

1 AN ACT concerning State government.

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

4 Section 1. Short title. This Act may be cited as the  
5 Illinois Family Case Management Act.

6 Section 5. Legislative findings and purpose. The General  
7 Assembly finds as follows:

8 (1) The statewide rate of infant mortality continues to  
9 remain at an unacceptable level in regard to the national  
10 average.

11 (2) Within the State of Illinois, certain areas and  
12 populations continue to experience rates of infant  
13 mortality far greater than either the statewide or national  
14 averages. Prevention activities need to be statewide for  
15 maximum benefit.

16 (3) Family case management services are proven to be  
17 effective in improving the health of women and infants and  
18 lowering the incidence of infant morbidity and mortality,  
19 particularly those individuals linked to the Special  
20 Supplemental Nutrition Program for Women, Infants and  
21 Children (WIC).

22 (4) Family case management improves the health and  
23 development of children and families by providing the  
24 earliest identification of their needs and promoting  
25 linkages to address those needs.

26 (5) Data demonstrates significantly lower Medicaid  
27 expenditures for pregnant and postpartum women and  
28 children who have been enrolled in family case management  
29 and WIC services than for Medicaid-eligible persons not  
30 receiving case management services.

31 Therefore, as a critical component in delivering  
32 comprehensive maternal and child health services in Illinois,

1 it is the purpose of this Act to provide for the establishment  
2 and recognition of a program of family case management to  
3 ensure and provide statewide wrap-around services targeted  
4 toward reducing the incidence of infant mortality, very low  
5 birthweight infants, and low birthweight infants within the  
6 State.

7 Section 10. Definitions. In this Act:

8 "Department" means the Illinois Department of Human  
9 Services.

10 "Eligible participant" means: (i) subject to available  
11 appropriations, any pregnant woman or child through the age of  
12 one year enrolled in the Medicaid program on the effective date  
13 of this Act or whose income is up to 200% of the federal  
14 poverty level; and (ii) subject to additional appropriations,  
15 any child through the age of 4 years enrolled in Medicaid or  
16 whose income is up to 200% of the federal poverty level.

17 "Family Case Management program" or "program" means the  
18 program established under Section 15 of this Act.

19 "Infant mortality rate" means the number of infant deaths  
20 per 1,000 live births as reported on a calendar year basis by  
21 the federal Department of Health and Human Services.

22 "Secretary" means the Secretary of Human Services.

23 "Targeted Intensive Case Management" means services  
24 provided to any program-eligible pregnant woman or infant  
25 through the age of one, where an assessment has been performed  
26 that deems the participant at greater risk for infant mortality  
27 or morbidity.

28 Section 15. Family Case Management Program. The Department  
29 shall establish and administer a family case management  
30 program. The purposes of the program shall be to reduce the  
31 incidence of infant mortality, very low birthweight infants,  
32 and low birthweight infants and to assist low-income families  
33 to obtain available health and human services needed for  
34 healthy growth and development, including but not limited to

1 prenatal care, early periodic screening, diagnosis, and  
2 treatment (EPSDT) services, immunizations, lead screenings,  
3 nutritional support, and other specialized services for  
4 families with additional challenges and needs. Under the  
5 program, case management shall involve individualized  
6 assessment of needs, planning of services, referral,  
7 monitoring, and advocacy to assist a client in gaining access  
8 to appropriate services. Under the program, case management  
9 shall be an active and collaborative process involving a  
10 qualified case manager, the client, the client's family, and  
11 service providers in the community. Priority shall be given to  
12 ensure that Targeted Intensive Case Management, as defined in  
13 this Act, is available to each qualified participant as defined  
14 within the Department's rules and program standards.

