2004.