

**SB3006**



**96TH GENERAL ASSEMBLY**

**State of Illinois**

**2009 and 2010**

**SB3006**

Introduced 2/4/2010, by Sen. James F. Clayborne, Jr.

**SYNOPSIS AS INTRODUCED:**

305 ILCS 5/5-5.4

from Ch. 23, par. 5-5.4

Amends the Illinois Public Aid Code. Makes a technical change in a Section concerning standards of payment of skilled nursing and intermediate care services.

LRB096 19183 KTG 34574 b

**A BILL FOR**

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 ~~The~~ Department of Healthcare and  
10 Family Services shall develop standards of payment of skilled  
11 nursing and intermediate care services in facilities providing  
12 such 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  
15 prospective basis. The amount of the payment rate for all  
16 nursing facilities certified by the Department of Public Health  
17 under the Nursing Home Care Act as Intermediate Care for the  
18 Developmentally Disabled facilities, Long Term Care for Under  
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  
23 prior years, which shall be applied to the current rate year

1 and updated for inflation, except that the capital cost element  
2 for newly constructed facilities shall be based upon projected  
3 budgets. The annually established payment rate shall take  
4 effect on July 1 in 1984 and subsequent years. No rate increase  
5 and no update for inflation shall be provided on or after July  
6 1, 1994 and before July 1, 2010, unless specifically provided  
7 for in this Section. The changes made by Public Act 93-841  
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  
13 Developmentally Disabled facilities or Long Term Care for Under  
14 Age 22 facilities, the rates taking effect on July 1, 1998  
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,  
18 the rates taking effect on July 1, 1998 shall include an  
19 increase of 3% plus \$1.10 per resident-day, as defined by the  
20 Department. For facilities licensed by the Department of Public  
21 Health under the Nursing Home 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 January  
24 1, 2006 shall include an increase of 3%. For facilities  
25 licensed by the Department of Public Health under the Nursing  
26 Home Care Act as Intermediate Care Facilities for the

1 Developmentally Disabled or Long Term Care for Under Age 22  
2 facilities, the rates taking effect on January 1, 2009 shall  
3 include an increase sufficient to provide a \$0.50 per hour wage  
4 increase for non-executive staff.

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

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

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

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

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

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

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

18 Notwithstanding any other provision of this Section, for  
19 facilities licensed by the Department of Public Health under  
20 the Nursing Home Care Act as skilled nursing facilities or  
21 intermediate care facilities, the numerator of the ratio used  
22 by the Department of Healthcare and Family Services to compute  
23 the rate payable under this Section using the Minimum Data Set  
24 (MDS) methodology shall incorporate the following annual  
25 amounts as the additional funds appropriated to the Department  
26 specifically to pay for rates based on the MDS nursing

1 component methodology in excess of the funding in effect on  
2 December 31, 2006:

3 (i) For rates taking effect January 1, 2007,  
4 \$60,000,000.

5 (ii) For rates taking effect January 1, 2008,  
6 \$110,000,000.

7 (iii) For rates taking effect January 1, 2009,  
8 \$194,000,000.

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, the support component of the  
13 rates taking effect on January 1, 2008 shall be computed using  
14 the most recent cost reports on file with the Department of  
15 Healthcare and Family Services no later than April 1, 2005,  
16 updated for inflation to January 1, 2006.

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

25 For facilities licensed by the Department of Public Health  
26 under the Nursing Home Care Act as skilled nursing facilities

1 or intermediate care facilities, the rates taking effect on  
2 July 1, 2001 shall be computed using the most recent cost  
3 reports on file with the Department of Public Aid no later than  
4 April 1, 2000, updated for inflation to January 1, 2001. For  
5 rates effective July 1, 2001 only, rates shall be the greater  
6 of the rate computed for July 1, 2001 or the rate effective on  
7 June 30, 2001.

8 Notwithstanding any other provision of this Section, for  
9 facilities licensed by the Department of Public Health under  
10 the Nursing Home Care Act as skilled nursing facilities or  
11 intermediate care facilities, the Illinois Department shall  
12 determine by rule the rates taking effect on July 1, 2002,  
13 which shall be 5.9% less than the rates in effect on June 30,  
14 2002.

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  
18 intermediate care facilities, if the payment methodologies  
19 required under Section 5A-12 and the waiver granted under 42  
20 CFR 433.68 are approved by the United States Centers for  
21 Medicare and Medicaid Services, the rates taking effect on July  
22 1, 2004 shall be 3.0% greater than the rates in effect on June  
23 30, 2004. These rates shall take effect only upon approval and  
24 implementation of the payment methodologies required under  
25 Section 5A-12.

