



## 102ND GENERAL ASSEMBLY

### State of Illinois

2021 and 2022

HB5186

Introduced 1/31/2022, by Rep. William Davis

#### SYNOPSIS AS INTRODUCED:

See Index

Amends the Illinois Act on the Aging. Removes a provision concerning a bi-monthly report on the progress of the Community Care Program. Amends the Illinois Coal and Energy Development Bond Act. Repeals specified provisions concerning bonds and investments. Amends the Department of Human Services Act. Removes provisions concerning the reporting of allegations of adult students with disabilities. Amends the State Finance Act. Repeals provisions concerning cash flow borrowing and general funds liquidity. Amends the Illinois Procurement Code. Removes a provision requiring the Department of Central Management Services to report on specified State agency reports. Amends the Community Services Act. Removes provisions concerning the creation and duties of a commission related to the financing for community services. Amends the Unified Code of Corrections. Repeals provisions concerning specified annual reports and a residential and transition treatment program for women. Amends the Workers' Compensation Act. Provides requirements concerning the selection of certified independent arbitrators for claims by former and current employees of the Illinois Workers' Compensation Commission. Repeals provision creating a Commission Review Board. Makes conforming and other changes. Effective immediately.

LRB102 24774 RJF 34017 b

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 persons age 60 and older in need of  
10 long term care or who are established as persons who suffer  
11 from Alzheimer's disease or a related disorder under the  
12 Alzheimer's Disease Assistance Act, thereby enabling them to  
13 remain in their own homes or in other living arrangements.  
14 Such preventive services, which may be coordinated with other  
15 programs for the aged and monitored by area agencies on aging  
16 in cooperation with the Department, may include, but are not  
17 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  
17 services for which a person may qualify, consideration shall  
18 not be given to the value of cash, property or other assets  
19 held in the name of the person's spouse pursuant to a written  
20 agreement dividing marital property into equal but separate  
21 shares or pursuant to a transfer of the person's interest in a  
22 home to his spouse, provided that the spouse's share of the  
23 marital property is not made available to the person seeking  
24 such 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  
5 of Public Aid (now Department of Healthcare and Family  
6 Services), seek appropriate amendments under Sections 1915 and  
7 1924 of the Social Security Act. The purpose of the amendments  
8 shall be to extend eligibility for home and community based  
9 services under Sections 1915 and 1924 of the Social Security  
10 Act to persons who transfer to or for the benefit of a spouse  
11 those amounts of income and resources allowed under Section  
12 1924 of the Social Security Act. Subject to the approval of  
13 such amendments, the Department shall extend the provisions of  
14 Section 5-4 of the Illinois Public Aid Code to persons who, but  
15 for the provision of home or community-based services, would  
16 require the level of care provided in an institution, as is  
17 provided for in federal law. Those persons no longer found to  
18 be eligible for receiving noninstitutional services due to  
19 changes in the eligibility criteria shall be given 45 days  
20 notice prior to actual termination. Those persons receiving  
21 notice of termination may contact the Department and request  
22 the determination be appealed at any time during the 45 day  
23 notice period. The target population identified for the  
24 purposes of this Section are persons age 60 and older with an  
25 identified service need. Priority shall be given to those who  
26 are at imminent risk of institutionalization. The services

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

1 eligibility criteria for those persons who are receiving  
2 non-institutional services; and (2) the establishment and  
3 development of non-institutional services in areas of the  
4 State where they are not currently available or are  
5 undeveloped. On and after July 1, 1996, all nursing home  
6 prescreenings for individuals 60 years of age or older shall  
7 be conducted by the Department.

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

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

24 The Department, or the Department's authorized  
25 representative, may recover the amount of moneys expended for  
26 services provided to or in behalf of a person under this

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

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

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

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

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

17           (4) ensuring that the determination of need tool is  
18 accurate in determining the participants' level of need;  
19 to achieve this, the Department, in conjunction with the  
20 Older Adult Services Advisory Committee, shall institute a  
21 study of the relationship between the Determination of  
22 Need scores, level of need, service cost maximums, and the  
23 development and utilization of service plans no later than  
24 May 1, 2008; findings and recommendations shall be  
25 presented to the Governor and the General Assembly no  
26 later than January 1, 2009; recommendations shall include



1 all needed changes to the service cost maximums schedule  
2 and additional covered services;

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

6 (A) bathing;

7 (B) grooming;

8 (C) toileting;

9 (D) nail care;

10 (E) transferring;

11 (F) respiratory services;

12 (G) exercise; or

13 (H) positioning;

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

20 (7) ensuring that the State may access maximum federal  
21 matching funds by seeking approval for the Centers for  
22 Medicare and Medicaid Services for modifications to the  
23 State's home and community based services waiver and  
24 additional waiver opportunities, including applying for  
25 enrollment in the Balance Incentive Payment Program by May  
26 1, 2013, in order to maximize federal matching funds; this

1 shall include, but not be limited to, modification that  
2 reflects all changes in the Community Care Program  
3 services and all increases in the services cost maximum;

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

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

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

1 dollars as promptly as possible; the Department on Aging  
2 shall have at least 3 meetings with stakeholders by  
3 January 1, 2014 in order to address these improvements;

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

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

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

17 By January 1, 2009 or as soon after the end of the Cash and  
18 Counseling Demonstration Project as is practicable, the  
19 Department may, based on its evaluation of the demonstration  
20 project, promulgate rules concerning personal assistant  
21 services, to include, but need not be limited to,  
22 qualifications, employment screening, rights under fair labor  
23 standards, training, fiduciary agent, and supervision  
24 requirements. All applicants shall be subject to the  
25 provisions of the Health Care Worker Background Check Act.

26 The Department shall develop procedures to enhance

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

7 Beginning on the effective date of this amendatory Act of  
8 1991, no person may perform chore/housekeeping and home care  
9 aide services under a program authorized by this Section  
10 unless that person has been issued a certificate of  
11 pre-service to do so by his or her employing agency.  
12 Information gathered to effect such certification shall  
13 include (i) the person's name, (ii) the date the person was  
14 hired by his or her current employer, and (iii) the training,  
15 including dates and levels. Persons engaged in the program  
16 authorized by this Section before the effective date of this  
17 amendatory Act of 1991 shall be issued a certificate of all  
18 pre- and in-service training from his or her employer upon  
19 submitting the necessary information. The employing agency  
20 shall be required to retain records of all staff pre- and  
21 in-service training, and shall provide such records to the  
22 Department upon request and upon termination of the employer's  
23 contract with the Department. In addition, the employing  
24 agency is responsible for the issuance of certifications of  
25 in-service training completed to their employees.

26 The Department is required to develop a system to ensure

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

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

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

12 Nominations may be presented from any agency or State  
13 association with interest in the program. The Director, or his  
14 or her designee, shall serve as the permanent co-chair of the  
15 advisory committee. One other co-chair shall be nominated and  
16 approved by the members of the committee on an annual basis.  
17 Committee members' terms of appointment shall be for 4 years  
18 with one-quarter of the appointees' terms expiring each year.  
19 A member shall continue to serve until his or her replacement  
20 is named. The Department shall fill vacancies that have a  
21 remaining term of over one year, and this replacement shall  
22 occur through the annual replacement of expiring terms. The  
23 Director shall designate Department staff to provide technical  
24 assistance and staff support to the committee. Department  
25 representation shall not constitute membership of the  
26 committee. All Committee papers, issues, recommendations,

1 reports, and meeting memoranda are advisory only. The  
2 Director, or his or her designee, shall make a written report,  
3 as requested by the Committee, regarding issues before the  
4 Committee.

