

**SB0187**



**101ST GENERAL ASSEMBLY**

**State of Illinois**

**2019 and 2020**

**SB0187**

Introduced 1/30/2019, by Sen. Ram Villivalam

**SYNOPSIS AS INTRODUCED:**

20 ILCS 105/4.02

from Ch. 23, par. 6104.02

Amends the Illinois Act on the Aging. Expands the Community Care Program to provide services to all persons, regardless of age, who have Alzheimer's disease or a related disorder as defined under the Alzheimer's Disease Assistance Act.

LRB101 02837 KTG 47845 b

FISCAL NOTE ACT  
MAY APPLY

**A BILL FOR**

1 AN ACT concerning State government.

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

4 Section 5. The Illinois Act on the Aging is amended by  
5 changing Section 4.02 as follows:

6 (20 ILCS 105/4.02) (from Ch. 23, par. 6104.02)

7 Sec. 4.02. Community Care Program. The Department shall  
8 establish a program of services to prevent unnecessary  
9 institutionalization of (i) persons age 60 and older in need of  
10 long term care or (ii) persons, regardless of age, who are  
11 established as persons who suffer from Alzheimer's disease or a  
12 related disorder under the Alzheimer's Disease Assistance Act,  
13 thereby enabling them to remain in their own homes or in other  
14 living arrangements. Such preventive services, which may be  
15 coordinated with other programs for the aged and monitored by  
16 area agencies on aging in cooperation with the Department, may  
17 include, but are not limited to, any or all of the following:

- 18 (a) (blank);  
19 (b) (blank);  
20 (c) home care aide services;  
21 (d) personal assistant services;  
22 (e) adult day services;  
23 (f) home-delivered meals;

- 1 (g) education in self-care;  
2 (h) personal care services;  
3 (i) adult day health services;  
4 (j) habilitation services;  
5 (k) respite care;  
6 (k-5) community reintegration services;  
7 (k-6) flexible senior services;  
8 (k-7) medication management;  
9 (k-8) emergency home response;  
10 (l) other nonmedical social services that may enable  
11 the person to become self-supporting; or  
12 (m) clearinghouse for information provided by senior  
13 citizen home owners who want to rent rooms to or share  
14 living space with other senior citizens.

15 The Department shall establish eligibility standards for  
16 such services. In determining the amount and nature of services  
17 for which a person may qualify, consideration shall not be  
18 given to the value of cash, property or other assets held in  
19 the name of the person's spouse pursuant to a written agreement  
20 dividing marital property into equal but separate shares or  
21 pursuant to a transfer of the person's interest in a home to  
22 his spouse, provided that the spouse's share of the marital  
23 property is not made available to the person seeking such  
24 services.

25 Beginning January 1, 2008, the Department shall require as  
26 a condition of eligibility that all new financially eligible

1 applicants apply for and enroll in medical assistance under  
2 Article V of the Illinois Public Aid Code in accordance with  
3 rules promulgated by the Department.

4 The Department shall, in conjunction with the Department of  
5 Public Aid (now Department of Healthcare and Family Services),  
6 seek appropriate amendments under Sections 1915 and 1924 of the  
7 Social Security Act. The purpose of the amendments shall be to  
8 extend eligibility for home and community based services under  
9 Sections 1915 and 1924 of the Social Security Act to persons  
10 who transfer to or for the benefit of a spouse those amounts of  
11 income and resources allowed under Section 1924 of the Social  
12 Security Act. Subject to the approval of such amendments, the  
13 Department shall extend the provisions of Section 5-4 of the  
14 Illinois Public Aid Code to persons who, but for the provision  
15 of home or community-based services, would require the level of  
16 care provided in an institution, as is provided for in federal  
17 law. Those persons no longer found to be eligible for receiving  
18 noninstitutional services due to changes in the eligibility  
19 criteria shall be given 45 days notice prior to actual  
20 termination. Those persons receiving notice of termination may  
21 contact the Department and request the determination be  
22 appealed at any time during the 45 day notice period. The  
23 target population identified for the purposes of this Section  
24 are persons age 60 and older with an identified service need  
25 and persons, regardless of age, who suffer from Alzheimer's  
26 disease or a related disorder under the Alzheimer's Disease

