96TH GENERAL ASSEMBLY

State of Illinois

2009 and 2010

HB5924

Introduced 2/10/2010, by Rep. William Davis

SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5.4

from Ch. 23, par. 5-5.4

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for facilities licensed by the Department of Public Health under the MR/DD Community Care Act as Intermediate Care Facilities for the Developmentally Disabled or Long Term Care for Under Age 22 facilities, the payment rates established by the Department of Healthcare and Family Services that take effect on July 1, 2010 shall include an increase sufficient to provide a \$0.50 per-hour wage increase for non-executive staff. Effective immediately.

LRB096 17747 KTG 33112 b

FISCAL NOTE ACT MAY APPLY

A BILL FOR

HB5924

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 5-5.4 as follows:

6 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)

7 (Text of Section before amendment by P.A. 96-339)

8 Sec. 5-5.4. Standards of Payment - Department of Healthcare 9 and Family Services. The Department of Healthcare and Family 10 Services shall develop standards of payment of skilled nursing 11 and intermediate care services in facilities providing such 12 services under this Article which:

13 (1) Provide for the determination of a facility's payment 14 for skilled nursing and intermediate care services on a prospective basis. The amount of the payment rate for all 15 16 nursing facilities certified by the Department of Public Health 17 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities, Long Term Care for Under 18 19 Age 22 facilities, Skilled Nursing facilities, or Intermediate 20 Care facilities under the medical assistance program shall be 21 prospectively established annually on the basis of historical, 22 financial, and statistical data reflecting actual costs from prior years, which shall be applied to the current rate year 23

and updated for inflation, except that the capital cost element 1 2 for newly constructed facilities shall be based upon projected 3 budgets. The annually established payment rate shall take effect on July 1 in 1984 and subsequent years. No rate increase 4 5 and no update for inflation shall be provided on or after July 1, 1994 and before July 1, 2010, unless specifically provided 6 for in this Section. The changes made by Public Act 93-841 7 8 extending the duration of the prohibition against a rate 9 increase or update for inflation are effective retroactive to 10 July 1, 2004.

11 For facilities licensed by the Department of Public Health 12 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under 13 Age 22 facilities, the rates taking effect on July 1, 1998 14 15 shall include an increase of 3%. For facilities licensed by the 16 Department of Public Health under the Nursing Home Care Act as 17 Skilled Nursing facilities or Intermediate Care facilities, the rates taking effect on July 1, 1998 shall include an 18 19 increase of 3% plus \$1.10 per resident-day, as defined by the Department. For facilities licensed by the Department of Public 20 21 Health under the MR/DD Community Care Act as Intermediate Care 22 Facilities for the Developmentally Disabled or Long Term Care 23 for Under Age 22 facilities, the rates taking effect on July 1, 24 2010 shall include an increase sufficient to provide a \$0.50 25 per-hour wage increase for non-executive staff. For facilities 26 licensed by the Department of Public Health under the Nursing

Intermediate Care Facilities for 1 Home Care Act as the 2 Developmentally Disabled or Long Term Care for Under Age 22 facilities, the rates taking effect on January 1, 2006 shall 3 include an increase of 3%. For facilities licensed by the 4 5 Department of Public Health under the Nursing Home Care Act as 6 Intermediate Care Facilities for the Developmentally Disabled 7 or Long Term Care for Under Age 22 facilities, the rates taking 8 effect on January 1, 2009 shall include an increase sufficient 9 to provide a \$0.50 per hour wage increase for non-executive 10 staff.

11 For facilities licensed by the Department of Public Health 12 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under 13 Age 22 facilities, the rates taking effect on July 1, 1999 14 15 shall include an increase of 1.6% plus \$3.00 per resident-day, 16 as defined by the Department. For facilities licensed by the 17 Department of Public Health under the Nursing Home Care Act as Skilled Nursing facilities or Intermediate Care facilities, 18 19 the rates taking effect on July 1, 1999 shall include an 20 increase of 1.6% and, for services provided on or after October 1, 1999, shall be increased by \$4.00 per resident-day, as 21 22 defined by the Department.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on July 1, 2000

shall include an increase of 2.5% per resident-day, as defined by the Department. For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Skilled Nursing facilities or Intermediate Care facilities, the rates taking effect on July 1, 2000 shall include an increase of 2.5% per resident-day, as defined by the Department.

