

## 93RD GENERAL ASSEMBLY State of Illinois 2003 and 2004

Introduced 2/5/2004, by Mattie Hunter

## SYNOPSIS AS INTRODUCED:

New Act

Creates the Illinois Consumer-Directed Care Act. Requires the Illinois Department on Aging, in conjunction with the Illinois Department of Public Aid, the Illinois Department of Public Health, and the Illinois Department of Human Services, to establish the consumer-directed care program as a demonstration program. Provides eligibility requirements for those enrolled in the program. Provides that consumers enrolled in the program shall be given a monthly budget allowance based on the results of their assessed functional needs and the financial resources of the program. Provides that consumers may use the budget allowance to pay only for home and community-based services that meet the consumer's long-term care needs and that are a cost-efficient use of funds. Sets forth the roles and responsibilities for consumers, State agencies, and fiscal intermediaries in administrating the program. Requires that all persons who render care under this Act must comply with the requirements of the Health Care Worker Background Check Act. Requires the Department on Aging to submit an annual report to the General Assembly. Repeals the Act on January 1, 2008.

LRB093 20680 BDD 46549 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning health care.

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

- Section 1. Short title. This Act may be cited as theIllinois Consumer-Directed Care Act.
- Section 5. Legislative findings. The General Assembly 6 7 finds that alternatives to institutional care, such as in-home and community-based care, should be encouraged. The General 8 that giving recipients of in-home 9 Assembly finds community-based services the opportunity to select 10 t.he services they need and the providers they want, including 11 family and friends, enhances their sense of dignity and 12 autonomy. The General Assembly also finds that providing 13 14 consumers choice and control, as tested in current research and 15 demonstration projects, has been beneficial and should be developed further and implemented statewide. 16
- Section 10. Legislative intent. It is the intent of the General Assembly to nurture the autonomy of those citizens of the State, of all ages, who have disabilities by providing the long-term care services they need in the least restrictive and appropriate setting. It is the intent of the General Assembly to give these individuals more choices in and greater control over the purchased long-term care services that they receive.
- 24 Section 15. Definitions. In this Act
- "Budget allowance" means the amount of money made available each month to a consumer to purchase needed long-term care services, based on the results of a functional needs assessment.
- "Consultant" means an individual who provides technical assistance to consumers in meeting their responsibilities

- 1 under this Act.
- 2 "Consumer" means a person who has chosen to participate in
- 3 the program, has met the enrollment requirements, and has
- 4 received an approved budget allowance.
- 5 "Department" means the Illinois Department on Aging.
- 6 "Fiscal intermediary" means an entity approved by the
- 7 Department that helps the consumer manage the consumer's budget
- 8 allowance, retains the funds, processes employment
- 9 information, if any, and tax information, reviews records to
- 10 ensure correctness, writes paychecks to providers, and
- 11 delivers paychecks to the consumer for distribution to
- 12 providers and caregivers.
- "Provider" means (i) a person licensed or otherwise
- 14 permitted to render services eligible for reimbursement under
- 15 this Act for whom the consumer is not the employer of record or
- 16 (ii) a consumer-employed caregiver for whom the consumer is the
- 17 employer of record.
- 18 "Representative" means an uncompensated individual
- designated by the consumer to assist in managing the consumer's
- 20 budget allowance and needed services.
- 21 Section 20. Program established. Beginning July 1, 2004,
- the Department, in conjunction with the Illinois Department of
- 23 Public Aid, the Illinois Department of Public Health, and the
- 24 Illinois Department of Human Services, shall establish as a
- 25 demonstration program the consumer-directed care program,
- 26 which shall be based on the principles of consumer choice and
- 27 control. The Department shall implement the demonstration
- program upon federal approval. The program shall allow enrolled
- 29 persons to choose the providers of services and to direct the
- 30 delivery of services, to best meet their long-term care needs.
- 31 The program must operate within the funds appropriated.
- 32 Section 25. Eligibility and enrollment. Persons who are
- 33 enrolled in a Medicaid home and community-based waiver program
- 34 and are who able to direct their own care or to designate an

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1 eligible representative may choose to participate in the

2 consumer-directed care program.

