## 95TH GENERAL ASSEMBLY

## State of Illinois

## 2007 and 2008

#### SB2870

Introduced 2/15/2008, by Sen. Michael Noland

### SYNOPSIS AS INTRODUCED:

225 ILCS 25/18	from Ch. 111, par. 2318
305 ILCS 5/5-5	from Ch. 23, par. 5-5

Amends the Dental Practice Act. Provides that dental hygienists may provide, without the supervision of a dentist, fluoride treatments and teeth cleaning and sealant services to children who are eligible participants in the State's Medicaid program. Requires any dental hygienist who provides such services to provide the eligible child's parent or guardian with the name of a licensed dentist who is a provider of medical services under the program. Requires any dental hygienist who provides such services and who practices in a public health clinic to refer for treatment any child with needs outside of the dental hygienist's scope of practice. Effective January 1, 2009.

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FISCAL NOTE ACT MAY APPLY

A BILL FOR

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1 AN ACT concerning regulation.

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

4 Section 5. The Illinois Dental Practice Act is amended by 5 changing Section 18 as follows:

6 (225 ILCS 25/18) (from Ch. 111, par. 2318)
7 (Section scheduled to be repealed on January 1, 2016)
8 Sec. 18. Acts constituting the practice of dental hygiene;
9 limitations.
10 (a) A person practices dental hygiene within the meaning of
11 this Act when he or she performs the following acts under the

12 supervision of a dentist:

(i) the operative procedure of dental hygiene,
 consisting of oral prophylactic procedures;

(ii) the exposure and processing of X-Ray films of
the teeth and surrounding structures;

(iii) the application to the surfaces of the teeth or gums of chemical compounds designed to be desensitizing agents or effective agents in the prevention of dental caries or periodontal disease;

21 (iv) all services which may be performed by a 22 dental assistant as specified by rule pursuant to 23 Section 17; (v) administration and monitoring of nitrous oxide
 upon successful completion of a training program
 approved by the Department;

4 (vi) administration of local anesthetics upon
5 successful completion of a training program approved
6 by the Department; and

7 (vii) such other procedures and acts as shall be
8 prescribed by rule or regulation of the Department.

(b) A dental hygienist may be employed or engaged only:

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(1) by a dentist;

11 (2) by a federal, State, county, or municipal agency or 12 institution;

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(3) by a public or private school; or

(4) by a public clinic operating under the direction of
a hospital or federal, State, county, municipal, or other
public agency or institution.

17 (c) When employed or engaged in the office of a dentist, a dental hygienist may perform, under general supervision, those 18 19 procedures found in items (i) through (iv) of subsection (a) of this Section, provided the patient has been examined by the 20 dentist within one year of the provision of dental hygiene 21 22 services, the dentist has approved the dental hygiene services 23 by a notation in the patient's record and the patient has been notified that the dentist may be out of the office during the 24 25 provision of dental hygiene services.

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(d) If a patient of record is unable to travel to a dental

office because of illness, infirmity, or imprisonment, a dental 1 2 hygienist may perform, under the general supervision of a dentist, those procedures found in items (i) through (iv) of 3 subsection (a) of this Section, provided the patient is located 4 5 in a long-term care facility licensed by the State of Illinois, a mental health or developmental disability facility, or a 6 State or federal prison. The dentist shall personally examine 7 8 and diagnose the patient and determine which services are 9 necessary to be performed, which shall be contained in an order 10 to the hygienist and a notation in the patient's record. Such 11 order must be implemented within 120 days of its issuance, and 12 an updated medical history and observation of oral conditions must be performed by the hygienist immediately prior to 13 14 beginning the procedures to ensure that the patient's health 15 has not changed in any manner to warrant a reexamination by the 16 dentist.