15 Section 20. Maternal and Child Health Advisory Board.

16 (a) The Maternal and Child Health Advisory Board ("the  
17 Board") is created within the Department to advise the  
18 Department on the implementation of this Act, including  
19 assessments and advice regarding rate structure, and other  
20 activities related to maternal and child health and infant  
21 mortality reduction programs in the State of Illinois. The  
22 Board shall consist of the Secretary of Human Services (or his  
23 or her designee), who shall serve as chairman, and one  
24 additional representative of the Department of Human Services  
25 designated by the Secretary who has direct responsibility with  
26 the family case management program; one representative each  
27 from the Departments of Children and Family Services, Public  
28 Health, and Public Aid; and 4 members of the Illinois General  
29 Assembly, one each appointed by the President and Minority  
30 Leader of the Senate and the Speaker and Minority Leader of the  
31 House of Representatives. In addition, the Governor shall  
32 appoint 20 additional members of the Board. Of the members  
33 appointed by the Governor, 2 shall be physicians licensed to  
34 practice medicine in all of its branches who currently serve  
35 patients enrolled in the family case management program, one of

1 whom shall be an individual with a specialty in obstetrics and  
2 gynecology and one of whom shall be an individual with a  
3 specialty in pediatric medicine; 5 representatives, one each  
4 from certified local health departments within the 5 counties  
5 with the largest number of family case management enrollees; 5  
6 representatives from certified local health departments  
7 outside the Chicago metropolitan and collar counties areas that  
8 shall include a balance of urban and rural health departments;  
9 a registered professional nurse serving as a public health  
10 nurse within a certified local health department; 5 individuals  
11 representing community-based programs currently providing  
12 family case management services within Cook County that are not  
13 certified local health departments; and 2 consumers who are  
14 receiving or have received family case management services.

15 Legislative members shall serve during their term of office  
16 in the Illinois General Assembly. Members appointed by the  
17 Governor shall serve a term of 3 years or until their  
18 successors are appointed. Any member appointed to fill a  
19 vacancy occurring prior to the expiration of the term for which  
20 his or her predecessor was appointed shall be appointed for the  
21 remainder of such term. Members of the Board shall serve  
22 without compensation but shall be reimbursed for necessary  
23 expenses incurred in the performance of their duties.

24 (b) The Board shall advise the Secretary on efforts related  
25 to maternal and child health programs, including infant  
26 mortality reduction, in the State of Illinois. In addition, the  
27 Board shall review and make recommendations to the Department  
28 and the Governor in regard to the system for maternal and child  
29 health programs, collaboration, and interrelation between and  
30 delivery of programs, including but not limited to Family Case  
31 Management, Targeted Intensive Prenatal Case Management, the  
32 Special Supplemental Nutrition Program for Women, Infants and  
33 Children (WIC), and HealthWorks, and the adequacy of family  
34 case management funding and reimbursement levels. In  
35 performing its duties, the Board may hold hearings throughout  
36 the State and advise and receive advice from any local advisory

1 bodies created to address the infant mortality problem.

2 (c) The Board shall report to the General Assembly, on  
3 January 1 of each year, a listing of activities taken in regard  
4 to this Act, other efforts to address maternal and child health  
5 and infant mortality in Illinois, and proposed recommendations  
6 regarding funding and reimbursement levels to adequately  
7 support the family case management program.

8 Section 25. Rules. Within one year after the effective date  
9 of this Act, the Department shall adopt rules to implement this  
10 Act. In developing the rules, the Department shall consult with  
11 the Maternal and Child Health Advisory Board.

12 (410 ILCS 220/Act rep.)

13 Section 90. The Infant Mortality Reduction Act is repealed.

14 Section 95. The Prenatal and Newborn Care Act is amended by  
15 changing Section 7 as follows:

16 (410 ILCS 225/7) (from Ch. 111 1/2, par. 7027)

17 Sec. 7. Advisory board consultation. The Department shall  
18 consult with the Maternal and Child Health Advisory Board  
19 created under the Illinois Family Case Management Act ~~the~~  
20 ~~Infant Mortality Reduction Advisory Board, established~~  
21 ~~pursuant to the Infant Mortality Reduction Act, as amended,~~  
22 regarding the implementation of this program. In addition, the  
23 Board shall advise the Department on the coordination of  
24 services provided under this program with services provided  
25 under the Illinois Family Case Management Act ~~Infant Mortality~~  
26 ~~Reduction Act~~ and the Problem Pregnancy Health Services and  
27 Care Act.

28 (Source: P.A. 86-860.)

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