94TH GENERAL ASSEMBLY

State of Illinois

2005 and 2006

HB2542

Introduced 2/18/2005, by Rep. Jack D. Franks

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5.4

from Ch. 23, par. 5-5.4

Amends the Illinois Public Aid Code. Makes a technical change in a Section concerning standards of payment of skilled nursing and intermediate care services.

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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)

Sec. 5-5.4. Standards of Payment - Department of Public
Aid. <u>The</u> The Department of Public Aid shall develop standards
of payment of skilled nursing and intermediate care services in
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 and no update for inflation shall be provided on or after July 26 1, 1994 and before July 1, 2005, unless specifically provided 27 28 for in this Section. The changes made by this amendatory Act of 29 the 93rd General Assembly extending the duration of the 30 prohibition against a rate increase or update for inflation are effective retroactive to July 1, 2004. 31

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For facilities licensed by the Department of Public Health

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1 under the Nursing Home Care Act as Intermediate Care for the 2 Developmentally Disabled facilities or Long Term Care for Under 3 Age 22 facilities, the rates taking effect on July 1, 1998 4 shall include an increase of 3%. For facilities licensed by the 5 Department of Public Health under the Nursing Home Care Act as Skilled Nursing facilities or Intermediate Care facilities, 6 the rates taking effect on July 1, 1998 shall include an 7 8 increase of 3% plus \$1.10 per resident-day, as defined by the 9 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 Under 13 Age 22 facilities, the rates taking effect on July 1, 1999 shall include an increase of 1.6% plus \$3.00 per resident-day, 14 15 as defined by the Department. For facilities licensed by the 16 Department of Public Health under the Nursing Home Care Act as 17 Skilled Nursing facilities or Intermediate Care facilities, the rates taking effect on July 1, 1999 shall include an 18 19 increase of 1.6% and, for services provided on or after October 20 1, 1999, shall be increased by \$4.00 per resident-day, as 21 defined by the Department.

22 For facilities licensed by the Department of Public Health 23 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under 24 25 Age 22 facilities, the rates taking effect on July 1, 2000 26 shall include an increase of 2.5% per resident-day, as defined 27 by the Department. For facilities licensed by the Department of 28 Public Health under the Nursing Home Care Act as Skilled 29 Nursing facilities or Intermediate Care facilities, the rates 30 taking effect on July 1, 2000 shall include an increase of 2.5% 31 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 shall develop the - 3 - LRB094 09466 DRJ 39717 b

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

12 (A) For a facility that would receive a lower nursing 13 component rate per patient day under the new system than the facility received effective on the date immediately 14 preceding the date that the Department implements the new 15 16 payment methodology, the nursing component rate per 17 patient day for the facility shall be held at the level in effect on the date immediately preceding the date that the 18 Department implements the new payment methodology until a 19 higher nursing component rate of reimbursement is achieved 20 21 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 HB2542

shall include a statewide increase of 7.85%, as defined by the
 Department.

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

11 For facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities 12 or intermediate care facilities, the rates taking effect on 13 July 1, 2001 shall be computed using the most recent cost 14 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 of the rate computed for July 1, 2001 or the rate effective on 18 19 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.

27 Notwithstanding any other provision of this Section, for 28 facilities licensed by the Department of Public Health under 29 the Nursing Home Care Act as skilled nursing facilities or 30 intermediate care facilities, if the payment methodologies required under Section 5A-12 and the waiver granted under 42 31 32 CFR 433.68 are approved by the United States Centers for Medicare and Medicaid Services, the rates taking effect on July 33 1, 2004 shall be 3.0% greater than the rates in effect on June 34 35 30, 2004. These rates shall take effect only upon approval and implementation of the payment methodologies required under 36

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1 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.

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 as long-term care 11 facilities for residents under 22 years of age, the rates 12 taking effect on July 1, 2003 shall include a statewide 13 increase of 4%, as defined by the Department.

Rates established effective each July 1 shall govern 14 15 payment for services rendered throughout that fiscal year, 16 except that rates established on July 1, 1996 shall be 17 increased by 6.8% for services provided on or after January 1, 1997. Such rates will be based upon the rates calculated for 18 19 the year beginning July 1, 1990, and for subsequent years thereafter until June 30, 2001 shall be based on the facility 20 cost reports for the facility fiscal year ending at any point 21 in time during the previous calendar year, updated to the 22 23 midpoint of the rate year. The cost report shall be on file 24 with the Department no later than April 1 of the current rate 25 year. Should the cost report not be on file by April 1, the 26 Department shall base the rate on the latest cost report filed 27 by each skilled care facility and intermediate care facility, 28 updated to the midpoint of the current rate In year. 29 determining rates for services rendered on and after July 1, 30 1985, fixed time shall not be computed at less than zero. The 31 Department shall not make any alterations of regulations which 32 would reduce any component of the Medicaid rate to a level 33 below what that component would have been utilizing in the rate effective on July 1, 1984. 34

35 (2) Shall take into account the actual costs incurred by36 facilities in providing services for recipients of skilled

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nursing and intermediate care services under the medical
 assistance program.

3 (3) Shall take into account the medical and psycho-social4 characteristics and needs of the patients.

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

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

20 (Source: P.A. 92-10, eff. 6-11-01; 92-31, eff. 6-28-01; 92-597, 21 eff. 6-28-02; 92-651, eff. 7-11-02; 92-848, eff. 1-1-03; 93-20, 22 eff. 6-20-03; 93-649, eff. 1-8-04; 93-659, eff. 2-3-04; 93-841, 23 eff. 7-30-04.)