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

10 The requirement for reporting to the General Assembly  
11 shall be satisfied by filing copies of the report as required  
12 by Section 3.1 of the General Assembly Organization Act and  
13 filing such additional copies with the State Government Report  
14 Distribution Center for the General Assembly as is required  
15 under paragraph (t) of Section 7 of the State Library Act.

16 Those persons previously found eligible for receiving  
17 non-institutional services whose services were discontinued  
18 under the Emergency Budget Act of Fiscal Year 1992, and who do  
19 not meet the eligibility standards in effect on or after July  
20 1, 1992, shall remain ineligible on and after July 1, 1992.  
21 Those persons previously not required to cost-share and who  
22 were required to cost-share effective March 1, 1992, shall  
23 continue to meet cost-share requirements on and after July 1,  
24 1992. Beginning July 1, 1992, all clients will be required to  
25 meet eligibility, cost-share, and other requirements and will  
26 have services discontinued or altered when they fail to meet

1 these requirements.

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

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

11 The Department shall require, as a condition of  
12 eligibility, enrollment in the medical assistance program  
13 under Article V of the Illinois Public Aid Code (i) beginning  
14 August 1, 2013, if the Auditor General has reported that the  
15 Department has failed to comply with the reporting  
16 requirements of Section 2-27 of the Illinois State Auditing  
17 Act; or (ii) beginning June 1, 2014, if the Auditor General has  
18 reported that the Department has not undertaken the required  
19 actions listed in the report required by subsection (a) of  
20 Section 2-27 of the Illinois State Auditing Act.

21 The Department shall delay Community Care Program services  
22 until an applicant is determined eligible for medical  
23 assistance under Article V of the Illinois Public Aid Code (i)  
24 beginning August 1, 2013, if the Auditor General has reported  
25 that the Department has failed to comply with the reporting  
26 requirements of Section 2-27 of the Illinois State Auditing



1 Act; or (ii) beginning June 1, 2014, if the Auditor General has  
2 reported that the Department has not undertaken the required  
3 actions listed in the report required by subsection (a) of  
4 Section 2-27 of the Illinois State Auditing Act.

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

15 ~~The Department shall provide a bi-monthly report on the~~  
16 ~~progress of the Community Care Program reforms set forth in~~  
17 ~~this amendatory Act of the 98th General Assembly to the~~  
18 ~~Governor, the Speaker of the House of Representatives, the~~  
19 ~~Minority Leader of the House of Representatives, the President~~  
20 ~~of the Senate, and the Minority Leader of the Senate.~~

21 The Department shall conduct a quarterly review of Care  
22 Coordination Unit performance and adherence to service  
23 guidelines. The quarterly review shall be reported to the  
24 Speaker of the House of Representatives, the Minority Leader  
25 of the House of Representatives, the President of the Senate,  
26 and the Minority Leader of the Senate. The Department shall

1 collect and report longitudinal data on the performance of  
2 each care coordination unit. Nothing in this paragraph shall  
3 be construed to require the Department to identify specific  
4 care coordination units.

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

14 The Director of the Department on Aging shall make  
15 information available to the State Board of Elections as may  
16 be required by an agreement the State Board of Elections has  
17 entered into with a multi-state voter registration list  
18 maintenance system.

19 Within 30 days after July 6, 2017 (the effective date of  
20 Public Act 100-23), rates shall be increased to \$18.29 per  
21 hour, for the purpose of increasing, by at least \$.72 per hour,  
22 the wages paid by those vendors to their employees who provide  
23 homemaker services. The Department shall pay an enhanced rate  
24 under the Community Care Program to those in-home service  
25 provider agencies that offer health insurance coverage as a  
26 benefit to their direct service worker employees consistent

1 with the mandates of Public Act 95-713. For State fiscal years  
2 2018 and 2019, the enhanced rate shall be \$1.77 per hour. The  
3 rate shall be adjusted using actuarial analysis based on the  
4 cost of care, but shall not be set below \$1.77 per hour. The  
5 Department shall adopt rules, including emergency rules under  
6 subsections (y) and (bb) of Section 5-45 of the Illinois  
7 Administrative Procedure Act, to implement the provisions of  
8 this paragraph.

9 The General Assembly finds it necessary to authorize an  
10 aggressive Medicaid enrollment initiative designed to maximize  
11 federal Medicaid funding for the Community Care Program which  
12 produces significant savings for the State of Illinois. The  
13 Department on Aging shall establish and implement a Community  
14 Care Program Medicaid Initiative. Under the Initiative, the  
15 Department on Aging shall, at a minimum: (i) provide an  
16 enhanced rate to adequately compensate care coordination units  
17 to enroll eligible Community Care Program clients into  
18 Medicaid; (ii) use recommendations from a stakeholder  
19 committee on how best to implement the Initiative; and (iii)  
20 establish requirements for State agencies to make enrollment  
21 in the State's Medical Assistance program easier for seniors.

22 The Community Care Program Medicaid Enrollment Oversight  
23 Subcommittee is created as a subcommittee of the Older Adult  
24 Services Advisory Committee established in Section 35 of the  
25 Older Adult Services Act to make recommendations on how best  
26 to increase the number of medical assistance recipients who

1 are enrolled in the Community Care Program. The Subcommittee  
2 shall consist of all of the following persons who must be  
3 appointed within 30 days after the effective date of this  
4 amendatory Act of the 100th General Assembly:

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

7 (2) One representative of the Department of Healthcare  
8 and Family Services, appointed by the Director of  
9 Healthcare and Family Services.

10 (3) One representative of the Department of Human  
11 Services, appointed by the Secretary of Human Services.

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

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

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

19 (7) One individual from a statewide association  
20 dedicated to Alzheimer's care, support, and research,  
21 appointed by the Director of Aging.

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

25 (9) One member of a trade or labor union representing  
26 persons who provide services under the Community Care

1 Program, appointed by the Director of Aging.

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

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

7 (12) One member of the House of Representatives, who  
8 shall serve as co-chairperson, appointed by the Speaker of  
9 the House of Representatives.

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

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

16 The Subcommittee shall provide oversight to the Community  
17 Care Program Medicaid Initiative and shall meet quarterly. At  
18 each Subcommittee meeting the Department on Aging shall  
19 provide the following data sets to the Subcommittee: (A) the  
20 number of Illinois residents, categorized by planning and  
21 service area, who are receiving services under the Community  
22 Care Program and are enrolled in the State's Medical  
23 Assistance Program; (B) the number of Illinois residents,  
24 categorized by planning and service area, who are receiving  
25 services under the Community Care Program, but are not  
26 enrolled in the State's Medical Assistance Program; and (C)

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

17 The Department on Aging, with the involvement of the  
18 Subcommittee, shall collaborate with the Department of Human  
19 Services and the Department of Healthcare and Family Services  
20 on how best to achieve the responsibilities of the Community  
21 Care Program Medicaid Initiative.

22 The Department on Aging, the Department of Human Services,  
23 and the Department of Healthcare and Family Services shall  
24 coordinate and implement a streamlined process for seniors to  
25 access benefits under the State's Medical Assistance Program.

26 The Subcommittee shall collaborate with the Department of

1 Human Services on the adoption of a uniform application  
2 submission process. The Department of Human Services and any  
3 other State agency involved with processing the medical  
4 assistance application of any person enrolled in the Community  
5 Care Program shall include the appropriate care coordination  
6 unit in all communications related to the determination or  
7 status of the application.