1 Assistance Act. Priority shall be given to those who are at  
2 imminent risk of institutionalization. The services shall be  
3 provided to eligible persons ~~age 60 and older~~ to the extent  
4 that the cost of the services together with the other personal  
5 maintenance expenses of the persons are reasonably related to  
6 the standards established for care in a group facility  
7 appropriate to the person's condition. These non-institutional  
8 services, pilot projects or experimental facilities may be  
9 provided as part of or in addition to those authorized by  
10 federal law or those funded and administered by the Department  
11 of Human Services. The Departments of Human Services,  
12 Healthcare and Family Services, Public Health, Veterans'  
13 Affairs, and Commerce and Economic Opportunity and other  
14 appropriate agencies of State, federal and local governments  
15 shall cooperate with the Department on Aging in the  
16 establishment and development of the non-institutional  
17 services. The Department shall require an annual audit from all  
18 personal assistant and home care aide vendors contracting with  
19 the Department under this Section. The annual audit shall  
20 assure that each audited vendor's procedures are in compliance  
21 with Department's financial reporting guidelines requiring an  
22 administrative and employee wage and benefits cost split as  
23 defined in administrative rules. The audit is a public record  
24 under the Freedom of Information Act. The Department shall  
25 execute, relative to the nursing home prescreening project,  
26 written inter-agency agreements with the Department of Human

1 Services and the Department of Healthcare and Family Services,  
2 to effect the following: (1) intake procedures and common  
3 eligibility criteria for those persons who are receiving  
4 non-institutional services; and (2) the establishment and  
5 development of non-institutional services in areas of the State  
6 where they are not currently available or are undeveloped. On  
7 and after July 1, 1996, all nursing home prescreenings for  
8 individuals 60 years of age or older and for other persons  
9 eligible for services under the Community Care Program shall be  
10 conducted by the Department.

11 As part of the Department on Aging's routine training of  
12 case managers and case manager supervisors, the Department may  
13 include information on family futures planning for persons who  
14 are age 60 or older and who are caregivers of their adult  
15 children with developmental disabilities and for persons with  
16 Alzheimer's disease or a related disorder. The content of the  
17 training shall be at the Department's discretion.

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

1 federal poverty standard.

2 The Department, or the Department's authorized  
3 representative, may recover the amount of moneys expended for  
4 services provided to or in behalf of a person under this  
5 Section by a claim against the person's estate or against the  
6 estate of the person's surviving spouse, but no recovery may be  
7 had until after the death of the surviving spouse, if any, and  
8 then only at such time when there is no surviving child who is  
9 under age 21 or blind or who has a permanent and total  
10 disability. This paragraph, however, shall not bar recovery, at  
11 the death of the person, of moneys for services provided to the  
12 person or in behalf of the person under this Section to which  
13 the person was not entitled; provided that such recovery shall  
14 not be enforced against any real estate while it is occupied as  
15 a homestead by the surviving spouse or other dependent, if no  
16 claims by other creditors have been filed against the estate,  
17 or, if such claims have been filed, they remain dormant for  
18 failure of prosecution or failure of the claimant to compel  
19 administration of the estate for the purpose of payment. This  
20 paragraph shall not bar recovery from the estate of a spouse,  
21 under Sections 1915 and 1924 of the Social Security Act and  
22 Section 5-4 of the Illinois Public Aid Code, who precedes a  
23 person receiving services under this Section in death. All  
24 moneys for services paid to or in behalf of the person under  
25 this Section shall be claimed for recovery from the deceased  
26 spouse's estate. "Homestead", as used in this paragraph, means

1 the dwelling house and contiguous real estate occupied by a  
2 surviving spouse or relative, as defined by the rules and  
3 regulations of the Department of Healthcare and Family  
4 Services, regardless of the value of the property.

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

7 (1) ensuring that in-home services included in the care  
8 plan are available on evenings and weekends;

9 (2) ensuring that care plans contain the services that  
10 eligible participants need based on the number of days in a  
11 month, not limited to specific blocks of time, as  
12 identified by the comprehensive assessment tool selected  
13 by the Department for use statewide, not to exceed the  
14 total monthly service cost maximum allowed for each  
15 service; the Department shall develop administrative rules  
16 to implement this item (2);

17 (3) ensuring that the participants have the right to  
18 choose the services contained in their care plan and to  
19 direct how those services are provided, based on  
20 administrative rules established by the Department;

21 (4) ensuring that the determination of need tool is  
22 accurate in determining the participants' level of need; to  
23 achieve this, the Department, in conjunction with the Older  
24 Adult Services Advisory Committee, shall institute a study  
25 of the relationship between the Determination of Need  
26 scores, level of need, service cost maximums, and the



