AN ACT concerning aging.

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

Section 5. The Civil Administrative Code of Illinois is amended by changing Section 5-520 as follows:

(20 ILCS 5/5-520) (was 20 ILCS 5/6.27)

Sec. 5-520. In the Department on Aging. A Council on Aging and a Coordinating Committee of State Agencies Serving Older Persons composed and appointed as provided in the Illinois Act on the Aging.

(Source: P.A. 91-239, eff. 1-1-00.)

Section 10. The Illinois Act on the Aging is amended by changing Sections 4.01, 4.02, 4.02c, 4.11, 8.05, 8.06, and 8.08 as follows:

(20 ILCS 105/4.01) (from Ch. 23, par. 6104.01)

Sec. 4.01. Additional powers and duties of the Department. In addition to powers and duties otherwise provided by law, the Department shall have the following powers and duties:

(1) To evaluate all programs, services, and facilities for the aged and for minority senior citizens within the State and determine the extent to which present public or private programs, services and facilities meet the needs of the aged.

- (2) To coordinate and evaluate all programs, services, and facilities for the Aging and for minority senior citizens presently furnished by State agencies and make appropriate recommendations regarding such services, programs and facilities to the Governor and/or the General Assembly.
- (3) To function as the sole State agency to develop a comprehensive plan to meet the needs of the State's senior citizens and the State's minority senior citizens.
- (4) To receive and disburse State and federal funds made available directly to the Department including those funds made available under the Older Americans Act and the Senior Community Service Employment Program for providing services for senior citizens and minority senior citizens or for purposes related thereto, and shall develop and administer any State Plan for the Aging required by federal law.
- (5) To solicit, accept, hold, and administer in behalf of the State any grants or legacies of money, securities, or property to the State of Illinois for services to senior citizens and minority senior citizens or purposes related thereto.
- (6) To provide consultation and assistance to communities, area agencies on aging, and groups developing local services for senior citizens and minority senior citizens.
- (7) To promote community education regarding the problems of senior citizens and minority senior citizens through

institutes, publications, radio, television and the local press.

- (8) To cooperate with agencies of the federal government in studies and conferences designed to examine the needs of senior citizens and minority senior citizens and to prepare programs and facilities to meet those needs.
- (9) To establish and maintain information and referral sources throughout the State when not provided by other agencies.
- (10) To provide the staff support that as may reasonably be required by the Council and the Coordinating Committee of State Agencies Serving Older Persons.
- (11) To make and enforce rules and regulations necessary and proper to the performance of its duties.
- (12) To establish and fund programs or projects or experimental facilities that are specially designed as alternatives to institutional care.
- (13) To develop a training program to train the counselors presently employed by the Department's aging network to provide Medicare beneficiaries with counseling and advocacy in Medicare, private health insurance, and related health care coverage plans. The Department shall report to the General Assembly on the implementation of the training program on or before December 1, 1986.
- (14) To make a grant to an institution of higher learning to study the feasibility of establishing and implementing an

affirmative action employment plan for the recruitment, hiring, training and retraining of persons 60 or more years old for jobs for which their employment would not be precluded by law.

- (15) To present one award annually in each of the categories of community service, education, the performance and graphic arts, and the labor force to outstanding Illinois senior citizens and minority senior citizens in recognition of their individual contributions to either community service, education, the performance and graphic arts, or the labor force. The awards shall be presented to 4 four senior citizens and minority senior citizens selected from a list of 44 nominees compiled annually by the Department. Nominations shall be solicited from senior citizens' service providers, area agencies on aging, senior citizens' centers, and senior citizens' organizations. The Department shall consult with the Coordinating Committee of State Agencies Serving Older Persons to determine which of the nominees shall be the recipient in each category of community service. The Department shall establish a central location within the State to be designated as the Senior Illinoisans Hall of Fame for the public display of all the annual awards, or replicas thereof.
- (16) To establish multipurpose senior centers through area agencies on aging and to fund those new and existing multipurpose senior centers through area agencies on aging, the establishment and funding to begin in such areas of the State

as the Department shall designate by rule and as specifically appropriated funds become available.

