

AN ACT concerning State government.

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

Section 1. Short title. This Act may be cited as the Illinois Family Case Management Act.

Section 5. Legislative findings and purpose. The General Assembly finds as follows:

(1) The statewide rate of infant mortality continues to remain at an unacceptable level in regard to the national average.

(2) Within the State of Illinois, certain areas and populations continue to experience rates of infant mortality far greater than either the statewide or national averages. Prevention activities need to be statewide for maximum benefit.

(3) Family case management services are proven to be effective in improving the health of women and infants and lowering the incidence of infant morbidity and mortality, particularly those individuals linked to the Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

(4) Family case management improves the health and development of children and families by providing the earliest identification of their needs and promoting linkages to address those needs.

(5) Data demonstrates significantly lower Medicaid expenditures for pregnant and postpartum women and children who have been enrolled in family case management and WIC services than for Medicaid-eligible persons not receiving case management services.

Therefore, as a critical component in delivering comprehensive maternal and child health services in Illinois,

it is the purpose of this Act to provide for the establishment and recognition of a program of family case management to ensure and provide statewide wrap-around services targeted toward reducing the incidence of infant mortality, very low birthweight infants, and low birthweight infants within the State.

Section 10. Definitions. In this Act:

"Department" means the Illinois Department of Human Services.

"Eligible participant" means: (i) subject to available appropriations, any pregnant woman or child through the age of one year enrolled in the Medicaid program on the effective date of this Act or whose income is up to 200% of the federal poverty level; and (ii) subject to additional appropriations, any child through the age of 4 years enrolled in Medicaid or whose income is up to 200% of the federal poverty level.

"Family Case Management program" or "program" means the program established under Section 15 of this Act.

"Infant mortality rate" means the number of infant deaths per 1,000 live births as reported on a calendar year basis by the federal Department of Health and Human Services.

"Secretary" means the Secretary of Human Services.

"Targeted Intensive Case Management" means services provided to any program-eligible pregnant woman or infant through the age of one, where an assessment has been performed that deems the participant at greater risk for infant mortality or morbidity.

Section 15. Family Case Management Program. The Department shall establish and administer a family case management program. The purposes of the program shall be to reduce the incidence of infant mortality, very low birthweight infants, and low birthweight infants and to assist low-income families to obtain available health and human services needed for healthy growth and development, including but not limited to

prenatal care, early periodic screening, diagnosis, and treatment (EPSDT) services, immunizations, lead screenings, nutritional support, and other specialized services for families with additional challenges and needs. Under the program, case management shall involve individualized assessment of needs, planning of services, referral, monitoring, and advocacy to assist a client in gaining access to appropriate services. Under the program, case management shall be an active and collaborative process involving a qualified case manager, the client, the client's family, and service providers in the community. Priority shall be given to ensure that Targeted Intensive Case Management, as defined in this Act, is available to each qualified participant as defined within the Department's rules and program standards.

Section 20. Maternal and Child Health Advisory Board.

(a) The Maternal and Child Health Advisory Board ("the Board") is created within the Department to advise the Department on the implementation of this Act, including assessments and advice regarding rate structure, and other activities related to maternal and child health and infant mortality reduction programs in the State of Illinois. The Board shall consist of the Secretary of Human Services (or his or her designee), who shall serve as chairman, and one additional representative of the Department of Human Services designated by the Secretary who has direct responsibility with the family case management program; one representative each from the Departments of Children and Family Services, Public Health, and Public Aid; and 4 members of the Illinois General Assembly, one each appointed by the President and Minority Leader of the Senate and the Speaker and Minority Leader of the House of Representatives. In addition, the Governor shall appoint 20 additional members of the Board. Of the members appointed by the Governor, 2 shall be physicians licensed to practice medicine in all of its branches who currently serve patients enrolled in the family case management program, one of

whom shall be an individual with a specialty in obstetrics and gynecology and one of whom shall be an individual with a specialty in pediatric medicine; 5 representatives, one each from certified local health departments within the 5 counties with the largest number of family case management enrollees; 5 representatives from certified local health departments outside the Chicago metropolitan and collar counties areas that shall include a balance of urban and rural health departments; a registered professional nurse serving as a public health nurse within a certified local health department; 5 individuals representing community-based programs currently providing family case management services within Cook County that are not certified local health departments; and 2 consumers who are receiving or have received family case management services.

Legislative members shall serve during their term of office in the Illinois General Assembly. Members appointed by the Governor shall serve a term of 3 years or until their successors are appointed. Any member appointed to fill a vacancy occurring prior to the expiration of the term for which his or her predecessor was appointed shall be appointed for the remainder of such term. Members of the Board shall serve without compensation but shall be reimbursed for necessary expenses incurred in the performance of their duties.

(b) The Board shall advise the Secretary on efforts related to maternal and child health programs, including infant mortality reduction, in the State of Illinois. In addition, the Board shall review and make recommendations to the Department and the Governor in regard to the system for maternal and child health programs, collaboration, and interrelation between and delivery of programs, including but not limited to Family Case Management, Targeted Intensive Prenatal Case Management, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and HealthWorks, and the adequacy of family case management funding and reimbursement levels. In performing its duties, the Board may hold hearings throughout the State and advise and receive advice from any local advisory

bodies created to address the infant mortality problem.

(c) The Board shall report to the General Assembly, on January 1 of each year, a listing of activities taken in regard to this Act, other efforts to address maternal and child health and infant mortality in Illinois, and proposed recommendations regarding funding and reimbursement levels to adequately support the family case management program.

Section 25. Rules. Within one year after the effective date of this Act, the Department shall adopt rules to implement this Act. In developing the rules, the Department shall consult with the Maternal and Child Health Advisory Board.

(410 ILCS 220/Act rep.)

Section 90. The Infant Mortality Reduction Act is repealed.

Section 95. The Prenatal and Newborn Care Act is amended by changing Section 7 as follows:

(410 ILCS 225/7) (from Ch. 111 1/2, par. 7027)

Sec. 7. Advisory board consultation. The Department shall consult with the Maternal and Child Health Advisory Board created under the Illinois Family Case Management Act ~~the Infant Mortality Reduction Advisory Board, established pursuant to the Infant Mortality Reduction Act, as amended,~~ regarding the implementation of this program. In addition, the Board shall advise the Department on the coordination of services provided under this program with services provided under the Illinois Family Case Management Act ~~Infant Mortality Reduction Act~~ and the Problem Pregnancy Health Services and Care Act.

(Source: P.A. 86-860.)

Section 99. Effective date. This Act takes effect upon becoming law.