



Sen. Napoleon Harris, III

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10200HB5186sam001

LRB102 24774 DTM 37564 a

1 AMENDMENT TO HOUSE BILL 5186

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 5186 by replacing  
3 everything after the enacting clause with the following:

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

1 limited to, any or all of the following:

2 (a) (blank);

3 (b) (blank);

4 (c) home care aide services;

5 (d) personal assistant services;

6 (e) adult day services;

7 (f) home-delivered meals;

8 (g) education in self-care;

9 (h) personal care services;

10 (i) adult day health services;

11 (j) habilitation services;

12 (k) respite care;

13 (k-5) community reintegration services;

14 (k-6) flexible senior services;

15 (k-7) medication management;

16 (k-8) emergency home response;

17 (l) other nonmedical social services that may enable  
18 the person to become self-supporting; or

19 (m) clearinghouse for information provided by senior  
20 citizen home owners who want to rent rooms to or share  
21 living space with other senior citizens.

22 The Department shall establish eligibility standards for  
23 such services. In determining the amount and nature of  
24 services for which a person may qualify, consideration shall  
25 not be given to the value of cash, property or other assets  
26 held in the name of the person's spouse pursuant to a written

1 agreement dividing marital property into equal but separate  
2 shares or pursuant to a transfer of the person's interest in a  
3 home to his spouse, provided that the spouse's share of the  
4 marital property is not made available to the person seeking  
5 such services.

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

11 The Department shall, in conjunction with the Department  
12 of Public Aid (now Department of Healthcare and Family  
13 Services), seek appropriate amendments under Sections 1915 and  
14 1924 of the Social Security Act. The purpose of the amendments  
15 shall be to extend eligibility for home and community based  
16 services under Sections 1915 and 1924 of the Social Security  
17 Act to persons who transfer to or for the benefit of a spouse  
18 those amounts of income and resources allowed under Section  
19 1924 of the Social Security Act. Subject to the approval of  
20 such amendments, the Department shall extend the provisions of  
21 Section 5-4 of the Illinois Public Aid Code to persons who, but  
22 for the provision of home or community-based services, would  
23 require the level of care provided in an institution, as is  
24 provided for in federal law. Those persons no longer found to  
25 be eligible for receiving noninstitutional services due to  
26 changes in the eligibility criteria shall be given 45 days

1 notice prior to actual termination. Those persons receiving  
2 notice of termination may contact the Department and request  
3 the determination be appealed at any time during the 45 day  
4 notice period. The target population identified for the  
5 purposes of this Section are persons age 60 and older with an  
6 identified service need. Priority shall be given to those who  
7 are at imminent risk of institutionalization. The services  
8 shall be provided to eligible persons age 60 and older to the  
9 extent that the cost of the services together with the other  
10 personal maintenance expenses of the persons are reasonably  
11 related to the standards established for care in a group  
12 facility appropriate to the person's condition. These  
13 non-institutional services, pilot projects or experimental  
14 facilities may be provided as part of or in addition to those  
15 authorized by federal law or those funded and administered by  
16 the Department of Human Services. The Departments of Human  
17 Services, Healthcare and Family Services, Public Health,  
18 Veterans' Affairs, and Commerce and Economic Opportunity and  
19 other appropriate agencies of State, federal and local  
20 governments shall cooperate with the Department on Aging in  
21 the establishment and development of the non-institutional  
22 services. The Department shall require an annual audit from  
23 all personal assistant and home care aide vendors contracting  
24 with the Department under this Section. The annual audit shall  
25 assure that each audited vendor's procedures are in compliance  
26 with Department's financial reporting guidelines requiring an

1 administrative and employee wage and benefits cost split as  
2 defined in administrative rules. The audit is a public record  
3 under the Freedom of Information Act. The Department shall  
4 execute, relative to the nursing home prescreening project,  
5 written inter-agency agreements with the Department of Human  
6 Services and the Department of Healthcare and Family Services,  
7 to effect the following: (1) intake procedures and common  
8 eligibility criteria for those persons who are receiving  
9 non-institutional services; and (2) the establishment and  
10 development of non-institutional services in areas of the  
11 State where they are not currently available or are  
12 undeveloped. On and after July 1, 1996, all nursing home  
13 prescreenings for individuals 60 years of age or older shall  
14 be conducted by the Department.

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

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

1 be considered by the Department in determining the copayment.  
2 The level of such copayment shall be adjusted whenever  
3 necessary to reflect any change in the officially designated  
4 federal poverty standard.

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

1 Section in death. All moneys for services paid to or in behalf  
2 of the person under this Section shall be claimed for recovery  
3 from the deceased spouse's estate. "Homestead", as used in  
4 this paragraph, means the dwelling house and contiguous real  
5 estate occupied by a surviving spouse or relative, as defined  
6 by the rules and regulations of the Department of Healthcare  
7 and Family Services, regardless of the value of the property.

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

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

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

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

24 (4) ensuring that the determination of need tool is  
25 accurate in determining the participants' level of need;  
26 to achieve this, the Department, in conjunction with the

1 Older Adult Services Advisory Committee, shall institute a  
2 study of the relationship between the Determination of  
3 Need scores, level of need, service cost maximums, and the  
4 development and utilization of service plans no later than  
5 May 1, 2008; findings and recommendations shall be  
6 presented to the Governor and the General Assembly no  
7 later than January 1, 2009; recommendations shall include  
8 all needed changes to the service cost maximums schedule  
9 and additional covered services;

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

- 13 (A) bathing;
- 14 (B) grooming;
- 15 (C) toileting;
- 16 (D) nail care;
- 17 (E) transferring;
- 18 (F) respiratory services;
- 19 (G) exercise; or
- 20 (H) positioning;