- (17) To develop the content and format of the acknowledgment regarding non-recourse reverse mortgage loans under Section 6.1 of the Illinois Banking Act; to provide independent consumer information on reverse mortgages and alternatives; and to refer consumers to independent counseling services with expertise in reverse mortgages.
- (18) To develop a pamphlet in English and Spanish which may be used by physicians licensed to practice medicine in all of its branches pursuant to the Medical Practice Act of 1987, pharmacists licensed pursuant to the Pharmacy Practice Act, and Illinois residents 65 years of age or older for the purpose of assisting physicians, pharmacists, and patients in monitoring prescriptions provided by various physicians and to aid persons 65 years of age or older in complying with directions for proper use of pharmaceutical prescriptions. The pamphlet may provide space for recording information including but not limited to the following:
  - (a) name and telephone number of the patient;
  - (b) name and telephone number of the prescribing
    physician;
    - (c) date of prescription;
    - (d) name of drug prescribed;
    - (e) directions for patient compliance; and
    - (f) name and telephone number of dispensing pharmacy.

In developing the pamphlet, the Department shall consult with the Illinois State Medical Society, the Center for Minority Health Services, the Illinois Pharmacists Association and senior citizens organizations. The Department shall distribute the pamphlets to physicians, pharmacists and persons 65 years of age or older or various senior citizen organizations throughout the State.

- (19) To conduct a study by April 1, 1994 of the feasibility of implementing the Senior Companion Program throughout the State for the fiscal year beginning July 1, 1994.
- (20) The With respect to contracts in effect on July 1, 1994, the Department shall increase the grant amounts so that the reimbursement rates paid through the community care program for chore housekeeping services and home care aides are at the same rate, which shall be the higher of the 2 rates currently paid. With respect to all contracts entered into, renewed, or extended on or after July 1, 1994, the reimbursement rates paid through the community care program for chore housekeeping services and home care aides shall be the same.
- (21) From funds appropriated to the Department from the Meals on Wheels Fund, a special fund in the State treasury that is hereby created, and in accordance with State and federal guidelines and the intrastate funding formula, to make grants to area agencies on aging, designated by the Department, for the sole purpose of delivering meals to homebound persons 60 years of age and older.

- (22) To distribute, through its area agencies on aging, information alerting seniors on safety issues regarding emergency weather conditions, including extreme heat and cold, flooding, tornadoes, electrical storms, and other severe storm weather. The information shall include all necessary instructions for safety and all emergency telephone numbers of organizations that will provide additional information and assistance.
- (23) To develop guidelines for the organization and implementation of Volunteer Services Credit Programs to be administered by Area Agencies on Aging or community based senior service organizations. The Department shall hold public hearings on the proposed guidelines for public comment, suggestion, and determination of public interest. The guidelines shall be based on the findings of other states and of community organizations in Illinois that are currently operating volunteer services credit programs or demonstration volunteer services credit programs. The Department shall offer guidelines for all aspects of the programs including, but not limited to, the following:
  - (a) types of services to be offered by volunteers;
  - (b) types of services to be received upon the redemption of service credits;
  - (c) issues of liability for the volunteers and the administering organizations;
    - (d) methods of tracking service credits earned and

service credits redeemed;

- (e) issues of time limits for redemption of service credits;
  - (f) methods of recruitment of volunteers;
- (g) utilization of community volunteers, community service groups, and other resources for delivering services to be received by service credit program clients;
- (h) accountability and assurance that services will be available to individuals who have earned service credits; and
  - (i) volunteer screening and qualifications.

The Department shall submit a written copy of the guidelines to the General Assembly by July 1, 1998.

(Source: P.A. 95-298, eff. 8-20-07; 95-689, eff. 10-29-07; 95-876, eff. 8-21-08.)