1 development and utilization of service plans no later than  
2 May 1, 2008; findings and recommendations shall be  
3 presented to the Governor and the General Assembly no later  
4 than January 1, 2009; recommendations shall include all  
5 needed changes to the service cost maximums schedule and  
6 additional covered services;

7 (5) ensuring that homemakers can provide personal care  
8 services that may or may not involve contact with clients,  
9 including but not limited to:

10 (A) bathing;

11 (B) grooming;

12 (C) toileting;

13 (D) nail care;

14 (E) transferring;

15 (F) respiratory services;

16 (G) exercise; or

17 (H) positioning;

18 (6) ensuring that homemaker program vendors are not  
19 restricted from hiring homemakers who are family members of  
20 clients or recommended by clients; the Department may not,  
21 by rule or policy, require homemakers who are family  
22 members of clients or recommended by clients to accept  
23 assignments in homes other than the client;

24 (7) ensuring that the State may access maximum federal  
25 matching funds by seeking approval for the Centers for  
26 Medicare and Medicaid Services for modifications to the

1 State's home and community based services waiver and  
2 additional waiver opportunities, including applying for  
3 enrollment in the Balance Incentive Payment Program by May  
4 1, 2013, in order to maximize federal matching funds; this  
5 shall include, but not be limited to, modification that  
6 reflects all changes in the Community Care Program services  
7 and all increases in the services cost maximum;

8 (8) ensuring that the determination of need tool  
9 accurately reflects the service needs of individuals with  
10 Alzheimer's disease and related dementia disorders;

11 (9) ensuring that services are authorized accurately  
12 and consistently for the Community Care Program (CCP); the  
13 Department shall implement a Service Authorization policy  
14 directive; the purpose shall be to ensure that eligibility  
15 and services are authorized accurately and consistently in  
16 the CCP program; the policy directive shall clarify service  
17 authorization guidelines to Care Coordination Units and  
18 Community Care Program providers no later than May 1, 2013;

19 (10) working in conjunction with Care Coordination  
20 Units, the Department of Healthcare and Family Services,  
21 the Department of Human Services, Community Care Program  
22 providers, and other stakeholders to make improvements to  
23 the Medicaid claiming processes and the Medicaid  
24 enrollment procedures or requirements as needed,  
25 including, but not limited to, specific policy changes or  
26 rules to improve the up-front enrollment of participants in

1 the Medicaid program and specific policy changes or rules  
2 to insure more prompt submission of bills to the federal  
3 government to secure maximum federal matching dollars as  
4 promptly as possible; the Department on Aging shall have at  
5 least 3 meetings with stakeholders by January 1, 2014 in  
6 order to address these improvements;

7 (11) requiring home care service providers to comply  
8 with the rounding of hours worked provisions under the  
9 federal Fair Labor Standards Act (FLSA) and as set forth in  
10 29 CFR 785.48(b) by May 1, 2013;

11 (12) implementing any necessary policy changes or  
12 promulgating any rules, no later than January 1, 2014, to  
13 assist the Department of Healthcare and Family Services in  
14 moving as many participants as possible, consistent with  
15 federal regulations, into coordinated care plans if a care  
16 coordination plan that covers long term care is available  
17 in the recipient's area; and

18 (13) maintaining fiscal year 2014 rates at the same  
19 level established on January 1, 2013.

20 By January 1, 2009 or as soon after the end of the Cash and  
21 Counseling Demonstration Project as is practicable, the  
22 Department may, based on its evaluation of the demonstration  
23 project, promulgate rules concerning personal assistant  
24 services, to include, but need not be limited to,  
25 qualifications, employment screening, rights under fair labor  
26 standards, training, fiduciary agent, and supervision

1 requirements. All applicants shall be subject to the provisions  
2 of the Health Care Worker Background Check Act.

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

10 Beginning on the effective date of this amendatory Act of  
11 1991, no person may perform chore/housekeeping and home care  
12 aide services under a program authorized by this Section unless  
13 that person has been issued a certificate of pre-service to do  
14 so by his or her employing agency. Information gathered to  
15 effect such certification shall include (i) the person's name,  
16 (ii) the date the person was hired by his or her current  
17 employer, and (iii) the training, including dates and levels.  
18 Persons engaged in the program authorized by this Section  
19 before the effective date of this amendatory Act of 1991 shall  
20 be issued a certificate of all pre- and in-service training  
21 from his or her employer upon submitting the necessary  
22 information. The employing agency shall be required to retain  
23 records of all staff pre- and in-service training, and shall  
24 provide such records to the Department upon request and upon  
25 termination of the employer's contract with the Department. In  
26 addition, the employing agency is responsible for the issuance

1 of certifications of in-service training completed to their  
2 employees.