26 Notwithstanding any other provisions of this Section, for



1 facilities licensed by the Department of Public Health under  
2 the Nursing Home Care Act as skilled nursing facilities or  
3 intermediate care facilities, the rates taking effect on  
4 January 1, 2005 shall be 3% more than the rates in effect on  
5 December 31, 2004.

6 Notwithstanding any other provision 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, effective January 1, 2009, the  
10 per diem support component of the rates effective on January 1,  
11 2008, computed using the most recent cost reports on file with  
12 the Department of Healthcare and Family Services no later than  
13 April 1, 2005, updated for inflation to January 1, 2006, shall  
14 be increased to the amount that would have been derived using  
15 standard Department of Healthcare and Family Services methods,  
16 procedures, and inflators.

17 Notwithstanding any other provisions of this Section, for  
18 facilities licensed by the Department of Public Health under  
19 the Nursing Home Care Act as intermediate care facilities that  
20 are federally defined as Institutions for Mental Disease, a  
21 socio-development component rate equal to 6.6% of the  
22 facility's nursing component rate as of January 1, 2006 shall  
23 be established and paid effective July 1, 2006. The  
24 socio-development component of the rate shall be increased by a  
25 factor of 2.53 on the first day of the month that begins at  
26 least 45 days after January 11, 2008 (the effective date of

1 Public Act 95-707). As of August 1, 2008, the socio-development  
2 component rate shall be equal to 6.6% of the facility's nursing  
3 component rate as of January 1, 2006, multiplied by a factor of  
4 3.53. The Illinois Department may by rule adjust these  
5 socio-development component rates, but in no case may such  
6 rates be diminished.

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

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

21 Notwithstanding any other provision of this Section, for  
22 facilities licensed by the Department of Public Health under  
23 the Nursing Home Care Act as skilled nursing facilities or  
24 intermediate care facilities, effective January 1, 2005,  
25 facility rates shall be increased by the difference between (i)  
26 a facility's per diem property, liability, and malpractice

1 insurance costs as reported in the cost report filed with the  
2 Department of Public Aid and used to establish rates effective  
3 July 1, 2001 and (ii) those same costs as reported in the  
4 facility's 2002 cost report. These costs shall be passed  
5 through to the facility without caps or limitations, except for  
6 adjustments required under normal auditing procedures.

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

1 effective on July 1, 1984.

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

6 (3) Shall take into account the medical and psycho-social  
7 characteristics and needs of the patients.

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

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

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

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

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

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

1 are effective retroactive to July 1, 2004.

2 For facilities licensed by the Department of Public Health  
3 under the Nursing Home Care Act as Intermediate Care for the  
4 Developmentally Disabled facilities or Long Term Care for Under  
5 Age 22 facilities, the rates taking effect on July 1, 1998  
6 shall include an increase of 3%. For facilities licensed by the  
7 Department of Public Health under the Nursing Home Care Act as  
8 Skilled Nursing facilities or Intermediate Care facilities,  
9 the rates taking effect on July 1, 1998 shall include an  
10 increase of 3% plus \$1.10 per resident-day, as defined by the  
11 Department. For facilities licensed by the Department of Public  
12 Health under the Nursing Home Care Act as Intermediate Care  
13 Facilities for the Developmentally Disabled or Long Term Care  
14 for Under Age 22 facilities, the rates taking effect on January  
15 1, 2006 shall include an increase of 3%. For facilities  
16 licensed by the Department of Public Health under the Nursing  
17 Home Care Act as Intermediate Care Facilities for the  
18 Developmentally Disabled or Long Term Care for Under Age 22  
19 facilities, the rates taking effect on January 1, 2009 shall  
20 include an increase sufficient to provide a \$0.50 per hour wage  
21 increase for non-executive staff.

22 For facilities licensed by the Department of Public Health  
23 under the Nursing Home Care Act as Intermediate Care for the  
24 Developmentally Disabled facilities or Long Term Care for Under  
25 Age 22 facilities, the rates taking effect on July 1, 1999  
26 shall include an increase of 1.6% plus \$3.00 per resident-day,

1 as defined by the Department. For facilities licensed by the  
2 Department of Public Health under the Nursing Home Care Act as  
3 Skilled Nursing facilities or Intermediate Care facilities,  
4 the rates taking effect on July 1, 1999 shall include an  
5 increase of 1.6% and, for services provided on or after October  
6 1, 1999, shall be increased by \$4.00 per resident-day, as  
7 defined by the Department.

