



Sen. David Koehler

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1 AMENDMENT TO SENATE BILL 3291

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 3291 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Mental Health and Developmental  
5 Disabilities Administrative Act is amended by adding Section  
6 54.5 as follows:

7 (20 ILCS 1705/54.5 new)

8 Sec. 54.5. Community care for the developmentally disabled  
9 quality workforce initiative.

10 (a) Legislative intent. Individuals with developmental  
11 disabilities who live in community-based settings rely on  
12 direct support staff for a variety of supports and services  
13 essential to the ability to reach their full potential. A  
14 stable, well-trained direct support workforce is critical to  
15 the well-being of these individuals. State and national studies  
16 have documented high rates of turnover among direct support

1 workers and confirmed that improvements in wages can help  
2 reduce turnover and develop a more stable and committed  
3 workforce. This Section would increase the wages and benefits  
4 for direct care workers supporting individuals with  
5 developmental disabilities and provide accountability by  
6 ensuring that additional resources go directly to these  
7 workers.

8 (b) Reimbursement. In order to attract and retain a stable,  
9 qualified, and healthy workforce, beginning July 1, 2010, the  
10 Department of Human Services may reimburse an individual  
11 community service provider serving individuals with  
12 developmental disabilities for spending incurred to provide  
13 improved wages and benefits to its employees serving  
14 developmentally disabled individuals. Reimbursement shall be  
15 based upon the provider's most recent cost report. Subject to  
16 available appropriations, this reimbursement shall be made  
17 according to the following criteria:

18 (1) The Department shall reimburse the provider to  
19 compensate for spending on improved wages and benefits for  
20 its eligible employees. Eligible employees include  
21 employees engaged in direct care work.

22 (2) In order to qualify for reimbursement under this  
23 Section, a provider must submit to the Department, before  
24 January 1 of each year, documentation of a written, legally  
25 binding commitment to increase spending for the purpose of  
26 providing improved wages and benefits to its eligible

1 employees during the next year. The commitment must be  
2 binding as to both existing and future staff. The  
3 commitment must include a method of enforcing the  
4 commitment that is available to the employees or their  
5 representative and is expeditious, uses a neutral  
6 decision-maker, and is economical for the employees. The  
7 Department must also receive documentation of the  
8 provider's provision of written notice of the commitment  
9 and the availability of the enforcement mechanism to the  
10 employees or their representative.

11 (3) Reimbursement shall be based on the amount of  
12 increased spending to be incurred by the provider for  
13 improving wages and benefits that exceeds the spending  
14 reported in the cost report currently used by the  
15 Department. Reimbursement shall be calculated as follows:  
16 the per diem equivalent of the quarterly difference between  
17 the cost to provide improved wages and benefits for covered  
18 eligible employees as identified in the legally binding  
19 commitment and the previous period cost of wages and  
20 benefits as reported in the cost report currently used by  
21 the Department, subject to the limitations identified in  
22 paragraph (2) of this subsection. In no event shall the per  
23 diem increase be in excess of \$7.00 for any 12 month  
24 period, or in excess of \$8.00 for any 12 month period for  
25 community-integrated living arrangements with 4 beds or  
26 less. For purposes of this Section, "community-integrated

1 living arrangement" has the same meaning ascribed to that  
2 term in the Community-Integrated Living Arrangements  
3 Licensure and Certification Act.

4 (4) Any community service provider is eligible to  
5 receive reimbursement under this Section. A provider's  
6 eligibility to receive reimbursement shall continue as  
7 long as the provider maintains eligibility under paragraph  
8 (2) of this subsection and the reimbursement program  
9 continues to exist.

10 (c) Audit. Reimbursement under this Section is subject to  
11 audit by the Department and shall be reduced or eliminated in  
12 the case of any provider that does not honor its commitment to  
13 increase spending to improve the wages and benefits of its  
14 employees or that decreases such spending.