Section 30. Budget allowances. Consumers enrolled in the program shall be given a monthly budget allowance based on the results of their assessed functional needs and the financial resources of the program. Consumers shall receive the budget allowance directly from a Department-approved fiscal intermediary. Each participating State agency shall develop purchasing guidelines to assist consumers in using the budget allowance to purchase needed and cost-effective services. The Department shall approve all purchasing guidelines.

- Section 35. Services. Consumers may use the budget allowance to pay only for home and community-based services that meet the consumer's long-term care needs and that are a cost-efficient use of funds. These services may include, but are not limited to, the following:
  - (1) Personal care.
- 18 (2) Homemaking and chores, including housework, meals,
  19 shopping, and transportation.
  - (3) Home modifications and assistive devices that may increase the consumer's independence or make it possible to avoid institutional placement.
    - (4) Assistance in taking self-administered medication.
  - (5) Day care and respite care services, including those provided by nursing home facilities or by adult day care facilities.
- 27 (6) Personal care and support services provided in an 28 assisted living facility.
- 29 Section 40. Consumer roles and responsibilities.
- 30 (a) Consumers shall be allowed to choose the providers of 31 services, as well as when and how the services are provided. 32 Providers may include a consumer's neighbor, friend, spouse, or 33 relative.

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1	(b)	In	cases	where	а	consumer	is	the	employer	of	reco	ord,
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- (1) Developing a job description.
- (2) Selecting caregivers and submitting information for the background screening as required by law.
  - (3) Communicating needs, preferences, and expectations about services being purchased.
  - (4) Providing the fiscal intermediary with all information necessary for provider payments and tax requirements.
- 12 (5) Ending the employment of an unsatisfactory
  13 caregiver.
  - (c) In cases where a consumer is not the employer of record, the consumer's roles and responsibilities include, but are not limited to, the following:
- 17 (1) Communicating needs, preferences, and expectations 18 about services being purchased.
  - (2) Ending the services of an unsatisfactory provider.
- 20 (3) Providing the fiscal agent with all information 21 necessary for provider payments and tax requirements.
  - Section 45. Agency and Department roles and responsibilities. The Department's and the other participating State agencies' roles and responsibilities include, but are not limited to, the following:
    - (1) Assessing each consumer's functional needs, helping with the service plan, and providing ongoing assistance with the service plan.
      - (2) Offering the services of consultants to provide training, technical assistance, and support to the consumer.
        - (3) Completing the background screening for providers.
- 33 (4) Approving fiscal intermediaries.
- 34 (5) Establishing the minimum qualifications for all 35 caregivers and providers and being the final arbiter of the

- fitness of any individual to be a caregiver or provider.
- 2 Section 50. Fiscal intermediary roles and
- 3 responsibilities. The fiscal intermediary's roles and
- 4 responsibilities include, but are not limited to, the
- 5 following:
- 6 (1) Providing recordkeeping services.
- 7 (2) Retaining the consumer-directed care funds,
- 8 processing employment and tax information, if any,
- 9 reviewing records to ensure correctness, writing paychecks
- 10 to providers, and delivering paychecks to the consumer for
- distribution.
- 12 Section 55. Background screening requirements. All persons
- 13 who render care under this Act must comply with the
- 14 requirements of the Health Care Worker Background Check Act.
- 15 Section 60. Rules; federal waivers. The Department and the
- other participating State agencies may adopt and enforce rules
- 17 concerning the consumer-directed care program. The Department
- shall take all necessary action to ensure State compliance with
- 19 federal regulations. The Department shall apply for any
- 20 necessary federal waivers or waiver amendments needed to
- 21 implement the program.
- Section 65. Reviews and reports. The Department and all
- other participating State agencies shall each, on an ongoing
- 24 basis, review and assess the implementation of the
- consumer-directed care program. By January 15 of each year,
- beginning in 2004, the Department shall submit a written report
- 27 to the General Assembly that includes the Department's and all
- other State agencies' review of the program and recommendations
- 29 for improvements to the program.
- 30 Section 70. Repeal. The Illinois Consumer-Directed Care
- 31 Act is repealed on January 1, 2008.