102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

SB3747

Introduced 1/21/2022, by Sen. Julie A. Morrison

SYNOPSIS AS INTRODUCED:

210 ILCS 85/6.2 new 225 ILCS 10/7.12 new 305 ILCS 5/9A-11 from Ch. 23, par. 9A-11 325 ILCS 20/3 from Ch. 23, par. 4153

Amends the Hospital Licensing Act. Provides that no later than January 1, 2023, the Department of Public Health shall convene a comprehensive stakeholder process to develop standards for hospitals to establish specialized units for children and adolescents with an autism spectrum disorder and other intellectual or developmental disabilities. Amends the Child Care Act of 1969. Provides that child welfare supervisors shall satisfy specified requirements. Provides that the Central Office of Licensing at the Department of Children and Family Services shall convene a 5 person panel to review all transcripts and course information and make a decision on the equivalency of the college degree to a human services degree. Provides that the panel must include representation from a community-based provider. Amends the Illinois Public Aid Code. Expands eligibility under the Department of Human Services' child care assistance program to youth in care and to families receiving Extended Family Support Program services from the Department of Children and Family Services. Amends the Early Intervention Services System Act. Provides that the definition of "eligible infants and toddlers" includes any child under the age of 3 who is the subject of a substantiated case of child abuse or neglect, as defined by the federal Child Abuse Prevention and Treatment Act. Effective immediately, except that changes to the Illinois Public Aid Code take effect July 1, 2023.

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AN ACT concerning regulation.

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

- Section 5. The Hospital Licensing Act is amended by adding
 Section 6.2 as follows:
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(210 ILCS 85/6.2 new)

Sec. 6.2. Units for children and adolescents with
 intellectual or developmental disabilities.

9 (a) No later than January 1, 2023, the Department shall convene a comprehensive stakeholder process that includes 10 representatives from the Department of Human Services, the 11 12 Department of Children and Family Services, the Department of Healthcare and Family Services, professional organizations 13 14 representing physicians, pediatricians, psychologists, physical therapists, and speech therapists, community-based 15 providers serving and supporting children and adults with 16 intellectual or developmental disabilities, and other 17 individuals or organizations the Department deems appropriate 18 19 to develop standards for hospitals to establish specialized 20 units for children and adolescents with an autism spectrum 21 disorder and other intellectual or developmental disabilities. 22 (b) The criteria for admission to these units shall include, but not be limited to: 23

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1	(1) children and adolescents between 10 years of age
2	and 21 years of age;
3	(2) have a documented primary diagnosis of an autism
4	spectrum disorder or other intellectual or developmental
5	disability; and
6	(3) display self-injury, aggression, or other severe
7	behavior problems that impair functioning.
8	(c) Staffing for these specialized units should include a
9	multidisciplinary team of appropriately licensed or certified
10	professionals and paraprofessionals able to implement methods
11	including, but not limited to:
12	(1) medication review and medication therapy;
13	(2) medical assessment and referrals;
14	(3) individual, group, and family therapies;
15	(4) functional behavior assessment;
16	(5) behavioral interventions;
17	(6) behavior training with family and agencies;
18	(7) social skills training;
19	(8) adaptive and self-care skills training;
20	(9) educational and developmental learning center;
21	(10) disposition planning;
22	(11) parent or guardian management training;
23	(12) problem-solving training;
24	(13) self-management training;
25	(14) cognitive behavioral therapy; and
26	(15) dialectical behavior therapy.

1	Section 10. The Child Care Act of 1969 is amended by adding
2	Section 7.12 as follows:
3	(225 ILCS 10/7.12 new)
4	Sec. 7.12. Child welfare supervisors.
5	(a) Child welfare supervisors shall satisfy the following
6	requirements:
7	<u>(1) a child welfare supervisor not working in a group</u>
8	home, child care institution, or maternity center shall
9	have a bachelor's degree listed in subsection (b) and 5
10	years of experience in a child welfare setting;
11	(2) a child welfare supervisor working at a group home
12	<u>shall have a high school diploma or high school</u>
13	equivalency certificate and 2 years of experience within a
14	child or adult residential program or a bachelor's degree
15	listed in subsection (b) and one year of experience
16	working in child or adult residential programs; and
17	(3) a child welfare supervisor working at a child care
18	institution or maternity shall have a high school diploma
19	or high school equivalency certificate.
20	(b) The Department shall accept the following degrees as
21	human services degrees:
22	(1) applied behavioral services;
23	(2) behavioral analysis and therapy;
24	(3) child and adolescent development;

