

1 AN ACT concerning State government.

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

4 Section 5. The Illinois Act on the Aging is amended by
5 changing Sections 3.11, 4.01, and 4.02 and by adding Section
6 5.03 as follows:

7 (20 ILCS 105/3.11)

8 Sec. 3.11. ~~Greatest social need.~~ "Greatest For the
9 ~~purposes of 89 Ill. Adm. Code 210.50, "greatest social need"~~
10 means the need caused by noneconomic factors that restrict an
11 individual's ability to perform normal daily tasks or that
12 threaten his or her capacity to live independently. These
13 factors include, but are not limited to, physical or mental
14 disability, language barriers, and cultural or social
15 isolation caused by, among other things, racial and ethnic
16 status, sexual orientation, gender identity, gender
17 expression, or HIV status.

18 (Source: P.A. 101-325, eff. 8-9-19.)

19 (20 ILCS 105/4.01) (from Ch. 23, par. 6104.01)

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

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

5 (2) To coordinate and evaluate all programs, services, and
6 facilities for the Aging and for minority senior citizens
7 presently furnished by State agencies and make appropriate
8 recommendations regarding such services, programs and
9 facilities to the Governor and/or the General Assembly.

10 (2-a) To request, receive, and share information
11 electronically through the use of data-sharing agreements for
12 the purpose of (i) establishing and verifying the initial and
13 continuing eligibility of older adults to participate in
14 programs administered by the Department; (ii) maximizing
15 federal financial participation in State assistance
16 expenditures; and (iii) investigating allegations of fraud or
17 other abuse of publicly funded benefits. Notwithstanding any
18 other law to the contrary, but only for the limited purposes
19 identified in the preceding sentence, this paragraph (2-a)
20 expressly authorizes the exchanges of income, identification,
21 and other pertinent eligibility information by and among the
22 Department and the Social Security Administration, the
23 Department of Employment Security, the Department of
24 Healthcare and Family Services, the Department of Human
25 Services, the Department of Revenue, the Secretary of State,
26 the U.S. Department of Veterans Affairs, and any other

1 governmental entity. The confidentiality of information
2 otherwise shall be maintained as required by law. In addition,
3 the Department on Aging shall verify employment information at
4 the request of a community care provider for the purpose of
5 ensuring program integrity under the Community Care Program.

6 (3) To function as the sole State agency to develop a
7 comprehensive plan to meet the needs of the State's senior
8 citizens and the State's minority senior citizens.

9 (4) To receive and disburse State and federal funds made
10 available directly to the Department including those funds
11 made available under the Older Americans Act and the Senior
12 Community Service Employment Program for providing services
13 for senior citizens and minority senior citizens or for
14 purposes related thereto, and shall develop and administer any
15 State Plan for the Aging required by federal law.

16 (5) To solicit, accept, hold, and administer in behalf of
17 the State any grants or legacies of money, securities, or
18 property to the State of Illinois for services to senior
19 citizens and minority senior citizens or purposes related
20 thereto.

21 (6) To provide consultation and assistance to communities,
22 area agencies on aging, and groups developing local services
23 for senior citizens and minority senior citizens.

24 (7) To promote community education regarding the problems
25 of senior citizens and minority senior citizens through
26 institutes, publications, radio, television and the local

1 press.

2 (8) To cooperate with agencies of the federal government
3 in studies and conferences designed to examine the needs of
4 senior citizens and minority senior citizens and to prepare
5 programs and facilities to meet those needs.

6 (9) To establish and maintain information and referral
7 sources throughout the State when not provided by other
8 agencies.

9 (10) To provide the staff support that may reasonably be
10 required by the Council.

11 (11) To make and enforce rules and regulations necessary
12 and proper to the performance of its duties.

13 (12) To establish and fund programs or projects or
14 experimental facilities that are specially designed as
15 alternatives to institutional care.