8 The Community Care Program Medicaid Initiative shall  
9 provide targeted funding to care coordination units to help  
10 seniors complete their applications for medical assistance  
11 benefits. On and after July 1, 2019, care coordination units  
12 shall receive no less than \$200 per completed application,  
13 which rate may be included in a bundled rate for initial intake  
14 services when Medicaid application assistance is provided in  
15 conjunction with the initial intake process for new program  
16 participants.

17 The Community Care Program Medicaid Initiative shall cease  
18 operation 5 years after the effective date of this amendatory  
19 Act of the 100th General Assembly, after which the  
20 Subcommittee shall dissolve.

21 (Source: P.A. 100-23, eff. 7-6-17; 100-587, eff. 6-4-18;  
22 100-1148, eff. 12-10-18; 101-10, eff. 6-5-19.)

23 (20 ILCS 1110/7 rep.)

24 (20 ILCS 1110/8 rep.)

25 (20 ILCS 1110/9 rep.)

1 (20 ILCS 1110/10 rep.)

2 (20 ILCS 1110/11 rep.)

3 (20 ILCS 1110/12 rep.)

4 (20 ILCS 1110/13 rep.)

5 (20 ILCS 1110/14 rep.)

6 (20 ILCS 1110/15 rep.)

7 (20 ILCS 1110/16 rep.)

8 (20 ILCS 1110/17 rep.)

9 Section 10. The Illinois Coal and Energy Development Bond  
10 Act is amended by repealing Sections 7, 8, 9, 10, 11, 12, 13,  
11 14, 15, 16, and 17.

12 Section 15. The Department of Human Services Act is  
13 amended by changing Section 1-17 as follows:

14 (20 ILCS 1305/1-17)

15 Sec. 1-17. Inspector General.

16 (a) Nature and purpose. It is the express intent of the  
17 General Assembly to ensure the health, safety, and financial  
18 condition of individuals receiving services in this State due  
19 to mental illness, developmental disability, or both by  
20 protecting those persons from acts of abuse, neglect, or both  
21 by service providers. To that end, the Office of the Inspector  
22 General for the Department of Human Services is created to  
23 investigate and report upon allegations of the abuse, neglect,  
24 or financial exploitation of individuals receiving services



1 within mental health facilities, developmental disabilities  
2 facilities, and community agencies operated, licensed, funded,  
3 or certified by the Department of Human Services, but not  
4 licensed or certified by any other State agency.

5 (b) Definitions. The following definitions apply to this  
6 Section:

7 ~~"Adult student with a disability" means an adult student,~~  
8 ~~age 18 through 21, inclusive, with an Individual Education~~  
9 ~~Program, other than a resident of a facility licensed by the~~  
10 ~~Department of Children and Family Services in accordance with~~  
11 ~~the Child Care Act of 1969. For purposes of this definition,~~  
12 ~~"through age 21, inclusive", means through the day before the~~  
13 ~~student's 22nd birthday.~~

14 "Agency" or "community agency" means (i) a community  
15 agency licensed, funded, or certified by the Department, but  
16 not licensed or certified by any other human services agency  
17 of the State, to provide mental health service or  
18 developmental disabilities service, or (ii) a program  
19 licensed, funded, or certified by the Department, but not  
20 licensed or certified by any other human services agency of  
21 the State, to provide mental health service or developmental  
22 disabilities service.

23 "Aggravating circumstance" means a factor that is  
24 attendant to a finding and that tends to compound or increase  
25 the culpability of the accused.

26 "Allegation" means an assertion, complaint, suspicion, or

1 incident involving any of the following conduct by an  
2 employee, facility, or agency against an individual or  
3 individuals: mental abuse, physical abuse, sexual abuse,  
4 neglect, or financial exploitation.

5 "Day" means working day, unless otherwise specified.

6 "Deflection" means a situation in which an individual is  
7 presented for admission to a facility or agency, and the  
8 facility staff or agency staff do not admit the individual.  
9 "Deflection" includes triage, redirection, and denial of  
10 admission.

11 "Department" means the Department of Human Services.

12 "Developmental disability" means "developmental  
13 disability" as defined in the Mental Health and Developmental  
14 Disabilities Code.

15 "Egregious neglect" means a finding of neglect as  
16 determined by the Inspector General that (i) represents a  
17 gross failure to adequately provide for, or a callused  
18 indifference to, the health, safety, or medical needs of an  
19 individual and (ii) results in an individual's death or other  
20 serious deterioration of an individual's physical condition or  
21 mental condition.

22 "Employee" means any person who provides services at the  
23 facility or agency on-site or off-site. The service  
24 relationship can be with the individual or with the facility  
25 or agency. Also, "employee" includes any employee or  
26 contractual agent of the Department of Human Services or the

1 community agency involved in providing or monitoring or  
2 administering mental health or developmental disability  
3 services. This includes but is not limited to: owners,  
4 operators, payroll personnel, contractors, subcontractors, and  
5 volunteers.

6 "Facility" or "State-operated facility" means a mental  
7 health facility or developmental disabilities facility  
8 operated by the Department.

9 "Financial exploitation" means taking unjust advantage of  
10 an individual's assets, property, or financial resources  
11 through deception, intimidation, or conversion for the  
12 employee's, facility's, or agency's own advantage or benefit.

13 "Finding" means the Office of Inspector General's  
14 determination regarding whether an allegation is  
15 substantiated, unsubstantiated, or unfounded.

16 "Health Care Worker Registry" or "Registry" means the  
17 Health Care Worker Registry under the Health Care Worker  
18 Background Check Act.

19 "Individual" means any person receiving mental health  
20 service, developmental disabilities service, or both from a  
21 facility or agency, while either on-site or off-site.

22 "Mental abuse" means the use of demeaning, intimidating,  
23 or threatening words, signs, gestures, or other actions by an  
24 employee about an individual and in the presence of an  
25 individual or individuals that results in emotional distress  
26 or maladaptive behavior, or could have resulted in emotional

1 distress or maladaptive behavior, for any individual present.

2 "Mental illness" means "mental illness" as defined in the  
3 Mental Health and Developmental Disabilities Code.

4 "Mentally ill" means having a mental illness.

5 "Mitigating circumstance" means a condition that (i) is  
6 attendant to a finding, (ii) does not excuse or justify the  
7 conduct in question, but (iii) may be considered in evaluating  
8 the severity of the conduct, the culpability of the accused,  
9 or both the severity of the conduct and the culpability of the  
10 accused.

11 "Neglect" means an employee's, agency's, or facility's  
12 failure to provide adequate medical care, personal care, or  
13 maintenance and that, as a consequence, (i) causes an  
14 individual pain, injury, or emotional distress, (ii) results  
15 in either an individual's maladaptive behavior or the  
16 deterioration of an individual's physical condition or mental  
17 condition, or (iii) places the individual's health or safety  
18 at substantial risk.

19 "Person with a developmental disability" means a person  
20 having a developmental disability.

21 "Physical abuse" means an employee's non-accidental and  
22 inappropriate contact with an individual that causes bodily  
23 harm. "Physical abuse" includes actions that cause bodily harm  
24 as a result of an employee directing an individual or person to  
25 physically abuse another individual.

26 "Recommendation" means an admonition, separate from a

1 finding, that requires action by the facility, agency, or  
2 Department to correct a systemic issue, problem, or deficiency  
3 identified during an investigation.