1	(4) communicative disorders, with a specialization in
2	rehabilitation counseling;
3	(5) community counseling;
4	(6) correctional counseling;
5	(7) counseling;
6	(8) counseling for child welfare specialists;
7	(9) counseling and organizational psychology;
8	(10) counseling studies;
9	<u>(11) criminal justice;</u>
10	(12) health and human services;
11	(13) education with a specialization in counseling,
12	counseling and human development, guidance and counseling,
13	curriculum development, family and consumer sciences, or
14	school counseling, or with coursework in early childhood,
15	childhood psycho-pathology, pre-school children, or
16	alcoholism and other drug abuse;
17	(14) health and wellness;
18	(15) human behavior;
19	<u>(16) human development;</u>
20	(17) human ecology, with specialization in human
21	development and family studies;
22	(18) human services and counseling;
23	(19) human services management;
24	(20) leadership and human services administration;
25	(21) non-profit management;

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1	(23) public health adm	inistra	tion;	
2	(24) public management	<u>;</u>		
3	<u>(25)</u> rehabilitation co	unselin	g;	
4	(26) social and behavi	oral psy	ychology;	
5	<u>(</u> 27) social psychology	<u>;</u>		
6	<u>(28)</u> urban education a	nd comm	unity couns	seling; and
7	(29) youth and family	services	s and admir	nistration.
8	(c) The Central Office of	of Lice	nsing at	the Department
9	<u>shall convene a 5 person pane</u>	<u>l to re</u>	eview all t	transcripts and
10	course information and make a	decisi	on on the	equivalency of
11	the college degree to a human	service	es degree.	The panel must
12	include representation from a	communi	ty-based p	rovider.
13	Section 15. The Illinois	Public	Aid Code	is amended by
1 4				

14 changing Section 9A-11 as follows:

15 (305 ILCS 5/9A-11) (from Ch. 23, par. 9A-11)

16 Sec. 9A-11. Child care.

(a) The General Assembly recognizes that families with 17 children need child care in order to work. Child care is 18 19 expensive and families with low incomes, including those who 20 are transitioning from welfare to work, often struggle to pay 21 the costs of day care. The General Assembly understands the importance of helping low-income working families become and 22 23 remain self-sufficient. The General Assembly also believes 24 that it is the responsibility of families to share in the costs

of child care. It is also the preference of the General
 Assembly that all working poor families should be treated
 equally, regardless of their welfare status.

the extent resources permit, the Illinois 4 (b) То 5 Department shall provide child care services to parents or other relatives as defined by rule who are working or 6 7 participating in employment or Department approved education 8 or training programs. At a minimum, the Illinois Department 9 shall cover the following categories of families:

(1) recipients of TANF under Article IV participating
 in work and training activities as specified in the
 personal plan for employment and self-sufficiency;

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(2) families transitioning from TANF to work;

(3) families at risk of becoming recipients of TANF;

(4) families with special needs as defined by rule;

16 (5) working families with very low incomes as defined17 by rule;

18 (6) families that are not recipients of TANF and that 19 need child care assistance to participate in education and 20 training activities; and

21 (6.5) youth in care as defined by Section 4d of the
 22 Children and Family Services Act;

(7) families with children under the age of 5 who have
an open intact family services case with the Department of
Children and Family Services. Any family that receives
child care assistance in accordance with this paragraph

shall remain eligible for child care assistance 6 months 1 2 after the child's intact family services case is closed, 3 regardless of whether the child's parents or other relatives as defined by rule are working or participating 4 5 in Department approved employment or education or training 6 programs. The Department of Human Services, in 7 consultation with the Department of Children and Family 8 Services, shall adopt rules to protect the privacy of 9 families who are the subject of an open intact family 10 services case when such families enroll in child care 11 services. Additional rules shall be adopted to offer 12 children who have an open intact family services case the 13 opportunity to receive an Early Intervention screening and 14 other services that their families may be eligible for as 15 provided by the Department of Human Services; and.

16 <u>(8) families receiving Extended Family Support Program</u>
17 <u>services from the Department of Children and Family</u>
18 <u>Services.</u>

19 The Department shall specify by rule the conditions of 20 eligibility, the application process, and the types, amounts, 21 and duration of services. Eligibility for child care benefits 22 and the amount of child care provided may vary based on family 23 size, income, and other factors as specified by rule.

The Department shall update the Child Care Assistance Program Eligibility Calculator posted on its website to include a question on whether a family is applying for child care assistance for the first time or is applying for a
 redetermination of eligibility.