For facilities licensed by the Department of Public Health 7 8 under the Nursing Home Care Act as skilled nursing facilities 9 or intermediate care facilities, a new payment methodology must 10 be implemented for the nursing component of the rate effective 11 July 1, 2003. The Department of Public Aid (now Healthcare and 12 Family Services) shall develop the new payment methodology 13 using the Minimum Data Set (MDS) as the instrument to collect 14 information concerning nursing home resident condition 15 necessary to compute the rate. The Department shall develop the 16 new payment methodology to meet the unique needs of Illinois 17 residents while remaining subject nursing home to the appropriations provided by the General Assembly. A transition 18 19 period from the payment methodology in effect on June 30, 2003 20 to the payment methodology in effect on July 1, 2003 shall be provided for a period not exceeding 3 years and 184 days after 21 22 implementation of the new payment methodology as follows:

(A) For a facility that would receive a lower nursing
component rate per patient day under the new system than
the facility received effective on the date immediately
preceding the date that the Department implements the new

payment methodology, the nursing component rate per patient day for the facility shall be held at the level in effect on the date immediately preceding the date that the Department implements the new payment methodology until a higher nursing component rate of reimbursement is achieved by that facility.

(B) For a facility that would receive a higher nursing 7 8 patient day under component rate per the payment 9 methodology in effect on July 1, 2003 than the facility 10 received effective on the date immediately preceding the 11 date that the Department implements the new payment 12 methodology, the nursing component rate per patient day for the facility shall be adjusted. 13

14 (C) Notwithstanding paragraphs (A) and (B), the
15 nursing component rate per patient day for the facility
16 shall be adjusted subject to appropriations provided by the
17 General Assembly.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on March 1, 2001 shall include a statewide increase of 7.85%, as defined by the Department.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or

intermediate care facilities, the numerator of the ratio used 1 2 by the Department of Healthcare and Family Services to compute the rate payable under this Section using the Minimum Data Set 3 4 methodology shall incorporate the following annual (MDS) 5 amounts as the additional funds appropriated to the Department 6 specifically to pay for rates based on the MDS nursing 7 component methodology in excess of the funding in effect on December 31, 2006: 8

9 (i) For rates taking effect January 1, 2007,
10 \$60,000,000.

(ii) For rates taking effect January 1, 2008,
 \$110,000,000.

13 (iii) For rates taking effect January 1, 2009,
14 \$194,000,000.

15 Notwithstanding any other provision of this Section, for 16 facilities licensed by the Department of Public Health under 17 the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the support component of the 18 rates taking effect on January 1, 2008 shall be computed using 19 20 the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005, 21 22 updated for inflation to January 1, 2006.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on April 1, 2002 shall include a statewide increase of 2.0%, as defined by the
 Department. This increase terminates on July 1, 2002; beginning
 July 1, 2002 these rates are reduced to the level of the rates
 in effect on March 31, 2002, as defined by the Department.

5 For facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities 6 7 or intermediate care facilities, the rates taking effect on 8 July 1, 2001 shall be computed using the most recent cost 9 reports on file with the Department of Public Aid no later than 10 April 1, 2000, updated for inflation to January 1, 2001. For 11 rates effective July 1, 2001 only, rates shall be the greater 12 of the rate computed for July 1, 2001 or the rate effective on 13 June 30, 2001.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the Illinois Department shall determine by rule the rates taking effect on July 1, 2002, which shall be 5.9% less than the rates in effect on June 30, 2002.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, if the payment methodologies required under Section 5A-12 and the waiver granted under 42 CFR 433.68 are approved by the United States Centers for

Medicare and Medicaid Services, the rates taking effect on July 1, 2004 shall be 3.0% greater than the rates in effect on June 30, 2004. These rates shall take effect only upon approval and 4 implementation of the payment methodologies required under 5 Section 5A-12.

6 Notwithstanding any other provisions of this Section, for 7 facilities licensed by the Department of Public Health under 8 the Nursing Home Care Act as skilled nursing facilities or 9 intermediate care facilities, the rates taking effect on 10 January 1, 2005 shall be 3% more than the rates in effect on 11 December 31, 2004.

