

2009 Mental Health Legislation:

HB 4 – Amends the State Facilities Closure Act. Provides that a recommendation of closure of a State facility may not be implemented unless the Commission on Government Forecasting and Accountability, by resolution adopted by record vote of at least 8 members, approves the recommendation (now, the Commission's opinion is merely advisory). Provides that nothing in the Act precludes the executive branch agency recommending closure from providing relevant information to the affected State employees and their authorized bargaining representatives. Effective immediately.

NAMI Illinois supports - DEAD

HB 47 – Amends the Freedom of Information Act. Exempts from the Act's copying and inspection requirements data of law enforcement agencies on the mental and physical disabilities, defects, and maladies of individuals maintained for the safety of responding law enforcement officers, the individuals, and the public.

NAMI Illinois supports

HB 204 – Amends the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to reimburse advanced practice nurses for psychiatric services they provide to Medicaid recipients pursuant to a collaborative agreement with a collaborating physician that authorizes the provision of psychiatric services. Effective immediately.

NAMI Illinois supports

HB 278 – Appropriates \$1,000,000 from the General Revenue Fund to the Board of Trustees of the University of Illinois for a forensic psychiatry fellowship training program at the University of Illinois at Chicago College of Medicine. Effective July 1, 2009.

NAMI Illinois supports

HB 283 – Amends the Mental Health and Developmental Disabilities Confidentiality Act. Provides that records and communications may be disclosed when a therapist determines that certain disclosures are necessary to initiate or continue civil commitment or involuntary treatment proceedings (instead of only civil commitment proceedings). Effective immediately.

NAMI Illinois supports - DEAD

HB 520 – Amends the Juvenile Court Act of 1987. Defines "mentally capable adult relative" and "physically capable adult relative". Provides that a minor shall not be considered neglected or dependent for the sole reason that the minor's parent or parents or other person or persons responsible for the minor's welfare have left the minor in the care of a physically and mentally capable adult relative who is willing and able to care for the minor for any period of time. Effective immediately.

If asked, NAMI Illinois supports

HB 527 – Amends the Clinical Psychologist Licensing Act. Provides that the Clinical Psychologists Licensing and Disciplinary Board shall grant certification as medical psychologists to doctoral level psychologists licensed under the Act who meet the additional education and training requirements under the Act, and that this certification shall grant medical psychologists prescriptive authority to prescribe and dispense those drugs used in the treatment of mental, emotional, and psychological disorders. Sets forth provisions concerning the additional education and training requirements, application requirements, renewal, prescribing practices, controlled substance prescriptive authority, and State Board of Pharmacy interaction. Amends the Nurse Practice Act, the Pharmacy Practice Act of 1987, and the Illinois Controlled Substances Act to make related changes.

NAMI Illinois opposes this bill - DEAD

HB 616 – Amends the State Prompt Payment Act. Defines "qualified provider" as (i) an organization that provides non-residential services for the elderly or for the prevention, intervention, or treatment of mental illness, developmental disabilities, or alcoholism or substance abuse or (ii) an entity licensed under the Community-Integrated Living Arrangements Licensure and Certification Act; but does not include a licensed hospital. Provides that a properly prepared voucher request to the Office of the Comptroller for payment to a qualified provider shall be given priority by the Comptroller for processing and warrant issuance after debt service obligations and payroll obligations of the State have been met unless the Comptroller deems that other obligations of the State must be satisfied prior to these categories of payment. Provides that, if at any time the Comptroller determines that there are insufficient funds available to process priority payments, then vouchers shall be processed and paid out in a first-in, first-out manner as corresponding funds become available. Effective immediately.