4 "Required reporter" means any employee who suspects,  
5 witnesses, or is informed of an allegation of any one or more  
6 of the following: mental abuse, physical abuse, sexual abuse,  
7 neglect, or financial exploitation.

8 "Secretary" means the Chief Administrative Officer of the  
9 Department.

10 "Sexual abuse" means any sexual contact or intimate  
11 physical contact between an employee and an individual,  
12 including an employee's coercion or encouragement of an  
13 individual to engage in sexual behavior that results in sexual  
14 contact, intimate physical contact, sexual behavior, or  
15 intimate physical behavior. Sexual abuse also includes (i) an  
16 employee's actions that result in the sending or showing of  
17 sexually explicit images to an individual via computer,  
18 cellular phone, electronic mail, portable electronic device,  
19 or other media with or without contact with the individual or  
20 (ii) an employee's posting of sexually explicit images of an  
21 individual online or elsewhere whether or not there is contact  
22 with the individual.

23 "Sexually explicit images" includes, but is not limited  
24 to, any material which depicts nudity, sexual conduct, or  
25 sado-masochistic abuse, or which contains explicit and  
26 detailed verbal descriptions or narrative accounts of sexual

1 excitement, sexual conduct, or sado-masochistic abuse.

2 "Substantiated" means there is a preponderance of the  
3 evidence to support the allegation.

4 "Unfounded" means there is no credible evidence to support  
5 the allegation.

6 "Unsubstantiated" means there is credible evidence, but  
7 less than a preponderance of evidence to support the  
8 allegation.

9 (c) Appointment. The Governor shall appoint, and the  
10 Senate shall confirm, an Inspector General. The Inspector  
11 General shall be appointed for a term of 4 years and shall  
12 function within the Department of Human Services and report to  
13 the Secretary and the Governor.

14 (d) Operation and appropriation. The Inspector General  
15 shall function independently within the Department with  
16 respect to the operations of the Office, including the  
17 performance of investigations and issuance of findings and  
18 recommendations. The appropriation for the Office of Inspector  
19 General shall be separate from the overall appropriation for  
20 the Department.

21 (e) Powers and duties. The Inspector General shall  
22 investigate reports of suspected mental abuse, physical abuse,  
23 sexual abuse, neglect, or financial exploitation of  
24 individuals in any mental health or developmental disabilities  
25 facility or agency and shall have authority to take immediate  
26 action to prevent any one or more of the following from

1 happening to individuals under its jurisdiction: mental abuse,  
2 physical abuse, sexual abuse, neglect, or financial  
3 exploitation. Upon written request of an agency of this State,  
4 the Inspector General may assist another agency of the State  
5 in investigating reports of the abuse, neglect, or abuse and  
6 neglect of persons with mental illness, persons with  
7 developmental disabilities, or persons with both. To comply  
8 with the requirements of subsection (k) of this Section, the  
9 Inspector General shall also review all reportable deaths for  
10 which there is no allegation of abuse or neglect. Nothing in  
11 this Section shall preempt any duties of the Medical Review  
12 Board set forth in the Mental Health and Developmental  
13 Disabilities Code. The Inspector General shall have no  
14 authority to investigate alleged violations of the State  
15 Officials and Employees Ethics Act. Allegations of misconduct  
16 under the State Officials and Employees Ethics Act shall be  
17 referred to the Office of the Governor's Executive Inspector  
18 General for investigation.

19 (f) Limitations. The Inspector General shall not conduct  
20 an investigation within an agency or facility if that  
21 investigation would be redundant to or interfere with an  
22 investigation conducted by another State agency. The Inspector  
23 General shall have no supervision over, or involvement in, the  
24 routine programmatic, licensing, funding, or certification  
25 operations of the Department. Nothing in this subsection  
26 limits investigations by the Department that may otherwise be

1 required by law or that may be necessary in the Department's  
2 capacity as central administrative authority responsible for  
3 the operation of the State's mental health and developmental  
4 disabilities facilities.

5 (g) Rulemaking authority. The Inspector General shall  
6 promulgate rules establishing minimum requirements for  
7 reporting allegations as well as for initiating, conducting,  
8 and completing investigations based upon the nature of the  
9 allegation or allegations. The rules shall clearly establish  
10 that if 2 or more State agencies could investigate an  
11 allegation, the Inspector General shall not conduct an  
12 investigation that would be redundant to, or interfere with,  
13 an investigation conducted by another State agency. The rules  
14 shall further clarify the method and circumstances under which  
15 the Office of Inspector General may interact with the  
16 licensing, funding, or certification units of the Department  
17 in preventing further occurrences of mental abuse, physical  
18 abuse, sexual abuse, neglect, egregious neglect, and financial  
19 exploitation.

20 (h) Training programs. The Inspector General shall (i)  
21 establish a comprehensive program to ensure that every person  
22 authorized to conduct investigations receives ongoing training  
23 relative to investigation techniques, communication skills,  
24 and the appropriate means of interacting with persons  
25 receiving treatment for mental illness, developmental  
26 disability, or both mental illness and developmental



1 disability, and (ii) establish and conduct periodic training  
2 programs for facility and agency employees concerning the  
3 prevention and reporting of any one or more of the following:  
4 mental abuse, physical abuse, sexual abuse, neglect, egregious  
5 neglect, or financial exploitation. The Inspector General  
6 shall further ensure (i) every person authorized to conduct  
7 investigations at community agencies receives ongoing training  
8 in Title 59, Parts 115, 116, and 119 of the Illinois  
9 Administrative Code, and (ii) every person authorized to  
10 conduct investigations shall receive ongoing training in Title  
11 59, Part 50 of the Illinois Administrative Code. Nothing in  
12 this Section shall be deemed to prevent the Office of  
13 Inspector General from conducting any other training as  
14 determined by the Inspector General to be necessary or  
15 helpful.

16 (i) Duty to cooperate.

17 (1) The Inspector General shall at all times be  
18 granted access to any facility or agency for the purpose  
19 of investigating any allegation, conducting unannounced  
20 site visits, monitoring compliance with a written  
21 response, or completing any other statutorily assigned  
22 duty. The Inspector General shall conduct unannounced site  
23 visits to each facility at least annually for the purpose  
24 of reviewing and making recommendations on systemic issues  
25 relative to preventing, reporting, investigating, and  
26 responding to all of the following: mental abuse, physical

1 abuse, sexual abuse, neglect, egregious neglect, or  
2 financial exploitation.

3 (2) Any employee who fails to cooperate with an Office  
4 of the Inspector General investigation is in violation of  
5 this Act. Failure to cooperate with an investigation  
6 includes, but is not limited to, any one or more of the  
7 following: (i) creating and transmitting a false report to  
8 the Office of the Inspector General hotline, (ii)  
9 providing false information to an Office of the Inspector  
10 General Investigator during an investigation, (iii)  
11 colluding with other employees to cover up evidence, (iv)  
12 colluding with other employees to provide false  
13 information to an Office of the Inspector General  
14 investigator, (v) destroying evidence, (vi) withholding  
15 evidence, or (vii) otherwise obstructing an Office of the  
16 Inspector General investigation. Additionally, any  
17 employee who, during an unannounced site visit or written  
18 response compliance check, fails to cooperate with  
19 requests from the Office of the Inspector General is in  
20 violation of this Act.