17 (e) School-based oral health care, consisting of and limited to oral prophylactic procedures, sealants, 18 and fluoride treatments, may be provided by a dental hygienist 19 20 under the general supervision of a dentist. A dental hygienist 21 may not provide other dental hygiene treatment in а 22 school-based setting, including but limited not to nitrous 23 administration monitoring of or oxide or 24 administration of local anesthetics. The school-based 25 procedures may be performed provided the patient is located at 26 a public or private school and the program is being conducted

by a State, county or local public health department initiative 1 2 or in conjunction with a dental school or dental hygiene program. The dentist shall personally examine and diagnose the 3 patient and determine which services are necessary to be 4 5 performed, which shall be contained in an order to the 6 hygienist and a notation in the patient's record. Any such 7 order for sealants must be implemented within 120 days after 8 its issuance. Any such order for oral prophylactic procedures 9 or fluoride treatments must be implemented within 180 days 10 after its issuance. An updated medical history and observation 11 of oral conditions must be performed by the hygienist 12 immediately prior to beginning the procedures to ensure that 13 the patient's health has not changed in any manner to warrant a reexamination by the dentist. 14

(f) Without the supervision of a dentist, a dental hygienist may (i) perform dental health education functions, (ii) and may record case histories and oral conditions observed, and (iii) provide fluoride treatments and teeth cleaning and sealant services, if appropriate, to children who are eligible participants in the State's Medicaid program, pursuant to Section 5-5 of the Illinois Public Aid Code.

22 (f-5) Any dental hygienist who provides services to 23 eligible children under item (iii) of subsection (f) of this 24 Section shall attempt to identify and provide to the child's 25 parent or guardian the name of a licensed dentist who is a 26 provider of medical services under the State's Medicaid

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program. Any dental hygienist who provides services to eligible children under item (iii) of subsection (f) of this Section and who practices in a public health clinic as set forth in subdivision (4) of subsection (b) of this Section shall refer for treatment any child with needs outside of the dental hygienist's scope of practice.

7 (g) The number of dental hygienists practicing in a dental
8 office shall not exceed, at any one time, 4 times the number of
9 dentists practicing in the office at the time.

10 (Source: P.A. 93-113, eff. 1-1-04; 93-821, eff. 7-28-04.)

Section 10. The Illinois Public Aid Code is amended by changing Section 5-5 as follows:

13 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

Sec. 5-5. Medical services. The Illinois Department, by 14 15 rule, shall determine the quantity and quality of and the rate of reimbursement for the medical assistance for which payment 16 will be authorized, and the medical services to be provided, 17 which may include all or part of the following: (1) inpatient 18 hospital services; (2) outpatient hospital services; (3) other 19 20 laboratory and X-ray services; (4) skilled nursing home 21 services; (5) physicians' services whether furnished in the office, the patient's home, a hospital, a skilled nursing home, 22 or elsewhere; (6) medical care, or any other type of remedial 23 24 care furnished by licensed practitioners; (7) home health care

(8) private duty nursing service; (9) clinic 1 services; 2 (10) dental services, including prevention and services; treatment of periodontal disease and dental caries disease for 3 pregnant women and fluoride treatments and teeth cleaning and 4 sealant services provided to children by dental hygienists; 5 6 (11) physical therapy and related services; (12) prescribed 7 drugs, dentures, and prosthetic devices; and eyeqlasses 8 prescribed by a physician skilled in the diseases of the eye, 9 or by an optometrist, whichever the person may select; (13) 10 other diagnostic, screening, preventive, and rehabilitative 11 services; (14) transportation and such other expenses as may be 12 necessary; (15) medical treatment of sexual assault survivors, 13 as defined in Section 1a of the Sexual Assault Survivors Emergency Treatment Act, for injuries sustained as a result of 14 the sexual assault, including examinations and laboratory 15 16 tests to discover evidence which may be used in criminal 17 proceedings arising from the sexual assault; (16) the diagnosis and treatment of sickle cell anemia; and (17) any other medical 18 care, and any other type of remedial care recognized under the 19 laws of this State, but not including abortions, or induced 20 miscarriages or premature births, unless, in the opinion of a 21 22 physician, such procedures are necessary for the preservation 23 of the life of the woman seeking such treatment, or except an induced premature birth intended to produce a live viable child 24 25 and such procedure is necessary for the health of the mother or 26 her unborn child. The Illinois Department, by rule, shall

prohibit any physician from providing medical assistance to 1 2 anyone eligible therefor under this Code where such physician 3 has been found guilty of performing an abortion procedure in a wilful and wanton manner upon a woman who was not pregnant at 4 5 the time such abortion procedure was performed. The term "any other type of remedial care" shall include nursing care and 6 nursing home service for persons who rely on treatment by 7 8 spiritual means alone through prayer for healing.