12 Notwithstanding any other provision of this Section, for 13 facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or 14 intermediate care facilities, effective January 1, 2009, the 15 16 per diem support component of the rates effective on January 1, 17 2008, computed using the most recent cost reports on file with the Department of Healthcare and Family Services no later than 18 April 1, 2005, updated for inflation to January 1, 2006, shall 19 be increased to the amount that would have been derived using 20 21 standard Department of Healthcare and Family Services methods, 22 procedures, and inflators.

Notwithstanding any other provisions of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as intermediate care facilities that are federally defined as Institutions for Mental Disease, a

- 9 - LRB096 17747 KTG 33112 b

socio-development component rate equal to 6.6% 1 of the 2 facility's nursing component rate as of January 1, 2006 shall July 1, 3 established and paid effective 2006. The be socio-development component of the rate shall be increased by a 4 5 factor of 2.53 on the first day of the month that begins at 6 least 45 days after January 11, 2008 (the effective date of 7 Public Act 95-707). As of August 1, 2008, the socio-development component rate shall be equal to 6.6% of the facility's nursing 8 9 component rate as of January 1, 2006, multiplied by a factor of 10 3.53. The Illinois Department may by rule adjust these 11 socio-development component rates, but in no case may such 12 rates be diminished.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or as long-term care facilities for residents under 22 years of age, the rates taking effect on July 1, 2003 shall include a statewide increase of 4%, as defined by the Department.

19 For facilities licensed by the Department of Public Health 20 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under 21 22 Age 22 facilities, the rates taking effect on the first day of 23 the month that begins at least 45 days after the effective date of this amendatory Act of the 95th General Assembly shall 24 include a statewide increase of 2.5%, as defined by the 25 26 Department.

Notwithstanding any other provision of this Section, for 1 2 facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or 3 intermediate care facilities, effective January 1, 2005, 4 5 facility rates shall be increased by the difference between (i) 6 a facility's per diem property, liability, and malpractice 7 insurance costs as reported in the cost report filed with the 8 Department of Public Aid and used to establish rates effective 9 July 1, 2001 and (ii) those same costs as reported in the 10 facility's 2002 cost report. These costs shall be passed 11 through to the facility without caps or limitations, except for 12 adjustments required under normal auditing procedures.

13 Rates established effective each July 1 shall govern payment for services rendered throughout that fiscal year, 14 except that rates established on July 1, 1996 shall be 15 16 increased by 6.8% for services provided on or after January 1, 17 1997. Such rates will be based upon the rates calculated for the year beginning July 1, 1990, and for subsequent years 18 thereafter until June 30, 2001 shall be based on the facility 19 cost reports for the facility fiscal year ending at any point 20 in time during the previous calendar year, updated to the 21 22 midpoint of the rate year. The cost report shall be on file 23 with the Department no later than April 1 of the current rate year. Should the cost report not be on file by April 1, the 24 25 Department shall base the rate on the latest cost report filed 26 by each skilled care facility and intermediate care facility,

1 updated to the midpoint of the current rate year. In 2 determining rates for services rendered on and after July 1, 3 1985, fixed time shall not be computed at less than zero. The 4 Department shall not make any alterations of regulations which 5 would reduce any component of the Medicaid rate to a level 6 below what that component would have been utilizing in the rate 7 effective on July 1, 1984.

8 (2) Shall take into account the actual costs incurred by 9 facilities in providing services for recipients of skilled 10 nursing and intermediate care services under the medical 11 assistance program.

(3) Shall take into account the medical and psycho-socialcharacteristics and needs of the patients.

(4) Shall take into account the actual costs incurred by
facilities in meeting licensing and certification standards
imposed and prescribed by the State of Illinois, any of its
political subdivisions or municipalities and by the U.S.
Department of Health and Human Services pursuant to Title XIX
of the Social Security Act.

20 The Department of Healthcare and Family Services shall develop precise standards for payments to reimburse nursing 21 22 facilities for any utilization of appropriate rehabilitative 23 personnel for the provision of rehabilitative services which is authorized by federal regulations, including reimbursement for 24 25 services provided by qualified therapists or qualified assistants, and which is in accordance with 26 accepted

1 professional practices. Reimbursement also may be made for 2 utilization of other supportive personnel under appropriate 3 supervision.

4 (Source: P.A. 95-12, eff. 7-2-07; 95-331, eff. 8-21-07; 95-707,
5 eff. 1-11-08; 95-744, eff. 7-18-08; 96-45, eff. 7-15-09.)