A family's eligibility for child care services shall be 3 redetermined no sooner than 12 months following the initial 4 determination or most recent redetermination. During the 5 12-month periods, the family shall remain eligible for child 6 7 care services regardless of (i) a change in family income, unless family income exceeds 85% of State median income, or 8 9 (ii) a temporary change in the ongoing status of the parents or 10 other relatives, as defined by rule, as working or attending a 11 job training or educational program.

12 In determining income eligibility for child care benefits, the Department annually, at the beginning of each fiscal year, 13 14 shall establish, by rule, one income threshold for each family 15 size, in relation to percentage of State median income for a 16 family of that size, that makes families with incomes below 17 the specified threshold eligible for assistance and families with incomes above the specified threshold ineligible for 18 assistance. Through and including fiscal year 2007, 19 the 20 specified threshold must be no less than 50% of the then-current State median income for each 21 family size. 22 Beginning in fiscal year 2008, the specified threshold must be 23 no less than 185% of the then-current federal poverty level for each family size. Notwithstanding any other provision of 24 25 law or administrative rule to the contrary, beginning in 26 fiscal year 2019, the specified threshold for working families

with very low incomes as defined by rule must be no less than 1 2 185% of the then-current federal poverty level for each family 3 Notwithstanding any other provision of law size. or administrative rule to the contrary, beginning in State fiscal 4 5 year 2022, the specified income threshold shall be no less 6 than 200% of the then-current federal poverty level for each 7 family size.

8 In determining eligibility for assistance, the Department 9 shall not give preference to any category of recipients or 10 give preference to individuals based on their receipt of 11 benefits under this Code.

Nothing in this Section shall be construed as conferring entitlement status to eligible families.

14 The Illinois Department is authorized to lower income 15 eligibility ceilings, raise parent co-payments, create waiting 16 lists, or take such other actions during a fiscal year as are 17 necessary to ensure that child care benefits paid under this Article do not exceed the amounts appropriated for those child 18 19 care benefits. These changes may be accomplished by emergency 20 rule under Section 5-45 of the Illinois Administrative Procedure Act, except that the limitation on the number of 21 22 emergency rules that may be adopted in a 24-month period shall 23 not apply.

The Illinois Department may contract with other State agencies or child care organizations for the administration of child care services.

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(c) Payment shall be made for child care that otherwise 1 2 meets the requirements of this Section and applicable standards of State and local law and regulation, including any 3 requirements the Illinois Department promulgates by rule in 4 5 addition to the licensure requirements promulgated by the Department of Children and Family Services and Fire Prevention 6 and Safety requirements promulgated by the Office of the State 7 8 Fire Marshal, and is provided in any of the following:

9 (1) a child care center which is licensed or exempt 10 from licensure pursuant to Section 2.09 of the Child Care 11 Act of 1969;

12 (2) a licensed child care home or home exempt from13 licensing;

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(3) a licensed group child care home;

15 (4) other types of child care, including child care 16 provided by relatives or persons living in the same home 17 as the child, as determined by the Illinois Department by 18 rule.

19 Solely for the purposes of coverage under the (c-5)20 Illinois Public Labor Relations Act, child and day care home 21 providers, including licensed and license exempt, 22 participating in the Department's child care assistance 23 program shall be considered to be public employees and the State of Illinois shall be considered to be their employer as 24 25 of January 1, 2006 (the effective date of Public Act 94-320), 26 but not before. The State shall engage in collective

bargaining with an exclusive representative of child and day 1 2 care home providers participating in the child care assistance program concerning their terms and conditions of employment 3 within the State's control. Nothing in 4 that are this 5 subsection shall be understood to limit the right of families receiving services defined in this Section to select child and 6 7 day care home providers or supervise them within the limits of this Section. The State shall not be considered to be the 8 9 employer of child and day care home providers for any purposes 10 not specifically provided in Public Act 94-320, including, but 11 not limited to, purposes of vicarious liability in tort and 12 purposes of statutory retirement or health insurance benefits. 13 Child and day care home providers shall not be covered by the 14 State Employees Group Insurance Act of 1971.

In according child and day care home providers and their selected representative rights under the Illinois Public Labor Relations Act, the State intends that the State action exemption to application of federal and State antitrust laws be fully available to the extent that their activities are authorized by Public Act 94-320.

(d) The Illinois Department shall establish, by rule, a co-payment scale that provides for cost sharing by families that receive child care services, including parents whose only income is from assistance under this Code. The co-payment shall be based on family income and family size and may be based on other factors as appropriate. Co-payments may be 1 waived for families whose incomes are at or below the federal 2 poverty level.