9 Notwithstanding any other provision of this Section, a 10 comprehensive tobacco use cessation program that includes 11 purchasing prescription drugs or prescription medical devices 12 approved by the Food and Drug administration shall be covered 13 under the medical assistance program under this Article for 14 persons who are otherwise eligible for assistance under this 15 Article.

Notwithstanding any other provision of this Code, the Illinois Department may not require, as a condition of payment for any laboratory test authorized under this Article, that a physician's handwritten signature appear on the laboratory test order form. The Illinois Department may, however, impose other appropriate requirements regarding laboratory test order documentation.

The Department of Healthcare and Family Services shall provide the following services to persons eligible for assistance under this Article who are participating in education, training or employment programs operated by the

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Department of Human Services as successor to the Department of
 Public Aid:

3 (1) dental services, which shall include but not be4 limited to prosthodontics; and

5 (2) eyeglasses prescribed by a physician skilled in the
6 diseases of the eye, or by an optometrist, whichever the
7 person may select.

8 The Illinois Department, by rule, may distinguish and 9 classify the medical services to be provided only in accordance 10 with the classes of persons designated in Section 5-2.

11 The Department of Healthcare and Family Services must 12 provide coverage and reimbursement for amino acid-based 13 elemental formulas, regardless of delivery method, for the 14 diagnosis and treatment of (i) eosinophilic disorders and (ii) 15 short bowel syndrome when the prescribing physician has issued 16 a written order stating that the amino acid-based elemental 17 formula is medically necessary.

The Illinois Department shall authorize the provision of, 18 19 and shall authorize payment for, screening by low-dose 20 mammography for the presence of occult breast cancer for women 35 years of age or older who are eligible for medical 21 22 assistance under this Article, as follows: a baseline mammogram 23 for women 35 to 39 years of age and an annual mammogram for women 40 years of age or older. All screenings shall include a 24 25 physical breast exam, instruction on self-examination and 26 information regarding the frequency of self-examination and

its value as a preventative tool. As used in this Section, "low-dose mammography" means the x-ray examination of the breast using equipment dedicated specifically for mammography, including the x-ray tube, filter, compression device, image receptor, and cassettes, with an average radiation exposure delivery of less than one rad mid-breast, with 2 views for each breast.

8 Any medical or health care provider shall immediately 9 recommend, to any pregnant woman who is being provided prenatal 10 services and is suspected of drug abuse or is addicted as 11 defined in the Alcoholism and Other Drug Abuse and Dependency 12 Act, referral to a local substance abuse treatment provider 13 licensed by the Department of Human Services or to a licensed hospital which provides substance abuse treatment services. 14 15 The Department of Healthcare and Family Services shall assure 16 coverage for the cost of treatment of the drug abuse or 17 addiction for pregnant recipients in accordance with the Illinois Medicaid Program in conjunction with the Department of 18 19 Human Services.

20 All medical providers providing medical assistance to pregnant women under this Code shall receive information from 21 22 the Department on the availability of services under the Drug 23 Free Families with a Future or any comparable program providing 24 management services for addicted women, including case 25 information on appropriate referrals for other social services 26 that may be needed by addicted women in addition to treatment

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1 for addiction.

2 Department, in cooperation The Illinois with the Departments of Human Services (as successor to the Department 3 of Alcoholism and Substance Abuse) and Public Health, through a 4 public awareness campaign, may provide information concerning 5 6 treatment for alcoholism and drug abuse and addiction, prenatal 7 health care, and other pertinent programs directed at reducing 8 the number of drug-affected infants born to recipients of 9 medical assistance.

10 Neither the Department of Healthcare and Family Services 11 nor the Department of Human Services shall sanction the 12 recipient solely on the basis of her substance abuse.

