



95TH GENERAL ASSEMBLY

State of Illinois

2007 and 2008

HB5231

by Rep. Elizabeth Hernandez

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5

from Ch. 23, par. 5-5

Amends the Illinois Public Aid Code. Provides that dental services authorized under the medical assistance program include preventive, diagnostic, or corrective procedures. Provides that dental services provided to persons who are participating in education, training, or employment programs operated by the Department of Human Services must be provided by an individual licensed to practice dentistry or dental surgery; also provides that such "dental services" mean diagnostic, preventive, or corrective procedures provided by or under the supervision of a dentist in the practice of his or her profession (eliminates a reference to prosthodontics).

LRB095 15982 DRJ 41994 b

FISCAL NOTE ACT
MAY APPLY

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 5-5 as follows:

6 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

7 Sec. 5-5. Medical services. The Illinois Department, by
8 rule, shall determine the quantity and quality of and the rate
9 of reimbursement for the medical assistance for which payment
10 will be authorized, and the medical services to be provided,
11 which may include all or part of the following: (1) inpatient
12 hospital services; (2) outpatient hospital services; (3) other
13 laboratory and X-ray services; (4) skilled nursing home
14 services; (5) physicians' services whether furnished in the
15 office, the patient's home, a hospital, a skilled nursing home,
16 or elsewhere; (6) medical care, or any other type of remedial
17 care furnished by licensed practitioners; (7) home health care
18 services; (8) private duty nursing service; (9) clinic
19 services; (10) dental services, including (i) preventive,
20 diagnostic, or corrective procedures and (ii) prevention and
21 treatment of periodontal disease and dental caries disease for
22 pregnant women; (11) physical therapy and related services;
23 (12) prescribed drugs, dentures, and prosthetic devices; and

1 eyeglasses prescribed by a physician skilled in the diseases of
2 the eye, or by an optometrist, whichever the person may select;
3 (13) other diagnostic, screening, preventive, and
4 rehabilitative services; (14) transportation and such other
5 expenses as may be necessary; (15) medical treatment of sexual
6 assault survivors, as defined in Section 1a of the Sexual
7 Assault Survivors Emergency Treatment Act, for injuries
8 sustained as a result of the sexual assault, including
9 examinations and laboratory tests to discover evidence which
10 may be used in criminal proceedings arising from the sexual
11 assault; (16) the diagnosis and treatment of sickle cell
12 anemia; and (17) any other medical care, and any other type of
13 remedial care recognized under the laws of this State, but not
14 including abortions, or induced miscarriages or premature
15 births, unless, in the opinion of a physician, such procedures
16 are necessary for the preservation of the life of the woman
17 seeking such treatment, or except an induced premature birth
18 intended to produce a live viable child and such procedure is
19 necessary for the health of the mother or her unborn child. The
20 Illinois Department, by rule, shall prohibit any physician from
21 providing medical assistance to anyone eligible therefor under
22 this Code where such physician has been found guilty of
23 performing an abortion procedure in a wilful and wanton manner
24 upon a woman who was not pregnant at the time such abortion
25 procedure was performed. The term "any other type of remedial
26 care" shall include nursing care and nursing home service for

1 persons who rely on treatment by spiritual means alone through
2 prayer for healing.

3 Notwithstanding any other provision of this Section, a
4 comprehensive tobacco use cessation program that includes
5 purchasing prescription drugs or prescription medical devices
6 approved by the Food and Drug administration shall be covered
7 under the medical assistance program under this Article for
8 persons who are otherwise eligible for assistance under this
9 Article.

10 Notwithstanding any other provision of this Code, the
11 Illinois Department may not require, as a condition of payment
12 for any laboratory test authorized under this Article, that a
13 physician's handwritten signature appear on the laboratory
14 test order form. The Illinois Department may, however, impose
15 other appropriate requirements regarding laboratory test order
16 documentation.