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

18 For facilities licensed by the Department of Public Health  
19 under the Nursing Home Care Act as skilled nursing facilities  
20 or intermediate care facilities, a new payment methodology must  
21 be implemented for the nursing component of the rate effective  
22 July 1, 2003. The Department of Public Aid (now Healthcare and  
23 Family Services) shall develop the new payment methodology  
24 using the Minimum Data Set (MDS) as the instrument to collect  
25 information concerning nursing home resident condition  
26 necessary to compute the rate. The Department shall develop the

1 new payment methodology to meet the unique needs of Illinois  
2 nursing home residents while remaining subject to the  
3 appropriations provided by the General Assembly. A transition  
4 period from the payment methodology in effect on June 30, 2003  
5 to the payment methodology in effect on July 1, 2003 shall be  
6 provided for a period not exceeding 3 years and 184 days after  
7 implementation of the new payment methodology as follows:

8 (A) For a facility that would receive a lower nursing  
9 component rate per patient day under the new system than  
10 the facility received effective on the date immediately  
11 preceding the date that the Department implements the new  
12 payment methodology, the nursing component rate per  
13 patient day for the facility shall be held at the level in  
14 effect on the date immediately preceding the date that the  
15 Department implements the new payment methodology until a  
16 higher nursing component rate of reimbursement is achieved  
17 by that facility.

18 (B) For a facility that would receive a higher nursing  
19 component rate per patient day under the payment  
20 methodology in effect on July 1, 2003 than the facility  
21 received effective on the date immediately preceding the  
22 date that the Department implements the new payment  
23 methodology, the nursing component rate per patient day for  
24 the facility shall be adjusted.

25 (C) Notwithstanding paragraphs (A) and (B), the  
26 nursing component rate per patient day for the facility



1 shall be adjusted subject to appropriations provided by the  
2 General Assembly.

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

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, the numerator of the ratio used  
13 by the Department of Healthcare and Family Services to compute  
14 the rate payable under this Section using the Minimum Data Set  
15 (MDS) methodology shall incorporate the following annual  
16 amounts as the additional funds appropriated to the Department  
17 specifically to pay for rates based on the MDS nursing  
18 component methodology in excess of the funding in effect on  
19 December 31, 2006:

20 (i) For rates taking effect January 1, 2007,  
21 \$60,000,000.

22 (ii) For rates taking effect January 1, 2008,  
23 \$110,000,000.

24 (iii) For rates taking effect January 1, 2009,  
25 \$194,000,000.

26 Notwithstanding any other provision of this Section, for

1 facilities licensed by the Department of Public Health under  
2 the Nursing Home Care Act as skilled nursing facilities or  
3 intermediate care facilities, the support component of the  
4 rates taking effect on January 1, 2008 shall be computed using  
5 the most recent cost reports on file with the Department of  
6 Healthcare and Family Services no later than April 1, 2005,  
7 updated for inflation to January 1, 2006.

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 April 1, 2002  
12 shall include a statewide increase of 2.0%, as defined by the  
13 Department. This increase terminates on July 1, 2002; beginning  
14 July 1, 2002 these rates are reduced to the level of the rates  
15 in effect on March 31, 2002, as defined by the Department.

16 For facilities licensed by the Department of Public Health  
17 under the Nursing Home Care Act as skilled nursing facilities  
18 or intermediate care facilities, the rates taking effect on  
19 July 1, 2001 shall be computed using the most recent cost  
20 reports on file with the Department of Public Aid no later than  
21 April 1, 2000, updated for inflation to January 1, 2001. For  
22 rates effective July 1, 2001 only, rates shall be the greater  
23 of the rate computed for July 1, 2001 or the rate effective on  
24 June 30, 2001.

25 Notwithstanding any other provision of this Section, for  
26 facilities licensed by the Department of Public Health under

1 the Nursing Home Care Act as skilled nursing facilities or  
2 intermediate care facilities, the Illinois Department shall  
3 determine by rule the rates taking effect on July 1, 2002,  
4 which shall be 5.9% less than the rates in effect on June 30,  
5 2002.

6 Notwithstanding any other provision 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, if the payment methodologies  
10 required under Section 5A-12 and the waiver granted under 42  
11 CFR 433.68 are approved by the United States Centers for  
12 Medicare and Medicaid Services, the rates taking effect on July  
13 1, 2004 shall be 3.0% greater than the rates in effect on June  
14 30, 2004. These rates shall take effect only upon approval and  
15 implementation of the payment methodologies required under  
16 Section 5A-12.

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

23 Notwithstanding any other provision of this Section, for  
24 facilities licensed by the Department of Public Health under  
25 the Nursing Home Care Act as skilled nursing facilities or  
26 intermediate care facilities, effective January 1, 2009, the

1 per diem support component of the rates effective on January 1,  
2 2008, computed using the most recent cost reports on file with  
3 the Department of Healthcare and Family Services no later than  
4 April 1, 2005, updated for inflation to January 1, 2006, shall  
5 be increased to the amount that would have been derived using  
6 standard Department of Healthcare and Family Services methods,  
7 procedures, and inflators.

