

1 AN ACT concerning health.

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

4 Section 5. The Alcoholism and Other Drug Abuse and
5 Dependency Act is amended by changing Section 1-10 as follows:

6 (20 ILCS 301/1-10)

7 Sec. 1-10. Definitions. As used in this Act, unless the
8 context clearly indicates otherwise, the following words and
9 terms have the following meanings:

10 "Act" means the Alcoholism and Other Drug Abuse and
11 Dependency Act.

12 "Addict" means a person who exhibits the disease known as
13 "addiction".

14 "Addiction" means a disease process characterized by the
15 continued use of a specific psycho-active substance despite
16 physical, psychological or social harm. The term also describes
17 the advanced stages of chemical dependency.

18 "Administrator" means a person responsible for
19 administration of a program.

20 "Alcoholic" means a person who exhibits the disease known
21 as "alcoholism".

22 "Alcoholism" means a chronic and progressive disease or
23 illness characterized by preoccupation with and loss of control

1 over the consumption of alcohol, and the use of alcohol despite
2 adverse consequences. Typically, combinations of the following
3 tendencies are also present: periodic or chronic intoxication;
4 physical disability; impaired emotional, occupational or
5 social adjustment; tendency toward relapse; a detrimental
6 effect on the individual, his family and society; psychological
7 dependence; and physical dependence. Alcoholism is also known
8 as addiction to alcohol. Alcoholism is described and further
9 categorized in clinical detail in the DSM and the ICD.

10 "Array of services" means assistance to individuals,
11 families and communities in response to alcohol or other drug
12 abuse or dependency. The array of services includes, but is not
13 limited to: prevention assistance for communities and schools;
14 case finding, assessment and intervention to help individuals
15 stop abusing alcohol or other drugs; a uniform screening,
16 assessment, and evaluation process including criteria for
17 substance use disorders and mental disorders or co-occurring
18 substance use and mental health disorders; case management;
19 detoxification to aid individuals in physically withdrawing
20 from alcohol or other drugs; short-term and long-term treatment
21 and support services to help individuals and family members
22 begin the process of recovery; prescription and dispensing of
23 the drug methadone or other medications as an adjunct to
24 treatment; relapse prevention services; education and
25 counseling for children or other co-dependents of alcoholics or
26 other drug abusers or addicts. For purposes of this Section, a

1 uniform screening, assessment, and evaluation process refers
2 to a process that includes an appropriate evaluation and, as
3 warranted, a referral. "Uniform" does not mean the use of a
4 singular instrument, tool, or process that all must utilize.

5 "Case management" means those services which will assist
6 individuals in gaining access to needed social, educational,
7 medical, treatment and other services.

8 "Children of alcoholics or drug addicts or abusers of
9 alcohol and other drugs" means the minor or adult children of
10 individuals who have abused or been dependent upon alcohol or
11 other drugs. These children may or may not become dependent
12 upon alcohol or other drugs themselves; however, they are
13 physically, psychologically, and behaviorally at high risk of
14 developing the illness. Children of alcoholics and other drug
15 abusers experience emotional and other problems, and benefit
16 from prevention and treatment services provided by funded and
17 non-funded agencies licensed by the Department.

18 "Co-dependents" means individuals who are involved in the
19 lives of and are affected by people who are dependent upon
20 alcohol and other drugs. Co-dependents compulsively engage in
21 behaviors that cause them to suffer adverse physical,
22 emotional, familial, social, behavioral, vocational, and legal
23 consequences as they attempt to cope with the alcohol or drug
24 dependent person. People who become co-dependents include
25 spouses, parents, siblings, and friends of alcohol or drug
26 dependent people. Co-dependents benefit from prevention and

1 treatment services provided by agencies licensed by the
2 Department.

3 "Controlled substance" means any substance or immediate
4 precursor which is enumerated in the schedules of Article II of
5 the Illinois Controlled Substances Act or the Cannabis Control
6 Act.