21 (j) Subpoena powers. The Inspector General shall have the  
22 power to subpoena witnesses and compel the production of all  
23 documents and physical evidence relating to his or her  
24 investigations and any hearings authorized by this Act. This  
25 subpoena power shall not extend to persons or documents of a  
26 labor organization or its representatives insofar as the

1 persons are acting in a representative capacity to an employee  
2 whose conduct is the subject of an investigation or the  
3 documents relate to that representation. Any person who  
4 otherwise fails to respond to a subpoena or who knowingly  
5 provides false information to the Office of the Inspector  
6 General by subpoena during an investigation is guilty of a  
7 Class A misdemeanor.

8 (k) Reporting allegations and deaths.

9 (1) Allegations. If an employee witnesses, is told of,  
10 or has reason to believe an incident of mental abuse,  
11 physical abuse, sexual abuse, neglect, or financial  
12 exploitation has occurred, the employee, agency, or  
13 facility shall report the allegation by phone to the  
14 Office of the Inspector General hotline according to the  
15 agency's or facility's procedures, but in no event later  
16 than 4 hours after the initial discovery of the incident,  
17 allegation, or suspicion of any one or more of the  
18 following: mental abuse, physical abuse, sexual abuse,  
19 neglect, or financial exploitation. A required reporter as  
20 defined in subsection (b) of this Section who knowingly or  
21 intentionally fails to comply with these reporting  
22 requirements is guilty of a Class A misdemeanor.

23 (2) Deaths. Absent an allegation, a required reporter  
24 shall, within 24 hours after initial discovery, report by  
25 phone to the Office of the Inspector General hotline each  
26 of the following:

1 (i) Any death of an individual occurring within 14  
2 calendar days after discharge or transfer of the  
3 individual from a residential program or facility.

4 (ii) Any death of an individual occurring within  
5 24 hours after deflection from a residential program  
6 or facility.

7 (iii) Any other death of an individual occurring  
8 at an agency or facility or at any Department-funded  
9 site.

10 (3) Retaliation. It is a violation of this Act for any  
11 employee or administrator of an agency or facility to take  
12 retaliatory action against an employee who acts in good  
13 faith in conformance with his or her duties as a required  
14 reporter.

15 (1) Reporting to law enforcement. ~~(1)~~ Reporting criminal  
16 acts. Within 24 hours after determining that there is credible  
17 evidence indicating that a criminal act may have been  
18 committed or that special expertise may be required in an  
19 investigation, the Inspector General shall notify the Illinois  
20 State Police or other appropriate law enforcement authority,  
21 or ensure that such notification is made. The Illinois State  
22 Police shall investigate any report from a State-operated  
23 facility indicating a possible murder, sexual assault, or  
24 other felony by an employee. All investigations conducted by  
25 the Inspector General shall be conducted in a manner designed  
26 to ensure the preservation of evidence for possible use in a

1 criminal prosecution.

2 ~~(2) Reporting allegations of adult students with~~  
3 ~~disabilities. Upon receipt of a reportable allegation~~  
4 ~~regarding an adult student with a disability, the~~  
5 ~~Department's Office of the Inspector General shall~~  
6 ~~determine whether the allegation meets the criteria for~~  
7 ~~the Domestic Abuse Program under the Abuse of Adults with~~  
8 ~~Disabilities Intervention Act. If the allegation is~~  
9 ~~reportable to that program, the Office of the Inspector~~  
10 ~~General shall initiate an investigation. If the allegation~~  
11 ~~is not reportable to the Domestic Abuse Program, the~~  
12 ~~Office of the Inspector General shall make an expeditious~~  
13 ~~referral to the respective law enforcement entity. If the~~  
14 ~~alleged victim is already receiving services from the~~  
15 ~~Department, the Office of the Inspector General shall also~~  
16 ~~make a referral to the respective Department of Human~~  
17 ~~Services' Division or Bureau.~~

18 (m) Investigative reports. Upon completion of an  
19 investigation, the Office of Inspector General shall issue an  
20 investigative report identifying whether the allegations are  
21 substantiated, unsubstantiated, or unfounded. Within 10  
22 business days after the transmittal of a completed  
23 investigative report substantiating an allegation, finding an  
24 allegation is unsubstantiated, or if a recommendation is made,  
25 the Inspector General shall provide the investigative report  
26 on the case to the Secretary and to the director of the

1 facility or agency where any one or more of the following  
2 occurred: mental abuse, physical abuse, sexual abuse, neglect,  
3 egregious neglect, or financial exploitation. The director of  
4 the facility or agency shall be responsible for maintaining  
5 the confidentiality of the investigative report consistent  
6 with State and federal law. In a substantiated case, the  
7 investigative report shall include any mitigating or  
8 aggravating circumstances that were identified during the  
9 investigation. If the case involves substantiated neglect, the  
10 investigative report shall also state whether egregious  
11 neglect was found. An investigative report may also set forth  
12 recommendations. All investigative reports prepared by the  
13 Office of the Inspector General shall be considered  
14 confidential and shall not be released except as provided by  
15 the law of this State or as required under applicable federal  
16 law. Unsubstantiated and unfounded reports shall not be  
17 disclosed except as allowed under Section 6 of the Abused and  
18 Neglected Long Term Care Facility Residents Reporting Act. Raw  
19 data used to compile the investigative report shall not be  
20 subject to release unless required by law or a court order.  
21 "Raw data used to compile the investigative report" includes,  
22 but is not limited to, any one or more of the following: the  
23 initial complaint, witness statements, photographs,  
24 investigator's notes, police reports, or incident reports. If  
25 the allegations are substantiated, the victim, the victim's  
26 guardian, and the accused shall be provided with a redacted

1 copy of the investigative report. Death reports where there  
2 was no allegation of abuse or neglect shall only be released  
3 pursuant to applicable State or federal law or a valid court  
4 order. Unredacted investigative reports, as well as raw data,  
5 may be shared with a local law enforcement entity, a State's  
6 Attorney's office, or a county coroner's office upon written  
7 request.

8 (n) Written responses, clarification requests, and  
9 reconsideration requests.

10 (1) Written responses. Within 30 calendar days from  
11 receipt of a substantiated investigative report or an  
12 investigative report which contains recommendations,  
13 absent a reconsideration request, the facility or agency  
14 shall file a written response that addresses, in a concise  
15 and reasoned manner, the actions taken to: (i) protect the  
16 individual; (ii) prevent recurrences; and (iii) eliminate  
17 the problems identified. The response shall include the  
18 implementation and completion dates of such actions. If  
19 the written response is not filed within the allotted 30  
20 calendar day period, the Secretary shall determine the  
21 appropriate corrective action to be taken.

22 (2) Requests for clarification. The facility, agency,  
23 victim or guardian, or the subject employee may request  
24 that the Office of Inspector General clarify the finding  
25 or findings for which clarification is sought.

26 (3) Requests for reconsideration. The facility,

1 agency, victim or guardian, or the subject employee may  
2 request that the Office of the Inspector General  
3 reconsider the finding or findings or the recommendations.  
4 A request for reconsideration shall be subject to a  
5 multi-layer review and shall include at least one reviewer  
6 who did not participate in the investigation or approval  
7 of the original investigative report. After the  
8 multi-layer review process has been completed, the  
9 Inspector General shall make the final determination on  
10 the reconsideration request. The investigation shall be  
11 reopened if the reconsideration determination finds that  
12 additional information is needed to complete the  
13 investigative record.

14 (o) Disclosure of the finding by the Inspector General.  
15 The Inspector General shall disclose the finding of an  
16 investigation to the following persons: (i) the Governor, (ii)  
17 the Secretary, (iii) the director of the facility or agency,  
18 (iv) the alleged victims and their guardians, (v) the  
19 complainant, and (vi) the accused. This information shall  
20 include whether the allegations were deemed substantiated,  
21 unsubstantiated, or unfounded.