NAMI Illinois supports - DEAD

HB 628 – Amends the Children with Disabilities Article of the School Code. Provides that a private evaluator or expert retained by or on behalf a parent or guardian shall be afforded reasonable and unimpeded access to educational personnel, facilities, classrooms, and buildings and to the child for the purpose of conducting any appropriate interviews, observations, assessments, tests, or evaluations of the child and of the child's current or proposed educational program, placement, and educational environment. Provides that a parent or guardian shall be afforded reasonable and unimpeded access to observe the child in his or her current or proposed educational program, placement, and educational environment. Provides that a parent or guardian who is a prevailing party in an impartial due process hearing or in a civil action may recover from an opposing party reasonable expert witness costs if the expert witness contributed to the relief obtained by the parent or guardian. Effective immediately.

NAMI Illinois is Neutral

HB 662 – Amends the Mental Health and Developmental Disabilities Administrative Act and the Illinois Public Aid Code. Provides that the Department of Human Services shall provide an annual increase in funding to all programs serving individuals with developmental disabilities for which the Department has established payment rates, including but not limited to intermediate care facilities for the developmentally disabled, services provided under the Illinois Home and Community Based Services Medicaid Waiver for adults with developmental disabilities, and other programs for individuals with developmental disabilities supported by State funds or by funding under the Social Security Act; provides that the annual increase in rates shall be effective the first day of every State fiscal year. Provides that Medicaid payment rates for all nursing facilities certified by the Department of Public Health under the Nursing Home Care Act as Intermediate Care for the Developmentally Disabled facilities shall be increased annually on July 1 by the over-the-year increase in the previous calendar year of the non-seasonally-adjusted Employment Cost Index for total compensation for all civilian workers compiled by the U.S. Bureau of Labor Statistics. Effective July 1, 2009.

NAMI Illinois is Neutral

HB 751 – Amends the Mental Health and Developmental Disabilities Administrative Act, the State Property Control Act, and the Community Services Act. Provides that whenever a State mental health facility operated by the Department of Human Services is closed and the real estate on which the facility is located is sold by the State, the net proceeds of the sale of the real estate shall be deposited into the Community Mental Health Medicaid Trust Fund. Provides that whenever a State developmental disabilities facility operated by the Department of Human Services is closed and the real estate on which the facility is located is sold by the State, the net proceeds of the sale of the real estate shall be deposited into the Community Developmental Disability Services Medicaid Trust Fund. Provides that in determining whether any net proceeds are realized from such a sale of real estate, sufficient moneys shall be made available to ensure that there is an appropriate level of staffing and that life, safety, and care concerns are addressed so as to provide for persons with developmental disabilities or mental illness at the remaining

State-operated facilities that will be expected to handle the individuals previously served at the closed facility. Requires the Department of Human Services to share and discuss its plan or plans for using the net proceeds with advocates, advocacy organizations, and advisory groups whose mission includes advocacy for persons with developmental disabilities or persons with mental illness. Effective immediately.

NAMI Illinois supports

HB 754 – Amends the Department of Human Services Act. Provides that the Department of Human Services Division of Mental Health under the leadership of Secretary of the Department of Human Services and as the State Mental Health Authority, in an effort to develop and establish a comprehensive State mental health plan for Illinois and to coordinate all policy making in mental health, shall convene and lead a Work Group composed of directors of State agencies and principal stakeholders in the public mental health system. Provides that the Work Group is charged with designing Illinois' mental health system to be more efficient and effective as well as reduce redundancies in the delivery of services to persons with mental illnesses. Sets forth items that must be included in the Illinois Comprehensive State Mental Health Plan. Sets forth other Work Group functions.

NAMI Illinois supports - DEAD

HB 758 – Amends the Mental Health and Developmental Disabilities Administrative Act and the State Finance Act. Removes the allocation formula for the use of the Community Mental Health Medicaid Trust Fund and provides that 100% of the Fund shall be used for the purchase of community mental health services. Removes the reallocation of the first \$16,700,000 from the Community Developmental Disabilities Medicaid Trust Fund. Requires the Department of Human Services to annually report to the Governor and the General Assembly upon total deposits into and expenditures from those funds. Provides that the moneys in those funds are exempt from fund sweeps. Effective immediately.

