98TH GENERAL ASSEMBLY

State of Illinois

2013 and 2014

HB0647

Introduced 1/25/2013, by Rep. Michael J. Madigan

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-16

from Ch. 23, par. 5-16

Amends the Illinois Public Aid Code. Makes a technical change in a Section concerning managed care.

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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 5-16 as follows:

6 (305 ILCS 5/5-16) (from Ch. 23, par. 5-16)

7 Sec. 5-16. Managed Care. The The Illinois Department may develop and implement a Primary Care Sponsor System consistent 8 9 with the provisions of this Section. The purpose of this managed care delivery system shall be to contain the costs of 10 providing medical care to Medicaid recipients by having one 11 provider responsible for managing all aspects of a recipient's 12 13 medical care. This managed care system shall have the following 14 characteristics:

(a) The Department, by rule, shall establish criteria
to determine which clients must participate in this
program;

(b) Providers participating in the program may be paid
an amount per patient per month, to be set by the Illinois
Department, for managing each recipient's medical care;

(c) Providers eligible to participate in the program
shall be physicians licensed to practice medicine in all
its branches, and the Illinois Department may terminate a

provider's participation if the provider is determined to have failed to comply with any applicable program standard or procedure established by the Illinois Department;

4 (d) Each recipient required to participate in the 5 program must select from a panel of primary care providers 6 or networks established by the Department in their 7 communities;

8 (e) A recipient may change his designated primary care
9 provider:

10 (1)when the designated source becomes 11 unavailable, as the Illinois Department shall 12 determine by rule; or

(2) when the designated primary care provider
notifies the Illinois Department that it wishes to
withdraw from any obligation as primary care provider;
or

17 (3) in other situations, as the Illinois18 Department shall provide by rule;

19 (f) The Illinois Department shall, by rule, establish 20 procedures for providing medical services when the unavailable or 21 designated source becomes wishes to 22 withdraw from any obligation as primary care provider 23 taking into consideration the need for emergency or 24 temporary medical assistance and ensuring that the 25 recipient has continuous and unrestricted access to 26 medical care from the date on which such unavailability or - 3 - LRB098 03470 KTG 33485 b

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withdrawal becomes effective until such time as the recipient designates a primary care source;

3 Only medical care services authorized by (q) а recipient's designated provider, except for emergency 4 5 services, services performed by a provider that is owned or operated by a county and that provides non-emergency 6 7 services without regard to ability to pay and such other 8 services as provided by the Illinois Department, shall be 9 subject to payment by the Illinois Department. The Illinois 10 Department shall enter into an intergovernmental agreement 11 with each county that owns or operates such a provider to 12 develop and implement policies to minimize the provision of 13 medical care services provided by county owned or operated 14 providers pursuant to the foregoing exception.

15 The Illinois Department shall seek and obtain necessary 16 authorization provided under federal law to implement such a 17 program including the waiver of any federal regulations.

Illinois Department may implement the amendatory 18 The 19 changes to this Section made by this amendatory Act of 1991 through the use of emergency rules in accordance with the 20 provisions of Section 5.02 of the Illinois Administrative 21 22 Procedure Act. For purposes of the Illinois Administrative 23 Procedure Act, the adoption of rules to implement the amendatory changes to this Section made by this amendatory Act 24 25 of 1991 shall be deemed an emergency and necessary for the 26 public interest, safety and welfare.

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1 The Illinois Department may establish a managed care system 2 demonstration program, on a limited basis, as described in this 3 Section. The demonstration program shall terminate on June 30, 4 1997. Within 30 days after the end of each year of the 5 demonstration program's operation, the Illinois Department 6 shall report to the Governor and the General Assembly 7 concerning the operation of the demonstration program.

8 (Source: P.A. 87-14; 88-490.)