17 The Department of Healthcare and Family Services shall
18 provide the following services to persons eligible for
19 assistance under this Article who are participating in
20 education, training or employment programs operated by the
21 Department of Human Services as successor to the Department of
22 Public Aid:

23 (1) dental services provided by an individual licensed
24 to practice dentistry or dental surgery; for purposes of
25 this paragraph (1), "dental services" means diagnostic,
26 preventive, or corrective procedures provided by or under

1 the supervision of a dentist in the practice of his or her
2 profession ~~, which shall include but not be limited to~~
3 ~~prosthodontics; and~~

4 (2) eyeglasses prescribed by a physician skilled in the
5 diseases of the eye, or by an optometrist, whichever the
6 person may select.

7 The Illinois Department, by rule, may distinguish and
8 classify the medical services to be provided only in accordance
9 with the classes of persons designated in Section 5-2.

10 The Department of Healthcare and Family Services must
11 provide coverage and reimbursement for amino acid-based
12 elemental formulas, regardless of delivery method, for the
13 diagnosis and treatment of (i) eosinophilic disorders and (ii)
14 short bowel syndrome when the prescribing physician has issued
15 a written order stating that the amino acid-based elemental
16 formula is medically necessary.

17 The Illinois Department shall authorize the provision of,
18 and shall authorize payment for, screening by low-dose
19 mammography for the presence of occult breast cancer for women
20 35 years of age or older who are eligible for medical
21 assistance under this Article, as follows: a baseline mammogram
22 for women 35 to 39 years of age and an annual mammogram for
23 women 40 years of age or older. All screenings shall include a
24 physical breast exam, instruction on self-examination and
25 information regarding the frequency of self-examination and
26 its value as a preventative tool. As used in this Section,

1 "low-dose mammography" means the x-ray examination of the
2 breast using equipment dedicated specifically for mammography,
3 including the x-ray tube, filter, compression device, image
4 receptor, and cassettes, with an average radiation exposure
5 delivery of less than one rad mid-breast, with 2 views for each
6 breast.

7 Any medical or health care provider shall immediately
8 recommend, to any pregnant woman who is being provided prenatal
9 services and is suspected of drug abuse or is addicted as
10 defined in the Alcoholism and Other Drug Abuse and Dependency
11 Act, referral to a local substance abuse treatment provider
12 licensed by the Department of Human Services or to a licensed
13 hospital which provides substance abuse treatment services.
14 The Department of Healthcare and Family Services shall assure
15 coverage for the cost of treatment of the drug abuse or
16 addiction for pregnant recipients in accordance with the
17 Illinois Medicaid Program in conjunction with the Department of
18 Human Services.

19 All medical providers providing medical assistance to
20 pregnant women under this Code shall receive information from
21 the Department on the availability of services under the Drug
22 Free Families with a Future or any comparable program providing
23 case management services for addicted women, including
24 information on appropriate referrals for other social services
25 that may be needed by addicted women in addition to treatment
26 for addiction.

1 The Illinois Department, in cooperation with the
2 Departments of Human Services (as successor to the Department
3 of Alcoholism and Substance Abuse) and Public Health, through a
4 public awareness campaign, may provide information concerning
5 treatment for alcoholism and drug abuse and addiction, prenatal
6 health care, and other pertinent programs directed at reducing
7 the number of drug-affected infants born to recipients of
8 medical assistance.

9 Neither the Department of Healthcare and Family Services
10 nor the Department of Human Services shall sanction the
11 recipient solely on the basis of her substance abuse.

12 The Illinois Department shall establish such regulations
13 governing the dispensing of health services under this Article
14 as it shall deem appropriate. The Department should seek the
15 advice of formal professional advisory committees appointed by
16 the Director of the Illinois Department for the purpose of
17 providing regular advice on policy and administrative matters,
18 information dissemination and educational activities for
19 medical and health care providers, and consistency in
20 procedures to the Illinois Department.