NAMI Illinois supports

HB 759 - Creates the Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act. Contains provisions concerning jurisdiction over adult guardianships, conservatorships, and other protective proceedings. Sets forth guidelines to specify which court has jurisdiction to appoint a guardian or conservator for an incapacitated adult, by prioritizing the states which might claim jurisdiction. Provides for designation of a "home state" and a "significant-connection state". Provides for communication and cooperation between courts. Contains provisions concerning transfer of guardianship or conservatorship to another state. Provides for registration and recognition of guardianship or protective orders from other states.

NAMI Illinois supports

HB 766 – Amends the Illinois Public Aid Code. Provides that an inmate of a penal institution maintained by the State or a unit of local government may qualify for medical assistance only after he or she has ceased to be an inmate of such an institution, but the inmate may apply for medical assistance in advance of his or her discharge or release from the institution. Provides that a recipient of medical assistance who becomes an inmate of a penal institution may be permitted a period of up to 30 days in the institution without suspension or termination of eligibility for medical assistance. Provides that within a reasonable time after the discharge or release of a person who was an inmate of a penal institution, the Department of Healthcare and Family Services shall re-determine the person's eligibility for medical assistance. Effective immediately.

NAMI Illinois supports - DEAD

HB 812 – Amends the Illinois Insurance Code. Provides that certain Sections of the Illinois Insurance Code do not apply to short-term travel, disability income, long-term care, accident only, or limited or specified disease policies.

NAMI Illinois is neutral

HB 1065 – In provisions of the Mental Health and Developmental Disabilities Confidentiality Act authorizing a mental health or developmental disability facility to disclose certain information to the U.S. Secret Service or the Department of State Police when necessary to protect the life of, or to prevent bodily harm to, a public official, changes the definition of "public official" to include a Supreme, Appellate, Circuit, or Associate Judge of the State of Illinois. Effective immediately.

House Committee Amendment No. 1

Also includes a member of the United States Congress, a Judge of the United States, a Justice of the United States, a United States Magistrate Judge, and a Bankruptcy Judge in the definition of "public official".

NAMI Illinois supports

HB 1143 – Creates the Mental Health Graduate Education Scholarship Act. Establishes the Mental Health Graduate Scholarship Program, to be administered by the Department of Human Services. Requires the Department to provide scholarships to qualified individuals who are enrolled in or accepted into a mental health graduate program at a public or private college or university in this State and who agree to being employed in this State as a licensed professional counselor, licensed clinical professional counselor, licensed clinical psychologist, licensed social worker, or licensed clinical social worker in direct patient care in a human services capacity in a designated shortage area for at least one year for each year of scholarship assistance received. Sets forth provisions concerning the functions of the Department, the award and amount of a scholarship, requirements for scholarship recipients, a Mental Health Consortium Advisory Council, student enrollment and the obligations of institutions, and program funding. Effective immediately.

NAMI Illinois supports

HB 1351 – Amends the Illinois Public Aid Code. Provides that beginning July 1, 2010, reimbursement for child and adult psychiatric services provided by a physician must not be lower than 90% of Medicare reimbursement in accordance with the Medicare payment localities for Illinois. Provides that beginning July 1, 2010, reimbursement for child and adult psychiatric services provided by a licensed health care professional under the Medicaid Community Mental Health Services Program must not be lower than 90% of Medicare reimbursement in accordance with Medicare payment localities for Illinois. Provides that all adjustments shall be made without lowering any rates then in effect that may be higher than the level required by these provisions. Provides that by July 2, 2010, reimbursement rules and policies shall not be more restrictive than Medicare physician payment rules and policies. Effective immediately.

