



94TH GENERAL ASSEMBLY

State of Illinois

2005 and 2006

SB2905

Introduced 1/20/2006, by Sen. William R. Haine

SYNOPSIS AS INTRODUCED:

See Index

Creates the Executive Order 3 (2005) Implementation Act and amends various Acts. Implements and supersedes Executive Order 3 (2005). Changes the name of the Department of Public Aid to the Department of Healthcare and Family Services. Transfers certain powers, duties, rights, and responsibilities related to State healthcare purchasing (including (i) rate development and negotiation with hospitals, physicians, and managed care providers, (ii) health care procurement development, (iii) contract implementation and fiscal monitoring, (iv) contract amendments, (v) payment processing, and (vi) purchasing aspects of health care plans administered by the State on behalf of State employees, non-State employees (such as retired teachers), and residents of State-operated facilities) from the departments of Central Management Services, Corrections, Human Services, and Veterans' Affairs to the Department of Healthcare and Family Services. Provides that certain functions concerning the administration and management of employee benefits are excluded from the transfer. Provides for the transfer of staff, records, and unexpended moneys to the Department of Healthcare and Family Services. Makes conforming changes in other Acts. Effective immediately.

LRB094 12603 DRJ 47343 b

FISCAL NOTE ACT
MAY APPLY

1 AN ACT concerning the implementation of Executive Order 3
2 (2005).

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

5 Section 1. Short title. This Act may be cited as the
6 Executive Order 3 (2005) Implementation Act.

7 Section 5. Effect. This Act, including all of the
8 amendatory provisions of this Act, implements and supersedes
9 Executive Order 3 (2005).

10 Section 10. Department of Public Aid; name changed.

11 (a) On the effective date of this Act, the name of the
12 Department of Public Aid is changed to the Department of
13 Healthcare and Family Services. References in any law,
14 appropriation, rule, form, or other document (i) to the
15 Department of Public Aid or to IDPA are deemed, in appropriate
16 contexts, to be references to the Department of Healthcare and
17 Family Services for all purposes and (ii) to the Director or
18 Assistant Director of Public Aid are deemed, in appropriate
19 contexts, to be references to the Director or Assistant
20 Director, respectively, of Healthcare and Family Services for
21 all purposes.

22 (b) Except as otherwise provided in this Act, the powers,
23 duties, rights, and responsibilities formerly vested in or
24 associated with the Department of Public Aid are not affected
25 by the renaming of the agency to the Department of Healthcare
26 and Family Services.

27 Section 15. State healthcare purchasing functions
28 transferred.

29 (a) Except as provided in Section 20, on the effective date
30 of this Act or as soon thereafter as practical, all of the

1 powers, duties, rights, and responsibilities of the Department
2 of Central Management Services, the Department of Corrections,
3 the Department of Human Services, and the Department of
4 Veterans' Affairs related to State healthcare purchasing are
5 transferred to the Department of Healthcare and Family
6 Services.

7 (b) The functions associated with State healthcare
8 purchasing that are transferred to the Department of Healthcare
9 and Family Services under this Section include, without
10 limitation, the following:

11 (1) Rate development and negotiation with hospitals,
12 physicians, and managed care providers.

13 (2) Health care procurement development.

14 (3) Contract implementation and fiscal monitoring.

15 (4) Contract amendments.

16 (5) Payment processing.

17 (6) Purchasing aspects of health care plans
18 administered by the State on behalf of the following:

19 (A) State employees. These healthcare purchasing
20 functions include the following health care plans:
21 quality health care plan; managed health care plan;
22 vision plan; pharmacy benefits plan; dental plan;
23 behavioral health plan; employee assistance plan;
24 utilization management plan; and SHIPs and various
25 subrogation agreements. These healthcare purchasing
26 functions also include the purchasing and
27 administration of flu shots, hepatitis B vaccinations,
28 and tuberculosis tests.

29 (B) Persons other than State employees. These
30 healthcare purchasing functions include the following
31 health care plans: the retired teachers' health
32 insurance plan under the State Employees Group
33 Insurance Act of 1971; the local government health
34 insurance plan under the State Employees Group
35 Insurance Act of 1971; the community colleges health
36 insurance plan under the State Employees Group

1 Insurance Act of 1971; and the active teacher
2 prescription program.

3 (C) Residents of State-operated facilities,
4 including (i) correctional and youth facilities
5 operated by the Department of Corrections, (ii) mental
6 health centers and developmental centers operated by
7 the Department of Human Services, and (iii) veterans
8 homes operated by the Department of Veterans' Affairs.

9 (c) The powers, duties, rights, and responsibilities
10 vested in or associated with State healthcare purchasing are
11 not affected by this Act, except that all management and staff
12 support or other resources necessary to the operations of State
13 healthcare purchasing shall be provided by the Department of
14 Healthcare and Family Services as provided in this Act.