6 (Text of Section after amendment by P.A. 96-339)

HB5924

Sec. 5-5.4. Standards of Payment - Department of Healthcare and Family Services. The Department of Healthcare and Family Services shall develop standards of payment of skilled nursing and intermediate care services in facilities providing such services under this Article which:

12 (1) Provide for the determination of a facility's payment 13 for skilled nursing and intermediate care services on a 14 prospective basis. The amount of the payment rate for all 15 nursing facilities certified by the Department of Public Health 16 under the MR/DD Community Care Act or the Nursing Home Care Act Care for the Developmentally Disabled 17 Intermediate as facilities, Long Term Care for Under Age 22 facilities, Skilled 18 Nursing facilities, or Intermediate Care facilities under the 19 20 medical assistance program shall be prospectively established 21 annually on the basis of historical, financial, and statistical 22 data reflecting actual costs from prior years, which shall be applied to the current rate year and updated for inflation, 23 except that the capital cost element for newly constructed 24 25 facilities shall be based upon projected budgets. The annually established payment rate shall take effect on July 1 in 1984 and subsequent years. No rate increase and no update for inflation shall be provided on or after July 1, 1994 and before July 1, 2010, unless specifically provided for in this Section. The changes made by Public Act 93-841 extending the duration of the prohibition against a rate increase or update for inflation are effective retroactive to July 1, 2004.

8 For facilities licensed by the Department of Public Health 9 under the Nursing Home Care Act as Intermediate Care for the 10 Developmentally Disabled facilities or Long Term Care for Under 11 Age 22 facilities, the rates taking effect on July 1, 1998 12 shall include an increase of 3%. For facilities licensed by the 13 Department of Public Health under the Nursing Home Care Act as 14 Skilled Nursing facilities or Intermediate Care facilities, the rates taking effect on July 1, 1998 shall include an 15 16 increase of 3% plus \$1.10 per resident-day, as defined by the 17 Department. For facilities licensed by the Department of Public Health under the MR/DD Community Care Act as Intermediate Care 18 19 Facilities for the Developmentally Disabled or Long Term Care 20 for Under Age 22 facilities, the rates taking effect on July 1, 21 2010 shall include an increase sufficient to provide a \$0.50 22 per-hour wage increase for non-executive staff. For facilities 23 licensed by the Department of Public Health under the Nursing Intermediate Care Facilities for the 24 Care Act as Home 25 Developmentally Disabled or Long Term Care for Under Age 22 26 facilities, the rates taking effect on January 1, 2006 shall

include an increase of 3%. For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care Facilities for the Developmentally Disabled or Long Term Care for Under Age 22 facilities, the rates taking effect on January 1, 2009 shall include an increase sufficient to provide a \$0.50 per hour wage increase for non-executive staff.

8 For facilities licensed by the Department of Public Health 9 under the Nursing Home Care Act as Intermediate Care for the 10 Developmentally Disabled facilities or Long Term Care for Under 11 Age 22 facilities, the rates taking effect on July 1, 1999 12 shall include an increase of 1.6% plus \$3.00 per resident-day, as defined by the Department. For facilities licensed by the 13 14 Department of Public Health under the Nursing Home Care Act as 15 Skilled Nursing facilities or Intermediate Care facilities, the rates taking effect on July 1, 1999 shall include an 16 17 increase of 1.6% and, for services provided on or after October 1, 1999, shall be increased by \$4.00 per resident-day, as 18 19 defined by the Department.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on July 1, 2000 shall include an increase of 2.5% per resident-day, as defined by the Department. For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Skilled

Nursing facilities or Intermediate Care facilities, the rates
 taking effect on July 1, 2000 shall include an increase of 2.5%
 per resident-day, as defined by the Department.

For facilities licensed by the Department of Public Health 4 5 under the Nursing Home Care Act as skilled nursing facilities 6 or intermediate care facilities, a new payment methodology must 7 be implemented for the nursing component of the rate effective 8 July 1, 2003. The Department of Public Aid (now Healthcare and 9 Family Services) shall develop the new payment methodology 10 using the Minimum Data Set (MDS) as the instrument to collect 11 information concerning nursing home resident condition 12 necessary to compute the rate. The Department shall develop the new payment methodology to meet the unique needs of Illinois 13 14 nursing home residents while remaining subject to the 15 appropriations provided by the General Assembly. A transition 16 period from the payment methodology in effect on June 30, 2003 17 to the payment methodology in effect on July 1, 2003 shall be provided for a period not exceeding 3 years and 184 days after 18 19 implementation of the new payment methodology as follows:

20 (A) For a facility that would receive a lower nursing 21 component rate per patient day under the new system than 22 the facility received effective on the date immediately 23 preceding the date that the Department implements the new 24 payment methodology, the nursing component rate per 25 patient day for the facility shall be held at the level in 26 effect on the date immediately preceding the date that the

HB5924

Department implements the new payment methodology until a
 higher nursing component rate of reimbursement is achieved
 by that facility.