NAMI Illinois supports - DEAD

HB 2280 – Amends the Mental Health and Developmental Disabilities Code. Provides that a petitioner in an involuntary admission's case shall be notified of the respondent's request for voluntary admission to a mental health facility and the petitioner's right to object to such voluntary admission when the request was made prior to an adjudication of the matter and the facility director of the mental health facility has approved the respondent's request. Provides that if voluntary admission is accepted and the petition is dismissed by the court, or if the respondent is found subject to involuntary admission, notice shall be provided to the petitioner, orally and in writing, of his or her right to receive notice of the respondent's discharge. Further provides that a facility director of a mental health facility shall notify the petitioner in a successful involuntary admission case, of the hospitalized person's subsequent discharge at least 48 hours prior to discharge if the petitioner has requested in writing that such notification be given. Effective immediately.

NAMI Illinois supports

HB 2289 – Amends the Guardianship and Advocacy Act. Provides that Guardianship and Advocacy Commission, acting on a request from the Director of the Guardianship and Advocacy Commission, may disapprove any action of a regional authority, in which case the regional

authority shall cease such action. Provides that the Commission shall operate subject to the provisions of the Illinois Procurement Code (instead of the Illinois Purchasing Act). Provides that the Director shall carry out the policies and programs of the Commission and coordinate the activities of its divisions and may delegate to the Human Rights Authority Director any specified duties. Transfers the authority of certain appointment duties from the Commission to the Director. Provides that reassignments of investigations for conflicts of interest and refusals to investigate shall be reviewed and approved by the Director and the Director may seek direction from the Commission. Provides that a regional authority may conduct investigations upon its own initiative if it has reason to believe that the rights of an eligible person have been violated in the region in which the authority sits, unless the Director (rather than Commission) finds that a conflict of interest exists and directs another regional authority to conduct the investigation. Provides that closed meetings by a regional authority are subject to the provisions of the Open Meetings Act. Transfers the authority for referrals for further action from the Commission to the Director. Provides that a regional authority may, by acting through the Director, propose to the Commission legislation for the purpose of safeguarding the rights of eligible persons.

NAMI Illinois is Neutral

HB 2290 - Amends the Probate Act of 1975. Provides that a guardian shall not consent to a ward's sterilization without a court order, but a court order is not required if a procedure is medically necessary to preserve the ward's life or prevent a serious impairment even though it may result in sterilization. Provides that if the motion of a guardian seeking to consent to a ward's sterilization shows that sterilization is warranted, the court shall appoint a guardian ad litem, who shall be an attorney or a qualified disabilities or mental illness advocate. Provides that the court may appoint counsel for the ward, and shall do so upon the ward's request, if the ward objects to sterilization, or the ward's position is adverse to the guardian ad litem. Provides that the court shall advise the ward of his or her right to appointed counsel. Provides for a medical and psychological evaluation to assess the ward's capacity concerning sterilization. Provides that the court shall determine if the ward has the capacity to consent to sterilization by considering whether the ward is able to understand the relationship between sexual activity and reproduction; reproduction consequences; and sterilization. Provides that the ward shall not be deemed to lack capacity solely on the basis of a disability. Provides that if the court finds that the ward has capacity to consent, and the ward objects or consents, the court shall enter an order based on the ward's decision. If the court finds that the ward does not have capacity and has no clear desire for sterilization, the court shall apply standards. Provides that those standards include that the court shall not authorize sterilization unless the court clearly finds that the ward lacks decisional capacity, is fertile, and capable of procreation; the benefits outweigh the harm; less intrusive alternatives were considered; and sterilization is in the ward's best interest, considering trauma or psychological damage if he or she had a child. Provides that the court shall consider if the ward is sexually active, the ability of the ward to understand reproduction and contraception, and other factors relative to the ward's best interest. Includes other provisions.

NAMI Illinois supports

HB 2446 - Amends the Mental Health and Developmental Disabilities Code. Provides that a court order authorizing the administration of authorized involuntary treatment shall allow a person designated in the order as authorized to administer the treatment to designate another person to administer the treatment in the court-designated person's absence. Provides that a person designated in the court order as authorized to administer the treatment must be a qualified acute and long-term health care professional familiar with the recipient's mental and physical status and active in the recipient's care. Provides that a person designated by the court-designated person to administer the treatment in the court-designated person's absence must be a licensed and qualified health care professional. Effective immediately.