7 "Crime of violence" means any of the following crimes:
8 murder, voluntary manslaughter, criminal sexual assault,
9 aggravated criminal sexual assault, predatory criminal sexual
10 assault of a child, armed robbery, robbery, arson, kidnapping,
11 aggravated battery, aggravated arson, or any other felony which
12 involves the use or threat of physical force or violence
13 against another individual.

14 "Department" means the Illinois Department of Human
15 Services as successor to the former Department of Alcoholism
16 and Substance Abuse.

17 "Designated program" means a program designated by the
18 Department to provide services described in subsection (c) or
19 (d) of Section 15-10 of this Act. A designated program's
20 primary function is screening, assessing, referring and
21 tracking clients identified by the criminal justice system, and
22 the program agrees to apply statewide the standards, uniform
23 criteria and procedures established by the Department pursuant
24 to such designation.

25 "Detoxification" means the process of allowing an
26 individual to safely withdraw from a drug in a controlled

1 environment.

2 "DSM" means the most current edition of the Diagnostic and
3 Statistical Manual of Mental Disorders.

4 "D.U.I." means driving under the influence of alcohol or
5 other substances which may cause impairment of driving ability.

6 "Facility" means the building or premises which are used
7 for the provision of licensable program services, including
8 support services, as set forth by rule.

9 "ICD" means the most current edition of the International
10 Classification of Diseases.

11 "Incapacitated" means that a person is unconscious or
12 otherwise exhibits, by overt behavior or by extreme physical
13 debilitation, an inability to care for his own needs or to
14 recognize the obvious danger of his situation or to make
15 rational decisions with respect to his need for treatment.

16 "Intermediary person" means a person with expertise
17 relative to addiction, alcoholism, and the abuse of alcohol or
18 other drugs who may be called on to assist the police in
19 carrying out enforcement or other activities with respect to
20 persons who abuse or are dependent on alcohol or other drugs.

21 "Intervention" means readily accessible activities which
22 assist individuals and their partners or family members in
23 coping with the immediate problems of alcohol and other drug
24 abuse or dependency, and in reducing their alcohol and other
25 drug use. Intervention can facilitate emotional and social
26 stability, and involves referring people for further treatment

1 as needed.

2 "Intoxicated person" means a person whose mental or
3 physical functioning is substantially impaired as a result of
4 the current effects of alcohol or other drugs within the body.

5 "Local advisory council" means an alcohol and substance
6 abuse body established in a county, township or community area,
7 which represents public and private entities having an interest
8 in the prevention and treatment of alcoholism or other drug
9 abuse.

10 "Off-site services" means licensable program services or
11 activities which are conducted at a location separate from the
12 primary service location of the provider, and which services
13 are operated by a program or entity licensed under this Act.

14 "Person" means any individual, firm, group, association,
15 partnership, corporation, trust, government or governmental
16 subdivision or agency.

17 "Prevention" means an interactive process of individuals,
18 families, schools, religious organizations, communities and
19 regional, state and national organizations to reduce
20 alcoholism, prevent the use of illegal drugs and the abuse of
21 legal drugs by persons of all ages, prevent the use of alcohol
22 by minors, build the capacities of individuals and systems, and
23 promote healthy environments, lifestyles and behaviors.

24 "Program" means a licensable or fundable activity or
25 service, or a coordinated range of such activities or services,
26 as the Department may establish by rule.

1 "Recovery" means the long-term, often life-long, process
2 in which an addicted person changes the way in which he makes
3 decisions and establishes personal and life priorities. The
4 evolution of this decision-making and priority-setting process
5 is generally manifested by an obvious improvement in the
6 individual's life and lifestyle and by his overcoming the abuse
7 of or dependence on alcohol or other drugs. Recovery is also
8 generally manifested by prolonged periods of abstinence from
9 addictive chemicals which are not medically supervised.
10 Recovery is the goal of treatment.