21 The Illinois Department may develop and contract with
22 Partnerships of medical providers to arrange medical services
23 for persons eligible under Section 5-2 of this Code.
24 Implementation of this Section may be by demonstration projects
25 in certain geographic areas. The Partnership shall be
26 represented by a sponsor organization. The Department, by rule,

1 shall develop qualifications for sponsors of Partnerships.
2 Nothing in this Section shall be construed to require that the
3 sponsor organization be a medical organization.

4 The sponsor must negotiate formal written contracts with
5 medical providers for physician services, inpatient and
6 outpatient hospital care, home health services, treatment for
7 alcoholism and substance abuse, and other services determined
8 necessary by the Illinois Department by rule for delivery by
9 Partnerships. Physician services must include prenatal and
10 obstetrical care. The Illinois Department shall reimburse
11 medical services delivered by Partnership providers to clients
12 in target areas according to provisions of this Article and the
13 Illinois Health Finance Reform Act, except that:

14 (1) Physicians participating in a Partnership and
15 providing certain services, which shall be determined by
16 the Illinois Department, to persons in areas covered by the
17 Partnership may receive an additional surcharge for such
18 services.

19 (2) The Department may elect to consider and negotiate
20 financial incentives to encourage the development of
21 Partnerships and the efficient delivery of medical care.

22 (3) Persons receiving medical services through
23 Partnerships may receive medical and case management
24 services above the level usually offered through the
25 medical assistance program.

26 Medical providers shall be required to meet certain

1 qualifications to participate in Partnerships to ensure the
2 delivery of high quality medical services. These
3 qualifications shall be determined by rule of the Illinois
4 Department and may be higher than qualifications for
5 participation in the medical assistance program. Partnership
6 sponsors may prescribe reasonable additional qualifications
7 for participation by medical providers, only with the prior
8 written approval of the Illinois Department.

9 Nothing in this Section shall limit the free choice of
10 practitioners, hospitals, and other providers of medical
11 services by clients. In order to ensure patient freedom of
12 choice, the Illinois Department shall immediately promulgate
13 all rules and take all other necessary actions so that provided
14 services may be accessed from therapeutically certified
15 optometrists to the full extent of the Illinois Optometric
16 Practice Act of 1987 without discriminating between service
17 providers.

18 The Department shall apply for a waiver from the United
19 States Health Care Financing Administration to allow for the
20 implementation of Partnerships under this Section.

21 The Illinois Department shall require health care
22 providers to maintain records that document the medical care
23 and services provided to recipients of Medical Assistance under
24 this Article. The Illinois Department shall require health care
25 providers to make available, when authorized by the patient, in
26 writing, the medical records in a timely fashion to other

1 health care providers who are treating or serving persons
2 eligible for Medical Assistance under this Article. All
3 dispensers of medical services shall be required to maintain
4 and retain business and professional records sufficient to
5 fully and accurately document the nature, scope, details and
6 receipt of the health care provided to persons eligible for
7 medical assistance under this Code, in accordance with
8 regulations promulgated by the Illinois Department. The rules
9 and regulations shall require that proof of the receipt of
10 prescription drugs, dentures, prosthetic devices and
11 eyeglasses by eligible persons under this Section accompany
12 each claim for reimbursement submitted by the dispenser of such
13 medical services. No such claims for reimbursement shall be
14 approved for payment by the Illinois Department without such
15 proof of receipt, unless the Illinois Department shall have put
16 into effect and shall be operating a system of post-payment
17 audit and review which shall, on a sampling basis, be deemed
18 adequate by the Illinois Department to assure that such drugs,
19 dentures, prosthetic devices and eyeglasses for which payment
20 is being made are actually being received by eligible
21 recipients. Within 90 days after the effective date of this
22 amendatory Act of 1984, the Illinois Department shall establish
23 a current list of acquisition costs for all prosthetic devices
24 and any other items recognized as medical equipment and
25 supplies reimbursable under this Article and shall update such
26 list on a quarterly basis, except that the acquisition costs of

1 all prescription drugs shall be updated no less frequently than
2 every 30 days as required by Section 5-5.12.