NAMI Illinois supports - DEAD

HB 2586 – Amends the Property Tax Extension Limitation Law in the Property Tax Code. Provides that the term "aggregate extension" does not include special purpose extensions made

for community mental health purposes. Amends the Community Mental Health Act. Provides that, if a governmental unit levies a tax for community mental health purposes at a rate of less than 0.15%, that levy may be increased to not more than 0.15% by submitting the question to the voters. Effective immediately.

NAMI Illinois needs more information... we believe we oppose... - DEAD

HB 2633 – Amends the Unified Code of Corrections. Provides that a prisoner may be transferred to a super-maximum security institution only when, within one year of the date of the proposed transfer: (1) while incarcerated, the prisoner committed or attempted to commit acts of violence either: (i) which resulted in serious injury or death or (ii) in connection with any act of non-consensual sex; (2) the prisoner has engaged in 2 or more acts which caused serious disruption of prison operations; or (3) the prisoner has escaped or attempted to escape from within a security perimeter or custody, or both, or direct supervision. Provides that prisoners with serious mental illnesses shall not be transferred to a super-maximum security facility. Provides that the Department of Corrections shall review the status of all prisoners currently housed at a super-maximum security institution within 90 days of the effective date of the amendatory Act to determine whether they should continue to be housed at that facility. Prisoners already incarcerated for longer than one year may continue to be held at a super-maximum institution only on the basis of specified criteria and must be provided a hearing within 6 months of the effective date of the amendatory Act.

NAMI Illinois supports - DEAD

HB 3843 – Amends the Mental Health and Developmental Disabilities Confidentiality Act. Changes reference from the Abused and Neglected Long Term Care Facility Residents Reporting Act to the Department of Human Services Act. Provides that a recipient's records and communications shall be disclosed pursuant to the Department of Human Services Act in testimony at health care worker registry hearings or preliminary proceedings when relevant provided that information so disclosed shall not be utilized for any other purpose nor be redisclosed, except in connection with those proceedings. Effective immediately.

NAMI Illinois supports

HB 3844 – Amends the Department of Human Services Act. Requires the Inspector General to investigate the abuse and neglect of individuals who receive services within mental health facilities, developmental disabilities facilities, and community agencies operated, licensed, funded, or certified by the Department of Human Services, but not licensed or certified by any other State agency. Authorizes the Inspector to investigate these facilities upon an allegation that an employee has mentally abused, physically abused, sexually abused, neglected, or financially exploited an individual. Creates a duty for employees to cooperate with the Inspector's investigations. Grants the Inspector the power to subpoena witnesses and compel the production of documents. Requires employees to report certain allegations. Requires the Inspector, upon completion of an investigation, to issue a report. Requires a facility or agency to file a written response to the report under certain circumstances. Authorizes the Secretary to review the report and to specify other administrative sanctions. Requires the Inspector to report to the Illinois Department of Public Health's healthcare worker registry the identity of and the finding associated with each employee against whom there is a finding of physical abuse, sexual abuse, or egregious neglect. Provides for the notice of and an administrative hearing for persons whose names are to appear on the registry. Changes audit cycle by the Auditor General from every 2 years to an as-needed basis to be determined by the Auditor General. Effective immediately.

NAMI Illinois supports

HB 3899 – Amends the Mental Health and Developmental Disabilities Code. Provides that restraint may be used only as an emergency measure of last resort (instead of only as a therapeutic measure) to prevent a recipient of mental health services from causing physical harm to himself or physical abuse to others. Provides that a patient shall be placed in a position that allows airway access and does not compromise respiration. Provides that a face-down or prone

position shall not be used on children and adolescents. Provides that a face-down or prone position shall not be used on adults unless: (1) there is a documented specified patient preference and no psychological or medical contraindications to its use; or (2) there is an overriding psychological or medical justification for its use, which shall be documented. Effective immediately.