11 "Rehabilitation" means a process whereby those clinical
12 services necessary and appropriate for improving an
13 individual's life and lifestyle and for overcoming his or her
14 abuse of or dependency upon alcohol or other drugs, or both,
15 are delivered in an appropriate setting and manner as defined
16 in rules established by the Department.

17 "Relapse" means a process which is manifested by a
18 progressive pattern of behavior that reactivates the symptoms
19 of a disease or creates debilitating conditions in an
20 individual who has experienced remission from addiction or
21 alcoholism.

22 "Secretary" means the Secretary of Human Services or his or
23 her designee.

24 "Substance abuse" or "abuse" means a pattern of use of
25 alcohol or other drugs with the potential of leading to
26 immediate functional problems or to alcoholism or other drug

1 dependency, or to the use of alcohol and/or other drugs solely
2 for purposes of intoxication. The term also means the use of
3 illegal drugs by persons of any age, and the use of alcohol by
4 persons under the age of 21.

5 "Treatment" means the broad range of emergency,
6 outpatient, intermediate and residential services and care
7 (including assessment, diagnosis, medical, psychiatric,
8 psychological and social services, care and counseling, and
9 aftercare) which may be extended to individuals who abuse or
10 are dependent on alcohol or other drugs or families of those
11 persons.

12 (Source: P.A. 89-202, eff. 7-21-95; 89-428, eff. 12-13-95;
13 89-462, eff. 5-29-96; 89-507, eff. 7-1-97; 90-14, eff. 7-1-97;
14 90-135, eff. 7-22-97.)

15 Section 8. The Illinois Public Aid Code is amended by
16 changing Section 5-5 as follows:

17 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

18 Sec. 5-5. Medical services. The Illinois Department, by
19 rule, shall determine the quantity and quality of and the rate
20 of reimbursement for the medical assistance for which payment
21 will be authorized, and the medical services to be provided,
22 which may include all or part of the following: (1) inpatient
23 hospital services; (2) outpatient hospital services; (3) other
24 laboratory and X-ray services; (4) skilled nursing home

1 services; (5) physicians' services whether furnished in the
2 office, the patient's home, a hospital, a skilled nursing home,
3 or elsewhere; (6) medical care, or any other type of remedial
4 care furnished by licensed practitioners; (7) home health care
5 services; (8) private duty nursing service; (9) clinic
6 services; (10) dental services, including prevention and
7 treatment of periodontal disease and dental caries disease for
8 pregnant women, provided by an individual licensed to practice
9 dentistry or dental surgery; for purposes of this item (10),
10 "dental services" means diagnostic, preventive, or corrective
11 procedures provided by or under the supervision of a dentist in
12 the practice of his or her profession; (11) physical therapy
13 and related services; (12) prescribed drugs, dentures, and
14 prosthetic devices; and eyeglasses prescribed by a physician
15 skilled in the diseases of the eye, or by an optometrist,
16 whichever the person may select; (13) other diagnostic,
17 screening, preventive, and rehabilitative services, including
18 to ensure that the individual's need for intervention or
19 treatment of mental disorders or substance use disorders or
20 co-occurring mental health and substance use disorders is
21 determined using a uniform screening, assessment, and
22 evaluation process inclusive of criteria, for children and
23 adults; for purposes of this item (13), a uniform screening,
24 assessment, and evaluation process refers to a process that
25 includes an appropriate evaluation and, as warranted, a
26 referral; "uniform" does not mean the use of a singular

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

26 Notwithstanding any other provision of this Section, a

1 comprehensive tobacco use cessation program that includes
2 purchasing prescription drugs or prescription medical devices
3 approved by the Food and Drug Administration shall be covered
4 under the medical assistance program under this Article for
5 persons who are otherwise eligible for assistance under this
6 Article.

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

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

20 (1) dental services provided by or under the
21 supervision of a dentist; and

22 (2) eyeglasses prescribed by a physician skilled in the
23 diseases of the eye, or by an optometrist, whichever the
24 person may select.