8 Notwithstanding any other provisions of this Section, for  
9 facilities licensed by the Department of Public Health under  
10 the Nursing Home Care Act as intermediate care facilities that  
11 are federally defined as Institutions for Mental Disease, a  
12 socio-development component rate equal to 6.6% of the  
13 facility's nursing component rate as of January 1, 2006 shall  
14 be established and paid effective July 1, 2006. The  
15 socio-development component of the rate shall be increased by a  
16 factor of 2.53 on the first day of the month that begins at  
17 least 45 days after January 11, 2008 (the effective date of  
18 Public Act 95-707). As of August 1, 2008, the socio-development  
19 component rate shall be equal to 6.6% of the facility's nursing  
20 component rate as of January 1, 2006, multiplied by a factor of  
21 3.53. The Illinois Department may by rule adjust these  
22 socio-development component rates, but in no case may such  
23 rates be diminished.

24 For facilities licensed by the Department of Public Health  
25 under the Nursing Home Care Act as Intermediate Care for the  
26 Developmentally Disabled facilities or as long-term care

1 facilities for residents under 22 years of age, the rates  
2 taking effect on July 1, 2003 shall include a statewide  
3 increase of 4%, as defined by the Department.

4 For facilities licensed by the Department of Public Health  
5 under the Nursing Home Care Act as Intermediate Care for the  
6 Developmentally Disabled facilities or Long Term Care for Under  
7 Age 22 facilities, the rates taking effect on the first day of  
8 the month that begins at least 45 days after the effective date  
9 of this amendatory Act of the 95th General Assembly shall  
10 include a statewide increase of 2.5%, as defined by the  
11 Department.

12 Notwithstanding any other provision of this Section, for  
13 facilities licensed by the Department of Public Health under  
14 the Nursing Home Care Act as skilled nursing facilities or  
15 intermediate care facilities, effective January 1, 2005,  
16 facility rates shall be increased by the difference between (i)  
17 a facility's per diem property, liability, and malpractice  
18 insurance costs as reported in the cost report filed with the  
19 Department of Public Aid and used to establish rates effective  
20 July 1, 2001 and (ii) those same costs as reported in the  
21 facility's 2002 cost report. These costs shall be passed  
22 through to the facility without caps or limitations, except for  
23 adjustments required under normal auditing procedures.

24 Rates established effective each July 1 shall govern  
25 payment for services rendered throughout that fiscal year,  
26 except that rates established on July 1, 1996 shall be

1 increased by 6.8% for services provided on or after January 1,  
2 1997. Such rates will be based upon the rates calculated for  
3 the year beginning July 1, 1990, and for subsequent years  
4 thereafter until June 30, 2001 shall be based on the facility  
5 cost reports for the facility fiscal year ending at any point  
6 in time during the previous calendar year, updated to the  
7 midpoint of the rate year. The cost report shall be on file  
8 with the Department no later than April 1 of the current rate  
9 year. Should the cost report not be on file by April 1, the  
10 Department shall base the rate on the latest cost report filed  
11 by each skilled care facility and intermediate care facility,  
12 updated to the midpoint of the current rate year. In  
13 determining rates for services rendered on and after July 1,  
14 1985, fixed time shall not be computed at less than zero. The  
15 Department shall not make any alterations of regulations which  
16 would reduce any component of the Medicaid rate to a level  
17 below what that component would have been utilizing in the rate  
18 effective on July 1, 1984.

19 (2) Shall take into account the actual costs incurred by  
20 facilities in providing services for recipients of skilled  
21 nursing and intermediate care services under the medical  
22 assistance program.

23 (3) Shall take into account the medical and psycho-social  
24 characteristics and needs of the patients.

25 (4) Shall take into account the actual costs incurred by  
26 facilities in meeting licensing and certification standards

1 imposed and prescribed by the State of Illinois, any of its  
2 political subdivisions or municipalities and by the U.S.  
3 Department of Health and Human Services pursuant to Title XIX  
4 of the Social Security Act.

5 The Department of Healthcare and Family Services shall  
6 develop precise standards for payments to reimburse nursing  
7 facilities for any utilization of appropriate rehabilitative  
8 personnel for the provision of rehabilitative services which is  
9 authorized by federal regulations, including reimbursement for  
10 services provided by qualified therapists or qualified  
11 assistants, and which is in accordance with accepted  
12 professional practices. Reimbursement also may be made for  
13 utilization of other supportive personnel under appropriate  
14 supervision.

15 (Source: P.A. 95-12, eff. 7-2-07; 95-331, eff. 8-21-07; 95-707,  
16 eff. 1-11-08; 95-744, eff. 7-18-08; 96-45, eff. 7-15-09;  
17 96-339, eff. 7-1-10; revised 10-23-09.)

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