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



1           (7) ensuring that the State may access maximum federal  
2 matching funds by seeking approval for the Centers for  
3 Medicare and Medicaid Services for modifications to the  
4 State's home and community based services waiver and  
5 additional waiver opportunities, including applying for  
6 enrollment in the Balance Incentive Payment Program by May  
7 1, 2013, in order to maximize federal matching funds; this  
8 shall include, but not be limited to, modification that  
9 reflects all changes in the Community Care Program  
10 services and all increases in the services cost maximum;

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

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

23           (10) working in conjunction with Care Coordination  
24 Units, the Department of Healthcare and Family Services,  
25 the Department of Human Services, Community Care Program  
26 providers, and other stakeholders to make improvements to

1 the Medicaid claiming processes and the Medicaid  
2 enrollment procedures or requirements as needed,  
3 including, but not limited to, specific policy changes or  
4 rules to improve the up-front enrollment of participants  
5 in the Medicaid program and specific policy changes or  
6 rules to insure more prompt submission of bills to the  
7 federal government to secure maximum federal matching  
8 dollars as promptly as possible; the Department on Aging  
9 shall have at least 3 meetings with stakeholders by  
10 January 1, 2014 in order to address these improvements;

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

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

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

24 By January 1, 2009 or as soon after the end of the Cash and  
25 Counseling Demonstration Project as is practicable, the  
26 Department may, based on its evaluation of the demonstration

1 project, promulgate rules concerning personal assistant  
2 services, to include, but need not be limited to,  
3 qualifications, employment screening, rights under fair labor  
4 standards, training, fiduciary agent, and supervision  
5 requirements. All applicants shall be subject to the  
6 provisions of the Health Care Worker Background Check Act.

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

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

1 shall be required to retain records of all staff pre- and  
2 in-service training, and shall provide such records to the  
3 Department upon request and upon termination of the employer's  
4 contract with the Department. In addition, the employing  
5 agency is responsible for the issuance of certifications of  
6 in-service training completed to their employees.

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

16 The Community Care Program Advisory Committee is created  
17 in the Department on Aging. The Director shall appoint  
18 individuals to serve in the Committee, who shall serve at  
19 their own expense. Members of the Committee must abide by all  
20 applicable ethics laws. The Committee shall advise the  
21 Department on issues related to the Department's program of  
22 services to prevent unnecessary institutionalization. The  
23 Committee shall meet on a bi-monthly basis and shall serve to  
24 identify and advise the Department on present and potential  
25 issues affecting the service delivery network, the program's  
26 clients, and the Department and to recommend solution

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

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

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

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

17 The requirement for reporting to the General Assembly  
18 shall be satisfied by filing copies of the report as required  
19 by Section 3.1 of the General Assembly Organization Act and  
20 filing such additional copies with the State Government Report  
21 Distribution Center for the General Assembly as is required  
22 under paragraph (t) of Section 7 of the State Library Act.

23 Those persons previously found eligible for receiving  
24 non-institutional services whose services were discontinued  
25 under the Emergency Budget Act of Fiscal Year 1992, and who do  
26 not meet the eligibility standards in effect on or after July

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

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

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

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

1 Section 2-27 of the Illinois State Auditing Act.

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

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

22 The Department shall continue to provide other Community  
23 Care Program reports as required by statute.

24 ~~The Department shall provide a bi-monthly report on the~~  
25 ~~progress of the Community Care Program reforms set forth in~~  
26 ~~this amendatory Act of the 98th General Assembly to the~~



1 ~~Governor, the Speaker of the House of Representatives, the~~  
2 ~~Minority Leader of the House of Representatives, the President~~  
3 ~~of the Senate, and the Minority Leader of the Senate.~~

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

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

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

1 maintenance system.

2       Within 30 days after July 6, 2017 (the effective date of  
3 Public Act 100-23), rates shall be increased to \$18.29 per  
4 hour, for the purpose of increasing, by at least \$.72 per hour,  
5 the wages paid by those vendors to their employees who provide  
6 homemaker services. The Department shall pay an enhanced rate  
7 under the Community Care Program to those in-home service  
8 provider agencies that offer health insurance coverage as a  
9 benefit to their direct service worker employees consistent  
10 with the mandates of Public Act 95-713. For State fiscal years  
11 2018 and 2019, the enhanced rate shall be \$1.77 per hour. The  
12 rate shall be adjusted using actuarial analysis based on the  
13 cost of care, but shall not be set below \$1.77 per hour. The  
14 Department shall adopt rules, including emergency rules under  
15 subsections (y) and (bb) of Section 5-45 of the Illinois  
16 Administrative Procedure Act, to implement the provisions of  
17 this paragraph.

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

1 Medicaid; (ii) use recommendations from a stakeholder  
2 committee on how best to implement the Initiative; and (iii)  
3 establish requirements for State agencies to make enrollment  
4 in the State's Medical Assistance program easier for seniors.

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

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

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

19 (3) One representative of the Department of Human  
20 Services, appointed by the Secretary of Human Services.

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

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

26 (6) One individual representing Area Agencies on

1 Aging, appointed by the Director of Aging.

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

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

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

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

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

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

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

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

25 The Subcommittee shall provide oversight to the Community  
26 Care Program Medicaid Initiative and shall meet quarterly. At

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

26 The Department on Aging, with the involvement of the

1 Subcommittee, shall collaborate with the Department of Human  
2 Services and the Department of Healthcare and Family Services  
3 on how best to achieve the responsibilities of the Community  
4 Care Program Medicaid Initiative.

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

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

17 The Community Care Program Medicaid Initiative shall  
18 provide targeted funding to care coordination units to help  
19 seniors complete their applications for medical assistance  
20 benefits. On and after July 1, 2019, care coordination units  
21 shall receive no less than \$200 per completed application,  
22 which rate may be included in a bundled rate for initial intake  
23 services when Medicaid application assistance is provided in  
24 conjunction with the initial intake process for new program  
25 participants.