25 Notwithstanding any other provision of this Code and
26 subject to federal approval, the Department may adopt rules to

1 allow a dentist who is volunteering his or her service at no
2 cost to render dental services through an enrolled
3 not-for-profit health clinic without the dentist personally
4 enrolling as a participating provider in the medical assistance
5 program. A not-for-profit health clinic shall include a public
6 health clinic or Federally Qualified Health Center or other
7 enrolled provider, as determined by the Department, through
8 which dental services covered under this Section are performed.
9 The Department shall establish a process for payment of claims
10 for reimbursement for covered dental services rendered under
11 this provision.

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

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

22 The Illinois Department shall authorize the provision of,
23 and shall authorize payment for, screening by low-dose
24 mammography for the presence of occult breast cancer for women
25 35 years of age or older who are eligible for medical
26 assistance under this Article, as follows:

1 (A) A baseline mammogram for women 35 to 39 years of
2 age.

3 (B) An annual mammogram for women 40 years of age or
4 older.

5 (C) A mammogram at the age and intervals considered
6 medically necessary by the woman's health care provider for
7 women under 40 years of age and having a family history of
8 breast cancer, prior personal history of breast cancer,
9 positive genetic testing, or other risk factors.

10 (D) A comprehensive ultrasound screening of an entire
11 breast or breasts if a mammogram demonstrates
12 heterogeneous or dense breast tissue, when medically
13 necessary as determined by a physician licensed to practice
14 medicine in all of its branches.

15 All screenings shall include a physical breast exam,
16 instruction on self-examination and information regarding the
17 frequency of self-examination and its value as a preventative
18 tool. For purposes of this Section, "low-dose mammography"
19 means the x-ray examination of the breast using equipment
20 dedicated specifically for mammography, including the x-ray
21 tube, filter, compression device, and image receptor, with an
22 average radiation exposure delivery of less than one rad per
23 breast for 2 views of an average size breast. The term also
24 includes digital mammography.

25 On and after January 1, 2012, providers participating in a
26 quality improvement program approved by the Department shall be

1 reimbursed for screening and diagnostic mammography at the same
2 rate as the Medicare program's rates, including the increased
3 reimbursement for digital mammography.

4 The Department shall convene an expert panel including
5 representatives of hospitals, free-standing mammography
6 facilities, and doctors, including radiologists, to establish
7 quality standards.

8 Subject to federal approval, the Department shall
9 establish a rate methodology for mammography at federally
10 qualified health centers and other encounter-rate clinics.
11 These clinics or centers may also collaborate with other
12 hospital-based mammography facilities.

13 The Department shall establish a methodology to remind
14 women who are age-appropriate for screening mammography, but
15 who have not received a mammogram within the previous 18
16 months, of the importance and benefit of screening mammography.

17 The Department shall establish a performance goal for
18 primary care providers with respect to their female patients
19 over age 40 receiving an annual mammogram. This performance
20 goal shall be used to provide additional reimbursement in the
21 form of a quality performance bonus to primary care providers
22 who meet that goal.

23 The Department shall devise a means of case-managing or
24 patient navigation for beneficiaries diagnosed with breast
25 cancer. This program shall initially operate as a pilot program
26 in areas of the State with the highest incidence of mortality

1 related to breast cancer. At least one pilot program site shall
2 be in the metropolitan Chicago area and at least one site shall
3 be outside the metropolitan Chicago area. An evaluation of the
4 pilot program shall be carried out measuring health outcomes
5 and cost of care for those served by the pilot program compared
6 to similarly situated patients who are not served by the pilot
7 program.

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

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

1 for addiction.

