

AN ACT in relation to public aid.

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

Section 5. The Illinois Public Aid Code is amended by  
adding Section 5-24 as follows:

(305 ILCS 5/5-24 new)

Sec. 5-24. Disease management programs and services for  
chronic conditions; pilot project.

(a) In this Section, "disease management programs and  
services" means services administered to patients in order to  
improve their overall health and to prevent clinical  
exacerbations and complications, using cost-effective,  
evidence-based practice guidelines and patient  
self-management strategies. Disease management programs and  
services include all of the following:

(1) A population identification process.

(2) Evidence-based or consensus-based clinical  
practice guidelines, risk identification, and matching of  
interventions with clinical need.

(3) Patient self-management and disease education.

(4) Process and outcomes measurement, evaluation,  
management, and reporting.

(b) Subject to appropriations, the Department of Public  
Aid may undertake a pilot project to study patient outcomes,  
for patients with chronic diseases, associated with the use  
of disease management programs and services for chronic  
condition management. "Chronic diseases" include, but are not  
limited to, diabetes, congestive heart failure, and chronic  
obstructive pulmonary disease.

(c) The disease management programs and services pilot  
project shall examine whether chronic disease management

programs and services for patients with specific chronic conditions do any or all of the following:

(1) Improve the patient's overall health in a more expeditious manner.

(2) Lower costs in other aspects of the medical assistance program, such as hospital admissions, days in skilled nursing homes, emergency room visits, or more frequent physician office visits.

(d) In carrying out the pilot project, the Department of Public Aid shall examine all relevant scientific literature and shall consult with health care practitioners including, but not limited to, physicians, surgeons, registered pharmacists, and registered nurses.

(e) The Department of Public Aid shall consult with medical experts, disease advocacy groups, and academic institutions to develop criteria to be used in selecting a vendor for the pilot project.

(f) The Department of Public Aid may adopt rules to implement this Section.

(g) This Section is repealed 10 years after the effective date of this amendatory Act of the 93rd General Assembly.