

96TH GENERAL ASSEMBLY State of Illinois 2009 and 2010 SB1564

Introduced 2/19/2009, by Sen. David Koehler

SYNOPSIS AS INTRODUCED:

20 ILCS 1705/54.5 new 305 ILCS 5/5-5.4

from Ch. 23, par. 5-5.4

Amends the Mental Health and Developmental Disabilities Administrative Act and the Illinois Public Aid Code. Provides that the Department of Human Services shall establish payment rates providing equal pay by July 1, 2016 for direct care workers in all programs serving individuals with developmental disabilities, including but not limited to intermediate care facilities for the developmentally disabled, services provided under the Illinois Home and Community Based Services Medicaid Waivers for adults and children with developmental disabilities, and other programs for individuals with developmental disabilities supported by State funds or by funding under Title XIX of the Social Security Act. Provides that wage rates at specified percentages of the target shall be in effect in years before 2016.

LRB096 09819 KTG 19982 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning government.

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

- 4 Section 5. The Mental Health and Developmental
- 5 Disabilities Administrative Act is amended by adding Section
- 6 54.5 as follows:
- 7 (20 ILCS 1705/54.5 new)
- 8 Sec. 54.5. Wage parity for community service providers
- 9 serving persons with a developmental disability. The
- 10 Department shall establish payment rates providing equal pay
- 11 for direct care workers in all programs serving individuals
- with developmental disabilities pursuant to Section 54 of this
- 13 Act, including but not limited to intermediate care facilities
- 14 for the developmentally disabled, services provided under the
- 15 <u>Illinois Home and Community Based Services Medicaid Waivers for</u>
- 16 adults and children with developmental disabilities, and other
- 17 programs for individuals with developmental disabilities
- supported by State funds or by funding under Title XIX of the
- 19 Social Security Act. Such rates shall include wage rates for
- direct care workers that are no lower than those identified in
- 21 State collective bargaining agreements for the title Mental
- 22 Health Technician I, step 1. These wage rates shall be in
- effect no later than July 1, 2016. Wage rates at 95% of the

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- 1 target shall be in effect no later than July 1, 2015. Wage 2 rates at 90% of the target shall be in effect no later than 3 July 1, 2014. Wage rates at 85% of the target shall be in effect no later than July 1, 2013. Wage rates at 80% of the 4 target shall be in effect no later than July 1, 2012. Wage 5 rates at 75% of the target shall be in effect no later than 6 7 July 1, 2011. Wage rates at 72% of the target shall be in 8 effect no later than July 1, 2010.
- 9 Section 10. The Illinois Public Aid Code is amended by changing Section 5-5.4 as follows:
- 11 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)
- 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:
 - (1) Provide for the determination of a facility's payment for skilled nursing and intermediate care services on a prospective basis. The amount of the payment rate for all nursing facilities certified by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities, Long Term Care for Under Age 22 facilities, Skilled Nursing facilities, or Intermediate Care facilities under the medical assistance program shall be

prospectively established annually on the basis of historical, 1 2 financial, and statistical data reflecting actual costs from 3 prior years, which shall be applied to the current rate year 4 and updated for inflation, except that the capital cost element 5 for newly constructed facilities shall be based upon projected 6 budgets. The annually established payment rate shall take 7 effect on July 1 in 1984 and subsequent years. No rate increase and no update for inflation shall be provided on or after July 8 9 1, 1994 and before July 1, 2009, unless specifically provided for in this Section. The changes made by Public Act 93-841 10 11 extending the duration of the prohibition against a rate 12 increase or update for inflation are effective retroactive to 13 July 1, 2004. Pursuant to Section 54.5 of the Mental Health and Development Disabilities Administrative Act, payments rates 14 for all nursing facilities certified by the Department of 15 16 Public Health under the Nursing Home Care Act as Intermediate 17 Care for the Developmentally Disabled facilities shall provide equal pay for direct care workers. Such rates shall include 18 19 wage rates for direct care workers that are no lower than those 20 identified in State collective bargaining agreements for the title Mental Health Technician I, step 1. These wages rates 21 22 shall be in effect no later than July 1, 2016. Wage rates at 23 95% of the target shall be in effect no later than July 1, 24 2015. Wage rates at 90% of the target shall be in effect no 25 later than July 1, 2014. Wage rates at 85% of the target shall be in effect no later than July 1, 2013. Wage rates at 80% of 26

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the target shall be in effect no later than July 1, 2012. Wage

rates at 75% of the target shall be in effect no later than

July 1, 2011. Wage rates at 72% of the target shall be in

effect no later than July 1, 2010.

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, 1998 shall include an increase of 3%. 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, 1998 shall include an increase of 3% plus \$1.10 per resident-day, as defined by the Department. 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, 2006 shall include an increase of 3%. For facilities licensed by the Department of Public Health under the Nursing Intermediate Care Facilities for the Home Care Act as 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.

