

1 AN ACT concerning aging.

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

4 Section 5. The Older Adult Services Act is amended by
5 changing Section 25 as follows:

6 (320 ILCS 42/25)

7 Sec. 25. Older adult services restructuring. No later than
8 January 1, 2005, the Department shall commence the process of
9 restructuring the older adult services delivery system.
10 Priority shall be given to both the expansion of services and
11 the development of new services in priority service areas.
12 Subject to the availability of funding, the restructuring shall
13 include, but not be limited to, the following:

14 (1) Planning. The Department shall develop a plan to
15 restructure the State's service delivery system for older
16 adults. The plan shall include a schedule for the
17 implementation of the initiatives outlined in this Act and all
18 other initiatives identified by the participating agencies to
19 fulfill the purposes of this Act. Financing for older adult
20 services shall be based on the principle that "money follows
21 the individual". The plan shall also identify potential
22 impediments to delivery system restructuring and include any
23 known regulatory or statutory barriers.

24 (2) Comprehensive case management. The Department shall
25 implement a statewide system of holistic comprehensive case
26 management. The system shall include the identification and
27 implementation of a universal, comprehensive assessment tool
28 to be used statewide to determine the level of functional,
29 cognitive, socialization, and financial needs of older adults.
30 This tool shall be supported by an electronic intake,
31 assessment, and care planning system linked to a central
32 location. "Comprehensive case management" includes services

1 and coordination such as (i) comprehensive assessment of the
2 older adult (including the physical, functional, cognitive,
3 psycho-social, and social needs of the individual); (ii)
4 development and implementation of a service plan with the older
5 adult to mobilize the formal and family resources and services
6 identified in the assessment to meet the needs of the older
7 adult, including coordination of the resources and services
8 with any other plans that exist for various formal services,
9 such as hospital discharge plans, and with the information and
10 assistance services; (iii) coordination and monitoring of
11 formal and family service delivery, including coordination and
12 monitoring to ensure that services specified in the plan are
13 being provided; (iv) periodic reassessment and revision of the
14 status of the older adult with the older adult or, if
15 necessary, the older adult's designated representative; and
16 (v) in accordance with the wishes of the older adult, advocacy
17 on behalf of the older adult for needed services or resources.

18 (3) Coordinated point of entry. The Department shall
19 implement and publicize a statewide coordinated point of entry
20 using a uniform name, identity, logo, and toll-free number.

21 (4) Public web site. The Department shall develop a public
22 web site that provides links to available services, resources,
23 and reference materials concerning caregiving, diseases, and
24 best practices for use by professionals, older adults, and
25 family caregivers.

26 (5) Expansion of older adult services. The Department shall
27 expand older adult services that promote independence and
28 permit older adults to remain in their own homes and
29 communities.

30 (6) Consumer-directed home and community-based services.
31 The Department shall expand the range of service options
32 available to permit older adults to exercise maximum choice and
33 control over their care.

34 (7) Comprehensive delivery system. The Department shall
35 expand opportunities for older adults to receive services in
36 systems that integrate acute and chronic care.

1 (8) Enhanced transition and follow-up services. The
2 Department shall implement a program of transition from one
3 residential setting to another and follow-up services,
4 regardless of residential setting, pursuant to rules with
5 respect to (i) resident eligibility, (ii) assessment of the
6 resident's health, cognitive, social, and financial needs,
7 (iii) development of transition plans, and (iv) the level of
8 services that must be available before transitioning a resident
9 from one setting to another.

10 (9) Family caregiver support. The Department shall develop
11 strategies for public and private financing of services that
12 supplement and support family caregivers.

13 (10) Quality standards and quality improvement. The
14 Department shall establish a core set of uniform quality
15 standards for all providers that focus on outcomes and take
16 into consideration consumer choice and satisfaction, and the
17 Department shall require each provider to implement a
18 continuous quality improvement process to address consumer
19 issues. The continuous quality improvement process must
20 benchmark performance, be person-centered and data-driven, and
21 focus on consumer satisfaction.

22 (11) Workforce. The Department shall develop strategies to
23 attract and retain a qualified and stable worker pool, provide
24 living wages and benefits, and create a work environment that
25 is conducive to long-term employment and career development.
26 Resources such as grants, education, and promotion of career
27 opportunities may be used.

