



93RD GENERAL ASSEMBLY
State of Illinois
2003 and 2004

Introduced 2/6/2004, by Tom Cross

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-2

from Ch. 23, par. 5-2

Amends the Illinois Public Aid Code. Makes a technical change in a Section concerning Medicaid eligibility for persons with disabilities who are employed (the "Medicaid buy-in provision").

LRB093 19679 DRJ 45420 b

1 AN ACT in relation to 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 5-2 as follows:

6 (305 ILCS 5/5-2) (from Ch. 23, par. 5-2)

7 Sec. 5-2. Classes of Persons Eligible. Medical assistance
8 under this Article shall be available to any of the following
9 classes of persons in respect to whom a plan for coverage has
10 been submitted to the Governor by the Illinois Department and
11 approved by him:

12 1. Recipients of basic maintenance grants under Articles
13 III and IV.

14 2. Persons otherwise eligible for basic maintenance under
15 Articles III and IV but who fail to qualify thereunder on the
16 basis of need, and who have insufficient income and resources
17 to meet the costs of necessary medical care, including but not
18 limited to the following:

19 (a) All persons otherwise eligible for basic
20 maintenance under Article III but who fail to qualify under
21 that Article on the basis of need and who meet either of
22 the following requirements:

23 (i) their income, as determined by the Illinois
24 Department in accordance with any federal
25 requirements, is equal to or less than 70% in fiscal
26 year 2001, equal to or less than 85% in fiscal year
27 2002 and until a date to be determined by the
28 Department by rule, and equal to or less than 100%
29 beginning on the date determined by the Department by
30 rule, of the nonfarm income official poverty line, as
31 defined by the federal Office of Management and Budget
32 and revised annually in accordance with Section 673(2)

1 of the Omnibus Budget Reconciliation Act of 1981,
2 applicable to families of the same size; or

3 (ii) their income, after the deduction of costs
4 incurred for medical care and for other types of
5 remedial care, is equal to or less than 70% in fiscal
6 year 2001, equal to or less than 85% in fiscal year
7 2002 and until a date to be determined by the
8 Department by rule, and equal to or less than 100%
9 beginning on the date determined by the Department by
10 rule, of the nonfarm income official poverty line, as
11 defined in item (i) of this subparagraph (a).

12 (b) All persons who would be determined eligible for
13 such basic maintenance under Article IV by disregarding the
14 maximum earned income permitted by federal law.

15 3. Persons who would otherwise qualify for Aid to the
16 Medically Indigent under Article VII.

17 4. Persons not eligible under any of the preceding
18 paragraphs who fall sick, are injured, or die, not having
19 sufficient money, property or other resources to meet the costs
20 of necessary medical care or funeral and burial expenses.

21 5. (a) Women during pregnancy, after the fact of pregnancy
22 has been determined by medical diagnosis, and during the
23 60-day period beginning on the last day of the pregnancy,
24 together with their infants and children born after
25 September 30, 1983, whose income and resources are
26 insufficient to meet the costs of necessary medical care to
27 the maximum extent possible under Title XIX of the Federal
28 Social Security Act.

29 (b) The Illinois Department and the Governor shall
30 provide a plan for coverage of the persons eligible under
31 paragraph 5(a) by April 1, 1990. Such plan shall provide
32 ambulatory prenatal care to pregnant women during a
33 presumptive eligibility period and establish an income
34 eligibility standard that is equal to 133% of the nonfarm
35 income official poverty line, as defined by the federal
36 Office of Management and Budget and revised annually in

1 accordance with Section 673(2) of the Omnibus Budget
2 Reconciliation Act of 1981, applicable to families of the
3 same size, provided that costs incurred for medical care
4 are not taken into account in determining such income
5 eligibility.

6 (c) The Illinois Department may conduct a
7 demonstration in at least one county that will provide
8 medical assistance to pregnant women, together with their
9 infants and children up to one year of age, where the
10 income eligibility standard is set up to 185% of the
11 nonfarm income official poverty line, as defined by the
12 federal Office of Management and Budget. The Illinois
13 Department shall seek and obtain necessary authorization
14 provided under federal law to implement such a
15 demonstration. Such demonstration may establish resource
16 standards that are not more restrictive than those
17 established under Article IV of this Code.

18 6. Persons under the age of 18 who fail to qualify as
19 dependent under Article IV and who have insufficient income and
20 resources to meet the costs of necessary medical care to the
21 maximum extent permitted under Title XIX of the Federal Social
22 Security Act.

23 7. Persons who are under 21 years of age and would qualify
24 as disabled as defined under the Federal Supplemental Security
25 Income Program, provided medical service for such persons would
26 be eligible for Federal Financial Participation, and provided
27 the Illinois Department determines that:

28 (a) the person requires a level of care provided by a
29 hospital, skilled nursing facility, or intermediate care
30 facility, as determined by a physician licensed to practice
31 medicine in all its branches;

32 (b) it is appropriate to provide such care outside of
33 an institution, as determined by a physician licensed to
34 practice medicine in all its branches;

35 (c) the estimated amount which would be expended for
36 care outside the institution is not greater than the

1 estimated amount which would be expended in an institution.

