



Sen. Gary Forby

**Filed: 3/14/2005**

09400SB1967sam002

LRB094 08053 DRJ 43711 a

1 AMENDMENT TO SENATE BILL 1967

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 1967, AS AMENDED,  
3 by replacing everything after the enacting clause with the  
4 following:

5 "Section 5. The Older Adult Services Act is amended by  
6 changing Section 25 as follows:

7 (320 ILCS 42/25)

8 Sec. 25. Older adult services restructuring. No later than  
9 January 1, 2005, the Department shall commence the process of  
10 restructuring the older adult services delivery system.  
11 Priority shall be given to both the expansion of services and  
12 the development of new services in priority service areas.  
13 Subject to the availability of funding, the restructuring shall  
14 include, but not be limited to, the following:

15 (1) Planning. The Department shall develop a plan to  
16 restructure the State's service delivery system for older  
17 adults. The plan shall include a schedule for the  
18 implementation of the initiatives outlined in this Act and all  
19 other initiatives identified by the participating agencies to  
20 fulfill the purposes of this Act. Financing for older adult  
21 services shall be based on the principle that "money follows  
22 the individual". The plan shall also identify potential  
23 impediments to delivery system restructuring and include any  
24 known regulatory or statutory barriers.

1           (2) Comprehensive case management. The Department shall  
2 implement a statewide system of holistic comprehensive case  
3 management. The system shall include the identification and  
4 implementation of a universal, comprehensive assessment tool  
5 to be used statewide to determine the level of functional,  
6 cognitive, socialization, and financial needs of older adults.  
7 This tool shall be supported by an electronic intake,  
8 assessment, and care planning system linked to a central  
9 location. "Comprehensive case management" includes services  
10 and coordination such as (i) comprehensive assessment of the  
11 older adult (including the physical, functional, cognitive,  
12 psycho-social, and social needs of the individual); (ii)  
13 development and implementation of a service plan with the older  
14 adult to mobilize the formal and family resources and services  
15 identified in the assessment to meet the needs of the older  
16 adult, including coordination of the resources and services  
17 with any other plans that exist for various formal services,  
18 such as hospital discharge plans, and with the information and  
19 assistance services; (iii) coordination and monitoring of  
20 formal and family service delivery, including coordination and  
21 monitoring to ensure that services specified in the plan are  
22 being provided; (iv) periodic reassessment and revision of the  
23 status of the older adult with the older adult or, if  
24 necessary, the older adult's designated representative; and  
25 (v) in accordance with the wishes of the older adult, advocacy  
26 on behalf of the older adult for needed services or resources.

27           (3) Coordinated point of entry. The Department shall  
28 implement and publicize a statewide coordinated point of entry  
29 using a uniform name, identity, logo, and toll-free number.

30           (4) Public web site. The Department shall develop a public  
31 web site that provides links to available services, resources,  
32 and reference materials concerning caregiving, diseases, and  
33 best practices for use by professionals, older adults, and  
34 family caregivers.

1 (5) Expansion of older adult services. The Department shall  
2 expand older adult services that promote independence and  
3 permit older adults to remain in their own homes and  
4 communities.

5 (6) Consumer-directed home and community-based services.  
6 The Department shall expand the range of service options  
7 available to permit older adults to exercise maximum choice and  
8 control over their care.

9 (7) Comprehensive delivery system. The Department shall  
10 expand opportunities for older adults to receive services in  
11 systems that integrate acute and chronic care.

12 (8) Enhanced transition and follow-up services. The  
13 Department shall implement a program of transition from one  
14 residential setting to another and follow-up services,  
15 regardless of residential setting, pursuant to rules with  
16 respect to (i) resident eligibility, (ii) assessment of the  
17 resident's health, cognitive, social, and financial needs,  
18 (iii) development of transition plans, and (iv) the level of  
19 services that must be available before transitioning a resident  
20 from one setting to another.

21 (9) Family caregiver support. The Department shall develop  
22 strategies for public and private financing of services that  
23 supplement and support family caregivers.

24 (10) Quality standards and quality improvement. The  
25 Department shall establish a core set of uniform quality  
26 standards for all providers that focus on outcomes and take  
27 into consideration consumer choice and satisfaction, and the  
28 Department shall require each provider to implement a  
29 continuous quality improvement process to address consumer  
30 issues. The continuous quality improvement process must  
31 benchmark performance, be person-centered and data-driven, and  
32 focus on consumer satisfaction.