28 (12) Coordination of services. The Department shall
29 identify methods to better coordinate service networks to
30 maximize resources and minimize duplication of services and
31 ease of application.

32 (13) Barriers to services. The Department shall identify
33 barriers to the provision, availability, and accessibility of
34 services and shall implement a plan to address those barriers.
35 The plan shall: (i) identify barriers, including but not
36 limited to, statutory and regulatory complexity, reimbursement

1 issues, payment issues, and labor force issues; (ii) recommend
2 changes to State or federal laws or administrative rules or
3 regulations; (iii) recommend application for federal waivers
4 to improve efficiency and reduce cost and paperwork; (iv)
5 develop innovative service delivery models; and (v) recommend
6 application for federal or private service grants.

7 (14) Reimbursement and funding. The Department shall
8 investigate and evaluate costs and payments by defining costs
9 to implement a uniform, audited provider cost reporting system
10 to be considered by all Departments in establishing payments.
11 To the extent possible, multiple cost reporting mandates shall
12 not be imposed.

13 (15) Medicaid nursing home cost containment and Medicare
14 utilization. The Department of Public Aid, in collaboration
15 with the Department on Aging and the Department of Public
16 Health and in consultation with the Advisory Committee, shall
17 propose a plan to contain Medicaid nursing home costs and
18 maximize Medicare utilization. The plan must not impair the
19 ability of an older adult to choose among available services.
20 The plan shall include, but not be limited to, (i) techniques
21 to maximize the use of the most cost-effective services without
22 sacrificing quality and (ii) methods to identify and serve
23 older adults in need of minimal services to remain independent,
24 but who are likely to develop a need for more extensive
25 services in the absence of those minimal services.

26 (16) Bed reduction. The Department of Public Health shall
27 implement a nursing home conversion program to reduce the
28 number of Medicaid-certified nursing home beds in areas with
29 excess beds. The Department of Public Aid shall investigate
30 changes to the Medicaid nursing facility reimbursement system
31 in order to reduce beds. Such changes may include, but are not
32 limited to, incentive payments that will enable facilities to
33 adjust to the restructuring and expansion of services required
34 by the Older Adult Services Act, including adjustments for the
35 voluntary closure or layaway of nursing home beds certified
36 under Title XIX of the federal Social Security Act. Any savings

1 shall be reallocated to fund home-based or community-based
2 older adult services pursuant to Section 20.

3 (17) Financing. The Department shall investigate and
4 evaluate financing options for older adult services and shall
5 make recommendations in the report required by Section 15
6 concerning the feasibility of these financing arrangements.
7 These arrangements shall include, but are not limited to:

8 (A) private long-term care insurance coverage for
9 older adult services;

10 (B) enhancement of federal long-term care financing
11 initiatives;

12 (C) employer benefit programs such as medical savings
13 accounts for long-term care;

14 (D) individual and family cost-sharing options;

15 (E) strategies to reduce reliance on government
16 programs;

17 (F) fraudulent asset divestiture and financial
18 planning prevention; and

19 (G) methods to supplement and support family and
20 community caregiving.

21 (18) Older Adult Services Demonstration Grants. The
22 Department shall implement a program of demonstration grants
23 that will assist in the restructuring of the older adult
24 services delivery system, and shall provide funding for
25 innovative service delivery models and system change and
26 integration initiatives pursuant to subsection (g) of Section
27 20.

28 (19) Bed need methodology update. For the purposes of
29 determining areas with excess beds, the Departments shall
30 provide information and assistance to the Health Facilities
31 Planning Board to update the Bed Need Methodology for Long-Term
32 Care to update the assumptions used to establish the
33 methodology to make them consistent with modern older adult
34 services.

35 (20) Affordable housing. The Departments shall utilize the
36 recommendations of Illinois' Annual Comprehensive Housing

1 Plan, as developed by the Affordable Housing Task Force through
2 the Governor's Executive Order 2003-18, in their efforts to
3 address the affordable housing needs of older adults.

4 (Source: P.A. 93-1031, eff. 8-27-04.)

5 Section 99. Effective date. This Act takes effect upon
6 becoming law.