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, 1999 shall include an increase of 1.6% plus \$3.00 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, 1999 shall include an increase of 1.6% and, for services provided on or after October 1, 1999, shall be increased by \$4.00 per resident-day, as 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 under the Nursing Home Care Act as skilled nursing facilities or intermediate care facilities, a new payment methodology must be implemented for the nursing component of the rate effective July 1, 2003. The Department of Public Aid (now Healthcare and Family Services) shall develop the new payment methodology

using the Minimum Data Set (MDS) as the instrument to collect information concerning nursing home resident condition necessary to compute the rate. The Department shall develop the new payment methodology to meet the unique needs of Illinois nursing home residents while remaining subject to the appropriations provided by the General Assembly. A transition period from the payment methodology in effect on June 30, 2003 to the payment methodology in effect on July 1, 2003 shall be provided for a period not exceeding 3 years and 184 days after 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 component rate per patient day under the payment methodology in effect on July 1, 2003 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 adjusted.

2 (C) Notwithstanding paragraphs (A) and (B), the
3 nursing component rate per patient day for the facility
4 shall be adjusted subject to appropriations provided by the
5 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 (MDS) methodology shall incorporate the following annual amounts as the additional funds appropriated to the Department specifically to pay for rates based on the MDS nursing component methodology in excess of the funding in effect on December 31, 2006:

- 23 (i) For rates taking effect January 1, 2007, \$60,000,000.
- 25 (ii) For rates taking effect January 1, 2008, \$110,000,000.

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rates taking effect January 1, 2009, 1 (iii) 2 \$194,000,000.

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 support component of the rates taking effect on January 1, 2008 shall be computed using the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005, 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.

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, 2001 shall be computed using the most recent cost reports on file with the Department of Public Aid no later than April 1, 2000, updated for inflation to January 1, 2001. For rates effective July 1, 2001 only, rates shall be the greater of the rate computed for July 1, 2001 or the rate effective on

1 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 implementation of the payment methodologies required under 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.

Notwithstanding any other provision of this Section, for

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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, 2009, the per diem support component of the rates effective on January 1, 2008, computed using the most recent cost reports on file with the Department of Healthcare and Family Services no later than April 1, 2005, updated for inflation to January 1, 2006, shall be increased to the amount that would have been derived using standard Department of Healthcare and Family Services methods, 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 socio-development component rate equal to 6.6% of facility's nursing component rate as of January 1, 2006 shall established and paid effective July 1, 2006. be The socio-development component of the rate shall be increased by a 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 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 component rate as of January 1, 2006, multiplied by a factor of The Illinois Department may by rule adjust these socio-development component rates, but in no case may such 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.

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 the first day of the month that begins at least 45 days after the effective date of this amendatory Act of the 95th General Assembly shall include a statewide increase of 2.5%, 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, effective January 1, 2005, facility rates shall be increased by the difference between (i) a facility's per diem property, liability, and malpractice insurance costs as reported in the cost report filed with the Department of Public Aid and used to establish rates effective July 1, 2001 and (ii) those same costs as reported in the facility's 2002 cost report. These costs shall be passed through to the facility without caps or limitations, except for adjustments required under normal auditing procedures.

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Rates established effective each July 1 shall govern payment for services rendered throughout that fiscal year, except that rates established on July 1, 1996 shall be increased by 6.8% for services provided on or after January 1, 1997. Such rates will be based upon the rates calculated for the year beginning July 1, 1990, and for subsequent years thereafter until June 30, 2001 shall be based on the facility cost reports for the facility fiscal year ending at any point in time during the previous calendar year, updated to the midpoint of the rate year. The cost report shall be on file 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 Department shall base the rate on the latest cost report filed by each skilled care facility and intermediate care facility, updated to the midpoint of the current rate year. determining rates for services rendered on and after July 1, 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.

- (2) Shall take into account the actual costs incurred by facilities in providing services for recipients of skilled nursing and intermediate care services under the medical assistance program.
 - (3) Shall take into account the medical and psycho-social

- 1 characteristics and needs of the patients.
- 2 (4) Shall take into account the actual costs incurred by
- 3 facilities in meeting licensing and certification standards
- 4 imposed and prescribed by the State of Illinois, any of its
- 5 political subdivisions or municipalities and by the U.S.
- 6 Department of Health and Human Services pursuant to Title XIX
- 7 of the Social Security Act.
- 8 The Department of Healthcare and Family Services shall
- 9 develop precise standards for payments to reimburse nursing
- 10 facilities for any utilization of appropriate rehabilitative
- 11 personnel for the provision of rehabilitative services which is
- 12 authorized by federal regulations, including reimbursement for
- 13 services provided by qualified therapists or qualified
- 14 assistants, and which is in accordance with accepted
- 15 professional practices. Reimbursement also may be made for
- 16 utilization of other supportive personnel under appropriate
- 17 supervision.
- 18 (Source: P.A. 94-48, eff. 7-1-05; 94-85, eff. 6-28-05; 94-697,
- 19 eff. 11-21-05; 94-838, eff. 6-6-06; 94-964, eff. 6-28-06;
- 20 95-12, eff. 7-2-07; 95-331, eff. 8-21-07; 95-707, eff. 1-11-08;
- 21 95-744, eff. 7-18-08.)