NAMI Illinois supports - DEAD

HB 3926 - Amends the Children's Mental Health Act of 2003. Provides that any screening services provided under the Children's Mental Health Plan must be voluntary and conducted with parental consent and in accordance with the Mental Health and Developmental Disabilities Code. Effective immediately.

NAMI Illinois supports - DEAD

HB 3981 – Amends the Mental Health and Developmental Disabilities Code and the Mental Health and Developmental Disabilities Confidentiality Act. Changes the definition of "dangerous conduct" to mean threatening behavior or conduct that places another individual or the person engaging in the behavior or conduct (rather than places another individual) in reasonable expectation of being harmed, or a person's inability to provide, without the assistance of family or outside help, for his or her basic physical needs so as to guard himself or herself from serious harm. Extends the lists of possible medical practitioners who must examine a person subject to an involuntary admission petition and execute a certificate stating whether involuntary admission and immediate hospitalization is appropriate, to include a psychiatrist (rather than a physician, qualified examiner, or clinical psychologist only). Contains provisions regarding the amount of time a mental health facility can temporarily detain a person for examination; the situations under which a person can be released from a mental health facility following the initial examination period and the court filing of a certificate stating whether involuntary admission and immediate hospitalization is appropriate; additional persons who are entitled to inspect and copy an admitted person's mental health records; additional agencies that may disclose a person's mental health records and communications to other agencies; and other matters. Effective immediately.

NAMI Illinois supports

SB 31 – Amends the Firearm Owners Identification Card Act. Provides that the Department of State Police may revoke a Firearm Owner's Identification Card of a parent or guardian of a person under 21 years of age who is unable to prevent his or her child under 21 years of age from gaining access to a firearm or ammunition, or both, when (1) the child upon 2 occasions has had possession of his or her parent or guardian's firearm or ammunition, or both, without the parent or guardian's permission and (2) the child met the criteria for severe or major mood disorder or severe conduct disorder (evidenced by behavior such as forced sex, physical cruelty, use of a weapon, stealing while confronting a victim, breaking and entering), or both, as defined in the DSM-IV-TR published by the American Psychiatric Association, or the child is an adjudicated delinquent minor for acts involving aggressive or violent behavior. Imposes conditions on any rulemaking authority.

NAMI Illinois supports – DEAD

SB 42 – Amends the Mental Health and Developmental Disabilities Code and the Rights of Crime Victims and Witnesses Act. Provides that if a criminal defendant has been found not guilty by reason of insanity of a violent crime and a hearing has been ordered by the court under the Mental Health and Developmental Disabilities Code to determine if the defendant is: (1) in need of mental health services on an inpatient basis; (2) in need of mental health services on an outpatient basis; or (3) not in need of mental health services, the victim or the victim's spouse, guardian, parent, grandparent, or other immediate family or household member shall have the right to present a victim's impact statement at the commitment hearing.

NAMI Illinois opposes

SB 209 – Amends the Mental Health and Developmental Disabilities Code and the Probate Act of 1975. Provides that a person who may be voluntarily admitted to a mental health facility includes a person adjudicated a disabled person. Provides for voluntary admission to a mental health facility if the facility director determines and documents in the recipient's medical record that the person (i) is clinically suitable for admission as a voluntary recipient and (ii) has the capacity to consent to voluntary admission (instead of if the director deems such person clinically suitable for admission as a voluntary recipient). Sets forth factors to be considered in determining whether a person has the capacity to consent to voluntary admission. Provides that a guardian of the person may not admit a ward to a mental health facility except at the ward's request as provided in the Mental Health and Developmental Disabilities Code and unless the ward has the capacity to consent to such admission.

NAMI Illinois supports

SB 231 – Amends the Illinois Public Aid Code. Provides that if a person who is incarcerated in a jail or correctional facility in Illinois or receiving treatment at a hospital under the authority of the Department of Corrections was a recipient of medical assistance immediately before his or her incarceration or period of treatment, the recipient shall remain eligible for medical assistance during the period of his or her incarceration or treatment, but the Department of Healthcare and Family Services shall not provide medical assistance for any medical care, services, or supplies provided to the recipient during that period. Provides that the Department may, however, provide medical assistance for inpatient hospital services provided to the recipient at a hospital located outside the premises of the jail or correctional facility to the extent that federal financial participation is available for the costs of those services. Makes other changes. Effective immediately.