3 The rules and regulations of the Illinois Department shall
4 require that a written statement including the required opinion
5 of a physician shall accompany any claim for reimbursement for
6 abortions, or induced miscarriages or premature births. This
7 statement shall indicate what procedures were used in providing
8 such medical services.

9 The Illinois Department shall require all dispensers of
10 medical services, other than an individual practitioner or
11 group of practitioners, desiring to participate in the Medical
12 Assistance program established under this Article to disclose
13 all financial, beneficial, ownership, equity, surety or other
14 interests in any and all firms, corporations, partnerships,
15 associations, business enterprises, joint ventures, agencies,
16 institutions or other legal entities providing any form of
17 health care services in this State under this Article.

18 The Illinois Department may require that all dispensers of
19 medical services desiring to participate in the medical
20 assistance program established under this Article disclose,
21 under such terms and conditions as the Illinois Department may
22 by rule establish, all inquiries from clients and attorneys
23 regarding medical bills paid by the Illinois Department, which
24 inquiries could indicate potential existence of claims or liens
25 for the Illinois Department.

26 Enrollment of a vendor that provides non-emergency medical

1 transportation, defined by the Department by rule, shall be
2 conditional for 180 days. During that time, the Department of
3 Healthcare and Family Services may terminate the vendor's
4 eligibility to participate in the medical assistance program
5 without cause. That termination of eligibility is not subject
6 to the Department's hearing process.

7 The Illinois Department shall establish policies,
8 procedures, standards and criteria by rule for the acquisition,
9 repair and replacement of orthotic and prosthetic devices and
10 durable medical equipment. Such rules shall provide, but not be
11 limited to, the following services: (1) immediate repair or
12 replacement of such devices by recipients without medical
13 authorization; and (2) rental, lease, purchase or
14 lease-purchase of durable medical equipment in a
15 cost-effective manner, taking into consideration the
16 recipient's medical prognosis, the extent of the recipient's
17 needs, and the requirements and costs for maintaining such
18 equipment. Such rules shall enable a recipient to temporarily
19 acquire and use alternative or substitute devices or equipment
20 pending repairs or replacements of any device or equipment
21 previously authorized for such recipient by the Department.

22 The Department shall execute, relative to the nursing home
23 prescreening project, written inter-agency agreements with the
24 Department of Human Services and the Department on Aging, to
25 effect the following: (i) intake procedures and common
26 eligibility criteria for those persons who are receiving

1 non-institutional services; and (ii) the establishment and
2 development of non-institutional services in areas of the State
3 where they are not currently available or are undeveloped.

4 The Illinois Department shall develop and operate, in
5 cooperation with other State Departments and agencies and in
6 compliance with applicable federal laws and regulations,
7 appropriate and effective systems of health care evaluation and
8 programs for monitoring of utilization of health care services
9 and facilities, as it affects persons eligible for medical
10 assistance under this Code.

11 The Illinois Department shall report annually to the
12 General Assembly, no later than the second Friday in April of
13 1979 and each year thereafter, in regard to:

14 (a) actual statistics and trends in utilization of
15 medical services by public aid recipients;

16 (b) actual statistics and trends in the provision of
17 the various medical services by medical vendors;

18 (c) current rate structures and proposed changes in
19 those rate structures for the various medical vendors; and

20 (d) efforts at utilization review and control by the
21 Illinois Department.

22 The period covered by each report shall be the 3 years
23 ending on the June 30 prior to the report. The report shall
24 include suggested legislation for consideration by the General
25 Assembly. The filing of one copy of the report with the
26 Speaker, one copy with the Minority Leader and one copy with

1 the Clerk of the House of Representatives, one copy with the
2 President, one copy with the Minority Leader and one copy with
3 the Secretary of the Senate, one copy with the Legislative
4 Research Unit, and such additional copies with the State
5 Government Report Distribution Center for the General Assembly
6 as is required under paragraph (t) of Section 7 of the State
7 Library Act shall be deemed sufficient to comply with this
8 Section.

9 (Source: P.A. 95-331, eff. 8-21-07; 95-520, eff. 8-28-07.)