

HB3899 (Stava-Murray) Nursing Home Medicaid Rate Reform

Many nursing homes are still staffed below the required legal minimum even though the 2011 bed tax was passed to pay for increased staffing. Data has shown that nursing facilities with the **lowest staffing hours** per resident day currently **benefit the most** under the Medicaid rate system and have the **best health care cost coverage**.

The Centers for Medicare & Medicaid Services' new Patient-Driven Payment Model (PDPM) requires Illinois to make changes to its reimbursement system. This federal change creates headaches but also opportunity. Illinois while

making required changes can also add accountability for staffing and quality into the redesigned rate system. Illinois needs a rate system that recognizes acuity and incentivizes better staffing and better quality.

A creation of a new rate system is not only being pressured by the federal government with the change to PDPM, but pressured by the inequities and disparities that were brought to light during the COVID-19 pandemic.

What the Bill does:

- States that the Department of Healthcare and Family Services shall develop a nursing home rate system to achieve improved outcomes and increased accountability with an emphasis on patient-centered care.
- Urges the Department to create a single assessment program that maximizes federal revenue and minimizes losers within the system while simultaneously creating a new methodology.
- Provides that the concerns, inequities, and disparities that were brought to light during the COVID-19 pandemic should be considered in the creation of a new methodology.
- Suggests using Quality star and staffing star ratings as one of the quality measures within the new rate.
- Recommends tying funding, rates, and incentives to demonstrable and sustained performance on key quality reporting metrics.

Vote 'YES' to reform Medicaid rates in order to incentivize quality care and proper staffing within Nursing Homes. Vote 'YES' to HB3899

