

July 28, 2016

To the Honorable Members of
The Illinois House of Representatives,
99th General Assembly:

Today I veto House Bill 4351 from the 99th General Assembly, which would amend the Illinois Act on Aging to restrict the State's flexibility in how we assess and serve Illinois's elderly and physically disabled residents.

This bill is very similar to House Bill 2482, passed by the General Assembly last year, and which I returned with an amendatory veto for many of the same concerns I raise today. Although well intentioned, this bill would lead to serious unintended consequences.

First, this bill would lock into statute that an individual with a particular threshold score on the Determination of Need (DON) assessment tool would be eligible for both institutional and home and community-based long term care services. Instead, an individual with the threshold score should be entitled to institutional or home and community-based care. Many members of the General Assembly have long worked to transition the state from a reliance on institutional-based care to a focus on community care options that improve patient quality and cost efficiency. However, House Bill 4351 inhibits this transformation in the way the State delivers services for the elderly and disabled.

Second, to the extent that a motivating factor behind this legislation is to preclude a raise in the minimum DON score used to determine eligibility—as originally contemplated under the SMART Act (Public Act 97-0689)—I have no intention of raising the DON score. In light of this commitment, there can be no good reason to unnecessarily restrict the State's ability to move from institutional-based care to community-based care through this legislation.

Finally, this bill would inhibit the Illinois Department on Aging from creating a new program, the Community Reinvestment Program (CRP). This program is designed to provide a multitude of flexible services for non-Medicaid individuals currently being served under the Community Care Program (CCP), and it furthers the State's commitment to serving individuals in their own home and community rather than in nursing homes. CRP is also projected to produce savings of nearly \$200 million during the next fiscal year. By precluding the launch of CRP, this bill would prevent the State from managing ever-rising costs and jeopardize our ability to ensure that essential community services remain available for the approximately 44,000 non-Medicaid persons now served by CCP.

Therefore, pursuant to Section 9(b) of Article IV of the Illinois Constitution of 1970, I hereby return House Bill 4351, entitled "AN ACT concerning public aid", with the foregoing objections, vetoed in its entirety.

Sincerely,

Bruce Rauner
GOVERNOR