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

12 The Community Care Program Advisory Committee is created in  
13 the Department on Aging. The Director shall appoint individuals  
14 to serve in the Committee, who shall serve at their own  
15 expense. Members of the Committee must abide by all applicable  
16 ethics laws. The Committee shall advise the Department on  
17 issues related to the Department's program of services to  
18 prevent unnecessary institutionalization. The Committee shall  
19 meet on a bi-monthly basis and shall serve to identify and  
20 advise the Department on present and potential issues affecting  
21 the service delivery network, the program's clients, and the  
22 Department and to recommend solution strategies. Persons  
23 appointed to the Committee shall be appointed on, but not  
24 limited to, their own and their agency's experience with the  
25 program, geographic representation, and willingness to serve.  
26 The Director shall appoint members to the Committee to

1 represent provider, advocacy, policy research, and other  
2 constituencies committed to the delivery of high quality home  
3 and community-based services to older adults and to persons  
4 with Alzheimer's disease or a related disorder.

5 Representatives shall be appointed to ensure representation  
6 from community care providers including, but not limited to,  
7 adult day service providers, homemaker providers, case  
8 coordination and case management units, emergency home  
9 response providers, statewide trade or labor unions that  
10 represent home care aides and direct care staff, area agencies  
11 on aging, adults over age 60, membership organizations  
12 representing older adults, and other organizational entities,  
13 providers of care, or individuals with demonstrated interest  
14 and expertise in the field of home and community care as  
15 determined by the Director.

16 Nominations may be presented from any agency or State  
17 association with interest in the program. The Director, or his  
18 or her designee, shall serve as the permanent co-chair of the  
19 advisory committee. One other co-chair shall be nominated and  
20 approved by the members of the committee on an annual basis.  
21 Committee members' terms of appointment shall be for 4 years  
22 with one-quarter of the appointees' terms expiring each year. A  
23 member shall continue to serve until his or her replacement is  
24 named. The Department shall fill vacancies that have a  
25 remaining term of over one year, and this replacement shall  
26 occur through the annual replacement of expiring terms. The

1 Director shall designate Department staff to provide technical  
2 assistance and staff support to the committee. Department  
3 representation shall not constitute membership of the  
4 committee. All Committee papers, issues, recommendations,  
5 reports, and meeting memoranda are advisory only. The Director,  
6 or his or her designee, shall make a written report, as  
7 requested by the Committee, regarding issues before the  
8 Committee.

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

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

24 Those persons previously found eligible for receiving  
25 non-institutional services whose services were discontinued  
26 under the Emergency Budget Act of Fiscal Year 1992, and who do

1 not meet the eligibility standards in effect on or after July  
2 1, 1992, shall remain ineligible on and after July 1, 1992.  
3 Those persons previously not required to cost-share and who  
4 were required to cost-share effective March 1, 1992, shall  
5 continue to meet cost-share requirements on and after July 1,  
6 1992. Beginning July 1, 1992, all clients will be required to  
7 meet eligibility, cost-share, and other requirements and will  
8 have services discontinued or altered when they fail to meet  
9 these requirements.

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

15 The Department shall implement an electronic service  
16 verification based on global positioning systems or other  
17 cost-effective technology for the Community Care Program no  
18 later than January 1, 2014.

19 The Department shall require, as a condition of  
20 eligibility, enrollment in the medical assistance program  
21 under Article V of the Illinois Public Aid Code (i) beginning  
22 August 1, 2013, if the Auditor General has reported that the  
23 Department has failed to comply with the reporting requirements  
24 of Section 2-27 of the Illinois State Auditing Act; or (ii)  
25 beginning June 1, 2014, if the Auditor General has reported  
26 that the Department has not undertaken the required actions



1 listed in the report required by subsection (a) of Section 2-27  
2 of the Illinois State Auditing Act.

3 The Department shall delay Community Care Program services  
4 until an applicant is determined eligible for medical  
5 assistance under Article V of the Illinois Public Aid Code (i)  
6 beginning August 1, 2013, if the Auditor General has reported  
7 that the Department has failed to comply with the reporting  
8 requirements of Section 2-27 of the Illinois State Auditing  
9 Act; or (ii) beginning June 1, 2014, if the Auditor General has  
10 reported that the Department has not undertaken the required  
11 actions listed in the report required by subsection (a) of  
12 Section 2-27 of the Illinois State Auditing Act.