2 8. Persons who become ineligible for basic maintenance
3 assistance under Article IV of this Code in programs
4 administered by the Illinois Department due to employment
5 earnings and persons in assistance units comprised of adults
6 and children who become ineligible for basic maintenance
7 assistance under Article VI of this Code due to employment
8 earnings. The plan for coverage for this class of persons
9 shall:

10 (a) extend the medical assistance coverage for up to 12
11 months following termination of basic maintenance
12 assistance; and

13 (b) offer persons who have initially received 6 months
14 of the coverage provided in paragraph (a) above, the option
15 of receiving an additional 6 months of coverage, subject to
16 the following:

17 (i) such coverage shall be pursuant to provisions
18 of the federal Social Security Act;

19 (ii) such coverage shall include all services
20 covered while the person was eligible for basic
21 maintenance assistance;

22 (iii) no premium shall be charged for such
23 coverage; and

24 (iv) such coverage shall be suspended in the event
25 of a person's failure without good cause to file in a
26 timely fashion reports required for this coverage
27 under the Social Security Act and coverage shall be
28 reinstated upon the filing of such reports if the
29 person remains otherwise eligible.

30 9. Persons with acquired immunodeficiency syndrome (AIDS)
31 or with AIDS-related conditions with respect to whom there has
32 been a determination that but for home or community-based
33 services such individuals would require the level of care
34 provided in an inpatient hospital, skilled nursing facility or
35 intermediate care facility the cost of which is reimbursed
36 under this Article. Assistance shall be provided to such

1 persons to the maximum extent permitted under Title XIX of the
2 Federal Social Security Act.

3 10. Participants in the long-term care insurance
4 partnership program established under the Partnership for
5 Long-Term Care Act who meet the qualifications for protection
6 of resources described in Section 25 of that Act.

7 11. Persons with disabilities who are employed and eligible
8 for Medicaid, pursuant to Section 1902(a)(10)(A)(ii)(xv) of
9 the federal Social Security Act, as provided by the Illinois
10 Department by rule.

11 12. Subject to federal approval, persons who are eligible
12 for medical assistance coverage under applicable provisions of
13 the federal Social Security Act and the federal Breast and
14 Cervical Cancer Prevention and Treatment Act of 2000. Those
15 eligible persons are defined to include, but not be limited to,
16 the following persons:

17 (1) persons who have been screened for breast or
18 cervical cancer under the U.S. Centers for Disease Control
19 and Prevention Breast and Cervical Cancer Program
20 established under Title XV of the federal Public Health
21 Services Act in accordance with the requirements of Section
22 1504 of that Act as administered by the Illinois Department
23 of Public Health; and

24 (2) persons whose screenings under the above program
25 were funded in whole or in part by funds appropriated to
26 the Illinois Department of Public Health for breast or
27 cervical cancer screening.

28 "Medical assistance" under this paragraph 12 shall be identical
29 to the benefits provided under the State's approved plan under
30 Title XIX of the Social Security Act. The Department must
31 request federal approval of the coverage under this paragraph
32 12 within 30 days after the effective date of this amendatory
33 Act of the 92nd General Assembly.

34 The Illinois Department and the Governor shall provide a
35 plan for coverage of the persons eligible under paragraph 7 as
36 soon as possible after July 1, 1984.

1 The eligibility of any such person for medical assistance
2 under this Article is not affected by the payment of any grant
3 under the Senior Citizens and Disabled Persons Property Tax
4 Relief and Pharmaceutical Assistance Act or any distributions
5 or items of income described under subparagraph (X) of
6 paragraph (2) of subsection (a) of Section 203 of the Illinois
7 Income Tax Act. The Department shall by rule establish the
8 amounts of assets to be disregarded in determining eligibility
9 for medical assistance, which shall at a minimum equal the
10 amounts to be disregarded under the Federal Supplemental
11 Security Income Program. The amount of assets of a single
12 person to be disregarded shall not be less than \$2,000, and the
13 amount of assets of a married couple to be disregarded shall
14 not be less than \$3,000.

15 To the extent permitted under federal law, any person found
16 guilty of a second violation of Article VIII A shall be
17 ineligible for medical assistance under this Article, as
18 provided in Section 8A-8.

19 The eligibility of any person for medical assistance under
20 this Article shall not be affected by the receipt by the person
21 of donations or benefits from fundraisers held for the person
22 in cases of serious illness, as long as neither the person nor
23 members of the person's family have actual control over the
24 donations or benefits or the disbursement of the donations or
25 benefits.

26 (Source: P.A. 92-16, eff. 6-28-01; 92-47, eff. 7-3-01; 92-597,
27 eff. 6-28-02; 93-20, eff. 6-20-03.)