

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 adding Section 5-24 as follows:

6 (305 ILCS 5/5-24 new)

7 Sec. 5-24. Disease management programs and services for
8 chronic conditions; pilot project.

9 (a) In this Section, "disease management programs and
10 services" means services administered to patients in order to
11 improve their overall health and to prevent clinical
12 exacerbations and complications, using cost-effective,
13 evidence-based practice guidelines and patient
14 self-management strategies. Disease management programs and
15 services include all of the following:

- 16 (1) A population identification process.
- 17 (2) Evidence-based or consensus-based clinical
18 practice guidelines, risk identification, and matching of
19 interventions with clinical need.
- 20 (3) Patient self-management and disease education.
- 21 (4) Process and outcomes measurement, evaluation,
22 management, and reporting.

23 (b) Subject to appropriations, the Department of Public
24 Aid may undertake a pilot project to study patient outcomes,
25 for patients with chronic diseases, associated with the use
26 of disease management programs and services for chronic
27 condition management. "Chronic diseases" include, but are not
28 limited to, diabetes, congestive heart failure, and chronic
29 obstructive pulmonary disease.

30 (c) The disease management programs and services pilot
31 project shall examine whether chronic disease management

1 programs and services for patients with specific chronic
2 conditions do any or all of the following:

3 (1) Improve the patient's overall health in a more
4 expeditious manner.

5 (2) Lower costs in other aspects of the medical
6 assistance program, such as hospital admissions, days in
7 skilled nursing homes, emergency-room visits, or more
8 frequent physician office visits.

9 (d) In carrying out the pilot project, the Department of
10 Public Aid shall examine all relevant scientific literature
11 and shall consult with health care practitioners including,
12 but not limited to, physicians, surgeons, registered
13 pharmacists, and registered nurses.

14 (e) The Department of Public Aid shall consult with
15 medical experts, disease advocacy groups, and academic
16 institutions to develop criteria to be used in selecting a
17 vendor for the pilot project.

18 (f) The pilot project may not use any company whose
19 primary purpose is to market specific products or services,
20 other than disease management services to the entity
21 responsible for the patient's health care coverage.

22 (g) The Department of Public Aid may adopt rules to
23 implement this Section.

24 (h) This Section is repealed 10 years after the
25 effective date of this amendatory Act of the 93rd General
26 Assembly.