NAMI Illinois supports

SB 327 – Amends the State Facilities Closure Act. Provides that, if appropriations have been made for the current fiscal year for the operation of a State facility during the entire fiscal year, then no action may be taken to close the facility, to reduce its capacity to serve the number of residents, youth, or inmates for which the appropriation was made, or to move its location from the county in which the service is provided, unless the action is specifically approved by the same joint resolution of the General Assembly. Effective immediately.

NAMI Illinois supports

SB 1453 – Amends the Health Services Education Grants Act. Provides that, in addition to grants to medical, dental, pharmacy, optometry, and nursing schools and physician assistant programs, grants may be made to psychology and other physical and mental health-related schools and programs (instead of to other health-related schools and programs). Effective immediately.

NAMI Illinois supports

SB 1474 – Amends the State Prompt Payment Act. Defines "qualified provider" as (i) an organization that provides non-residential services for the elderly or for the prevention, intervention, or treatment of mental illness, developmental disabilities, or alcoholism or substance abuse or (ii) an entity licensed under the Community-Integrated Living Arrangements Licensure and Certification Act; but does not include a licensed hospital. Provides that a properly prepared voucher request to the Office of the Comptroller for payment to a qualified provider shall be given priority by the Comptroller for processing and warrant issuance after debt service obligations and payroll obligations of the State have been met unless the Comptroller deems that other obligations of the State must be satisfied prior to these categories of payment. Provides that, if at any time the Comptroller determines that there are insufficient funds available to process priority payments, then vouchers shall be processed and paid out in a first-in, first-out manner as corresponding funds become available. Effective immediately.

NAMI Illinois supports - DEAD

SB 1498 – Amends the Illinois Public Aid Code. Provides that beginning July 1, 2010, reimbursement for child and adult psychiatric services provided by a physician must not be lower than 90% of Medicare reimbursement in accordance with the Medicare payment localities for Illinois. Provides that beginning July 1, 2010, reimbursement for child and adult psychiatric services provided by a licensed health care professional under the Medicaid Community Mental Health Services Program must not be lower than 90% of Medicare reimbursement in accordance with Medicare payment localities for Illinois. Provides that all adjustments shall be made without lowering any rates then in effect that may be higher than the level required by these provisions. Provides that by July 2, 2010, reimbursement rules and policies shall not be more restrictive than Medicare physician payment rules and policies. Effective immediately.

NAMI Illinois supports - DEAD

SB 1499 – Amends the Community Services Act. Requires the Governor to create a commission by July 1, 2009 (instead of 2007) to review various matters in connection with funding for community services. Provides that if the Governor does not make appointments to the commission by July 1, 2009, then the Speaker and Minority Leader of the House of Representatives and the President and Minority Leader of the Senate shall make appointments to the commission. Provides that the commission must issue a final report no later than December 31, 2010 (instead of September 1, 2008). Adds 3 directors of Department of Human Services (DHS) divisions as commission members. Requires DHS to provide staff support for the commission. Effective immediately.

NAMI Illinois supports

SB 1564 – Amends the Mental Health and Developmental Disabilities Administrative Act and the Illinois Public Aid Code. Provides that the Department of Human Services shall establish payment rates providing equal pay by July 1, 2016 for direct care workers in all programs serving individuals with developmental disabilities, including but not limited to intermediate care facilities for the developmentally disabled, services provided under the Illinois Home and Community Based Services Medicaid Waivers for adults and children with developmental disabilities, and other programs for individuals with developmental disabilities supported by State funds or by funding under Title XIX of the Social Security Act. Provides that wage rates at specified percentages of the target shall be in effect in years before 2016.