22 (p) Secretary review. Upon review of the Inspector  
23 General's investigative report and any agency's or facility's  
24 written response, the Secretary shall accept or reject the  
25 written response and notify the Inspector General of that  
26 determination. The Secretary may further direct that other



1 administrative action be taken, including, but not limited to,  
2 any one or more of the following: (i) additional site visits,  
3 (ii) training, (iii) provision of technical assistance  
4 relative to administrative needs, licensure, or certification,  
5 or (iv) the imposition of appropriate sanctions.

6 (q) Action by facility or agency. Within 30 days of the  
7 date the Secretary approves the written response or directs  
8 that further administrative action be taken, the facility or  
9 agency shall provide an implementation report to the Inspector  
10 General that provides the status of the action taken. The  
11 facility or agency shall be allowed an additional 30 days to  
12 send notice of completion of the action or to send an updated  
13 implementation report. If the action has not been completed  
14 within the additional 30-day period, the facility or agency  
15 shall send updated implementation reports every 60 days until  
16 completion. The Inspector General shall conduct a review of  
17 any implementation plan that takes more than 120 days after  
18 approval to complete, and shall monitor compliance through a  
19 random review of approved written responses, which may  
20 include, but are not limited to: (i) site visits, (ii)  
21 telephone contact, and (iii) requests for additional  
22 documentation evidencing compliance.

23 (r) Sanctions. Sanctions, if imposed by the Secretary  
24 under Subdivision (p)(iv) of this Section, shall be designed  
25 to prevent further acts of mental abuse, physical abuse,  
26 sexual abuse, neglect, egregious neglect, or financial

1 exploitation or some combination of one or more of those acts  
2 at a facility or agency, and may include any one or more of the  
3 following:

4 (1) Appointment of on-site monitors.

5 (2) Transfer or relocation of an individual or  
6 individuals.

7 (3) Closure of units.

8 (4) Termination of any one or more of the following:

9 (i) Department licensing, (ii) funding, or (iii)  
10 certification.

11 The Inspector General may seek the assistance of the  
12 Illinois Attorney General or the office of any State's  
13 Attorney in implementing sanctions.

14 (s) Health Care Worker Registry.

15 (1) Reporting to the Registry. The Inspector General  
16 shall report to the Department of Public Health's Health  
17 Care Worker Registry, a public registry, the identity and  
18 finding of each employee of a facility or agency against  
19 whom there is a final investigative report containing a  
20 substantiated allegation of physical or sexual abuse,  
21 financial exploitation, or egregious neglect of an  
22 individual.

23 (2) Notice to employee. Prior to reporting the name of  
24 an employee, the employee shall be notified of the  
25 Department's obligation to report and shall be granted an  
26 opportunity to request an administrative hearing, the sole

1 purpose of which is to determine if the substantiated  
2 finding warrants reporting to the Registry. Notice to the  
3 employee shall contain a clear and concise statement of  
4 the grounds on which the report to the Registry is based,  
5 offer the employee an opportunity for a hearing, and  
6 identify the process for requesting such a hearing. Notice  
7 is sufficient if provided by certified mail to the  
8 employee's last known address. If the employee fails to  
9 request a hearing within 30 days from the date of the  
10 notice, the Inspector General shall report the name of the  
11 employee to the Registry. Nothing in this subdivision  
12 (s)(2) shall diminish or impair the rights of a person who  
13 is a member of a collective bargaining unit under the  
14 Illinois Public Labor Relations Act or under any other  
15 federal labor statute.

16 (3) Registry hearings. If the employee requests an  
17 administrative hearing, the employee shall be granted an  
18 opportunity to appear before an administrative law judge  
19 to present reasons why the employee's name should not be  
20 reported to the Registry. The Department shall bear the  
21 burden of presenting evidence that establishes, by a  
22 preponderance of the evidence, that the substantiated  
23 finding warrants reporting to the Registry. After  
24 considering all the evidence presented, the administrative  
25 law judge shall make a recommendation to the Secretary as  
26 to whether the substantiated finding warrants reporting

1 the name of the employee to the Registry. The Secretary  
2 shall render the final decision. The Department and the  
3 employee shall have the right to request that the  
4 administrative law judge consider a stipulated disposition  
5 of these proceedings.

6 (4) Testimony at Registry hearings. A person who makes  
7 a report or who investigates a report under this Act shall  
8 testify fully in any judicial proceeding resulting from  
9 such a report, as to any evidence of abuse or neglect, or  
10 the cause thereof. No evidence shall be excluded by reason  
11 of any common law or statutory privilege relating to  
12 communications between the alleged perpetrator of abuse or  
13 neglect, or the individual alleged as the victim in the  
14 report, and the person making or investigating the report.  
15 Testimony at hearings is exempt from the confidentiality  
16 requirements of subsection (f) of Section 10 of the Mental  
17 Health and Developmental Disabilities Confidentiality Act.

18 (5) Employee's rights to collateral action. No  
19 reporting to the Registry shall occur and no hearing shall  
20 be set or proceed if an employee notifies the Inspector  
21 General in writing, including any supporting  
22 documentation, that he or she is formally contesting an  
23 adverse employment action resulting from a substantiated  
24 finding by complaint filed with the Illinois Civil Service  
25 Commission, or which otherwise seeks to enforce the  
26 employee's rights pursuant to any applicable collective

1 bargaining agreement. If an action taken by an employer  
2 against an employee as a result of a finding of physical  
3 abuse, sexual abuse, or egregious neglect is overturned  
4 through an action filed with the Illinois Civil Service  
5 Commission or under any applicable collective bargaining  
6 agreement and if that employee's name has already been  
7 sent to the Registry, the employee's name shall be removed  
8 from the Registry.

9 (6) Removal from Registry. At any time after the  
10 report to the Registry, but no more than once in any  
11 12-month period, an employee may petition the Department  
12 in writing to remove his or her name from the Registry.  
13 Upon receiving notice of such request, the Inspector  
14 General shall conduct an investigation into the petition.  
15 Upon receipt of such request, an administrative hearing  
16 will be set by the Department. At the hearing, the  
17 employee shall bear the burden of presenting evidence that  
18 establishes, by a preponderance of the evidence, that  
19 removal of the name from the Registry is in the public  
20 interest. The parties may jointly request that the  
21 administrative law judge consider a stipulated disposition  
22 of these proceedings.

23 (t) Review of Administrative Decisions. The Department  
24 shall preserve a record of all proceedings at any formal  
25 hearing conducted by the Department involving Health Care  
26 Worker Registry hearings. Final administrative decisions of

1 the Department are subject to judicial review pursuant to  
2 provisions of the Administrative Review Law.

3 (u) Quality Care Board. There is created, within the  
4 Office of the Inspector General, a Quality Care Board to be  
5 composed of 7 members appointed by the Governor with the  
6 advice and consent of the Senate. One of the members shall be  
7 designated as chairman by the Governor. Of the initial  
8 appointments made by the Governor, 4 Board members shall each  
9 be appointed for a term of 4 years and 3 members shall each be  
10 appointed for a term of 2 years. Upon the expiration of each  
11 member's term, a successor shall be appointed for a term of 4  
12 years. In the case of a vacancy in the office of any member,  
13 the Governor shall appoint a successor for the remainder of  
14 the unexpired term.