(20 ILCS 105/4.02) (from Ch. 23, par. 6104.02)

Sec. 4.02. Community Care Program. The Department shall establish a program of services to prevent unnecessary institutionalization of persons age 60 and older in need of long term care or who are established as persons who suffer from Alzheimer's disease or a related disorder under the Alzheimer's Disease Assistance Act, thereby enabling them to remain in their own homes or in other living arrangements. Such preventive services, which may be coordinated with other programs for the aged and monitored by area agencies on aging

in cooperation with the Department, may include, but are not limited to, any or all of the following:

- (a) (blank);
- (b) (blank);
- (c) home care aide services;
- (d) personal assistant services;
- (e) adult day services;
- (f) home-delivered meals;
- (q) education in self-care;
- (h) personal care services;
- (i) adult day health services;
- (j) habilitation services;
- (k) respite care;
- (k-5) community reintegration services;
- (k-6) flexible senior services;
- (k-7) medication management;
- (k-8) emergency home response;
- (1) other nonmedical social services that may enable the person to become self-supporting; or
- (m) clearinghouse for information provided by senior citizen home owners who want to rent rooms to or share living space with other senior citizens.

The Department shall establish eligibility standards for such services. In taking into consideration the unique economic and social needs of the target population for whom they are to be provided. Such eligibility standards shall be based on the

that in determining the amount and nature of services for which a person may qualify, consideration shall not be given to the value of cash, property or other assets held in the name of the person's spouse pursuant to a written agreement dividing marital property into equal but separate shares or pursuant to a transfer of the person's interest in a home to his spouse, provided that the spouse's share of the marital property is not made available to the person seeking such services.

Beginning July 1, 2002, the Department shall require as a condition of eligibility that all financially eligible applicants apply for medical assistance under Article V of the Illinois Public Aid Code in accordance with rules promulgated by the Department.

Beginning January 1, 2008, the Department shall require as a condition of eligibility that all new financially eligible applicants apply for and enroll in medical assistance under Article V of the Illinois Public Aid Code in accordance with rules promulgated by the Department.

The Department shall, in conjunction with the Department of Public Aid (now Department of Healthcare and Family Services), seek appropriate amendments under Sections 1915 and 1924 of the Social Security Act. The purpose of the amendments shall be to extend eligibility for home and community based services under Sections 1915 and 1924 of the Social Security Act to persons who transfer to or for the benefit of a spouse those amounts of

income and resources allowed under Section 1924 of the Social Security Act. Subject to the approval of such amendments, the Department shall extend the provisions of Section 5-4 of the Illinois Public Aid Code to persons who, but for the provision of home or community-based services, would require the level of care provided in an institution, as is provided for in federal law. Those persons no longer found to be eligible for receiving noninstitutional services due to changes in the eligibility criteria shall be given 45 60 days notice prior to actual termination. Those persons receiving notice of termination may the Department and request the determination be appealed at any time during the 45 60 day notice period. With the exception of the lengthened notice and time frame for the appeal request, the appeal process shall follow the normal procedure. In addition, each person affected regardless of the circumstances for discontinued eligibility shall be given notice and the opportunity to purchase the necessary services through the Community Care Program. If the individual does not elect to purchase services, the Department shall advise the individual of alternative services. The target population identified for the purposes of this Section are persons age 60 and older with an identified service need. Priority shall be imminent given to those who are at risk of institutionalization. The services shall be provided eligible persons age 60 and older to the extent that the cost of the services together with the other personal maintenance

expenses of the persons are reasonably related to the standards established for care in a group facility appropriate to the person's condition. These non-institutional services, pilot projects or experimental facilities may be provided as part of or in addition to those authorized by federal law or those funded and administered by the Department of Human Services. The Departments of Human Services, Healthcare and Family Services, Public Health, Veterans' Affairs, and Commerce and Economic Opportunity and other appropriate agencies of State, federal and local governments shall cooperate with the Department on Aging in the establishment and development of the non-institutional services. The Department shall require an annual audit from all personal assistant and home care aide vendors contracting with the Department under this Section. The annual audit shall assure that each audited vendor's procedures in compliance with Department's financial reporting quidelines requiring an administrative and employee wage and benefits cost split as defined in administrative rules. The audit is a public record under the Freedom of Information Act. The Department shall execute, relative to the nursing home prescreening project, written inter-agency agreements with the Department of Human Services and the Department of Healthcare and Family Services, to effect the following: (1) intake procedures and common eligibility criteria for those persons who are receiving non-institutional services; and (2) the establishment and development of non-institutional services in areas of the State where they are not currently available or are undeveloped. On and after July 1, 1996, all nursing home prescreenings for individuals 60 years of age or older shall be conducted by the Department.

