



94TH GENERAL ASSEMBLY
State of Illinois
2005 and 2006
HB5441

Introduced 01/27/06, by Rep. Tom Cross

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.

LRB094 17583 DRJ 52879 b

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

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

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

21 (c) Providers eligible to participate in the program
22 shall be physicians licensed to practice medicine in all
23 its branches, and the Illinois Department may terminate a
24 provider's participation if the provider is determined to
25 have failed to comply with any applicable program standard
26 or procedure established by the Illinois Department;

27 (d) Each recipient required to participate in the
28 program must select from a panel of primary care providers
29 or networks established by the Department in their
30 communities;

31 (e) A recipient may change his designated primary care
32 provider:

1 (1) when the designated source becomes
2 unavailable, as the Illinois Department shall
3 determine by rule; or

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

8 (3) in other situations, as the Illinois
9 Department shall provide by rule;

10 (f) The Illinois Department shall, by rule, establish
11 procedures for providing medical services when the
12 designated source becomes unavailable or wishes to
13 withdraw from any obligation as primary care provider
14 taking into consideration the need for emergency or
15 temporary medical assistance and ensuring that the
16 recipient has continuous and unrestricted access to
17 medical care from the date on which such unavailability or
18 withdrawal becomes effective until such time as the
19 recipient designates a primary care source;

20 (g) Only medical care services authorized by a
21 recipient's designated provider, except for emergency
22 services, services performed by a provider that is owned or
23 operated by a county and that provides non-emergency
24 services without regard to ability to pay and such other
25 services as provided by the Illinois Department, shall be
26 subject to payment by the Illinois Department. The Illinois
27 Department shall enter into an intergovernmental agreement
28 with each county that owns or operates such a provider to
29 develop and implement policies to minimize the provision of
30 medical care services provided by county owned or operated
31 providers pursuant to the foregoing exception.

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

35 The Illinois Department may implement the amendatory
36 changes to this Section made by this amendatory Act of 1991

1 through the use of emergency rules in accordance with the
2 provisions of Section 5.02 of the Illinois Administrative
3 Procedure Act. For purposes of the Illinois Administrative
4 Procedure Act, the adoption of rules to implement the
5 amendatory changes to this Section made by this amendatory Act
6 of 1991 shall be deemed an emergency and necessary for the
7 public interest, safety and welfare.

8 The Illinois Department may establish a managed care system
9 demonstration program, on a limited basis, as described in this
10 Section. The demonstration program shall terminate on June 30,
11 1997. Within 30 days after the end of each year of the
12 demonstration program's operation, the Illinois Department
13 shall report to the Governor and the General Assembly
14 concerning the operation of the demonstration program.

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