3 (d-5) The Illinois Department, in consultation with its 4 Child Care and Development Advisory Council, shall develop a 5 plan to revise the child care assistance program's co-payment 6 scale. The plan shall be completed no later than February 1, 7 2008, and shall include:

8 (1) findings as to the percentage of income that the 9 average American family spends on child care and the 10 relative amounts that low-income families and the average 11 American family spend on other necessities of life;

12 (2) recommendations for revising the child care 13 co-payment scale to assure that families receiving child 14 care services from the Department are paying no more than 15 they can reasonably afford;

16 (3) recommendations for revising the child care 17 co-payment scale to provide at-risk children with complete 18 access to Preschool for All and Head Start; and

19 (4) recommendations for changes in child care program20 policies that affect the affordability of child care.

21 (e) (Blank).

(f) The Illinois Department shall, by rule, set rates to be paid for the various types of child care. Child care may be provided through one of the following methods:

(1) arranging the child care through eligibleproviders by use of purchase of service contracts or

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vouchers;

2 (2) arranging with other agencies and community
 3 volunteer groups for non-reimbursed child care;

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(3) (blank); or

5 (4) adopting such other arrangements as the Department
6 determines appropriate.

7 (f-1) Within 30 days after June 4, 2018 (the effective 8 date of Public Act 100-587), the Department of Human Services 9 shall establish rates for child care providers that are no 10 less than the rates in effect on January 1, 2018 increased by 11 4.26%.

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(f-5) (Blank).

13 (g) Families eligible for assistance under this Section14 shall be given the following options:

(1) receiving a child care certificate issued by the
Department or a subcontractor of the Department that may
be used by the parents as payment for child care and
development services only; or

19 (2) if space is available, enrolling the child with a child care provider that has a purchase of service 20 21 contract with the Department or a subcontractor of the 22 Department for the provision of child care and development 23 services. The Department may identify particular priority 24 populations for whom they may request special 25 consideration by a provider with purchase of service 26 contracts, provided that the providers shall be permitted

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1	to maintain a balance of clients in terms of household
2	incomes and families and children with special needs, as
3	defined by rule.
4	(Source: P.A. 101-81, eff. 7-12-19; 101-657, eff. 3-23-21;
5	102-491, eff. 8-20-21; revised 11-8-21.)
6	Section 20. The Early Intervention Services System Act is
7	amended by changing Section 3 as follows:
8	(325 ILCS 20/3) (from Ch. 23, par. 4153)
9	Sec. 3. Definitions. As used in this Act:
10	(a) "Eligible infants and toddlers" means infants and
11	toddlers under 36 months of age with any of the following
12	conditions:
13	(1) Developmental delays.
14	(2) A physical or mental condition which typically
15	results in developmental delay.
16	(3) Being at risk of having substantial developmental
17	delays based on informed clinical opinion.
18	(4) Either (A) having entered the program under any of
19	the circumstances listed in paragraphs (1) through (3) of
20	this subsection but no longer meeting the current
21	eligibility criteria under those paragraphs, and
22	continuing to have any measurable delay, or (B) not having
23	attained a level of development in each area, including
24	(i) cognitive, (ii) physical (including vision and

hearing), (iii) language, speech, and communication, (iv) 1 2 social or emotional, or (v) adaptive, that is at least at the mean of the child's age equivalent peers; and, in 3 addition to either item (A) or item (B), (C) having been 4 5 determined by the multidisciplinary individualized family service plan team to require the continuation of early 6 intervention services in order to support continuing 7 8 developmental progress, pursuant to the child's needs and 9 provided in an appropriate developmental manner. The type, 10 frequency, and intensity of services shall differ from the 11 initial individualized family services plan because of the 12 child's developmental progress, and may consist of only 13 service coordination, evaluation, and assessments.

14 "Eligible infants and toddlers" includes any child under 15 the age of 3 who is the subject of a substantiated case of 16 child abuse or neglect, as defined by the federal Child Abuse 17 Prevention and Treatment Act.

(b) "Developmental delay" means a delay in one or more of
the following areas of childhood development as measured by
appropriate diagnostic instruments and standard procedures:
cognitive; physical, including vision and hearing; language,
speech and communication; social or emotional; or adaptive.
The term means a delay of 30% or more below the mean in
function in one or more of those areas.

(c) "Physical or mental condition which typically resultsin developmental delay" means:

1 (1) a diagnosed medical disorder or exposure to a 2 toxic substance bearing a relatively well known expectancy 3 for developmental outcomes within varying ranges of 4 developmental disabilities; or

5 (2) a history of prenatal, perinatal, neonatal or 6 early developmental events suggestive of biological 7 insults to the developing central nervous system and which 8 either singly or collectively increase the probability of 9 developing a disability or delay based on a medical 10 history.

