

AN ACT concerning State government.

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

Section 1. Short title. This Act may be cited as the Task Force on Human Services Contracting Act.

Section 5. Purpose. It is the purpose of this Act to create a task force to study State contracting with private nonprofit human service providers and the challenges faced by those providers and to develop recommendations on how to improve the contracting relationship and partnership between State departments and agencies and private nonprofit human service providers so that they work effectively and efficiently to improve the well-being of Illinoisans.

Section 10. Task Force on State Contracting with Private Nonprofit Human Service Providers.

(a) The Task Force on State Contracting with Private Nonprofit Human Service Providers is created to study State contracting with private nonprofit human service providers and to develop recommendations on how to improve the contracting relationship and partnership between State departments and agencies and private nonprofit human service providers so that they work effectively and efficiently to improve the well-being

of Illinoisans. The Task Force shall perform the following actions:

(1) Review data provided by State departments and agencies that contract with private nonprofit human service providers regarding the effectiveness of the system of service provision.

(2) Collect and review data on each of the following:

(A) Service system planning: the means by which State departments and agencies and private nonprofit human service providers assess needs, identify gaps, and establish system goals, especially the flow of information collected by the State departments and agencies and shared back with private nonprofit human service providers.

(B) Contract negotiation: the process by which State departments and agencies engage private nonprofit human service providers to provide specific services and achieve specific goals, especially the adequacy of time to review and adjust.

(C) Reimbursement rate methodologies: the processes by which State departments and agencies establish rates, the frequency of review and adjustment, and the adequacy of those rates to achieve the outcomes sought by the State.

(D) Monitoring of service and administration: the process by which State departments and agencies

evaluate performance, especially the efficiency of data collection and review, and prevent or resolve processes and reports that are duplicative, costly, and wasteful of staff time and that slow the process of permanency and contribute to unnecessary staff turnover.

(E) Business processes: the means by which State departments and agencies provide approvals for services, activities, plans and changes, especially preventing the unnecessary delays that arise from delayed or slowed approvals, which also slow the process of permanency and unnecessarily add to the stress and trauma experience of children in State care.

(F) Timely payment: the process by which State departments and agencies make payments, including the timeliness of payments and the opportunities for appeal; and the court of claims process as it relates to human service contracting.

(3) In each of the study categories described in subparagraphs (A) through (F) of paragraph (2), develop recommendations on how to improve the contracting relationship and partnership between State departments and agencies and private nonprofit human service providers so that they work effectively and efficiently to improve the well-being of Illinoisans. The Task Force shall also issue specific recommendations on procedures that will improve

the court of claims process, as it relates to human service contracting, to make it operate more expeditiously and efficiently.

(b) The Task Force shall consist of persons representing nonprofit service providers that provide direct services to the State concerning child care and child welfare, mental health, developmental disabilities, domestic violence, early intervention, alcohol and substance abuse treatment, and other applicable nonprofit providers providing direct services at the community level. Members of the Task Force shall be appointed as follows:

(1) 7 members appointed by the President of the Senate, one of whom shall be designated as Co-Chairperson;

(2) 6 members appointed by the Senate Minority Leader;

(3) 7 members appointed by the Speaker of the House of Representatives, one of whom shall be designated as Co-Chairperson; and

(4) 6 members appointed by the Minority Leader of the House of Representatives.

In addition, the Director of Children and Family Services, the Director of Healthcare and Family Services, the Director of Human Services, the Director of Human Rights, and the Director, or his or her designee, of any other State agency that contracts for direct human services shall each serve as an ex officio member of the Task Force.

The Task Force shall also include at least 2, but no more

than 3, members that represent organizations or agencies that provide research, analytics, and fiduciary analysis.

(c) The Task Force may establish a method to gather testimony and input from individuals and organizations that are not members of the Task Force.

(d) The Department of Human Services shall provide administrative and other support to the Task Force.

(e) The Task Force shall submit a preliminary report to the Auditor General, the General Assembly, and the Governor no later than October 1, 2019, and a final report, along with recommendations and any proposed legislation, to the General Assembly and the Governor by January 1, 2020.

The reports to the General Assembly shall be filed with the Clerk of the House of Representatives and the Secretary of the Senate in electronic form only, in the manner that the Clerk and the Secretary shall direct.

(f) The Task Force is dissolved on January 1, 2021.

Section 15. Repeal. This Act is repealed on January 1, 2021.

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