As part of the Department on Aging's routine training of case managers and case manager supervisors, the Department may include information on family futures planning for persons who are age 60 or older and who are caregivers of their adult children with developmental disabilities. The content of the training shall be at the Department's discretion.

The Department is authorized to establish a system of recipient copayment for services provided under this Section, such copayment to be based upon the recipient's ability to pay but in no case to exceed the actual cost of the services provided. Additionally, any portion of a person's income which is equal to or less than the federal poverty standard shall not be considered by the Department in determining the copayment. The level of such copayment shall be adjusted whenever necessary to reflect any change in the officially designated federal poverty standard.

The Department, or the Department's authorized representative, <u>may shall</u> recover the amount of moneys expended for services provided to or in behalf of a person under this Section by a claim against the person's estate or against the estate of the person's surviving spouse, but no recovery may be had until after the death of the surviving spouse, if any, and

then only at such time when there is no surviving child who is under age 21, blind, or permanently and totally disabled. This paragraph, however, shall not bar recovery, at the death of the person, of moneys for services provided to the person or in behalf of the person under this Section to which the person was not entitled; provided that such recovery shall not be enforced against any real estate while it is occupied as a homestead by the surviving spouse or other dependent, if no claims by other creditors have been filed against the estate, or, if such claims have been filed, they remain dormant for failure of prosecution or failure of the claimant to compel administration of the estate for the purpose of payment. This paragraph shall not bar recovery from the estate of a spouse, under Sections 1915 and 1924 of the Social Security Act and Section 5-4 of the Illinois Public Aid Code, who precedes a person receiving services under this Section in death. All moneys for services paid to or in behalf of the person under this Section shall be claimed for recovery from the deceased spouse's estate. "Homestead", as used in this paragraph, means the dwelling house and contiguous real estate occupied by a surviving spouse or relative, as defined by the rules and regulations of the Department of Healthcare and Family Services, regardless of the value of the property.

The Department shall increase the effectiveness of the existing Community Care Program by:

(1) ensuring that in-home services included in the care

plan are available on evenings and weekends;

- (2) ensuring that care plans contain the services that eligible participants need based on the number of days in a month, not limited to specific blocks of time, as identified by the comprehensive assessment tool selected by the Department for use statewide, not to exceed the total monthly service cost maximum allowed for each service; the Department shall develop administrative rules to implement this item (2);
- (3) ensuring that the participants have the right to choose the services contained in their care plan and to direct how those services are provided, based on administrative rules established by the Department;
- (4) ensuring that the determination of need tool is accurate in determining the participants' level of need; to achieve this, the Department, in conjunction with the Older Adult Services Advisory Committee, shall institute a study of the relationship between the Determination of Need scores, level of need, service cost maximums, and the development and utilization of service plans no later than May 1, 2008; findings and recommendations shall be presented to the Governor and the General Assembly no later than January 1, 2009; recommendations shall include all needed changes to the service cost maximums schedule and additional covered services;
  - (5) ensuring that homemakers can provide personal care

services that may or may not involve contact with clients, including but not limited to:

- (A) bathing;
- (B) grooming;
- (C) toileting;
- (D) nail care;
- (E) transferring;
- (F) respiratory services;
- (G) exercise; or
- (H) positioning;
- (6) ensuring that homemaker program vendors are not restricted from hiring homemakers who are family members of clients or recommended by clients; the Department may not, by rule or policy, require homemakers who are family members of clients or recommended by clients to accept assignments in homes other than the client; and
- (7) ensuring that the State may access maximum federal matching funds by seeking approval for the Centers for Medicare and Medicaid Services for modifications to the State's home and community based services waiver and additional waiver opportunities in order to maximize federal matching funds; this shall include, but not be limited to, modification that reflects all changes in the Community Care Program services and all increases in the services cost maximum.