13 The Department shall implement co-payments for the  
14 Community Care Program at the federally allowable maximum level  
15 (i) beginning August 1, 2013, if the Auditor General has  
16 reported that the Department has failed to comply with the  
17 reporting requirements of Section 2-27 of the Illinois State  
18 Auditing Act; or (ii) beginning June 1, 2014, if the Auditor  
19 General has reported that the Department has not undertaken the  
20 required actions listed in the report required by subsection  
21 (a) of Section 2-27 of the Illinois State Auditing Act.

22 The Department shall provide a bi-monthly report on the  
23 progress of the Community Care Program reforms set forth in  
24 this amendatory Act of the 98th General Assembly to the  
25 Governor, the Speaker of the House of Representatives, the  
26 Minority Leader of the House of Representatives, the President

1 of the Senate, and the Minority Leader of the Senate.

2 The Department shall conduct a quarterly review of Care  
3 Coordination Unit performance and adherence to service  
4 guidelines. The quarterly review shall be reported to the  
5 Speaker of the House of Representatives, the Minority Leader of  
6 the House of Representatives, the President of the Senate, and  
7 the Minority Leader of the Senate. The Department shall collect  
8 and report longitudinal data on the performance of each care  
9 coordination unit. Nothing in this paragraph shall be construed  
10 to require the Department to identify specific care  
11 coordination units.

12 In regard to community care providers, failure to comply  
13 with Department on Aging policies shall be cause for  
14 disciplinary action, including, but not limited to,  
15 disqualification from serving Community Care Program clients.  
16 Each provider, upon submission of any bill or invoice to the  
17 Department for payment for services rendered, shall include a  
18 notarized statement, under penalty of perjury pursuant to  
19 Section 1-109 of the Code of Civil Procedure, that the provider  
20 has complied with all Department policies.

21 The Director of the Department on Aging shall make  
22 information available to the State Board of Elections as may be  
23 required by an agreement the State Board of Elections has  
24 entered into with a multi-state voter registration list  
25 maintenance system.

26 Within 30 days after July 6, 2017 (the effective date of

1 Public Act 100-23), rates shall be increased to \$18.29 per  
2 hour, for the purpose of increasing, by at least \$.72 per hour,  
3 the wages paid by those vendors to their employees who provide  
4 homemaker services. The Department shall pay an enhanced rate  
5 under the Community Care Program to those in-home service  
6 provider agencies that offer health insurance coverage as a  
7 benefit to their direct service worker employees consistent  
8 with the mandates of Public Act 95-713. For State fiscal years  
9 2018 and 2019, the enhanced rate shall be \$1.77 per hour. The  
10 rate shall be adjusted using actuarial analysis based on the  
11 cost of care, but shall not be set below \$1.77 per hour. The  
12 Department shall adopt rules, including emergency rules under  
13 subsections (y) and (bb) of Section 5-45 of the Illinois  
14 Administrative Procedure Act, to implement the provisions of  
15 this paragraph.

16 The General Assembly finds it necessary to authorize an  
17 aggressive Medicaid enrollment initiative designed to maximize  
18 federal Medicaid funding for the Community Care Program which  
19 produces significant savings for the State of Illinois. The  
20 Department on Aging shall establish and implement a Community  
21 Care Program Medicaid Initiative. Under the Initiative, the  
22 Department on Aging shall, at a minimum: (i) provide an  
23 enhanced rate to adequately compensate care coordination units  
24 to enroll eligible Community Care Program clients into  
25 Medicaid; (ii) use recommendations from a stakeholder  
26 committee on how best to implement the Initiative; and (iii)

1 establish requirements for State agencies to make enrollment in  
2 the State's Medical Assistance program easier for seniors.

3 The Community Care Program Medicaid Enrollment Oversight  
4 Subcommittee is created as a subcommittee of the Older Adult  
5 Services Advisory Committee established in Section 35 of the  
6 Older Adult Services Act to make recommendations on how best to  
7 increase the number of medical assistance recipients who are  
8 enrolled in the Community Care Program. The Subcommittee shall  
9 consist of all of the following persons who must be appointed  
10 within 30 days after the effective date of this amendatory Act  
11 of the 100th General Assembly:

12 (1) The Director of Aging, or his or her designee, who  
13 shall serve as the chairperson of the Subcommittee.