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

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

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

22 Notwithstanding any other provision of law, a health care
23 provider under the medical assistance program may elect, in
24 lieu of receiving direct payment for services provided under
25 that program, to participate in the State Employees Deferred
26 Compensation Plan adopted under Article 24 of the Illinois

1 Pension Code. A health care provider who elects to participate
2 in the plan does not have a cause of action against the State
3 for any damages allegedly suffered by the provider as a result
4 of any delay by the State in crediting the amount of any
5 contribution to the provider's plan account.

6 The Illinois Department may develop and contract with
7 Partnerships of medical providers to arrange medical services
8 for persons eligible under Section 5-2 of this Code.
9 Implementation of this Section may be by demonstration projects
10 in certain geographic areas. The Partnership shall be
11 represented by a sponsor organization. The Department, by rule,
12 shall develop qualifications for sponsors of Partnerships.
13 Nothing in this Section shall be construed to require that the
14 sponsor organization be a medical organization.

15 The sponsor must negotiate formal written contracts with
16 medical providers for physician services, inpatient and
17 outpatient hospital care, home health services, treatment for
18 alcoholism and substance abuse, and other services determined
19 necessary by the Illinois Department by rule for delivery by
20 Partnerships. Physician services must include prenatal and
21 obstetrical care. The Illinois Department shall reimburse
22 medical services delivered by Partnership providers to clients
23 in target areas according to provisions of this Article and the
24 Illinois Health Finance Reform Act, except that:

- 25 (1) Physicians participating in a Partnership and
26 providing certain services, which shall be determined by

1 the Illinois Department, to persons in areas covered by the
2 Partnership may receive an additional surcharge for such
3 services.

4 (2) The Department may elect to consider and negotiate
5 financial incentives to encourage the development of
6 Partnerships and the efficient delivery of medical care.

7 (3) Persons receiving medical services through
8 Partnerships may receive medical and case management
9 services above the level usually offered through the
10 medical assistance program.

11 Medical providers shall be required to meet certain
12 qualifications to participate in Partnerships to ensure the
13 delivery of high quality medical services. These
14 qualifications shall be determined by rule of the Illinois
15 Department and may be higher than qualifications for
16 participation in the medical assistance program. Partnership
17 sponsors may prescribe reasonable additional qualifications
18 for participation by medical providers, only with the prior
19 written approval of the Illinois Department.

20 Nothing in this Section shall limit the free choice of
21 practitioners, hospitals, and other providers of medical
22 services by clients. In order to ensure patient freedom of
23 choice, the Illinois Department shall immediately promulgate
24 all rules and take all other necessary actions so that provided
25 services may be accessed from therapeutically certified
26 optometrists to the full extent of the Illinois Optometric

1 Practice Act of 1987 without discriminating between service
2 providers.

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

6 The Illinois Department shall require health care
7 providers to maintain records that document the medical care
8 and services provided to recipients of Medical Assistance under
9 this Article. Such records must be retained for a period of not
10 less than 6 years from the date of service or as provided by
11 applicable State law, whichever period is longer, except that
12 if an audit is initiated within the required retention period
13 then the records must be retained until the audit is completed
14 and every exception is resolved. The Illinois Department shall
15 require health care providers to make available, when
16 authorized by the patient, in writing, the medical records in a
17 timely fashion to other health care providers who are treating
18 or serving persons eligible for Medical Assistance under this
19 Article. All dispensers of medical services shall be required
20 to maintain and retain business and professional records
21 sufficient to fully and accurately document the nature, scope,
22 details and receipt of the health care provided to persons
23 eligible for medical assistance under this Code, in accordance
24 with regulations promulgated by the Illinois Department. The
25 rules and regulations shall require that proof of the receipt
26 of prescription drugs, dentures, prosthetic devices and