16 (13) To develop a training program to train the counselors
17 presently employed by the Department's aging network to
18 provide Medicare beneficiaries with counseling and advocacy in
19 Medicare, private health insurance, and related health care
20 coverage plans. ~~The Department shall report to the General
21 Assembly on the implementation of the training program on or
22 before December 1, 1986.~~

23 (14) To make a grant to an institution of higher learning
24 to study the feasibility of establishing and implementing an
25 affirmative action employment plan for the recruitment,
26 hiring, training and retraining of persons 60 or more years

1 old for jobs for which their employment would not be precluded
2 by law.

3 (15) To present one award annually in each of the
4 categories of community service, education, the performance
5 and graphic arts, and the labor force to outstanding Illinois
6 senior citizens and minority senior citizens in recognition of
7 their individual contributions to either community service,
8 education, the performance and graphic arts, or the labor
9 force. ~~The awards shall be presented to 4 senior citizens and~~
10 ~~minority senior citizens selected from a list of 44 nominees~~
11 ~~compiled annually by the Department.~~ Nominations shall be
12 solicited from senior citizens' service providers, area
13 agencies on aging, senior citizens' centers, and senior
14 citizens' organizations. If there are no nominations in a
15 category, the Department may award a second person in one of
16 the remaining categories. The Department shall establish a
17 central location within the State to be designated as the
18 Senior Illinoisans Hall of Fame for the public display of all
19 the annual awards, or replicas thereof.

20 (16) To establish multipurpose senior centers through area
21 agencies on aging and to fund those new and existing
22 multipurpose senior centers through area agencies on aging,
23 the establishment and funding to begin in such areas of the
24 State as the Department shall designate by rule and as
25 specifically appropriated funds become available.

26 (17) (Blank).

1 (18) To develop a pamphlet in English and Spanish which
2 may be used by physicians licensed to practice medicine in all
3 of its branches pursuant to the Medical Practice Act of 1987,
4 pharmacists licensed pursuant to the Pharmacy Practice Act,
5 and Illinois residents 65 years of age or older for the purpose
6 of assisting physicians, pharmacists, and patients in
7 monitoring prescriptions provided by various physicians and to
8 aid persons 65 years of age or older in complying with
9 directions for proper use of pharmaceutical prescriptions. The
10 pamphlet may provide space for recording information including
11 but not limited to the following:

12 (a) name and telephone number of the patient;

13 (b) name and telephone number of the prescribing
14 physician;

15 (c) date of prescription;

16 (d) name of drug prescribed;

17 (e) directions for patient compliance; and

18 (f) name and telephone number of dispensing pharmacy.

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

26 (19) To conduct a study of the feasibility of implementing

1 the Senior Companion Program throughout the State.

2 (20) The reimbursement rates paid through the community
3 care program for chore housekeeping services and home care
4 aides shall be the same.

5 (21) From funds appropriated to the Department from the
6 Meals on Wheels Fund, a special fund in the State treasury that
7 is hereby created, and in accordance with State and federal
8 guidelines and the intrastate funding formula, to make grants
9 to area agencies on aging, designated by the Department, for
10 the sole purpose of delivering meals to homebound persons 60
11 years of age and older.

12 (22) To distribute, through its area agencies on aging,
13 information alerting seniors on safety issues regarding
14 emergency weather conditions, including extreme heat and cold,
15 flooding, tornadoes, electrical storms, and other severe storm
16 weather. The information shall include all necessary
17 instructions for safety and all emergency telephone numbers of
18 organizations that will provide additional information and
19 assistance.