33 (11) Workforce. The Department shall develop strategies to  
34 attract and retain a qualified and stable worker pool, provide

1 living wages and benefits, and create a work environment that  
2 is conducive to long-term employment and career development.  
3 Resources such as grants, education, and promotion of career  
4 opportunities may be used.

5 (12) Coordination of services. The Department shall  
6 identify methods to better coordinate service networks to  
7 maximize resources and minimize duplication of services and  
8 ease of application.

9 (13) Barriers to services. The Department shall identify  
10 barriers to the provision, availability, and accessibility of  
11 services and shall implement a plan to address those barriers.  
12 The plan shall: (i) identify barriers, including but not  
13 limited to, statutory and regulatory complexity, reimbursement  
14 issues, payment issues, and labor force issues; (ii) recommend  
15 changes to State or federal laws or administrative rules or  
16 regulations; (iii) recommend application for federal waivers  
17 to improve efficiency and reduce cost and paperwork; (iv)  
18 develop innovative service delivery models; and (v) recommend  
19 application for federal or private service grants.

20 (14) Reimbursement and funding. The Department shall  
21 investigate and evaluate costs and payments by defining costs  
22 to implement a uniform, audited provider cost reporting system  
23 to be considered by all Departments in establishing payments.  
24 To the extent possible, multiple cost reporting mandates shall  
25 not be imposed.

26 (15) Medicaid nursing home cost containment and Medicare  
27 utilization. The Department of Public Aid, in collaboration  
28 with the Department on Aging and the Department of Public  
29 Health and in consultation with the Advisory Committee, shall  
30 propose a plan to contain Medicaid nursing home costs and  
31 maximize Medicare utilization. The plan must not impair the  
32 ability of an older adult to choose among available services.  
33 The plan shall include, but not be limited to, (i) techniques  
34 to maximize the use of the most cost-effective services without

1 sacrificing quality and (ii) methods to identify and serve  
2 older adults in need of minimal services to remain independent,  
3 but who are likely to develop a need for more extensive  
4 services in the absence of those minimal services.

5 (16) Bed reduction. The Department of Public Health shall  
6 implement a nursing home conversion program to reduce the  
7 number of Medicaid-certified nursing home beds in areas with  
8 excess beds. The Department of Public Aid shall investigate  
9 changes to the Medicaid nursing facility reimbursement system  
10 in order to reduce beds. Such changes may include, but are not  
11 limited to, incentive payments that will enable facilities to  
12 adjust to the restructuring and expansion of services required  
13 by the Older Adult Services Act, including adjustments for the  
14 voluntary closure or layaway of nursing home beds certified  
15 under Title XIX of the federal Social Security Act. Any savings  
16 shall be reallocated to fund home-based or community-based  
17 older adult services pursuant to Section 20.

18 (17) Financing. The Department shall investigate and  
19 evaluate financing options for older adult services and shall  
20 make recommendations in the report required by Section 15  
21 concerning the feasibility of these financing arrangements.  
22 These arrangements shall include, but are not limited to:

23 (A) private long-term care insurance coverage for  
24 older adult services;

25 (B) enhancement of federal long-term care financing  
26 initiatives;

27 (C) employer benefit programs such as medical savings  
28 accounts for long-term care;

29 (D) individual and family cost-sharing options;

30 (E) strategies to reduce reliance on government  
31 programs;

32 (F) fraudulent asset divestiture and financial  
33 planning prevention; and

34 (G) methods to supplement and support family and

1 community caregiving.

2 (18) Older Adult Services Demonstration Grants. The  
3 Department shall implement a program of demonstration grants  
4 that will assist in the restructuring of the older adult  
5 services delivery system, and shall provide funding for  
6 innovative service delivery models and system change and  
7 integration initiatives pursuant to subsection (g) of Section  
8 20.

9 (19) Bed need methodology update. For the purposes of  
10 determining areas with excess beds, the Departments shall  
11 provide information and assistance to the Health Facilities  
12 Planning Board to update the Bed Need Methodology for Long-Term  
13 Care to update the assumptions used to establish the  
14 methodology to make them consistent with modern older adult  
15 services.

16 (20) Affordable housing. The Departments shall utilize the  
17 recommendations of Illinois' Annual Comprehensive Housing  
18 Plan, as developed by the Affordable Housing Task Force through  
19 the Governor's Executive Order 2003-18, in their efforts to  
20 address the affordable housing needs of older adults.

21 (Source: P.A. 93-1031, eff. 8-27-04.)

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