26 The Community Care Program Medicaid Initiative shall cease

1 operation 5 years after the effective date of this amendatory  
2 Act of the 100th General Assembly, after which the  
3 Subcommittee shall dissolve.

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

6 (20 ILCS 1110/7 rep.)

7 (20 ILCS 1110/8 rep.)

8 (20 ILCS 1110/9 rep.)

9 (20 ILCS 1110/10 rep.)

10 (20 ILCS 1110/11 rep.)

11 (20 ILCS 1110/12 rep.)

12 (20 ILCS 1110/13 rep.)

13 (20 ILCS 1110/14 rep.)

14 (20 ILCS 1110/15 rep.)

15 (20 ILCS 1110/16 rep.)

16 (20 ILCS 1110/17 rep.)

17 Section 10. The Illinois Coal and Energy Development Bond  
18 Act is amended by repealing Sections 7, 8, 9, 10, 11, 12, 13,  
19 14, 15, 16, and 17.

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

22 (20 ILCS 1305/1-17)

23 Sec. 1-17. Inspector General.

1 (a) Nature and purpose. It is the express intent of the  
2 General Assembly to ensure the health, safety, and financial  
3 condition of individuals receiving services in this State due  
4 to mental illness, developmental disability, or both by  
5 protecting those persons from acts of abuse, neglect, or both  
6 by service providers. To that end, the Office of the Inspector  
7 General for the Department of Human Services is created to  
8 investigate and report upon allegations of the abuse, neglect,  
9 or financial exploitation of individuals receiving services  
10 within mental health facilities, developmental disabilities  
11 facilities, and community agencies operated, licensed, funded,  
12 or certified by the Department of Human Services, but not  
13 licensed or certified by any other State agency.

14 (b) Definitions. The following definitions apply to this  
15 Section:

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

23 "Agency" or "community agency" means (i) a community  
24 agency licensed, funded, or certified by the Department, but  
25 not licensed or certified by any other human services agency  
26 of the State, to provide mental health service or



1 developmental disabilities service, or (ii) a program  
2 licensed, funded, or certified by the Department, but not  
3 licensed or certified by any other human services agency of  
4 the State, to provide mental health service or developmental  
5 disabilities service.

6 "Aggravating circumstance" means a factor that is  
7 attendant to a finding and that tends to compound or increase  
8 the culpability of the accused.

9 "Allegation" means an assertion, complaint, suspicion, or  
10 incident involving any of the following conduct by an  
11 employee, facility, or agency against an individual or  
12 individuals: mental abuse, physical abuse, sexual abuse,  
13 neglect, or financial exploitation.

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

15 "Deflection" means a situation in which an individual is  
16 presented for admission to a facility or agency, and the  
17 facility staff or agency staff do not admit the individual.  
18 "Deflection" includes triage, redirection, and denial of  
19 admission.

20 "Department" means the Department of Human Services.

21 "Developmental disability" means "developmental  
22 disability" as defined in the Mental Health and Developmental  
23 Disabilities Code.

24 "Egregious neglect" means a finding of neglect as  
25 determined by the Inspector General that (i) represents a  
26 gross failure to adequately provide for, or a callused

1 indifference to, the health, safety, or medical needs of an  
2 individual and (ii) results in an individual's death or other  
3 serious deterioration of an individual's physical condition or  
4 mental condition.

5 "Employee" means any person who provides services at the  
6 facility or agency on-site or off-site. The service  
7 relationship can be with the individual or with the facility  
8 or agency. Also, "employee" includes any employee or  
9 contractual agent of the Department of Human Services or the  
10 community agency involved in providing or monitoring or  
11 administering mental health or developmental disability  
12 services. This includes but is not limited to: owners,  
13 operators, payroll personnel, contractors, subcontractors, and  
14 volunteers.

15 "Facility" or "State-operated facility" means a mental  
16 health facility or developmental disabilities facility  
17 operated by the Department.

18 "Financial exploitation" means taking unjust advantage of  
19 an individual's assets, property, or financial resources  
20 through deception, intimidation, or conversion for the  
21 employee's, facility's, or agency's own advantage or benefit.

22 "Finding" means the Office of Inspector General's  
23 determination regarding whether an allegation is  
24 substantiated, unsubstantiated, or unfounded.

25 "Health Care Worker Registry" or "Registry" means the  
26 Health Care Worker Registry under the Health Care Worker

1 Background Check Act.

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

5 "Mental abuse" means the use of demeaning, intimidating,  
6 or threatening words, signs, gestures, or other actions by an  
7 employee about an individual and in the presence of an  
8 individual or individuals that results in emotional distress  
9 or maladaptive behavior, or could have resulted in emotional  
10 distress or maladaptive behavior, for any individual present.

11 "Mental illness" means "mental illness" as defined in the  
12 Mental Health and Developmental Disabilities Code.

13 "Mentally ill" means having a mental illness.

14 "Mitigating circumstance" means a condition that (i) is  
15 attendant to a finding, (ii) does not excuse or justify the  
16 conduct in question, but (iii) may be considered in evaluating  
17 the severity of the conduct, the culpability of the accused,  
18 or both the severity of the conduct and the culpability of the  
19 accused.

20 "Neglect" means an employee's, agency's, or facility's  
21 failure to provide adequate medical care, personal care, or  
22 maintenance and that, as a consequence, (i) causes an  
23 individual pain, injury, or emotional distress, (ii) results  
24 in either an individual's maladaptive behavior or the  
25 deterioration of an individual's physical condition or mental  
26 condition, or (iii) places the individual's health or safety

1 at substantial risk.

2 "Person with a developmental disability" means a person  
3 having a developmental disability.

4 "Physical abuse" means an employee's non-accidental and  
5 inappropriate contact with an individual that causes bodily  
6 harm. "Physical abuse" includes actions that cause bodily harm  
7 as a result of an employee directing an individual or person to  
8 physically abuse another individual.

