

94TH GENERAL ASSEMBLY State of Illinois 2005 and 2006 SB1774

Introduced 2/25/2005, by Sen. Dave Sullivan

SYNOPSIS AS INTRODUCED:

210 ILCS 45/3-304.1 320 ILCS 42/25

Amends the Nursing Home Care Act and the Older Adult Services Act. Adds information that the Department of Public Health must make available on a public web site, including: links to available services, resources, and reference materials concerning caregiving, diseases, and best practices for use by professionals, older adults, and family caregivers; a listing of and contact information for both facility-based and non-facility-based services and care; a listing of federal, State, and regional agencies on aging, and information describing their purposes, abilities, and services; and the Illinois Act on the Aging and the federal Older Americans Act. Provides that the Department on Aging must have a visible link on its web site home page to that information required to be made available on a public web site by the Department of Public Health. Effective immediately.

LRB094 08685 DRJ 41305 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning aging.

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

4	Section 5. The Nursing Home Care Act is amended by changing
5	Section 3-304.1 as follows:
6	(210 ILCS 45/3-304.1)
7	Sec. 3-304.1. Public computer access to information.
8	(a) The Department must make information regarding nursing
9	homes and home and community-based services in the State
10	available to the public in electronic form on the World Wide
11	Web, including all of the following information:
12	(1) who regulates nursing homes;
13	(2) information in the possession of the Department
14	that is listed in Sections 3-210 and 3-304;
15	(3) deficiencies and plans of correction;
16	(4) enforcement remedies;
17	(5) penalty letters;
18	(6) designation of penalty monies;
19	(7) the U.S. Department of Health and Human Services'
20	Health Care Financing Administration special projects or
21	federally required inspections;
22	(8) advisory standards;
23	(9) deficiency-free surveys; and
24	(10) enforcement actions and enforcement summaries: \div
25	(11) links to available services, resources, and
26	reference materials concerning caregiving, diseases, and
27	best practices for use by professionals, older adults, and
28	<pre>family caregivers;</pre>
29	(12) a listing of and contact information for both
30	facility-based and non-facility-based services and care;
31	no unlicensed, uncertified, unregistered, or otherwise

unregulated program or service that is required by law or

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1	regulation to be licensed, certified, registered, or
2	regulated shall be placed on a public web site under this
3	Section;
4	(13) a listing of State and regional agencies on aging,
5	and information describing their purposes, abilities, and
6	services;
7	(14) links to the web sites of, and contact information
8	for, the State and regional agencies on aging;
9	(15) a listing of, and links to, federal regulatory
10	agencies on aging-related programs and services;
11	(16) the rules adopted by the State and federal
12	agencies on aging; and
13	(17) the Illinois Act on the Aging and the federal
14	Older Americans Act.
15	(b) No fee or other charge may be imposed by the Department
16	as a condition of accessing the information.
17	(c) The electronic public access provided through the World
18	Wide Web shall be in addition to any other electronic or print
19	distribution of the information.
20	(d) The information shall be made available as provided in
21	this Section in the shortest practicable time after it is
22	publicly available in any other form.
23	(Source: P.A. 91-290, eff. 1-1-00.)
24	Section 10. The Older Adult Services Act is amended by
25	changing Section 25 as follows:
26	(320 ILCS 42/25)
27	Sec. 25. Older adult services restructuring. No later than
28	January 1, 2005, the Department shall commence the process of
29	restructuring the older adult services delivery system.
30	Priority shall be given to both the expansion of services and
31	the development of new services in priority service areas.
32	Subject to the availability of funding, the restructuring shall

include, but not be limited to, the following:

(1) Planning. The Department shall develop a plan to

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restructure the State's service delivery system for older shall include а schedule for adults. The plan the implementation of the initiatives outlined in this Act and all other initiatives identified by the participating agencies to fulfill the purposes of this Act. Financing for older adult services shall be based on the principle that "money follows the individual". The plan shall also identify potential impediments to delivery system restructuring and include any known regulatory or statutory barriers.

- (2) Comprehensive case management. The Department shall implement a statewide system of holistic comprehensive case management. The system shall include the identification and implementation of a universal, comprehensive assessment tool to be used statewide to determine the level of functional, cognitive, socialization, and financial needs of older adults. This tool shall be supported by an electronic intake, assessment, and care planning system linked to a central location. "Comprehensive case management" includes services and coordination such as (i) comprehensive assessment of the older adult (including the physical, functional, cognitive, and social needs of the individual); psycho-social, development and implementation of a service plan with the older adult to mobilize the formal and family resources and services identified in the assessment to meet the needs of the older adult, including coordination of the resources and services with any other plans that exist for various formal services, such as hospital discharge plans, and with the information and assistance services; (iii) coordination and monitoring of formal and family service delivery, including coordination and monitoring to ensure that services specified in the plan are being provided; (iv) periodic reassessment and revision of the status of the older adult with the older adult or, necessary, the older adult's designated representative; and (v) in accordance with the wishes of the older adult, advocacy on behalf of the older adult for needed services or resources.
 - (3) Coordinated point of entry. The Department shall

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implement and publicize a statewide coordinated point of entry using a uniform name, identity, logo, and toll-free number.

