92_SB1978 LRB9214473DJmb

- 1 AN ACT in relation to 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 adding Section 5-5.04 as follows:
- 6 (305 ILCS 5/5-5.04 new)
- 7 <u>Sec. 5-5.04. Medicaid Hospital Payment Task Force.</u>
- 8 (a) The General Assembly finds:
- 9 <u>(1) Through the Medicaid program, the Illinois</u>
- 10 <u>Department of Public Aid insures approximately 1,500,000</u>
- 11 <u>people, or about one out of every 8 Illinois residents.</u>
- 12 (2) The Illinois Department of Public Aid pays for
- 2 out of every 5 births in this State.
- 14 (3) The average Illinois hospital receives 12% of
- its patient revenue from Medicaid, with some hospitals
- far more dependent on the Medicaid program.
- 17 <u>(4) Hospitals are required by State and federal law</u>
- 18 <u>to examine and stabilize or appropriately transfer all</u>
- 19 <u>persons who come to the emergency room, regardless of</u>
- 20 <u>their ability to pay.</u>
- 21 (5) A growing number of Illinois residents do not
- 22 <u>have health insurance and do not qualify for Medicaid,</u>
- 23 <u>causing hospitals to provide an increasing amount of care</u>
- 24 <u>for which they are not paid.</u>
- 25 <u>(6) The base payments for inpatient hospital</u>
- services have effectively been frozen since 1992.
- 27 (7) Illinois Medicaid payments to hospitals cover,
- on average, far less than the actual cost of providing
- 29 <u>care.</u>
- 30 (8) More than 70% of Illinois hospitals lose money
- on patient care, and 67% have negative overall margins.

(9) Illinois hospitals are significant contributors
to the Illinois economy and employ over 200,000 people.
(10) Hospital Medicaid payments were reduced by
approximately \$100,000,000 during State Fiscal Year 2002
in response to declining State revenues, placing greater
financial stress on Illinois hospitals.
(11) A Medicaid program that pays reasonably for
services will promote and enhance a strong health care
system, which will improve access to quality health care
for all the people of Illinois.
(b) There is established within the Illinois Department
of Public Aid a Medicaid Hospital Payment Task Force (the
"Task Force"). The Task Force shall have the following
members:
(1) The Director of Public Aid, ex officio, or his
or her designee.
(2) The Director of Public Health, ex officio, or
his or her designee.
(3) Four members of the General Assembly, appointed
one each by the President of the Senate, the Minority
Leader of the Senate, the Speaker of the House of
Representatives, and the Minority Leader of the House of
Representatives. The members appointed by the President
of the Senate and the Speaker of the House of
Representatives shall serve as co-chairs of the Task
Force.
(4) Seven members appointed by the Director of
Public Aid as follows: 3 members recommended by the
Illinois Hospital Association; one member recommended by
the Illinois Catholic Health Association; one member
recommended by the Illinois Rural Health Association; one
member recommended by the Illinois State Chamber of
Commerce; and one member recommended by an advocacy
organization representing Medicaid recipients.

1	(c) The Illinois Department of Public Aid shall provide
2	technical and staff support to the Task Force.
3	(d) The Task Force shall conduct a comprehensive study
4	of the Medicaid program to ascertain the adequacy of rates
5	for inpatient and outpatient hospital care to ensure the
6	continued availability of hospital care in this State.
7	(e) The Task Force shall report its findings and
8	recommendations to the Governor and the General Assembly on
9	or before January 1, 2003. The Task Force's report shall
10	include, but need not be limited to, an evaluation of the
11	adequacy of Medicaid hospital payment rates by examining the
12	<u>following:</u>
13	(1) Payment-to-cost comparisons for Medicaid
14	inpatient and outpatient hospital services.
15	(2) The impact of Medicaid hospital payments on
16	hospital patient care margins.
17	(3) Comparison of Illinois Medicaid hospital
18	payments to Medicaid hospital payments in other states.
19	(4) The impact of Medicaid hospital payment rates
20	on access to health care for Illinois residents.
21	(5) The impact of Medicaid hospital payment rates
22	on the quality of health care available to Illinois
23	residents.
24	(6) The impact of Medicaid hospital payment rates
25	on the cost of health care for Illinois residents.
26	(7) Recommendations for changes in the Medicaid
27	payment system for hospitals.
28	(f) The Task Force shall retain independent experts,
29	with experience in health care finance and economics, to
30	assist it in conducting its study and preparing its report.
31	Section 99. Effective date. This Act takes effect upon
32	becoming law.