9 "Recommendation" means an admonition, separate from a  
10 finding, that requires action by the facility, agency, or  
11 Department to correct a systemic issue, problem, or deficiency  
12 identified during an investigation.

13 "Required reporter" means any employee who suspects,  
14 witnesses, or is informed of an allegation of any one or more  
15 of the following: mental abuse, physical abuse, sexual abuse,  
16 neglect, or financial exploitation.

17 "Secretary" means the Chief Administrative Officer of the  
18 Department.

19 "Sexual abuse" means any sexual contact or intimate  
20 physical contact between an employee and an individual,  
21 including an employee's coercion or encouragement of an  
22 individual to engage in sexual behavior that results in sexual  
23 contact, intimate physical contact, sexual behavior, or  
24 intimate physical behavior. Sexual abuse also includes (i) an  
25 employee's actions that result in the sending or showing of  
26 sexually explicit images to an individual via computer,

1 cellular phone, electronic mail, portable electronic device,  
2 or other media with or without contact with the individual or  
3 (ii) an employee's posting of sexually explicit images of an  
4 individual online or elsewhere whether or not there is contact  
5 with the individual.

6 "Sexually explicit images" includes, but is not limited  
7 to, any material which depicts nudity, sexual conduct, or  
8 sado-masochistic abuse, or which contains explicit and  
9 detailed verbal descriptions or narrative accounts of sexual  
10 excitement, sexual conduct, or sado-masochistic abuse.

11 "Substantiated" means there is a preponderance of the  
12 evidence to support the allegation.

13 "Unfounded" means there is no credible evidence to support  
14 the allegation.

15 "Unsubstantiated" means there is credible evidence, but  
16 less than a preponderance of evidence to support the  
17 allegation.

18 (c) Appointment. The Governor shall appoint, and the  
19 Senate shall confirm, an Inspector General. The Inspector  
20 General shall be appointed for a term of 4 years and shall  
21 function within the Department of Human Services and report to  
22 the Secretary and the Governor.

23 (d) Operation and appropriation. The Inspector General  
24 shall function independently within the Department with  
25 respect to the operations of the Office, including the  
26 performance of investigations and issuance of findings and

1 recommendations. The appropriation for the Office of Inspector  
2 General shall be separate from the overall appropriation for  
3 the Department.

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

1 General for investigation.

2 (f) Limitations. The Inspector General shall not conduct  
3 an investigation within an agency or facility if that  
4 investigation would be redundant to or interfere with an  
5 investigation conducted by another State agency. The Inspector  
6 General shall have no supervision over, or involvement in, the  
7 routine programmatic, licensing, funding, or certification  
8 operations of the Department. Nothing in this subsection  
9 limits investigations by the Department that may otherwise be  
10 required by law or that may be necessary in the Department's  
11 capacity as central administrative authority responsible for  
12 the operation of the State's mental health and developmental  
13 disabilities facilities.

14 (g) Rulemaking authority. The Inspector General shall  
15 promulgate rules establishing minimum requirements for  
16 reporting allegations as well as for initiating, conducting,  
17 and completing investigations based upon the nature of the  
18 allegation or allegations. The rules shall clearly establish  
19 that if 2 or more State agencies could investigate an  
20 allegation, the Inspector General shall not conduct an  
21 investigation that would be redundant to, or interfere with,  
22 an investigation conducted by another State agency. The rules  
23 shall further clarify the method and circumstances under which  
24 the Office of Inspector General may interact with the  
25 licensing, funding, or certification units of the Department  
26 in preventing further occurrences of mental abuse, physical

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

3 (h) Training programs. The Inspector General shall (i)  
4 establish a comprehensive program to ensure that every person  
5 authorized to conduct investigations receives ongoing training  
6 relative to investigation techniques, communication skills,  
7 and the appropriate means of interacting with persons  
8 receiving treatment for mental illness, developmental  
9 disability, or both mental illness and developmental  
10 disability, and (ii) establish and conduct periodic training  
11 programs for facility and agency employees concerning the  
12 prevention and reporting of any one or more of the following:  
13 mental abuse, physical abuse, sexual abuse, neglect, egregious  
14 neglect, or financial exploitation. The Inspector General  
15 shall further ensure (i) every person authorized to conduct  
16 investigations at community agencies receives ongoing training  
17 in Title 59, Parts 115, 116, and 119 of the Illinois  
18 Administrative Code, and (ii) every person authorized to  
19 conduct investigations shall receive ongoing training in Title  
20 59, Part 50 of the Illinois Administrative Code. Nothing in  
21 this Section shall be deemed to prevent the Office of  
22 Inspector General from conducting any other training as  
23 determined by the Inspector General to be necessary or  
24 helpful.

25 (i) Duty to cooperate.

26 (1) The Inspector General shall at all times be



1 granted access to any facility or agency for the purpose  
2 of investigating any allegation, conducting unannounced  
3 site visits, monitoring compliance with a written  
4 response, or completing any other statutorily assigned  
5 duty. The Inspector General shall conduct unannounced site  
6 visits to each facility at least annually for the purpose  
7 of reviewing and making recommendations on systemic issues  
8 relative to preventing, reporting, investigating, and  
9 responding to all of the following: mental abuse, physical  
10 abuse, sexual abuse, neglect, egregious neglect, or  
11 financial exploitation.

12 (2) Any employee who fails to cooperate with an Office  
13 of the Inspector General investigation is in violation of  
14 this Act. Failure to cooperate with an investigation  
15 includes, but is not limited to, any one or more of the  
16 following: (i) creating and transmitting a false report to  
17 the Office of the Inspector General hotline, (ii)  
18 providing false information to an Office of the Inspector  
19 General Investigator during an investigation, (iii)  
20 colluding with other employees to cover up evidence, (iv)  
21 colluding with other employees to provide false  
22 information to an Office of the Inspector General  
23 investigator, (v) destroying evidence, (vi) withholding  
24 evidence, or (vii) otherwise obstructing an Office of the  
25 Inspector General investigation. Additionally, any  
26 employee who, during an unannounced site visit or written

1 response compliance check, fails to cooperate with  
2 requests from the Office of the Inspector General is in  
3 violation of this Act.