By January 1, 2009 or as soon after the end of the Cash and

Counseling Demonstration Project as is practicable, the Department may, based on its evaluation of the demonstration project, promulgate rules concerning personal assistant services, to include, but need not be limited to, qualifications, employment screening, rights under fair labor standards, training, fiduciary agent, and supervision requirements. All applicants shall be subject to the provisions of the Health Care Worker Background Check Act.

The Department shall develop procedures to enhance availability of services on evenings, weekends, and on an emergency basis to meet the respite needs of caregivers. Procedures shall be developed to permit the utilization of services in successive blocks of 24 hours up to the monthly maximum established by the Department. Workers providing these services shall be appropriately trained.

Beginning on the effective date of this Amendatory Act of 1991, no person may perform chore/housekeeping and home care aide services under a program authorized by this Section unless that person has been issued a certificate of pre-service to do so by his or her employing agency. Information gathered to effect such certification shall include (i) the person's name, (ii) the date the person was hired by his or her current employer, and (iii) the training, including dates and levels. Persons engaged in the program authorized by this Section before the effective date of this amendatory Act of 1991 shall be issued a certificate of all pre- and in-service training

from his or her employer upon submitting the necessary information. The employing agency shall be required to retain records of all staff pre- and in-service training, and shall provide such records to the Department upon request and upon termination of the employer's contract with the Department. In addition, the employing agency is responsible for the issuance of certifications of in-service training completed to their employees.

The Department is required to develop a system to ensure that persons working as home care aides and personal assistants receive increases in their wages when the federal minimum wage is increased by requiring vendors to certify that they are meeting the federal minimum wage statute for home care aides and personal assistants. An employer that cannot ensure that the minimum wage increase is being given to home care aides and personal assistants shall be denied any increase in reimbursement costs.

The Community Care Program Advisory Committee is created in the Department on Aging. The Director shall appoint individuals to serve in the Committee, who shall serve at their own expense. Members of the Committee must abide by all applicable ethics laws. The Committee shall advise the Department on issues related to the Department's program of services to prevent unnecessary institutionalization. The Committee shall meet on a bi-monthly basis and shall serve to identify and advise the Department on present and potential issues affecting

the service delivery network, the program's clients, and the Department and to recommend solution strategies. Persons appointed to the Committee shall be appointed on, but not limited to, their own and their agency's experience with the program, geographic representation, and willingness to serve. The Director shall appoint members to the Committee to represent provider, advocacy, policy research, and other constituencies committed to the delivery of high quality home and community-based services to older adults. Representatives shall be appointed to ensure representation from community care providers including, but not limited to, adult day service providers, homemaker providers, case coordination and case management units, emergency home response providers, statewide trade or labor unions that represent home care aides and direct care staff, area agencies on aging, adults over age 60, membership organizations representing older adults, and other organizational entities, providers of care, or individuals with demonstrated interest and expertise in the field of home and community care as determined by the Director.

Nominations may be presented from any agency or State association with interest in the program. The Director, or his or her designee, shall serve as the permanent co-chair of the advisory committee. One other co-chair shall be nominated and approved by the members of the committee on an annual basis. Committee members' terms of appointment shall be for 4 years with one-quarter of the appointees' terms expiring each year. A

member shall continue to serve until his or her replacement is named. The Department shall fill vacancies that have a remaining term of over one year, and this replacement shall occur through the annual replacement of expiring terms. The Director shall designate Department staff to provide technical assistance and staff support to the committee. Department representation shall not constitute membership of the committee. All Committee papers, issues, recommendations, reports, and meeting memoranda are advisory only. The Director, or his or her designee, shall make a written report, as requested by the Committee, regarding issues before the Committee.