1 eyeglasses by eligible persons under this Section accompany
2 each claim for reimbursement submitted by the dispenser of such
3 medical services. No such claims for reimbursement shall be
4 approved for payment by the Illinois Department without such
5 proof of receipt, unless the Illinois Department shall have put
6 into effect and shall be operating a system of post-payment
7 audit and review which shall, on a sampling basis, be deemed
8 adequate by the Illinois Department to assure that such drugs,
9 dentures, prosthetic devices and eyeglasses for which payment
10 is being made are actually being received by eligible
11 recipients. Within 90 days after the effective date of this
12 amendatory Act of 1984, the Illinois Department shall establish
13 a current list of acquisition costs for all prosthetic devices
14 and any other items recognized as medical equipment and
15 supplies reimbursable under this Article and shall update such
16 list on a quarterly basis, except that the acquisition costs of
17 all prescription drugs shall be updated no less frequently than
18 every 30 days as required by Section 5-5.12.

19 The rules and regulations of the Illinois Department shall
20 require that a written statement including the required opinion
21 of a physician shall accompany any claim for reimbursement for
22 abortions, or induced miscarriages or premature births. This
23 statement shall indicate what procedures were used in providing
24 such medical services.

25 The Illinois Department shall require all dispensers of
26 medical services, other than an individual practitioner or

1 group of practitioners, desiring to participate in the Medical
2 Assistance program established under this Article to disclose
3 all financial, beneficial, ownership, equity, surety or other
4 interests in any and all firms, corporations, partnerships,
5 associations, business enterprises, joint ventures, agencies,
6 institutions or other legal entities providing any form of
7 health care services in this State under this Article.

8 The Illinois Department may require that all dispensers of
9 medical services desiring to participate in the medical
10 assistance program established under this Article disclose,
11 under such terms and conditions as the Illinois Department may
12 by rule establish, all inquiries from clients and attorneys
13 regarding medical bills paid by the Illinois Department, which
14 inquiries could indicate potential existence of claims or liens
15 for the Illinois Department.

16 Enrollment of a vendor that provides non-emergency medical
17 transportation, defined by the Department by rule, shall be
18 conditional for 180 days. During that time, the Department of
19 Healthcare and Family Services may terminate the vendor's
20 eligibility to participate in the medical assistance program
21 without cause. That termination of eligibility is not subject
22 to the Department's hearing process.

23 The Illinois Department shall establish policies,
24 procedures, standards and criteria by rule for the acquisition,
25 repair and replacement of orthotic and prosthetic devices and
26 durable medical equipment. Such rules shall provide, but not be

1 limited to, the following services: (1) immediate repair or
2 replacement of such devices by recipients without medical
3 authorization; and (2) rental, lease, purchase or
4 lease-purchase of durable medical equipment in a
5 cost-effective manner, taking into consideration the
6 recipient's medical prognosis, the extent of the recipient's
7 needs, and the requirements and costs for maintaining such
8 equipment. Such rules shall enable a recipient to temporarily
9 acquire and use alternative or substitute devices or equipment
10 pending repairs or replacements of any device or equipment
11 previously authorized for such recipient by the Department.

12 The Department shall execute, relative to the nursing home
13 prescreening project, written inter-agency agreements with the
14 Department of Human Services and the Department on Aging, to
15 effect the following: (i) intake procedures and common
16 eligibility criteria for those persons who are receiving
17 non-institutional services; and (ii) the establishment and
18 development of non-institutional services in areas of the State
19 where they are not currently available or are undeveloped.

20 The Illinois Department shall develop and operate, in
21 cooperation with other State Departments and agencies and in
22 compliance with applicable federal laws and regulations,
23 appropriate and effective systems of health care evaluation and
24 programs for monitoring of utilization of health care services
25 and facilities, as it affects persons eligible for medical
26 assistance under this Code.

1 The Illinois Department shall report annually to the
2 General Assembly, no later than the second Friday in April of
3 1979 and each year thereafter, in regard to:

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

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

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

10 (d) efforts at utilization review and control by the
11 Illinois Department.