4 (j) Subpoena powers. The Inspector General shall have the  
5 power to subpoena witnesses and compel the production of all  
6 documents and physical evidence relating to his or her  
7 investigations and any hearings authorized by this Act. This  
8 subpoena power shall not extend to persons or documents of a  
9 labor organization or its representatives insofar as the  
10 persons are acting in a representative capacity to an employee  
11 whose conduct is the subject of an investigation or the  
12 documents relate to that representation. Any person who  
13 otherwise fails to respond to a subpoena or who knowingly  
14 provides false information to the Office of the Inspector  
15 General by subpoena during an investigation is guilty of a  
16 Class A misdemeanor.

17 (k) Reporting allegations and deaths.

18 (1) Allegations. If an employee witnesses, is told of,  
19 or has reason to believe an incident of mental abuse,  
20 physical abuse, sexual abuse, neglect, or financial  
21 exploitation has occurred, the employee, agency, or  
22 facility shall report the allegation by phone to the  
23 Office of the Inspector General hotline according to the  
24 agency's or facility's procedures, but in no event later  
25 than 4 hours after the initial discovery of the incident,  
26 allegation, or suspicion of any one or more of the

1 following: mental abuse, physical abuse, sexual abuse,  
2 neglect, or financial exploitation. A required reporter as  
3 defined in subsection (b) of this Section who knowingly or  
4 intentionally fails to comply with these reporting  
5 requirements is guilty of a Class A misdemeanor.

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

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

13 (ii) Any death of an individual occurring within  
14 24 hours after deflection from a residential program  
15 or facility.

16 (iii) Any other death of an individual occurring  
17 at an agency or facility or at any Department-funded  
18 site.

19 (3) Retaliation. It is a violation of this Act for any  
20 employee or administrator of an agency or facility to take  
21 retaliatory action against an employee who acts in good  
22 faith in conformance with his or her duties as a required  
23 reporter.

24 (1) Reporting to law enforcement. ~~(1)~~ Reporting criminal  
25 acts. Within 24 hours after determining that there is credible  
26 evidence indicating that a criminal act may have been

1 committed or that special expertise may be required in an  
2 investigation, the Inspector General shall notify the Illinois  
3 State Police or other appropriate law enforcement authority,  
4 or ensure that such notification is made. The Illinois State  
5 Police shall investigate any report from a State-operated  
6 facility indicating a possible murder, sexual assault, or  
7 other felony by an employee. All investigations conducted by  
8 the Inspector General shall be conducted in a manner designed  
9 to ensure the preservation of evidence for possible use in a  
10 criminal prosecution.

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

1 (m) Investigative reports. Upon completion of an  
2 investigation, the Office of Inspector General shall issue an  
3 investigative report identifying whether the allegations are  
4 substantiated, unsubstantiated, or unfounded. Within 10  
5 business days after the transmittal of a completed  
6 investigative report substantiating an allegation, finding an  
7 allegation is unsubstantiated, or if a recommendation is made,  
8 the Inspector General shall provide the investigative report  
9 on the case to the Secretary and to the director of the  
10 facility or agency where any one or more of the following  
11 occurred: mental abuse, physical abuse, sexual abuse, neglect,  
12 egregious neglect, or financial exploitation. The director of  
13 the facility or agency shall be responsible for maintaining  
14 the confidentiality of the investigative report consistent  
15 with State and federal law. In a substantiated case, the  
16 investigative report shall include any mitigating or  
17 aggravating circumstances that were identified during the  
18 investigation. If the case involves substantiated neglect, the  
19 investigative report shall also state whether egregious  
20 neglect was found. An investigative report may also set forth  
21 recommendations. All investigative reports prepared by the  
22 Office of the Inspector General shall be considered  
23 confidential and shall not be released except as provided by  
24 the law of this State or as required under applicable federal  
25 law. Unsubstantiated and unfounded reports shall not be  
26 disclosed except as allowed under Section 6 of the Abused and

1 Neglected Long Term Care Facility Residents Reporting Act. Raw  
2 data used to compile the investigative report shall not be  
3 subject to release unless required by law or a court order.  
4 "Raw data used to compile the investigative report" includes,  
5 but is not limited to, any one or more of the following: the  
6 initial complaint, witness statements, photographs,  
7 investigator's notes, police reports, or incident reports. If  
8 the allegations are substantiated, the victim, the victim's  
9 guardian, and the accused shall be provided with a redacted  
10 copy of the investigative report. Death reports where there  
11 was no allegation of abuse or neglect shall only be released  
12 pursuant to applicable State or federal law or a valid court  
13 order. Unredacted investigative reports, as well as raw data,  
14 may be shared with a local law enforcement entity, a State's  
15 Attorney's office, or a county coroner's office upon written  
16 request.

17 (n) Written responses, clarification requests, and  
18 reconsideration requests.

19 (1) Written responses. Within 30 calendar days from  
20 receipt of a substantiated investigative report or an  
21 investigative report which contains recommendations,  
22 absent a reconsideration request, the facility or agency  
23 shall file a written response that addresses, in a concise  
24 and reasoned manner, the actions taken to: (i) protect the  
25 individual; (ii) prevent recurrences; and (iii) eliminate  
26 the problems identified. The response shall include the

1 implementation and completion dates of such actions. If  
2 the written response is not filed within the allotted 30  
3 calendar day period, the Secretary shall determine the  
4 appropriate corrective action to be taken.

5 (2) Requests for clarification. The facility, agency,  
6 victim or guardian, or the subject employee may request  
7 that the Office of Inspector General clarify the finding  
8 or findings for which clarification is sought.