- (4) Public web site. The Department of Public Health shall expand the develop a public web site developed pursuant to Section 3-304.1 of the Nursing Home Care Act to provide that provides links to available services, resources, and reference materials concerning caregiving, diseases, and best practices for use by professionals, older adults, and family caregivers. The Department on Aging shall have a visible link on its web site home page to the information required to be made available on a public web site by the Department of Public Health under Section 3-304.1 of the Nursing Home Care Act.
- (5) Expansion of older adult services. The Department shall expand older adult services that promote independence and permit older adults to remain in their own homes and communities.
- (6) Consumer-directed home and community-based services. The Department shall expand the range of service options available to permit older adults to exercise maximum choice and control over their care.
- (7) Comprehensive delivery system. The Department shall expand opportunities for older adults to receive services in systems that integrate acute and chronic care.
- (8) Enhanced transition and follow-up services. The Department shall implement a program of transition from one residential setting to another and follow-up services, regardless of residential setting, pursuant to rules with respect to (i) resident eligibility, (ii) assessment of the resident's health, cognitive, social, and financial needs, (iii) development of transition plans, and (iv) the level of services that must be available before transitioning a resident from one setting to another.
- 33 (9) Family caregiver support. The Department shall develop 34 strategies for public and private financing of services that 35 supplement and support family caregivers.
 - (10) Quality standards and quality improvement. The

Department shall establish a core set of uniform quality standards for all providers that focus on outcomes and take into consideration consumer choice and satisfaction, and the Department shall require each provider to implement a continuous quality improvement process to address consumer The continuous quality improvement process must issues. benchmark performance, be person-centered and data-driven, and

focus on consumer satisfaction.

- (11) Workforce. The Department shall develop strategies to attract and retain a qualified and stable worker pool, provide living wages and benefits, and create a work environment that is conducive to long-term employment and career development. Resources such as grants, education, and promotion of career opportunities may be used.
 - (12) Coordination of services. The Department shall identify methods to better coordinate service networks to maximize resources and minimize duplication of services and ease of application.
- (13) Barriers to services. The Department shall identify barriers to the provision, availability, and accessibility of services and shall implement a plan to address those barriers. The plan shall: (i) identify barriers, including but not limited to, statutory and regulatory complexity, reimbursement issues, payment issues, and labor force issues; (ii) recommend changes to State or federal laws or administrative rules or regulations; (iii) recommend application for federal waivers to improve efficiency and reduce cost and paperwork; (iv) develop innovative service delivery models; and (v) recommend application for federal or private service grants.
 - (14) Reimbursement and funding. The Department shall investigate and evaluate costs and payments by defining costs to implement a uniform, audited provider cost reporting system to be considered by all Departments in establishing payments. To the extent possible, multiple cost reporting mandates shall not be imposed.
 - (15) Medicaid nursing home cost containment and Medicare

utilization. The Department of Public Aid, in collaboration with the Department on Aging and the Department of Public Health and in consultation with the Advisory Committee, shall propose a plan to contain Medicaid nursing home costs and maximize Medicare utilization. The plan must not impair the ability of an older adult to choose among available services. The plan shall include, but not be limited to, (i) techniques to maximize the use of the most cost-effective services without sacrificing quality and (ii) methods to identify and serve older adults in need of minimal services to remain independent, but who are likely to develop a need for more extensive services in the absence of those minimal services.

- (16) Bed reduction. The Department of Public Health shall implement a nursing home conversion program to reduce the number of Medicaid-certified nursing home beds in areas with excess beds. The Department of Public Aid shall investigate changes to the Medicaid nursing facility reimbursement system in order to reduce beds. Such changes may include, but are not limited to, incentive payments that will enable facilities to adjust to the restructuring and expansion of services required by the Older Adult Services Act, including adjustments for the voluntary closure or layaway of nursing home beds certified under Title XIX of the federal Social Security Act. Any savings shall be reallocated to fund home-based or community-based older adult services pursuant to Section 20.
- (17) Financing. The Department shall investigate and evaluate financing options for older adult services and shall make recommendations in the report required by Section 15 concerning the feasibility of these financing arrangements. These arrangements shall include, but are not limited to:
- (A) private long-term care insurance coverage for older adult services;
- 33 (B) enhancement of federal long-term care financing initiatives;
 - (C) employer benefit programs such as medical savings accounts for long-term care;

- 1 (D) individual and family cost-sharing options;
- 2 (E) strategies to reduce reliance on government
- 3 programs;
- 4 (F) fraudulent asset divestiture and financial planning prevention; and
- 6 (G) methods to supplement and support family and community caregiving.
- 8 (18) Older Adult Services Demonstration Grants. The
 9 Department shall implement a program of demonstration grants
 10 that will assist in the restructuring of the older adult
 11 services delivery system, and shall provide funding for
 12 innovative service delivery models and system change and
 13 integration initiatives pursuant to subsection (g) of Section
 14 20.
- (19) Bed need methodology update. For the purposes of determining areas with excess beds, the Departments shall provide information and assistance to the Health Facilities Planning Board to update the Bed Need Methodology for Long-Term Care to update the assumptions used to establish the methodology to make them consistent with modern older adult services.
- 22 (Source: P.A. 93-1031, eff. 8-27-04.)
- 23 Section 99. Effective date. This Act takes effect upon 24 becoming law.