15 Section 10. The Illinois Public Aid Code is amended by  
16 adding Section 5-5.4f as follows:

17 (305 ILCS 5/5-5.4f new)

18 Sec. 5-5.4f. Intermediate care facilities for the  
19 developmentally disabled quality workforce initiative.

20 (a) Legislative intent. Individuals with developmental  
21 disabilities who live in community-based settings rely on  
22 direct support staff for a variety of supports and services  
23 essential to the ability to reach their full potential. A  
24 stable, well-trained direct support workforce is critical to

1 the well-being of these individuals. State and national studies  
2 have documented high rates of turnover among direct support  
3 workers and confirmed that improvements in wages can help  
4 reduce turnover and develop a more stable and committed  
5 workforce. This Section would increase the wages and benefits  
6 for direct care workers supporting individuals with  
7 developmental disabilities and provide accountability by  
8 ensuring that additional resources go directly to these  
9 workers.

10 (b) Reimbursement. Notwithstanding any provision of  
11 Section 5-5.4, in order to attract and retain a stable,  
12 qualified, and healthy workforce, beginning July 1, 2010, the  
13 Department of Healthcare and Family Services may reimburse an  
14 individual intermediate care facility for the developmentally  
15 disabled for spending incurred to provide improved wages and  
16 benefits to its employees serving the individuals residing in  
17 the facility. Reimbursement shall be based upon patient days  
18 reported in the facility's most recent cost report. Subject to  
19 available appropriations, this reimbursement shall be made  
20 according to the following criteria:

21 (1) The Department shall reimburse the facility to  
22 compensate for spending on improved wages and benefits for  
23 its eligible employees. Eligible employees include  
24 employees engaged in direct care work.

25 (2) In order to qualify for reimbursement under this  
26 Section, a facility must submit to the Department, before

1       January 1 of each year, documentation of a written, legally  
2       binding commitment to increase spending for the purpose of  
3       providing improved wages and benefits to its eligible  
4       employees during the next year. The commitment must be  
5       binding as to both existing and future staff. The  
6       commitment must include a method of enforcing the  
7       commitment that is available to the employees or their  
8       representative and is expeditious, uses a neutral  
9       decision-maker, and is economical for the employees. The  
10       Department must also receive documentation of the  
11       facility's provision of written notice of the commitment  
12       and the availability of the enforcement mechanism to the  
13       employees or their representative.

14       (3) Reimbursement shall be based on the amount of  
15       increased spending to be incurred by the facility for  
16       improving wages and benefits that exceeds the spending  
17       reported in the cost report currently used by the  
18       Department. Reimbursement shall be calculated as follows:  
19       the per diem equivalent of the quarterly difference between  
20       the cost to provide improved wages and benefits for covered  
21       eligible employees as identified in the legally binding  
22       commitment and the previous period cost of wages and  
23       benefits as reported in the cost report currently used by  
24       the Department, subject to the limitations identified in  
25       paragraph (2) of this subsection. In no event shall the per  
26       diem increase be in excess of \$5.00 for any 12 month period

1       for an intermediate care facility for the developmentally  
2       disabled with more than 16 beds, or in excess of \$6.00 for  
3       any 12 month period for an intermediate care facility for  
4       the developmentally disabled with 16 beds or less.

5       (4) Any intermediate care facility for the  
6       developmentally disabled is eligible to receive  
7       reimbursement under this Section. A facility's eligibility  
8       to receive reimbursement shall continue as long as the  
9       facility maintains eligibility under paragraph (2) of this  
10      subsection and the reimbursement program continues to  
11      exist.

12      (c) Audit. Reimbursement under this Section is subject to  
13      audit by the Department and shall be reduced or eliminated in  
14      the case of any facility that does not honor its commitment to  
15      increase spending to improve the wages and benefits of its  
16      employees or that decreases such spending.

17           Section 99. Effective date. This Act takes effect July 1,  
18      2010.".