14 (2) One representative of the Department of Healthcare  
15 and Family Services, appointed by the Director of  
16 Healthcare and Family Services.

17 (3) One representative of the Department of Human  
18 Services, appointed by the Secretary of Human Services.

19 (4) One individual representing a care coordination  
20 unit, appointed by the Director of Aging.

21 (5) One individual from a non-governmental statewide  
22 organization that advocates for seniors, appointed by the  
23 Director of Aging.

24 (6) One individual representing Area Agencies on  
25 Aging, appointed by the Director of Aging.

26 (7) One individual from a statewide association

1 dedicated to Alzheimer's care, support, and research,  
2 appointed by the Director of Aging.

3 (8) One individual from an organization that employs  
4 persons who provide services under the Community Care  
5 Program, appointed by the Director of Aging.

6 (9) One member of a trade or labor union representing  
7 persons who provide services under the Community Care  
8 Program, appointed by the Director of Aging.

9 (10) One member of the Senate, who shall serve as  
10 co-chairperson, appointed by the President of the Senate.

11 (11) One member of the Senate, who shall serve as  
12 co-chairperson, appointed by the Minority Leader of the  
13 Senate.

14 (12) One member of the House of Representatives, who  
15 shall serve as co-chairperson, appointed by the Speaker of  
16 the House of Representatives.

17 (13) One member of the House of Representatives, who  
18 shall serve as co-chairperson, appointed by the Minority  
19 Leader of the House of Representatives.

20 (14) One individual appointed by a labor organization  
21 representing frontline employees at the Department of  
22 Human Services.

23 The Subcommittee shall provide oversight to the Community  
24 Care Program Medicaid Initiative and shall meet quarterly. At  
25 each Subcommittee meeting the Department on Aging shall provide  
26 the following data sets to the Subcommittee: (A) the number of

1 Illinois residents, categorized by planning and service area,  
2 who are receiving services under the Community Care Program and  
3 are enrolled in the State's Medical Assistance Program; (B) the  
4 number of Illinois residents, categorized by planning and  
5 service area, who are receiving services under the Community  
6 Care Program, but are not enrolled in the State's Medical  
7 Assistance Program; and (C) the number of Illinois residents,  
8 categorized by planning and service area, who are receiving  
9 services under the Community Care Program and are eligible for  
10 benefits under the State's Medical Assistance Program, but are  
11 not enrolled in the State's Medical Assistance Program. In  
12 addition to this data, the Department on Aging shall provide  
13 the Subcommittee with plans on how the Department on Aging will  
14 reduce the number of Illinois residents who are not enrolled in  
15 the State's Medical Assistance Program but who are eligible for  
16 medical assistance benefits. The Department on Aging shall  
17 enroll in the State's Medical Assistance Program those Illinois  
18 residents who receive services under the Community Care Program  
19 and are eligible for medical assistance benefits but are not  
20 enrolled in the State's Medicaid Assistance Program. The data  
21 provided to the Subcommittee shall be made available to the  
22 public via the Department on Aging's website.

23 The Department on Aging, with the involvement of the  
24 Subcommittee, shall collaborate with the Department of Human  
25 Services and the Department of Healthcare and Family Services  
26 on how best to achieve the responsibilities of the Community

1 Care Program Medicaid Initiative.

2 The Department on Aging, the Department of Human Services,  
3 and the Department of Healthcare and Family Services shall  
4 coordinate and implement a streamlined process for seniors to  
5 access benefits under the State's Medical Assistance Program.

6 The Subcommittee shall collaborate with the Department of  
7 Human Services on the adoption of a uniform application  
8 submission process. The Department of Human Services and any  
9 other State agency involved with processing the medical  
10 assistance application of any person enrolled in the Community  
11 Care Program shall include the appropriate care coordination  
12 unit in all communications related to the determination or  
13 status of the application.

14 The Community Care Program Medicaid Initiative shall  
15 provide targeted funding to care coordination units to help  
16 seniors and other persons eligible for services under the  
17 Community Care Program complete their applications for medical  
18 assistance benefits. On and after July 1, 2019, care  
19 coordination units shall receive no less than \$200 per  
20 completed application.

21 The Community Care Program Medicaid Initiative shall cease  
22 operation 5 years after the effective date of this amendatory  
23 Act of the 100th General Assembly, after which the Subcommittee  
24 shall dissolve.

25 (Source: P.A. 99-143, eff. 7-27-15; 100-23, eff. 7-6-17;  
26 100-587, eff. 6-4-18.)