12 The period covered by each report shall be the 3 years
13 ending on the June 30 prior to the report. The report shall
14 include suggested legislation for consideration by the General
15 Assembly. The filing of one copy of the report with the
16 Speaker, one copy with the Minority Leader and one copy with
17 the Clerk of the House of Representatives, one copy with the
18 President, one copy with the Minority Leader and one copy with
19 the Secretary of the Senate, one copy with the Legislative
20 Research Unit, and such additional copies with the State
21 Government Report Distribution Center for the General Assembly
22 as is required under paragraph (t) of Section 7 of the State
23 Library Act shall be deemed sufficient to comply with this
24 Section.

25 Rulemaking authority to implement Public Act 95-1045, if
26 any, is conditioned on the rules being adopted in accordance

1 with all provisions of the Illinois Administrative Procedure
2 Act and all rules and procedures of the Joint Committee on
3 Administrative Rules; any purported rule not so adopted, for
4 whatever reason, is unauthorized.

5 (Source: P.A. 96-156, eff. 1-1-10; 96-806, eff. 7-1-10; 96-926,
6 eff. 1-1-11; 96-1000, eff. 7-2-10; 97-48, eff. 6-28-11; 97-638,
7 eff. 1-1-12.)

8 Section 10. The Community Services Act is amended by
9 changing Section 2 as follows:

10 (405 ILCS 30/2) (from Ch. 91 1/2, par. 902)

11 Sec. 2. Community Services System. Services should be
12 planned, developed, delivered and evaluated as part of a
13 comprehensive and coordinated system. The Department of Human
14 Services shall encourage the establishment of services in each
15 area of the State which cover the services categories described
16 below. What specific services are provided under each service
17 category shall be based on local needs; special attention shall
18 be given to unserved and underserved populations, including
19 children and youth, racial and ethnic minorities, and the
20 elderly. The service categories shall include:

21 (a) Prevention: services designed primarily to reduce the
22 incidence and ameliorate the severity of developmental
23 disabilities, mental illness and alcohol and drug dependence;

24 (b) Client Assessment and Diagnosis: services designed to

1 identify persons with developmental disabilities, mental
2 illness and alcohol and drug dependency; to determine the
3 extent of the disability and the level of functioning; to
4 ensure that the individual's need for treatment of mental
5 disorders or substance use disorders or co-occurring substance
6 use and mental health disorders is determined using a uniform
7 screening, assessment, and evaluation process inclusive of
8 criteria; for purposes of this subsection (b), a uniform
9 screening, assessment, and evaluation process refers to a
10 process that includes an appropriate evaluation and, as
11 warranted, a referral; "uniform" does not mean the use of a
12 singular instrument, tool, or process that all must utilize;
13 information obtained through client evaluation can be used in
14 individual treatment and habilitation plans; to assure
15 appropriate placement and to assist in program evaluation;

16 (c) Case Coordination: services to provide information and
17 assistance to disabled persons to insure that they obtain
18 needed services provided by the private and public sectors;
19 case coordination services should be available to individuals
20 whose functioning level or history of institutional recidivism
21 or long-term care indicate that such assistance is required for
22 successful community living;

23 (d) Crisis and Emergency: services to assist individuals
24 and their families through crisis periods, to stabilize
25 individuals under stress and to prevent unnecessary
26 institutionalization;

1 (e) Treatment, Habilitation and Support: services designed
2 to help individuals develop skills which promote independence
3 and improved levels of social and vocational functioning and
4 personal growth; and to provide non-treatment support services
5 which are necessary for successful community living;

6 (f) Community Residential Alternatives to Institutional
7 Settings: services to provide living arrangements for persons
8 unable to live independently; the level of supervision,
9 services provided and length of stay at community residential
10 alternatives will vary by the type of program and the needs and
11 functioning level of the residents; other services may be
12 provided in a community residential alternative which promote
13 the acquisition of independent living skills and integration
14 with the community.

15 (Source: P.A. 89-507, eff. 7-1-97.)

16 Section 99. Effective date. This Act takes effect upon
17 becoming law.