20 (23) To develop guidelines for the organization and
21 implementation of Volunteer Services Credit Programs to be
22 administered by Area Agencies on Aging or community based
23 senior service organizations. The Department shall hold public
24 hearings on the proposed guidelines for public comment,
25 suggestion, and determination of public interest. The
26 guidelines shall be based on the findings of other states and

1 of community organizations in Illinois that are currently
2 operating volunteer services credit programs or demonstration
3 volunteer services credit programs. The Department shall offer
4 guidelines for all aspects of the programs including, but not
5 limited to, the following:

6 (a) types of services to be offered by volunteers;

7 (b) types of services to be received upon the
8 redemption of service credits;

9 (c) issues of liability for the volunteers and the
10 administering organizations;

11 (d) methods of tracking service credits earned and
12 service credits redeemed;

13 (e) issues of time limits for redemption of service
14 credits;

15 (f) methods of recruitment of volunteers;

16 (g) utilization of community volunteers, community
17 service groups, and other resources for delivering
18 services to be received by service credit program clients;

19 (h) accountability and assurance that services will be
20 available to individuals who have earned service credits;
21 and

22 (i) volunteer screening and qualifications.

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

25 (24) To function as the sole State agency to receive and
26 disburse State and federal funds for providing adult

1 protective services in a domestic living situation in
2 accordance with the Adult Protective Services Act.

3 (25) To hold conferences, trainings, and other programs
4 for which the Department shall determine by rule a reasonable
5 fee to cover related administrative costs. Rules to implement
6 the fee authority granted by this paragraph (25) must be
7 adopted in accordance with all provisions of the Illinois
8 Administrative Procedure Act and all rules and procedures of
9 the Joint Committee on Administrative Rules; any purported
10 rule not so adopted, for whatever reason, is unauthorized.

11 (Source: P.A. 98-8, eff. 5-3-13; 98-49, eff. 7-1-13; 98-380,
12 eff. 8-16-13; 98-756, eff. 7-16-14; 99-331, eff. 1-1-16.)

13 (20 ILCS 105/4.02)

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

25 (a) (blank);

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

20 The Department shall establish eligibility standards for

21 such services. In determining the amount and nature of

22 services for which a person may qualify, consideration shall

23 not be given to the value of cash, property, or other assets

24 held in the name of the person's spouse pursuant to a written

25 agreement dividing marital property into equal but separate

26 shares or pursuant to a transfer of the person's interest in a

1 home to his spouse, provided that the spouse's share of the
2 marital property is not made available to the person seeking
3 such services.

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

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

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

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

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

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

1 necessary to reflect any change in the officially designated
2 federal poverty standard.

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

1 from the deceased spouse's estate. "Homestead", as used in
2 this paragraph, means the dwelling house and contiguous real
3 estate occupied by a surviving spouse or relative, as defined
4 by the rules and regulations of the Department of Healthcare
5 and Family Services, regardless of the value of the property.

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

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

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

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

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

~~Determination of Need scores, level of need, service cost maximums, and the development and utilization of service plans no later than May 1, 2008; findings and recommendations shall be presented to the Governor and the General Assembly no later than January 1, 2009; recommendations shall include all needed changes to the service cost maximums schedule and additional covered services;~~

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

- (A) bathing;
- (B) grooming;
- (C) toileting;
- (D) nail care;
- (E) transferring;
- (F) respiratory services;
- (G) exercise; or
- (H) positioning;

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

(7) ensuring that the State may access maximum federal

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

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

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

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

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

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

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

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

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

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

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

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

1 staff pre-service ~~pre-~~ and in-service training, and shall
2 provide such records to the Department upon request and upon
3 termination of the employer's contract with the Department. In
4 addition, the employing agency is responsible for the issuance
5 of certifications of in-service training completed to their
6 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 March 31 of the following
17 fiscal year.

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

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

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

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

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

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

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

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

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

25 The Department shall continue to provide ~~other~~ Community
26 Care Program reports as required by statute, which shall

1 include an annual report on Care Coordination Unit performance
2 and adherence to service guidelines and a 6-month supplemental
3 report.