9 (3) Requests for reconsideration. The facility,  
10 agency, victim or guardian, or the subject employee may  
11 request that the Office of the Inspector General  
12 reconsider the finding or findings or the recommendations.  
13 A request for reconsideration shall be subject to a  
14 multi-layer review and shall include at least one reviewer  
15 who did not participate in the investigation or approval  
16 of the original investigative report. After the  
17 multi-layer review process has been completed, the  
18 Inspector General shall make the final determination on  
19 the reconsideration request. The investigation shall be  
20 reopened if the reconsideration determination finds that  
21 additional information is needed to complete the  
22 investigative record.

23 (o) Disclosure of the finding by the Inspector General.  
24 The Inspector General shall disclose the finding of an  
25 investigation to the following persons: (i) the Governor, (ii)  
26 the Secretary, (iii) the director of the facility or agency,

1 (iv) the alleged victims and their guardians, (v) the  
2 complainant, and (vi) the accused. This information shall  
3 include whether the allegations were deemed substantiated,  
4 unsubstantiated, or unfounded.

5 (p) Secretary review. Upon review of the Inspector  
6 General's investigative report and any agency's or facility's  
7 written response, the Secretary shall accept or reject the  
8 written response and notify the Inspector General of that  
9 determination. The Secretary may further direct that other  
10 administrative action be taken, including, but not limited to,  
11 any one or more of the following: (i) additional site visits,  
12 (ii) training, (iii) provision of technical assistance  
13 relative to administrative needs, licensure, or certification,  
14 or (iv) the imposition of appropriate sanctions.

15 (q) Action by facility or agency. Within 30 days of the  
16 date the Secretary approves the written response or directs  
17 that further administrative action be taken, the facility or  
18 agency shall provide an implementation report to the Inspector  
19 General that provides the status of the action taken. The  
20 facility or agency shall be allowed an additional 30 days to  
21 send notice of completion of the action or to send an updated  
22 implementation report. If the action has not been completed  
23 within the additional 30-day period, the facility or agency  
24 shall send updated implementation reports every 60 days until  
25 completion. The Inspector General shall conduct a review of  
26 any implementation plan that takes more than 120 days after



1 approval to complete, and shall monitor compliance through a  
2 random review of approved written responses, which may  
3 include, but are not limited to: (i) site visits, (ii)  
4 telephone contact, and (iii) requests for additional  
5 documentation evidencing compliance.

6 (r) Sanctions. Sanctions, if imposed by the Secretary  
7 under Subdivision (p)(iv) of this Section, shall be designed  
8 to prevent further acts of mental abuse, physical abuse,  
9 sexual abuse, neglect, egregious neglect, or financial  
10 exploitation or some combination of one or more of those acts  
11 at a facility or agency, and may include any one or more of the  
12 following:

13 (1) Appointment of on-site monitors.

14 (2) Transfer or relocation of an individual or  
15 individuals.

16 (3) Closure of units.

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

18 (i) Department licensing, (ii) funding, or (iii)  
19 certification.

20 The Inspector General may seek the assistance of the  
21 Illinois Attorney General or the office of any State's  
22 Attorney in implementing sanctions.

23 (s) Health Care Worker Registry.

24 (1) Reporting to the Registry. The Inspector General  
25 shall report to the Department of Public Health's Health  
26 Care Worker Registry, a public registry, the identity and

1 finding of each employee of a facility or agency against  
2 whom there is a final investigative report containing a  
3 substantiated allegation of physical or sexual abuse,  
4 financial exploitation, or egregious neglect of an  
5 individual.

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

25 (3) Registry hearings. If the employee requests an  
26 administrative hearing, the employee shall be granted an

1 opportunity to appear before an administrative law judge  
2 to present reasons why the employee's name should not be  
3 reported to the Registry. The Department shall bear the  
4 burden of presenting evidence that establishes, by a  
5 preponderance of the evidence, that the substantiated  
6 finding warrants reporting to the Registry. After  
7 considering all the evidence presented, the administrative  
8 law judge shall make a recommendation to the Secretary as  
9 to whether the substantiated finding warrants reporting  
10 the name of the employee to the Registry. The Secretary  
11 shall render the final decision. The Department and the  
12 employee shall have the right to request that the  
13 administrative law judge consider a stipulated disposition  
14 of these proceedings.

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

1           (5) Employee's rights to collateral action. No  
2 reporting to the Registry shall occur and no hearing shall  
3 be set or proceed if an employee notifies the Inspector  
4 General in writing, including any supporting  
5 documentation, that he or she is formally contesting an  
6 adverse employment action resulting from a substantiated  
7 finding by complaint filed with the Illinois Civil Service  
8 Commission, or which otherwise seeks to enforce the  
9 employee's rights pursuant to any applicable collective  
10 bargaining agreement. If an action taken by an employer  
11 against an employee as a result of a finding of physical  
12 abuse, sexual abuse, or egregious neglect is overturned  
13 through an action filed with the Illinois Civil Service  
14 Commission or under any applicable collective bargaining  
15 agreement and if that employee's name has already been  
16 sent to the Registry, the employee's name shall be removed  
17 from the Registry.

18           (6) Removal from Registry. At any time after the  
19 report to the Registry, but no more than once in any  
20 12-month period, an employee may petition the Department  
21 in writing to remove his or her name from the Registry.  
22 Upon receiving notice of such request, the Inspector  
23 General shall conduct an investigation into the petition.  
24 Upon receipt of such request, an administrative hearing  
25 will be set by the Department. At the hearing, the  
26 employee shall bear the burden of presenting evidence that

1 establishes, by a preponderance of the evidence, that  
2 removal of the name from the Registry is in the public  
3 interest. The parties may jointly request that the  
4 administrative law judge consider a stipulated disposition  
5 of these proceedings.