11 (d) "Informed clinical opinion" means both clinical 12 observations parental participation and to determine eligibility by a consensus of a multidisciplinary team of 2 or 13 more members based on their professional experience and 14 15 expertise.

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(e) "Early intervention services" means services which:

(1) are designed to meet the developmental needs of each child eligible under this Act and the needs of his or her family;

20 (2) are selected in collaboration with the child's 21 family;

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(3) are provided under public supervision;

(4) are provided at no cost except where a schedule of
sliding scale fees or other system of payments by families
has been adopted in accordance with State and federal law;
(5) are designed to meet an infant's or toddler's

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1	developmental needs in any of the following areas:
2	(A) physical development, including vision and
3	hearing,
4	(B) cognitive development,
5	(C) communication development,
6	(D) social or emotional development, or
7	(E) adaptive development;
8	(6) meet the standards of the State, including the
9	requirements of this Act;
10	(7) include one or more of the following:
11	(A) family training,
12	(B) social work services, including counseling,
13	and home visits,
14	(C) special instruction,
15	(D) speech, language pathology and audiology,
16	(E) occupational therapy,
17	(F) physical therapy,
18	(G) psychological services,
19	(H) service coordination services,
20	(I) medical services only for diagnostic or
21	evaluation purposes,
22	(J) early identification, screening, and
23	assessment services,
24	(K) health services specified by the lead agency
25	as necessary to enable the infant or toddler to
26	benefit from the other early intervention services,

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1	(L) vision services,			
2	(M) transportation,			
3	(N) assistive technology devices and services,			
4	(O) nursing services,			
5	(P) nutrition services, and			
6	(Q) sign language and cued language services;			
7	(8) are provided by qualified personnel, including but			
8	not limited to:			
9	(A) child development specialists or special			
10	educators, including teachers of children with hearing			
11	impairments (including deafness) and teachers of			
12	children with vision impairments (including			
13	blindness),			
14	(B) speech and language pathologists and			
15	audiologists,			
16	(C) occupational therapists,			
17	(D) physical therapists,			
18	(E) social workers,			
19	(F) nurses,			
20	(G) dietitian nutritionists,			
21	(H) vision specialists, including ophthalmologists			
22	and optometrists,			
23	(I) psychologists, and			
24	(J) physicians;			
25	(9) are provided in conformity with an Individualized			
26	Family Service Plan;			

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(10) are provided throughout the year; and

(11) are provided in natural environments, to the
maximum extent appropriate, which may include the home and
community settings, unless justification is provided
consistent with federal regulations adopted under Sections
1431 through 1444 of Title 20 of the United States Code.

7 (f) "Individualized Family Service Plan" or "Plan" means a 8 written plan for providing early intervention services to a 9 child eligible under this Act and the child's family, as set 10 forth in Section 11.

(g) "Local interagency agreement" means an agreement entered into by local community and State and regional agencies receiving early intervention funds directly from the State and made in accordance with State interagency agreements providing for the delivery of early intervention services within a local community area.

17 (h) "Council" means the Illinois Interagency Council on18 Early Intervention established under Section 4.

(i) "Lead agency" means the State agency responsible for administering this Act and receiving and disbursing public funds received in accordance with State and federal law and rules.

23 (i-5) "Central billing office" means the central billing
24 office created by the lead agency under Section 13.

25 (j) "Child find" means a service which identifies eligible 26 infants and toddlers. (k) "Regional intake entity" means the lead agency's
 designated entity responsible for implementation of the Early
 Intervention Services System within its designated geographic
 area.

5 (1) "Early intervention provider" means an individual who 6 is qualified, as defined by the lead agency, to provide one or 7 more types of early intervention services, and who has 8 enrolled as a provider in the early intervention program.

9 (m) "Fully credentialed early intervention provider" means 10 individual who has met the standards in the State an 11 applicable to the relevant profession, and has met such other 12 qualifications as the lead agency has determined are suitable 13 for personnel providing early intervention services, including 14 pediatric experience, education, and continuing education. The 15 lead agency shall establish these gualifications by rule filed 16 no later than 180 days after the effective date of this 17 amendatory Act of the 92nd General Assembly.

18 (n) "Telehealth" has the meaning given to that term in19 Section 5 of the Telehealth Act.

20 (Source: P.A. 101-10, eff. 6-5-19; 102-104, eff. 7-22-21.)

21 Section 99. Effective date. This Act takes effect upon 22 becoming law, except that the changes to Section 15 take 23 effect on July 1, 2023.