The Department on Aging and the Department of Human Services shall cooperate in the development and submission of an annual report on programs and services provided under this Section. Such joint report shall be filed with the Governor and the General Assembly on or before September 30 each year.

The requirement for reporting to the General Assembly shall be satisfied by filing copies of the report with the Speaker, the Minority Leader and the Clerk of the House of Representatives and the President, the Minority Leader and the Secretary of the Senate and the Legislative Research Unit, as required by Section 3.1 of the General Assembly Organization Act and filing such additional copies with the State Government Report Distribution Center for the General Assembly as is required under paragraph (t) of Section 7 of the State Library

Act.

Those persons previously found eligible for receiving non-institutional services whose services were discontinued under the Emergency Budget Act of Fiscal Year 1992, and who do not meet the eligibility standards in effect on or after July 1, 1992, shall remain ineligible on and after July 1, 1992. Those persons previously not required to cost-share and who were required to cost-share effective March 1, 1992, shall continue to meet cost-share requirements on and after July 1, 1992. Beginning July 1, 1992, all clients will be required to meet eligibility, cost-share, and other requirements and will have services discontinued or altered when they fail to meet these requirements.

For the purposes of this Section, "flexible senior services" refers to services that require one-time or periodic expenditures including, but not limited to, respite care, home modification, assistive technology, housing assistance, and transportation.

(Source: P.A. 94-48, eff. 7-1-05; 94-269, eff. 7-19-05; 94-336, eff. 7-26-05; 94-954, eff. 6-27-06; 95-298, eff. 8-20-07; 95-473, eff. 8-27-07; 95-565, eff. 6-1-08; 95-876, eff. 8-21-08.)

(20 ILCS 105/4.02c)

Sec. 4.02c. Comprehensive Care in Residential Settings Demonstration Project.

## HB5499 Enrolled

- (a) The Department may establish and fund a demonstration program of bundled services designed to support the specialized needs of clients currently residing in projects that were formerly designated as Community Based Residential Facilities. Participating projects must hold a valid license, which remains unsuspended, unrevoked, and unexpired, under the provisions of the Assisted Living and Shared Housing Act.
  - (b) The demonstration program must include, at a minimum:
    - (1) 3 meals per day;
    - (2) routine housekeeping services;
    - (3) 24-hour-a-day security;
    - (4) an emergency response system;
    - (5) personal laundry and linen service;
    - (6) assistance with activities of daily living;
    - (7) medication management; and
    - (8) money management.

Optional services, such as transportation and social activities, may be provided.

(c) Reimbursement for the program shall be based on the client's level of need and functional impairment, as determined by the Department. Clients must meet all eligibility requirements established by rule. The Department may establish a capitated reimbursement mechanism based on the client's level of need and functional impairment. Reimbursement for program must be made to the Department-contracted provider delivering the services.

(d) The Department shall adopt rules and provide oversight for the project, with assistance and advice provided by the Assisted Living and Shared Housing Advisory Board and Assisted Living and Shared Housing Quality of Life Committee.

The project may be funded through the Department appropriations that may include Medicaid waiver funds.

(e) The Before January 1, 2008, the Department, in consultation with the Assisted Living and Shared Housing Advisory Board, may must report to the General Assembly on the results of the demonstration project. The report may must include, without limitation, any recommendations for changes or improvements, including changes or improvements in the administration of the program and an evaluation.

(Source: P.A. 93-775, eff. 1-1-05.)

(20 ILCS 105/4.11)

Sec. 4.11. AIDS awareness. The Department <u>may</u> <del>must</del> develop health programs and materials targeted to persons 50 years of age and more concerning the dangers of HIV and AIDS and sexually transmitted diseases.

(Source: P.A. 91-106, eff. 1-1-00.)

(20 ILCS 105/8.05) (from Ch. 23, par. 6108.05)

Sec. 8.05. Alzheimer's disease grants.