6 (t) Review of Administrative Decisions. The Department  
7 shall preserve a record of all proceedings at any formal  
8 hearing conducted by the Department involving Health Care  
9 Worker Registry hearings. Final administrative decisions of  
10 the Department are subject to judicial review pursuant to  
11 provisions of the Administrative Review Law.

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

24 Members appointed by the Governor shall be qualified by  
25 professional knowledge or experience in the area of law,  
26 investigatory techniques, or in the area of care of the

1 mentally ill or care of persons with developmental  
2 disabilities. Two members appointed by the Governor shall be  
3 persons with a disability or parents of persons with a  
4 disability. Members shall serve without compensation, but  
5 shall be reimbursed for expenses incurred in connection with  
6 the performance of their duties as members.

7 The Board shall meet quarterly, and may hold other  
8 meetings on the call of the chairman. Four members shall  
9 constitute a quorum allowing the Board to conduct its  
10 business. The Board may adopt rules and regulations it deems  
11 necessary to govern its own procedures.

12 The Board shall monitor and oversee the operations,  
13 policies, and procedures of the Inspector General to ensure  
14 the prompt and thorough investigation of allegations of  
15 neglect and abuse. In fulfilling these responsibilities, the  
16 Board may do the following:

17 (1) Provide independent, expert consultation to the  
18 Inspector General on policies and protocols for  
19 investigations of alleged abuse, neglect, or both abuse  
20 and neglect.

21 (2) Review existing regulations relating to the  
22 operation of facilities.

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

25 (4) Recommend policies concerning methods for  
26 improving the intergovernmental relationships between the

1 Office of the Inspector General and other State or federal  
2 offices.

3 (v) Annual report. The Inspector General shall provide to  
4 the General Assembly and the Governor, no later than January 1  
5 of each year, a summary of reports and investigations made  
6 under this Act for the prior fiscal year with respect to  
7 individuals receiving mental health or developmental  
8 disabilities services. The report shall detail the imposition  
9 of sanctions, if any, and the final disposition of any  
10 corrective or administrative action directed by the Secretary.  
11 The summaries shall not contain any confidential or  
12 identifying information of any individual, but shall include  
13 objective data identifying any trends in the number of  
14 reported allegations, the timeliness of the Office of the  
15 Inspector General's investigations, and their disposition, for  
16 each facility and Department-wide, for the most recent 3-year  
17 time period. The report shall also identify, by facility, the  
18 staff-to-patient ratios taking account of direct care staff  
19 only. The report shall also include detailed recommended  
20 administrative actions and matters for consideration by the  
21 General Assembly.

22 (w) Program audit. The Auditor General shall conduct a  
23 program audit of the Office of the Inspector General on an  
24 as-needed basis, as determined by the Auditor General. The  
25 audit shall specifically include the Inspector General's  
26 compliance with the Act and effectiveness in investigating

1 reports of allegations occurring in any facility or agency.  
2 The Auditor General shall conduct the program audit according  
3 to the provisions of the Illinois State Auditing Act and shall  
4 report its findings to the General Assembly no later than  
5 January 1 following the audit period.

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

10 (y) Nothing in this Section shall require a facility,  
11 including its employees, agents, medical staff members, and  
12 health care professionals, to provide a service to an  
13 individual in contravention of that individual's stated or  
14 implied objection to the provision of that service on the  
15 ground that that service conflicts with the individual's  
16 religious beliefs or practices, nor shall the failure to  
17 provide a service to an individual be considered abuse under  
18 this Section if the individual has objected to the provision  
19 of that service based on his or her religious beliefs or  
20 practices.

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

22 (20 ILCS 2712/Act rep.)

23 Section 20. The Broadband Access on Passenger Rail Law is  
24 repealed.



1 (20 ILCS 3930/7.6 rep.)

2 Section 25. The Illinois Criminal Justice Information Act  
3 is amended by repealing Section 7.6.

4 (20 ILCS 5035/Act rep.)

5 Section 30. The Illinois Human Services Commission Act is  
6 repealed.

7 (30 ILCS 105/5h rep.)

8 Section 35. The State Finance Act is amended by repealing  
9 Section 5h.

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

12 (30 ILCS 500/25-55)

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

1 ~~the cost per copy and the cost per page of the annual report of~~  
2 ~~the State agency printed during the calendar year covered by~~  
3 ~~the report.~~

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

5 (205 ILCS 405/3.2 rep.)

6 Section 45. The Currency Exchange Act is amended by  
7 repealing Section 3.2.

8 Section 50. The Grain Code is amended by changing Section  
9 30-25 as follows:

10 (240 ILCS 40/30-25)

11 Sec. 30-25. Grain Insurance Reserve Fund. Upon payment in  
12 full of all money that has been transferred to the Fund prior  
13 to June 30, 2003 from the General Revenue Fund as provided for  
14 under subsection (h) of Section 25-20, the State of Illinois  
15 shall, subject to appropriation, remit \$2,000,000 to the  
16 Corporation to be held in a separate and discrete account to be  
17 used to the extent the assets in the Fund are insufficient to  
18 satisfy claimants as payment of their claims become due as set  
19 forth in subsection (h) of Section 25-20. The remittance of  
20 the \$2,000,000 reserve shall be made to the Corporation within  
21 60 days of payment in full of all money transferred to the Fund  
22 as set forth above in this Section 30-25. All income received  
23 by the Reserve Fund shall be deposited in the Fund within 35

1 days of the end of each calendar quarter.

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

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

5 (405 ILCS 30/4) (from Ch. 91 1/2, par. 904)

6 Sec. 4. Financing for community services.

7 (a) The Department of Human Services is authorized to  
8 provide financial reimbursement to eligible private service  
9 providers, corporations, local government entities or  
10 voluntary associations for the provision of services to  
11 persons with mental illness, persons with a developmental  
12 disability, and persons with substance use disorders who are  
13 living in the community for the purpose of achieving the goals  
14 of this Act.