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SB 1750 – Amends the Property Tax Extension Limitation Law in the Property Tax Code. Provides that the term "aggregate extension" does not include special purpose extensions made for community mental health purposes. Amends the Community Mental Health Act. Provides that, if a governmental unit levies a tax for community mental health purposes at a rate of less than 0.15%, that levy may be increased to not more than 0.15% by submitting the question to the voters. Effective immediately.

NAMI Illinois needs more information...

SB 1893 – Sets forth the purpose of the Act. Creates the Health Insurance Choice Law. Sets forth requirements concerning policy offerings, choice, renewability, notice, disclosure, and rates. Creates the Illinois Healthcare Policy Task Force Law. Provides that the Task Force shall make recommendations regarding legislation. Amends the Illinois Income Tax Act to provide for certain contribution credits. Creates the Illinois Innovative Insurance Solutions Law as a new Article in the Illinois Insurance Code. Provides that health insurance carriers may submit plans that may not otherwise meet existing requirements. Creates the Illinois Health Insurance Premium Assistance Program as a new Article in the Illinois Insurance Code. Provides that the Department of Healthcare and Family Services shall administer the Program and issue rebates. Amends the Illinois Insurance Code. Provides assistance to small employers with certain provisions of the Code. Amends the Comprehensive Health Insurance Plan Act to set forth provisions concerning eligibility and small employer participation. Amends the Children's Health Insurance Program Act to set forth provisions concerning eligibility and health benefits for children. Amends the Managed

Care Reform and Patients Rights Act to set forth requirements concerning the Office of Consumer Health Insurance. Amends the Covering ALL KIDS Health Insurance Act to set forth requirements concerning eligibility and enrollment. Amends the Illinois Public Aid Code. Sets forth provisions concerning eligibility, reporting, incentives, model programs, and enforcement. Makes other changes. Effective immediately.

NAMI Illinois needs more information...

SB 2093 – Amends the Mental Health and Developmental Disabilities Administrative Act and the State Finance Act. Removes the allocation formula for the use of the Community Mental Health Medicaid Trust Fund and provides that 100% of the Fund shall be used for the purchase of community mental health services. Removes the reallocation of the first \$16,700,000 from the Community Developmental Disabilities Medicaid Trust Fund. Requires the Department of Human Services to annually report to the Governor and the General Assembly upon total deposits into and expenditures from those funds. Provides that the moneys in those funds are exempt from fund sweeps. Effective immediately.

NAMI Illinois supports

SB 2113 – Amends the Illinois Public Aid Code. Provides that under the medical assistance program, beginning January 1, 2009, the Department of Healthcare and Family Services may reimburse a skilled nursing facility, intermediate care facility, or institution for mental diseases providing long-term care services, based upon patient days reported in the facility's most recent cost report, for spending incurred to provide health care benefits to its employees serving the vulnerable populations residing in the facility, in order to attract and retain a qualified and healthy workforce. Provides that subject to available appropriations, the reimbursement shall be made according to certain criteria. Provides that the reimbursement is subject to audit by the Department and shall be reduced or eliminated in the case of any facility that does not honor its commitment to increase spending to improve the health of its employees or that decreases such spending. Effective July 1, 2009.

NAMI Illinois is Neutral - DEAD

Resolutions –

HR 42 - Lists the organizations that support the inclusion of anorexia nervosa and bulimia on the list of serious mental illnesses that qualify for coverage under applicable health insurance plans, and provides that a copy of the resolution be presented to those organizations.

NAMI Illinois supports

SJR 31 - Encourages the Governor's Office of Management and Budget to utilize the funds available due to the increased Federal Medical Assistance Percentage, also known as FMAP, along with funds available in the Health and Human Services Medicaid Trust Fund and funds available in the Community Mental Health Medicaid Trust Fund to maintain appropriation levels supporting current community care provided by mental health and substance misuse treatment community providers and increase funding to pay the State's obligations in a timely fashion.

NAMI Illinois supports