15 Members appointed by the Governor shall be qualified by  
16 professional knowledge or experience in the area of law,  
17 investigatory techniques, or in the area of care of the  
18 mentally ill or care of persons with developmental  
19 disabilities. Two members appointed by the Governor shall be  
20 persons with a disability or parents of persons with a  
21 disability. Members shall serve without compensation, but  
22 shall be reimbursed for expenses incurred in connection with  
23 the performance of their duties as members.

24 The Board shall meet quarterly, and may hold other  
25 meetings on the call of the chairman. Four members shall  
26 constitute a quorum allowing the Board to conduct its

1 business. The Board may adopt rules and regulations it deems  
2 necessary to govern its own procedures.

3 The Board shall monitor and oversee the operations,  
4 policies, and procedures of the Inspector General to ensure  
5 the prompt and thorough investigation of allegations of  
6 neglect and abuse. In fulfilling these responsibilities, the  
7 Board may do the following:

8 (1) Provide independent, expert consultation to the  
9 Inspector General on policies and protocols for  
10 investigations of alleged abuse, neglect, or both abuse  
11 and neglect.

12 (2) Review existing regulations relating to the  
13 operation of facilities.

14 (3) Advise the Inspector General as to the content of  
15 training activities authorized under this Section.

16 (4) Recommend policies concerning methods for  
17 improving the intergovernmental relationships between the  
18 Office of the Inspector General and other State or federal  
19 offices.

20 (v) Annual report. The Inspector General shall provide to  
21 the General Assembly and the Governor, no later than January 1  
22 of each year, a summary of reports and investigations made  
23 under this Act for the prior fiscal year with respect to  
24 individuals receiving mental health or developmental  
25 disabilities services. The report shall detail the imposition  
26 of sanctions, if any, and the final disposition of any

1 corrective or administrative action directed by the Secretary.  
2 The summaries shall not contain any confidential or  
3 identifying information of any individual, but shall include  
4 objective data identifying any trends in the number of  
5 reported allegations, the timeliness of the Office of the  
6 Inspector General's investigations, and their disposition, for  
7 each facility and Department-wide, for the most recent 3-year  
8 time period. The report shall also identify, by facility, the  
9 staff-to-patient ratios taking account of direct care staff  
10 only. The report shall also include detailed recommended  
11 administrative actions and matters for consideration by the  
12 General Assembly.

13 (w) Program audit. The Auditor General shall conduct a  
14 program audit of the Office of the Inspector General on an  
15 as-needed basis, as determined by the Auditor General. The  
16 audit shall specifically include the Inspector General's  
17 compliance with the Act and effectiveness in investigating  
18 reports of allegations occurring in any facility or agency.  
19 The Auditor General shall conduct the program audit according  
20 to the provisions of the Illinois State Auditing Act and shall  
21 report its findings to the General Assembly no later than  
22 January 1 following the audit period.

23 (x) Nothing in this Section shall be construed to mean  
24 that an individual is a victim of abuse or neglect because of  
25 health care services appropriately provided or not provided by  
26 health care professionals.



1           (y) Nothing in this Section shall require a facility,  
2 including its employees, agents, medical staff members, and  
3 health care professionals, to provide a service to an  
4 individual in contravention of that individual's stated or  
5 implied objection to the provision of that service on the  
6 ground that that service conflicts with the individual's  
7 religious beliefs or practices, nor shall the failure to  
8 provide a service to an individual be considered abuse under  
9 this Section if the individual has objected to the provision  
10 of that service based on his or her religious beliefs or  
11 practices.

12       (Source: P.A. 101-81, eff. 7-12-19; 102-538, eff. 8-20-21.)

13           (20 ILCS 2712/Act rep.)

14           Section 20. The Broadband Access on Passenger Rail Law is  
15 repealed.

16           (20 ILCS 3930/7.6 rep.)

17           Section 25. The Illinois Criminal Justice Information Act  
18 is amended by repealing Section 7.6.

19           (20 ILCS 5035/Act rep.)

20           Section 30. The Illinois Human Services Commission Act is  
21 repealed.

22           (30 ILCS 105/5h rep.)

1 Section 35. The State Finance Act is amended by repealing  
2 Section 5h.

3 Section 40. The Illinois Procurement Code is amended by  
4 changing Section 25-55 as follows:

5 (30 ILCS 500/25-55)

6 Sec. 25-55. Annual reports. Every printed annual report  
7 produced by a State agency shall bear a statement indicating  
8 whether it was printed by the State of Illinois or by contract  
9 and indicating the printing cost per copy and the number of  
10 copies printed. ~~The Department of Central Management Services~~  
11 ~~shall prepare and submit to the General Assembly on the fourth~~  
12 ~~Wednesday of January in each year a report setting forth with~~  
13 ~~respect to each State agency for the calendar year immediately~~  
14 ~~preceding the calendar year in which the report is filed the~~  
15 ~~total quantity of annual reports printed, the total cost, and~~  
16 ~~the cost per copy and the cost per page of the annual report of~~  
17 ~~the State agency printed during the calendar year covered by~~  
18 ~~the report.~~

19 (Source: P.A. 90-572, eff. date - See Sec. 99-5.)

20 (205 ILCS 405/3.2 rep.)

21 Section 45. The Currency Exchange Act is amended by  
22 repealing Section 3.2.

1 Section 50. The Grain Code is amended by changing Section  
2 30-25 as follows:

3 (240 ILCS 40/30-25)

4 Sec. 30-25. Grain Insurance Reserve Fund. Upon payment in  
5 full of all money that has been transferred to the Fund prior  
6 to June 30, 2003 from the General Revenue Fund as provided for  
7 under subsection (h) of Section 25-20, the State of Illinois  
8 shall, subject to appropriation, remit \$2,000,000 to the  
9 Corporation to be held in a separate and discrete account to be  
10 used to the extent the assets in the Fund are insufficient to  
11 satisfy claimants as payment of their claims become due as set  
12 forth in subsection (h) of Section 25-20. The remittance of  
13 the \$2,000,000 reserve shall be made to the Corporation within  
14 60 days of payment in full of all money transferred to the Fund  
15 as set forth above in this Section 30-25. All income received  
16 by the Reserve Fund shall be deposited in the Fund within 35  
17 days of the end of each calendar quarter.

18 (Source: P.A. 93-225, eff. 7-21-03.)

19 Section 55. The Community Services Act is amended by  
20 changing Section 4 as follows:

21 (405 ILCS 30/4) (from Ch. 91 1/2, par. 904)

22 Sec. 4. Financing for community services.

23 (a) The Department of Human Services is authorized to

1 provide financial reimbursement to eligible private service  
2 providers, corporations, local government entities or  
3 voluntary associations for the provision of services to  
4 persons with mental illness, persons with a developmental  
5 disability, and persons with substance use disorders who are  
6 living in the community for the purpose of achieving the goals  
7 of this Act.

8 The Department shall utilize the following funding  
9 mechanisms for community services:

10 (1) Purchase of Care Contracts: services purchased on  
11 a predetermined fee per unit of service basis from private  
12 providers or governmental entities. Fee per service rates  
13 are set by an established formula which covers some  
14 portion of personnel, supplies, and other allowable costs,  
15 and which makes some allowance for geographic variations  
16 in costs as well as for additional program components.

17 (2) Grants: sums of money which the Department grants  
18 to private providers or governmental entities pursuant to  
19 the grant recipient's agreement to provide certain  
20 services, as defined by departmental grant guidelines, to  
21 an approximate number of service recipients. Grant levels  
22 are set through consideration of personnel, supply and  
23 other allowable costs, as well as other funds available to  
24 the program.