(B) For a facility that would receive a higher nursing 4 5 component rate per patient day under the payment methodology in effect on July 1, 2003 than the facility 6 7 received effective on the date immediately preceding the 8 date that the Department implements the new payment 9 methodology, the nursing component rate per patient day for 10 the facility shall be adjusted.

11 (C) Notwithstanding paragraphs (A) and (B), the 12 nursing component rate per patient day for the facility 13 shall be adjusted subject to appropriations provided by the 14 General Assembly.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on March 1, 2001 shall include a statewide increase of 7.85%, as defined by the Department.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the numerator of the ratio used by the Department of Healthcare and Family Services to compute the rate payable under this Section using the Minimum Data Set 1 (MDS) methodology shall incorporate the following annual 2 amounts as the additional funds appropriated to the Department 3 specifically to pay for rates based on the MDS nursing 4 component methodology in excess of the funding in effect on 5 December 31, 2006:

6 (i) For rates taking effect January 1, 2007,
7 \$60,000,000.

8 (ii) For rates taking effect January 1, 2008,
9 \$110,000,000.

10 (iii) For rates taking effect January 1, 2009, 11 \$194,000,000.

12 Notwithstanding any other provision of this Section, for 13 facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or 14 intermediate care facilities, the support component of the 15 16 rates taking effect on January 1, 2008 shall be computed using 17 the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005, 18 19 updated for inflation to January 1, 2006.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under Age 22 facilities, the rates taking effect on April 1, 2002 shall include a statewide increase of 2.0%, as defined by the Department. This increase terminates on July 1, 2002; beginning July 1, 2002 these rates are reduced to the level of the rates 1 in effect on March 31, 2002, as defined by the Department.

2 For facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities 3 or intermediate care facilities, the rates taking effect on 4 5 July 1, 2001 shall be computed using the most recent cost reports on file with the Department of Public Aid no later than 6 7 April 1, 2000, updated for inflation to January 1, 2001. For 8 rates effective July 1, 2001 only, rates shall be the greater 9 of the rate computed for July 1, 2001 or the rate effective on 10 June 30, 2001.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the Illinois Department shall determine by rule the rates taking effect on July 1, 2002, which shall be 5.9% less than the rates in effect on June 30, 2002.

Notwithstanding any other provision of this Section, for 18 facilities licensed by the Department of Public Health under 19 20 the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, if the payment methodologies 21 22 required under Section 5A-12 and the waiver granted under 42 23 CFR 433.68 are approved by the United States Centers for Medicare and Medicaid Services, the rates taking effect on July 24 25 1, 2004 shall be 3.0% greater than the rates in effect on June 30, 2004. These rates shall take effect only upon approval and 26

1 implementation of the payment methodologies required under 2 Section 5A-12.

Notwithstanding any other provisions of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, the rates taking effect on January 1, 2005 shall be 3% more than the rates in effect on December 31, 2004.

9 Notwithstanding any other provision of this Section, for 10 facilities licensed by the Department of Public Health under 11 the Nursing Home Care Act as skilled nursing facilities or 12 intermediate care facilities, effective January 1, 2009, the per diem support component of the rates effective on January 1, 13 14 2008, computed using the most recent cost reports on file with 15 the Department of Healthcare and Family Services no later than 16 April 1, 2005, updated for inflation to January 1, 2006, shall 17 be increased to the amount that would have been derived using standard Department of Healthcare and Family Services methods, 18 19 procedures, and inflators.