(a) As used in this Section, unless the context requires otherwise:

- (1) "Participant" means an individual with Alzheimer's disease or a disease of a related type, particularly in the moderate to severe stage, whose care, needs and behavioral problems make it difficult for the individual to participate in existing care programs. The individual may be 60 years of age or older on the presumption that he or she is a prospective recipient of service under this Act.
- (2) "Disease of a related type" means any of those irreversible brain disorders which result in the symptoms described in paragraph (4). This includes but is not limited to multi-infarct dementia and Parkinson's disease.
- (3) "Grantee" means any public or private nonprofit agency selected by the Department to develop a care program for participants under this Section.
- (4) "Care needs" or "behavioral problems" means the manifestations of symptoms which may include but are not limited to memory loss, aphasia (communication disorder), becoming lost or disoriented, confusion and agitation with the potential for combativeness and incontinence.
- (b) In an effort to address the needs of persons suffering from Alzheimer's disease or a disease of a related type, the Department <u>may shall</u> encourage the development of adult day care for these persons through administration of specialized Alzheimer's Day Care Resource Centers. These projects <u>may shall</u> be designed to identify and meet the unique needs of the affected population, including the use of special evaluation

standards and techniques that take into consideration both the physical and cognitive abilities of individual applicants or recipients.

The Department <u>may</u> shall establish at least one urban and one rural specialized Alzheimer's Day Care Resource Center. Each center shall be designed so as to meet the unique needs and protect the safety of each participant. Each center shall be staffed by persons specially trained to work with participants. Each center shall operate in concert with regional ADA Centers.

The Department shall contract with a public or private nonprofit agency or with professional persons in the fields of health or social services with expertise in Alzheimer's disease, a disease of a related type, or a related dementia to develop a training module that includes information on the symptoms and progress of the diseases and to develop appropriate techniques for dealing with the psychosocial, health, and physical needs of participants.

The training module  $\underline{may}$  shall be developed for specialized Alzheimer's Day Care Resource Centers and  $\underline{may}$  shall be available to other community based providers who serve this client population. The training module shall be owned and may be distributed by the Department.

<u>Subject to appropriation, grants may</u> <del>Grants shall</del> be awarded at current rates as set by the Department on Aging under Section 240.1910 of Title 89 of the Illinois

Administrative Code, with at least one urban and one rural program for the specialized Alzheimer's Day Care Resource Centers. The Department <u>may shall</u> adopt policies, priorities and guidelines to carry out the purposes of this Section.

- (c) A prospective grantee shall apply in a manner prescribed by the Department and shall:
  - (1) Identify the special care needs and behavioral problems of participants and design its program to meet those needs.
  - (2) Demonstrate that its program has adequate and appropriate staffing to meet the nursing, psychosocial and recreational needs of participants.
  - (3) Provide an outline of the design of its physical facilities and the safeguards which shall be used to protect the participants.
  - (4) Submit a plan for assisting individuals who cannot afford the entire cost of the program. This may include eligibility policies, standards and criteria that are unique to the needs and requirements of the population served under this Act, notwithstanding the Section 4.02 provisions of and related rules and regulations. This may also include but need not be limited to additional funding sources to provide supplemental aid and allowing family members to participate as volunteers at the facility.
    - (5) Submit a plan for using volunteers and volunteer

aids and provide an outline for adequate training of those volunteers.

- (6) Identify potential sources of funding for its facility and outline plans to seek additional funding to remain solvent. This may include private donations and foundation grants, Medicare reimbursement for specific services and the use of adult education and public health services.
  - (7) Establish family support groups.
- (8) Encourage family members to provide transportation to and from the facility for participants.
- (9) Concentrate on participants in the moderate to severe range of disability.
- (10) Provide a noon meal to participants. The meal may be provided by an organization providing meals to the elderly or needy.
- (11) Establish contact with local educational programs such as nursing and gerontology programs to provide onsite training to students.
- (12) Provide services to assist family members, including counseling and referral to other resources.
- (13) Serve as a model available to service providers for onsite training in the care of participants.
- (d) The Department shall periodically annually report to the General Assembly before December 1 on the pilot project grants. The report  $\underline{may}$  shall include but  $\underline{need}$  not be limited to

the following:

- (1) A description of the progress made in implementing the programs.
- (2) The number of grantees who have established programs under this Section.
- (3) The number and characteristics of participants served by the programs, including but not limited to age, sex, diagnosis, reason for admission, functional impairment, referral source, living situation, and payment source.
- (4) An evaluation of the usefulness of the programs in delaying the placement of the participants in institutions, providing respite to families who care for participants in the home and providing a setting for onsite training in the care of participants.
- (5) A description of findings on the appropriate level and type of care required to meet the nursing and psychosocial needs of the participants and appropriate environmental conditions and treatment methods.

(Source: P.A. 87-316; 87-895.)

(20 ILCS 105/8.06) (from Ch. 23, par. 6108.06)

Sec. 8.06. The Department  $\underline{may}$  shall develop and implement a plan for the increased incorporation of local and community senior citizen centers into the functions and responsibilities of area agencies on aging and for the increased input of local

and community senior citizen centers into the Department's policy making process.

(Source: P.A. 86-730.)

(20 ILCS 105/8.08)

Sec. 8.08. Older direct care worker recognition. Department shall present one award annually to older direct care workers in each of the following categories: Older American Act Services, Home Health Services, Community Care Program Services, Nursing Homes, and programs that provide housing with services licensed or certified by the State. The Department shall solicit nominations from associations representing providers of the named services or settings and trade associations representing applicable direct care workers. Nominations shall be presented in a format designated by the Department. Direct care workers honored with this award must be 55 years of age or older and shall be recognized for their dedication and commitment to improving the quality of aging in Illinois above and beyond the confines of their job description. Award recipients shall be honored before their peers at the Governor's Conference on Aging or at a similar venue, shall have their pictures displayed on the Department's website with their permission, and shall receive a letter of commendation from the Governor. The Department shall consult with the Coordinating Committee of State Agencies Serving Older Persons to determine which of the nominees shall be the

recipient in each category of service provision or setting. The Department shall include the recipients of these awards in all Senior Hall of Fame displays required by the Act on Aging. Except as otherwise prohibited by law, the Department may solicit private sector funding to underwrite the cost of all awards and recognition materials and shall request that all associations representing providers of the named services or settings and trade associations applicable to direct care workers publicize the awards and the award recipients in communications with their members.

(Source: P.A. 96-376, eff. 8-13-09.)

- (20 ILCS 105/3.04 rep.)
- (20 ILCS 105/4.02d rep.)
- (20 ILCS 105/4.10 rep.)
- (20 ILCS 105/7.02 rep.)
- (20 ILCS 105/8 rep.)
- (20 ILCS 105/8.01 rep.)
- (20 ILCS 105/8.02 rep.)
- (20 ILCS 105/8.03 rep.)

Section 15. The Illinois Act on the Aging is amended by repealing Sections 3.04, 4.02d, 4.10, 7.02, 8, 8.01, 8.02, and 8.03.

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

20 ILCS 105/8.03 rep.

## INDEX

## Statutes amended in order of appearance

20	ILCS	5/5-520	was 20 ILCS 5/6.27
20	ILCS	105/4.01	from Ch. 23, par. 6104.01
20	ILCS	105/4.02	from Ch. 23, par. 6104.02
20	ILCS	105/4.02c	
20	ILCS	105/4.11	
20	ILCS	105/8.05	from Ch. 23, par. 6108.05
20	ILCS	105/8.06	from Ch. 23, par. 6108.06
20	ILCS	105/8.08	
20	ILCS	105/3.04 rep.	
20	ILCS	105/4.02d rep.	
20	ILCS	105/4.10 rep.	
20	ILCS	105/7.02 rep.	
20	ILCS	105/8 rep.	
20	ILCS	105/8.01 rep.	
20	ILCS	105/8.02 rep.	