25 (3) Other Funding Arrangements: funding mechanisms may  
26 be established on a pilot basis in order to examine the

1 feasibility of alternative financing arrangements for the  
2 provision of community services.

3 The Department shall establish and maintain an equitable  
4 system of payment which allows providers to improve persons  
5 with disabilities' capabilities for independence and reduces  
6 their reliance on State-operated services.

7 For services classified as entitlement services under  
8 federal law or guidelines, caps may not be placed on the total  
9 amount of payment a provider may receive in a fiscal year and  
10 the Department shall not require that a portion of the  
11 payments due be made in a subsequent fiscal year based on a  
12 yearly payment cap.

13 (b) (Blank). ~~The Governor shall create a commission by~~  
14 ~~September 1, 2009, or as soon thereafter as possible, to~~  
15 ~~review funding methodologies, identify gaps in funding,~~  
16 ~~identify revenue, and prioritize use of that revenue for~~  
17 ~~community developmental disability services, mental health~~  
18 ~~services, alcohol and substance abuse services, rehabilitation~~  
19 ~~services, and early intervention services. The Office of the~~  
20 ~~Governor shall provide staff support for the commission.~~

21 (c) (Blank). ~~The first meeting of the commission shall be~~  
22 ~~held within the first month after the creation and appointment~~  
23 ~~of the commission, and a final report summarizing the~~  
24 ~~commission's recommendations must be issued within 12 months~~  
25 ~~after the first meeting, and no later than September 1, 2010,~~  
26 ~~to the Governor and the General Assembly.~~

1           (d) (Blank). ~~The commission shall have the following 13~~  
2 ~~voting members:~~

3           ~~(A) one member of the House of Representatives,~~  
4 ~~appointed by the Speaker of the House of Representatives;~~

5           ~~(B) one member of the House of Representatives,~~  
6 ~~appointed by the House Minority Leader;~~

7           ~~(C) one member of the Senate, appointed by the~~  
8 ~~President of the Senate;~~

9           ~~(D) one member of the Senate, appointed by the Senate~~  
10 ~~Minority Leader;~~

11           ~~(E) one person with a developmental disability, or a~~  
12 ~~family member or guardian of such a person, appointed by~~  
13 ~~the Governor;~~

14           ~~(F) one person with a mental illness, or a family~~  
15 ~~member or guardian of such a person, appointed by the~~  
16 ~~Governor;~~

17           ~~(G) two persons from unions that represent employees~~  
18 ~~of community providers that serve people with~~  
19 ~~developmental disabilities, mental illness, and alcohol~~  
20 ~~and substance abuse disorders, appointed by the Governor;~~  
21 ~~and~~

22           ~~(H) five persons from statewide associations that~~  
23 ~~represent community providers that provide residential,~~  
24 ~~day training, and other developmental disability services,~~  
25 ~~mental health services, alcohol and substance abuse~~  
26 ~~services, rehabilitation services, or early intervention~~

1 ~~services, or any combination of those, appointed by the~~  
2 ~~Governor.~~

3 ~~The commission shall also have the following ex officio,~~  
4 ~~nonvoting members:~~

5 ~~(I) the Director of the Governor's Office of~~  
6 ~~Management and Budget or his or her designee;~~

7 ~~(J) the Chief Financial Officer of the Department of~~  
8 ~~Human Services or his or her designee;~~

9 ~~(K) the Administrator of the Department of Healthcare~~  
10 ~~and Family Services Division of Finance or his or her~~  
11 ~~designee;~~

12 ~~(L) the Director of the Department of Human Services~~  
13 ~~Division of Developmental Disabilities or his or her~~  
14 ~~designee;~~

15 ~~(M) the Director of the Department of Human Services~~  
16 ~~Division of Mental Health or his or her designee; and~~

17 ~~(N) the Director of the Department of Human Services~~  
18 ~~Division of Alcoholism and Substance Abuse or his or her~~  
19 ~~designee.~~

20 (e) The funding methodologies must reflect economic  
21 factors inherent in providing services and supports, recognize  
22 individual disability needs, and consider geographic  
23 differences, transportation costs, required staffing ratios,  
24 and mandates not currently funded.

25 (f) In accepting Department funds, providers shall  
26 recognize their responsibility to be accountable to the

1 Department and the State for the delivery of services which  
2 are consistent with the philosophies and goals of this Act and  
3 the rules and regulations promulgated under it.

4 (Source: P.A. 100-759, eff. 1-1-19.)

5 (730 ILCS 5/3-5-3 rep.)

6 (730 ILCS 5/5-8-1.3 rep.)

7 Section 60. The Unified Code of Corrections is amended by  
8 repealing Sections 3-5-3 and 5-8-1.3.

9 Section 65. The Workers' Compensation Act is amended by  
10 changing Section 18.1 as follows:

11 (820 ILCS 305/18.1)

12 Sec. 18.1. Claims by former and current employees of the  
13 Commission. All claims by current and former employees and  
14 appointees of the Commission shall be assigned to a certified  
15 independent arbitrator not employed by the Commission  
16 designated by the Chairman. In preparing the roster of  
17 approved certified independent arbitrators, the Chairman shall  
18 seek the advice and recommendation of the Commission or the  
19 Workers' Compensation Advisory Board at his or her discretion.  
20 ~~The Chairman shall designate an arbitrator from a list of~~  
21 ~~approved certified arbitrators provided by the Commission~~  
22 ~~Review Board.~~ If the Chairman is the claimant, then the  
23 independent arbitrator from the approved list shall be



1 designated by the longest serving Commissioner. The designated  
2 independent arbitrator shall have the authority of arbitrators  
3 of the Commission regarding settlement and adjudication of the  
4 claim of the current and former employees and appointees of  
5 the Commission. The decision of the independent arbitrator  
6 shall become the decision of the Commission. An appeal of the  
7 independent arbitrator's decision shall be subject to judicial  
8 review in accordance with subsection (f) of Section 19.

9 (Source: P.A. 97-18, eff. 6-28-11.)

10 (820 ILCS 305/14.1 rep.)

11 Section 70. The Workers' Compensation Act is amended by  
12 repealing Section 14.1.

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

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Statutes amended in order of appearance

- 20 ILCS 105/4.02 from Ch. 23, par. 6104.02
- 20 ILCS 1110/7 rep.
- 20 ILCS 1110/8 rep.
- 20 ILCS 1110/9 rep.
- 20 ILCS 1110/10 rep.
- 20 ILCS 1110/11 rep.
- 20 ILCS 1110/12 rep.
- 20 ILCS 1110/13 rep.
- 20 ILCS 1110/14 rep.
- 20 ILCS 1110/15 rep.
- 20 ILCS 1110/16 rep.
- 20 ILCS 1110/17 rep.
- 20 ILCS 1305/1-17
- 20 ILCS 2712/Act rep.
- 20 ILCS 3930/7.6 rep.
- 20 ILCS 5035/Act rep.
- 30 ILCS 105/5h rep.
- 30 ILCS 500/25-55
- 205 ILCS 405/3.2 rep.
- 240 ILCS 40/30-25
- 405 ILCS 30/4 from Ch. 91 1/2, par. 904
- 730 ILCS 5/3-5-3 rep.
- 730 ILCS 5/5-8-1.3 rep.

- 1 820 ILCS 305/18.1
- 2 820 ILCS 305/14.1 rep.