20 Notwithstanding any other provisions of this Section, for facilities licensed by the Department of Public Health under 21 the Nursing Home Care Act as intermediate care facilities that 22 23 are federally defined as Institutions for Mental Disease, a 24 socio-development component rate equal to 6.6% of the facility's nursing component rate as of January 1, 2006 shall 25 established and paid effective July 1, 2006. 26 be The

socio-development component of the rate shall be increased by a 1 2 factor of 2.53 on the first day of the month that begins at least 45 days after January 11, 2008 (the effective date of 3 Public Act 95-707). As of August 1, 2008, the socio-development 4 5 component rate shall be equal to 6.6% of the facility's nursing component rate as of January 1, 2006, multiplied by a factor of 6 7 3.53. The Illinois Department may by rule adjust these 8 socio-development component rates, but in no case may such 9 rates be diminished.

For facilities licensed by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or as long-term care facilities for residents under 22 years of age, the rates taking effect on July 1, 2003 shall include a statewide increase of 4%, as defined by the Department.

16 For facilities licensed by the Department of Public Health 17 under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities or Long Term Care for Under 18 19 Age 22 facilities, the rates taking effect on the first day of the month that begins at least 45 days after the effective date 20 of this amendatory Act of the 95th General Assembly shall 21 include a statewide increase of 2.5%, as defined by the 22 23 Department.

Notwithstanding any other provision of this Section, for facilities licensed by the Department of Public Health under the Nursing Home Care Act as skilled nursing facilities or

intermediate care facilities, effective January 1, 2005, 1 2 facility rates shall be increased by the difference between (i) a facility's per diem property, liability, and malpractice 3 insurance costs as reported in the cost report filed with the 4 5 Department of Public Aid and used to establish rates effective 6 July 1, 2001 and (ii) those same costs as reported in the 7 facility's 2002 cost report. These costs shall be passed 8 through to the facility without caps or limitations, except for 9 adjustments required under normal auditing procedures.

10 Rates established effective each July 1 shall govern 11 payment for services rendered throughout that fiscal year, 12 except that rates established on July 1, 1996 shall be 13 increased by 6.8% for services provided on or after January 1, 14 1997. Such rates will be based upon the rates calculated for the year beginning July 1, 1990, and for subsequent years 15 thereafter until June 30, 2001 shall be based on the facility 16 17 cost reports for the facility fiscal year ending at any point in time during the previous calendar year, updated to the 18 19 midpoint of the rate year. The cost report shall be on file with the Department no later than April 1 of the current rate 20 year. Should the cost report not be on file by April 1, the 21 22 Department shall base the rate on the latest cost report filed 23 by each skilled care facility and intermediate care facility, 24 updated to the midpoint of the current rate year. Ιn 25 determining rates for services rendered on and after July 1, 26 1985, fixed time shall not be computed at less than zero. The

Department shall not make any alterations of regulations which would reduce any component of the Medicaid rate to a level below what that component would have been utilizing in the rate effective on July 1, 1984.

5 (2) Shall take into account the actual costs incurred by 6 facilities in providing services for recipients of skilled 7 nursing and intermediate care services under the medical 8 assistance program.

9 (3) Shall take into account the medical and psycho-social10 characteristics and needs of the patients.

(4) Shall take into account the actual costs incurred by facilities in meeting licensing and certification standards imposed and prescribed by the State of Illinois, any of its political subdivisions or municipalities and by the U.S. Department of Health and Human Services pursuant to Title XIX of the Social Security Act.

17 The Department of Healthcare and Family Services shall develop precise standards for payments to reimburse nursing 18 19 facilities for any utilization of appropriate rehabilitative 20 personnel for the provision of rehabilitative services which is authorized by federal regulations, including reimbursement for 21 22 services provided by qualified therapists or qualified 23 and which is in accordance with assistants, accepted professional practices. Reimbursement also may be made for 24 25 utilization of other supportive personnel under appropriate 26 supervision.

HB5924 - 23 - LRB096 17747 KTG 33112 b
1 (Source: P.A. 95-12, eff. 7-2-07; 95-331, eff. 8-21-07; 95-707,
2 eff. 1-11-08; 95-744, eff. 7-18-08; 96-45, eff. 7-15-09;
3 96-339, eff. 7-1-10; revised 10-23-09.)

Section 95. No acceleration or delay. Where this Act makes changes in a statute that is represented in this Act by text that is not yet or no longer in effect (for example, a Section represented by multiple versions), the use of that text does not accelerate or delay the taking effect of (i) the changes made by this Act or (ii) provisions derived from any other Public Act.

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