13 The Illinois Department shall establish such regulations governing the dispensing of health services under this Article 14 15 as it shall deem appropriate. The Department should seek the 16 advice of formal professional advisory committees appointed by 17 the Director of the Illinois Department for the purpose of providing regular advice on policy and administrative matters, 18 information dissemination and educational activities 19 for 20 medical and health care providers, and consistency in 21 procedures to the Illinois Department.

The Illinois Department may develop and contract with Partnerships of medical providers to arrange medical services for persons eligible under Section 5-2 of this Code. Implementation of this Section may be by demonstration projects in certain geographic areas. The Partnership shall be

represented by a sponsor organization. The Department, by rule,
 shall develop qualifications for sponsors of Partnerships.
 Nothing in this Section shall be construed to require that the
 sponsor organization be a medical organization.

5 The sponsor must negotiate formal written contracts with 6 medical providers for physician services, inpatient and 7 outpatient hospital care, home health services, treatment for 8 alcoholism and substance abuse, and other services determined 9 necessary by the Illinois Department by rule for delivery by 10 Partnerships. Physician services must include prenatal and 11 obstetrical care. The Illinois Department shall reimburse 12 medical services delivered by Partnership providers to clients 13 in target areas according to provisions of this Article and the 14 Illinois Health Finance Reform Act, except that:

(1) Physicians participating in a Partnership and
 providing certain services, which shall be determined by
 the Illinois Department, to persons in areas covered by the
 Partnership may receive an additional surcharge for such
 services.

(2) The Department may elect to consider and negotiate
 financial incentives to encourage the development of
 Partnerships and the efficient delivery of medical care.

(3) Persons receiving medical services through
 Partnerships may receive medical and case management
 services above the level usually offered through the
 medical assistance program.

Medical providers shall be required to meet certain 1 2 qualifications to participate in Partnerships to ensure the 3 delivery of high quality medical services. These qualifications shall be determined by rule of the Illinois 4 be 5 Department and may higher than gualifications for 6 participation in the medical assistance program. Partnership 7 sponsors may prescribe reasonable additional qualifications 8 for participation by medical providers, only with the prior 9 written approval of the Illinois Department.

10 Nothing in this Section shall limit the free choice of 11 practitioners, hospitals, and other providers of medical 12 services by clients. In order to ensure patient freedom of 13 choice, the Illinois Department shall immediately promulgate 14 all rules and take all other necessary actions so that provided 15 services may be accessed from therapeutically certified 16 optometrists to the full extent of the Illinois Optometric 17 Practice Act of 1987 without discriminating between service 18 providers.

19 The Department shall apply for a waiver from the United 20 States Health Care Financing Administration to allow for the 21 implementation of Partnerships under this Section.

The Illinois Department shall require health care providers to maintain records that document the medical care and services provided to recipients of Medical Assistance under this Article. The Illinois Department shall require health care providers to make available, when authorized by the patient, in

writing, the medical records in a timely fashion to other 1 2 health care providers who are treating or serving persons eligible for Medical Assistance under this Article. All 3 dispensers of medical services shall be required to maintain 4 5 and retain business and professional records sufficient to 6 fully and accurately document the nature, scope, details and 7 receipt of the health care provided to persons eligible for assistance under this Code, 8 medical in accordance with 9 regulations promulgated by the Illinois Department. The rules 10 and regulations shall require that proof of the receipt of 11 prescription drugs, dentures, prosthetic devices and 12 eyeglasses by eligible persons under this Section accompany 13 each claim for reimbursement submitted by the dispenser of such medical services. No such claims for reimbursement shall be 14 15 approved for payment by the Illinois Department without such 16 proof of receipt, unless the Illinois Department shall have put 17 into effect and shall be operating a system of post-payment audit and review which shall, on a sampling basis, be deemed 18 19 adequate by the Illinois Department to assure that such drugs, 20 dentures, prosthetic devices and eyeqlasses for which payment being made are actually being received by eligible 21 is 22 recipients. Within 90 days after the effective date of this 23 amendatory Act of 1984, the Illinois Department shall establish a current list of acquisition costs for all prosthetic devices 24 25 and any other items recognized as medical equipment and 26 supplies reimbursable under this Article and shall update such

list on a quarterly basis, except that the acquisition costs of
 all prescription drugs shall be updated no less frequently than
 every 30 days as required by Section 5-5.12.