15 The Department shall utilize the following funding  
16 mechanisms for community services:

17 (1) Purchase of Care Contracts: services purchased on  
18 a predetermined fee per unit of service basis from private  
19 providers or governmental entities. Fee per service rates  
20 are set by an established formula which covers some  
21 portion of personnel, supplies, and other allowable costs,  
22 and which makes some allowance for geographic variations  
23 in costs as well as for additional program components.

24 (2) Grants: sums of money which the Department grants

1 to private providers or governmental entities pursuant to  
2 the grant recipient's agreement to provide certain  
3 services, as defined by departmental grant guidelines, to  
4 an approximate number of service recipients. Grant levels  
5 are set through consideration of personnel, supply and  
6 other allowable costs, as well as other funds available to  
7 the program.

8 (3) Other Funding Arrangements: funding mechanisms may  
9 be established on a pilot basis in order to examine the  
10 feasibility of alternative financing arrangements for the  
11 provision of community services.

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

16 For services classified as entitlement services under  
17 federal law or guidelines, caps may not be placed on the total  
18 amount of payment a provider may receive in a fiscal year and  
19 the Department shall not require that a portion of the  
20 payments due be made in a subsequent fiscal year based on a  
21 yearly payment cap.

22 (b) (Blank). ~~The Governor shall create a commission by~~  
23 ~~September 1, 2009, or as soon thereafter as possible, to~~  
24 ~~review funding methodologies, identify gaps in funding,~~  
25 ~~identify revenue, and prioritize use of that revenue for~~  
26 ~~community developmental disability services, mental health~~

1 ~~services, alcohol and substance abuse services, rehabilitation~~  
2 ~~services, and early intervention services. The Office of the~~  
3 ~~Governor shall provide staff support for the commission.~~

4 (c) (Blank). ~~The first meeting of the commission shall be~~  
5 ~~held within the first month after the creation and appointment~~  
6 ~~of the commission, and a final report summarizing the~~  
7 ~~commission's recommendations must be issued within 12 months~~  
8 ~~after the first meeting, and no later than September 1, 2010,~~  
9 ~~to the Governor and the General Assembly.~~

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

12 ~~(A) one member of the House of Representatives,~~  
13 ~~appointed by the Speaker of the House of Representatives;~~

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

16 ~~(C) one member of the Senate, appointed by the~~  
17 ~~President of the Senate;~~

18 ~~(D) one member of the Senate, appointed by the Senate~~  
19 ~~Minority Leader;~~

20 ~~(E) one person with a developmental disability, or a~~  
21 ~~family member or guardian of such a person, appointed by~~  
22 ~~the Governor;~~

23 ~~(F) one person with a mental illness, or a family~~  
24 ~~member or guardian of such a person, appointed by the~~  
25 ~~Governor;~~

26 ~~(G) two persons from unions that represent employees~~

1 ~~of community providers that serve people with~~  
2 ~~developmental disabilities, mental illness, and alcohol~~  
3 ~~and substance abuse disorders, appointed by the Governor;~~  
4 ~~and~~

5 ~~(H) five persons from statewide associations that~~  
6 ~~represent community providers that provide residential,~~  
7 ~~day training, and other developmental disability services,~~  
8 ~~mental health services, alcohol and substance abuse~~  
9 ~~services, rehabilitation services, or early intervention~~  
10 ~~services, or any combination of those, appointed by the~~  
11 ~~Governor.~~

12 ~~The commission shall also have the following ex officio,~~  
13 ~~nonvoting members:~~

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

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

18 ~~(K) the Administrator of the Department of Healthcare~~  
19 ~~and Family Services Division of Finance or his or her~~  
20 ~~designee;~~

21 ~~(L) the Director of the Department of Human Services~~  
22 ~~Division of Developmental Disabilities or his or her~~  
23 ~~designee;~~

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

26 ~~(N) the Director of the Department of Human Services~~

1 ~~Division of Alcoholism and Substance Abuse or his or her~~  
2 ~~designee.~~

3 (e) The funding methodologies must reflect economic  
4 factors inherent in providing services and supports, recognize  
5 individual disability needs, and consider geographic  
6 differences, transportation costs, required staffing ratios,  
7 and mandates not currently funded.

8 (f) In accepting Department funds, providers shall  
9 recognize their responsibility to be accountable to the  
10 Department and the State for the delivery of services which  
11 are consistent with the philosophies and goals of this Act and  
12 the rules and regulations promulgated under it.

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

14 (730 ILCS 5/3-5-3 rep.)

15 (730 ILCS 5/5-8-1.3 rep.)

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

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

20 (820 ILCS 305/18.1)

21 Sec. 18.1. Claims by former and current employees of the  
22 Commission. All claims by current and former employees and  
23 appointees of the Commission shall be assigned to a certified

1 independent arbitrator not employed by the Commission  
2 designated by the Chairman. In preparing the roster of  
3 approved certified independent arbitrators, the Chairman shall  
4 seek the advice and recommendation of the Commission or the  
5 Workers' Compensation Advisory Board at his or her discretion.

6 ~~The Chairman shall designate an arbitrator from a list of~~  
7 ~~approved certified arbitrators provided by the Commission~~  
8 ~~Review Board.~~ If the Chairman is the claimant, then the

9 independent arbitrator from the approved list shall be  
10 designated by the longest serving Commissioner. The designated  
11 independent arbitrator shall have the authority of arbitrators  
12 of the Commission regarding settlement and adjudication of the  
13 claim of the current and former employees and appointees of  
14 the Commission. The decision of the independent arbitrator  
15 shall become the decision of the Commission. An appeal of the  
16 independent arbitrator's decision shall be subject to judicial  
17 review in accordance with subsection (f) of Section 19.

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

19 (820 ILCS 305/14.1 rep.)

20 Section 70. The Workers' Compensation Act is amended by  
21 repealing Section 14.1.

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