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 Department shall pay an enhanced rate of at least
19 \$1.77 per unit under the Community Care Program to those
20 in-home service provider agencies that offer health insurance
21 coverage as a benefit to their direct service worker employees
22 pursuant to rules adopted by the Department. The Department
23 shall review the enhanced rate as part of its process to rebase
24 in-home service provider reimbursement rates pursuant to
25 federal waiver requirements. Subject to federal approval,
26 beginning on January 1, 2024, rates for adult day services

1 shall be increased to \$16.84 per hour and rates for each way
2 transportation services for adult day services shall be
3 increased to \$12.44 per unit transportation.

4 Subject to federal approval, on and after January 1, 2024,
5 rates for homemaker services shall be increased to \$28.07 to
6 sustain a minimum wage of \$17 per hour for direct service
7 workers. Rates in subsequent State fiscal years shall be no
8 lower than the rates put into effect upon federal approval.
9 Providers of in-home services shall be required to certify to
10 the Department that they remain in compliance with the
11 mandated wage increase for direct service workers. Fringe
12 benefits, including, but not limited to, paid time off and
13 payment for training, health insurance, travel, or
14 transportation, shall not be reduced in relation to the rate
15 increases described in this paragraph.

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

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

3 The Community Care Program Medicaid Enrollment Oversight
4 Subcommittee is created as a subcommittee of the Older Adult
5 Services Advisory Committee established in Section 35 of the
6 Older Adult Services Act to make recommendations on how best
7 to increase the number of medical assistance recipients who
8 are enrolled in the Community Care Program. The Subcommittee
9 shall consist of all of the following persons who must be
10 appointed within 30 days after June 4, 2018 (the effective
11 date of Public Act 100-587) ~~this amendatory Act of the 100th~~
12 ~~General Assembly~~:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

24 The Subcommittee shall provide oversight to the Community
25 Care Program Medicaid Initiative and shall meet quarterly. At
26 each Subcommittee meeting the Department on Aging shall

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

25 The Department on Aging, with the involvement of the
26 Subcommittee, shall collaborate with the Department of Human

1 Services and the Department of Healthcare and Family Services
2 on how best to achieve the responsibilities of the Community
3 Care Program Medicaid Initiative.

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

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

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

25 The Community Care Program Medicaid Initiative shall cease
26 operation 5 years after June 4, 2018 (the effective date of

1 Public Act 100-587) ~~this amendatory Act of the 100th General~~
2 ~~Assembly~~, after which the Subcommittee shall dissolve.

3 Effective July 1, 2023, subject to federal approval, the
4 Department on Aging shall reimburse Care Coordination Units at
5 the following rates for case management services: \$252.40 for
6 each initial assessment; \$366.40 for each initial assessment
7 with translation; \$229.68 for each redetermination assessment;
8 \$313.68 for each redetermination assessment with translation;
9 \$200.00 for each completed application for medical assistance
10 benefits; \$132.26 for each face-to-face, choices-for-care
11 screening; \$168.26 for each face-to-face, choices-for-care
12 screening with translation; \$124.56 for each 6-month,
13 face-to-face visit; \$132.00 for each MCO participant
14 eligibility determination; and \$157.00 for each MCO
15 participant eligibility determination with translation.

16 (Source: P.A. 102-1071, eff. 6-10-22; 103-8, eff. 6-7-23;
17 103-102, Article 45, Section 45-5, eff. 1-1-24; 103-102,
18 Article 85, Section 85-5, eff. 1-1-24; 103-102, Article 90,
19 Section 90-5, eff. 1-1-24; revised 12-12-23.)

20 (20 ILCS 105/5.03 new)

21 Sec. 5.03. Judicial review. All final administrative
22 decisions of the Department are subject to judicial review in
23 accordance with the provisions of the Administrative Review
24 Law, and all rules adopted under the Administrative Review
25 Law. The term "administrative decision" is defined as in

1 Section 3-101 of the Code of Civil Procedure.

2 Proceedings for judicial review shall be commenced in the
3 circuit court of the county in which the party applying for
4 review resides; however, if the party is not a resident of this
5 State, the venue shall be Sangamon County.