The rules and regulations of the Illinois Department shall require that a written statement including the required opinion of a physician shall accompany any claim for reimbursement for abortions, or induced miscarriages or premature births. This statement shall indicate what procedures were used in providing such medical services.

10 The Illinois Department shall require all dispensers of 11 medical services, other than an individual practitioner or 12 group of practitioners, desiring to participate in the Medical 13 Assistance program established under this Article to disclose 14 all financial, beneficial, ownership, equity, surety or other 15 interests in any and all firms, corporations, partnerships, 16 associations, business enterprises, joint ventures, agencies, 17 institutions or other legal entities providing any form of health care services in this State under this Article. 18

19 The Illinois Department may require that all dispensers of medical services desiring to participate in the medical 20 21 assistance program established under this Article disclose, 22 under such terms and conditions as the Illinois Department may 23 by rule establish, all inquiries from clients and attorneys regarding medical bills paid by the Illinois Department, which 24 25 inquiries could indicate potential existence of claims or liens 26 for the Illinois Department.

Enrollment of a vendor that provides non-emergency medical transportation, defined by the Department by rule, shall be conditional for 180 days. During that time, the Department of Healthcare and Family Services may terminate the vendor's eligibility to participate in the medical assistance program without cause. That termination of eligibility is not subject to the Department's hearing process.

8 The Illinois Department shall establish policies, 9 procedures, standards and criteria by rule for the acquisition, 10 repair and replacement of orthotic and prosthetic devices and 11 durable medical equipment. Such rules shall provide, but not be 12 limited to, the following services: (1) immediate repair or 13 replacement of such devices by recipients without medical 14 authorization; and (2) rental, lease, purchase or of 15 lease-purchase durable medical equipment in а 16 cost-effective manner, taking into consideration the 17 recipient's medical prognosis, the extent of the recipient's needs, and the requirements and costs for maintaining such 18 equipment. Such rules shall enable a recipient to temporarily 19 20 acquire and use alternative or substitute devices or equipment 21 pending repairs or replacements of any device or equipment 22 previously authorized for such recipient by the Department.

The Department shall execute, relative to the nursing home prescreening project, written inter-agency agreements with the Department of Human Services and the Department on Aging, to effect the following: (i) intake procedures and common

eligibility criteria for those persons who are receiving 1 2 non-institutional services; and (ii) the establishment and development of non-institutional services in areas of the State 3 where they are not currently available or are undeveloped. 4

5 The Illinois Department shall develop and operate, in cooperation with other State Departments and agencies and in 6 7 compliance with applicable federal laws and regulations, 8 appropriate and effective systems of health care evaluation and 9 programs for monitoring of utilization of health care services 10 and facilities, as it affects persons eligible for medical 11 assistance under this Code.

12 The Illinois Department shall report annually to the 13 General Assembly, no later than the second Friday in April of 1979 and each year thereafter, in regard to: 14

(a) actual statistics and trends in utilization of 15 16 medical services by public aid recipients;

17 (b) actual statistics and trends in the provision of the various medical services by medical vendors; 18

19 (c) current rate structures and proposed changes in 20 those rate structures for the various medical vendors; and

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(d) efforts at utilization review and control by the 22 Illinois Department.

23 The period covered by each report shall be the 3 years 24 ending on the June 30 prior to the report. The report shall 25 include suggested legislation for consideration by the General Assembly. The filing of one copy of the report with the 26

Speaker, one copy with the Minority Leader and one copy with 1 2 the Clerk of the House of Representatives, one copy with the 3 President, one copy with the Minority Leader and one copy with the Secretary of the Senate, one copy with the Legislative 4 5 Research Unit, and such additional copies with the State 6 Government Report Distribution Center for the General Assembly 7 as is required under paragraph (t) of Section 7 of the State Library Act shall be deemed sufficient to comply with this 8 Section. 9

10 (Source: P.A. 95-331, eff. 8-21-07; 95-520, eff. 8-28-07.)

Section 99. Effective date. This Act takes effect January 1, 2009.