



Sen. David Koehler

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LRB096 17742 KTG 37566 a

1 AMENDMENT TO SENATE BILL 3291

2 AMENDMENT NO. _____. Amend Senate Bill 3291 by replacing
3 everything after the enacting clause with the following:

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. Community care for the developmentally disabled
9 quality workforce initiative.

10 (a) Legislative intent. Individuals with developmental
11 disabilities who live in community-based settings rely on
12 direct support staff for a variety of supports and services
13 essential to the ability to reach their full potential. A
14 stable, well-trained direct support workforce is critical to
15 the well-being of these individuals. State and national studies
16 have documented high rates of turnover among direct support

1 workers and confirmed that improvements in wages can help
2 reduce turnover and develop a more stable and committed
3 workforce. This Section would increase the wages and benefits
4 for direct care workers supporting individuals with
5 developmental disabilities and provide accountability by
6 ensuring that additional resources go directly to these
7 workers.

8 (b) Reimbursement. In order to attract and retain a stable,
9 qualified, and healthy workforce, beginning July 1, 2010, the
10 Department of Human Services may reimburse an individual
11 community service provider serving individuals with
12 developmental disabilities for spending incurred to provide
13 improved wages and benefits to its employees serving
14 developmentally disabled individuals. Reimbursement shall be
15 based upon the provider's most recent cost report. Subject to
16 available appropriations, this reimbursement shall be made
17 according to the following criteria:

18 (1) The Department shall reimburse the provider to
19 compensate for spending on improved wages and benefits for
20 its eligible employees. Eligible employees include
21 employees engaged in direct care work.

22 (2) In order to qualify for reimbursement under this
23 Section, a provider must submit to the Department, before
24 January 1 of each year, documentation of a written, legally
25 binding commitment to increase spending for the purpose of
26 providing improved wages and benefits to its eligible

1 employees during the next year. The commitment must be
2 binding as to both existing and future staff. The
3 commitment must include a method of enforcing the
4 commitment that is available to the employees or their
5 representative and is expeditious, uses a neutral
6 decision-maker, and is economical for the employees. The
7 Department must also receive documentation of the
8 provider's provision of written notice of the commitment
9 and the availability of the enforcement mechanism to the
10 employees or their representative.

11 (3) Reimbursement shall be based on the amount of
12 increased spending to be incurred by the provider for
13 improving wages and benefits that exceeds the spending
14 reported in the cost report currently used by the
15 Department. Reimbursement shall be calculated as follows:
16 the per diem equivalent of the quarterly difference between
17 the cost to provide improved wages and benefits for covered
18 eligible employees as identified in the legally binding
19 commitment and the previous period cost of wages and
20 benefits as reported in the cost report currently used by
21 the Department, subject to the limitations identified in
22 paragraph (2) of this subsection. In no event shall the per
23 diem increase be in excess of \$7.00 for any 12 month
24 period, or in excess of \$8.00 for any 12 month period for
25 community-integrated living arrangements with 4 beds or
26 less. For purposes of this Section, "community-integrated

1 living arrangement" has the same meaning ascribed to that
2 term in the Community-Integrated Living Arrangements
3 Licensure and Certification Act.

4 (4) Any community service provider is eligible to
5 receive reimbursement under this Section. A provider's
6 eligibility to receive reimbursement shall continue as
7 long as the provider maintains eligibility under paragraph
8 (2) of this subsection and the reimbursement program
9 continues to exist.

10 (c) Audit. Reimbursement under this Section is subject to
11 audit by the Department and shall be reduced or eliminated in
12 the case of any provider that does not honor its commitment to
13 increase spending to improve the wages and benefits of its
14 employees or that decreases such spending.

15 Section 10. The Illinois Public Aid Code is amended by
16 adding Section 5-5.4f as follows:

17 (305 ILCS 5/5-5.4f new)

18 Sec. 5-5.4f. Intermediate care facilities for the
19 developmentally disabled quality workforce initiative.

20 (a) Legislative intent. Individuals with developmental
21 disabilities who live in community-based settings rely on
22 direct support staff for a variety of supports and services
23 essential to the ability to reach their full potential. A
24 stable, well-trained direct support workforce is critical to

1 the well-being of these individuals. State and national studies
2 have documented high rates of turnover among direct support
3 workers and confirmed that improvements in wages can help
4 reduce turnover and develop a more stable and committed
5 workforce. This Section would increase the wages and benefits
6 for direct care workers supporting individuals with
7 developmental disabilities and provide accountability by
8 ensuring that additional resources go directly to these
9 workers.

10 (b) Reimbursement. Notwithstanding any provision of
11 Section 5-5.4, in order to attract and retain a stable,
12 qualified, and healthy workforce, beginning July 1, 2010, the
13 Department of Healthcare and Family Services may reimburse an
14 individual intermediate care facility for the developmentally
15 disabled for spending incurred to provide improved wages and
16 benefits to its employees serving the individuals residing in
17 the facility. Reimbursement shall be based upon patient days
18 reported in the facility's most recent cost report. Subject to
19 available appropriations, this reimbursement shall be made
20 according to the following criteria:

21 (1) The Department shall reimburse the facility to
22 compensate for spending on improved wages and benefits for
23 its eligible employees. Eligible employees include
24 employees engaged in direct care work.

25 (2) In order to qualify for reimbursement under this
26 Section, a facility must submit to the Department, before

1 January 1 of each year, documentation of a written, legally
2 binding commitment to increase spending for the purpose of
3 providing improved wages and benefits to its eligible
4 employees during the next year. The commitment must be
5 binding as to both existing and future staff. The
6 commitment must include a method of enforcing the
7 commitment that is available to the employees or their
8 representative and is expeditious, uses a neutral
9 decision-maker, and is economical for the employees. The
10 Department must also receive documentation of the
11 facility's provision of written notice of the commitment
12 and the availability of the enforcement mechanism to the
13 employees or their representative.

14 (3) Reimbursement shall be based on the amount of
15 increased spending to be incurred by the facility for
16 improving wages and benefits that exceeds the spending
17 reported in the cost report currently used by the
18 Department. Reimbursement shall be calculated as follows:
19 the per diem equivalent of the quarterly difference between
20 the cost to provide improved wages and benefits for covered
21 eligible employees as identified in the legally binding
22 commitment and the previous period cost of wages and
23 benefits as reported in the cost report currently used by
24 the Department, subject to the limitations identified in
25 paragraph (2) of this subsection. In no event shall the per
26 diem increase be in excess of \$5.00 for any 12 month period

1 for an intermediate care facility for the developmentally
2 disabled with more than 16 beds, or in excess of \$6.00 for
3 any 12 month period for an intermediate care facility for
4 the developmentally disabled with 16 beds or less.

5 (4) Any intermediate care facility for the
6 developmentally disabled is eligible to receive
7 reimbursement under this Section. A facility's eligibility
8 to receive reimbursement shall continue as long as the
9 facility maintains eligibility under paragraph (2) of this
10 subsection and the reimbursement program continues to
11 exist.

12 (c) Audit. Reimbursement under this Section is subject to
13 audit by the Department and shall be reduced or eliminated in
14 the case of any facility that does not honor its commitment to
15 increase spending to improve the wages and benefits of its
16 employees or that decreases such spending.

17 Section 99. Effective date. This Act takes effect July 1,
18 2010."