15 Section 20. Functions excluded from transfer. The
16 functions associated with State healthcare purchasing that are
17 transferred to the Department of Healthcare and Family Services
18 under Section 15 do not include the following:

19 (1) The administration and management of employee
20 benefits, such as premium collections, employee services,
21 eligibility review and benefits determinations, member
22 claims analysis, reviews and appeals, and COBRA
23 (Consolidated Omnibus Budget Reconciliation Act of 1985)
24 insurance continuation benefits.

25 (2) The provision of mental health services and
26 developmental services by the Department of Human Services
27 at its mental health centers and developmental centers,
28 respectively.

29 Section 25. Representation on boards or other entities.
30 When any provision of an Executive Order or Act provides for
31 the membership of the Director of Central Management Services,
32 the Director of Corrections, the Secretary of Human Services,
33 or the Director of Veterans' Affairs on any council,
34 commission, board, or other entity in relation to any of the

1 State healthcare purchasing functions transferred to the
2 Department of Healthcare and Family Services under this Act,
3 the Director of Healthcare and Family Services or his or her
4 designee shall serve in that place. If more than one such
5 person is required by law to serve on any council, commission,
6 board, or other entity, then an equivalent number of
7 representatives of the Department of Healthcare and Family
8 Services shall so serve.

9 Section 30. Personnel transferred. Unless otherwise
10 provided pursuant to Section 75, employees of the Department of
11 Central Management Services, the Department of Corrections,
12 the Department of Human Services, or the Department of
13 Veterans' Affairs who are serving under the Personnel Code and
14 who are engaged in performing any of the State healthcare
15 purchasing functions transferred to the Department of
16 Healthcare and Family Services under this Act shall be
17 transferred to the Department of Healthcare and Family
18 Services. The status and rights of those employees, and the
19 rights of the State of Illinois and its agencies, under the
20 Personnel Code and applicable collective bargaining agreements
21 or under any pension, retirement, or annuity plan are not
22 affected by that transfer of employees or by any other
23 provision of this Act.

24 Section 35. Books and records transferred. All books,
25 records, papers, documents, property (real and personal),
26 contracts, and pending business pertaining to the powers,
27 duties, rights, and responsibilities related to any of the
28 State healthcare purchasing functions transferred under this
29 Act to the Department of Healthcare and Family Services,
30 including but not limited to material in electronic or magnetic
31 format and necessary computer hardware and software, shall be
32 delivered to the Department of Healthcare and Family Services.
33 The delivery of any such information may not violate any
34 applicable confidentiality constraints.

1 Section 40. Unexpended moneys transferred. All unexpended
2 appropriations and balances and other moneys available for use
3 in connection with any of the State healthcare purchasing
4 functions transferred to the Department of Healthcare and
5 Family Services under this Act shall be transferred for use by
6 that Department for the exercise of those functions pursuant to
7 the direction of the Governor. Unexpended balances so
8 transferred shall be expended only for the purpose for which
9 the appropriations were originally made.

10 Section 45. Exercise of transferred powers; savings
11 provisions. The powers, duties, rights, and responsibilities
12 related to the State healthcare purchasing functions
13 transferred to the Department of Healthcare and Family Services
14 under this Act are vested in and shall be exercised by that
15 Department. Each act done in the exercise of those powers,
16 duties, rights, and responsibilities shall have the same legal
17 effect as if done by the Department of Central Management
18 Services, the Department of Corrections, the Department of
19 Human Services, or the Department of Veterans' Affairs, or the
20 divisions, officers, or employees of those agencies.

21 Section 50. Rights, obligations, and duties unaffected by
22 transfer. The transfer of powers, duties, rights, and
23 responsibilities to the Department of Healthcare and Family
24 Services under this Act does not affect any person's rights,
25 obligations, or duties, including any civil or criminal
26 penalties applicable thereto, arising out of those transferred
27 powers, duties, rights, and responsibilities.

28 Section 55. Agency officers; penalties. Every officer of
29 the Department of Healthcare and Family Services is, for any
30 offense, subject to the same penalty or penalties, civil or
31 criminal, as are prescribed by existing law for the same
32 offense by any officer whose powers or duties are transferred

1 under this Act.

2 Section 60. Reports, notices, or papers. Whenever reports
3 or notices are required to be made or given or papers or
4 documents furnished or served by any person to or upon the
5 Department of Central Management Services, the Department of
6 Corrections, the Department of Human Services, or the
7 Department of Veterans' Affairs in connection with any State
8 healthcare purchasing function transferred under this Act, the
9 same shall be made, given, furnished, or served in the same
10 manner to or upon the Department of Healthcare and Family
11 Services.

12 Section 65. Acts and actions unaffected by transfer. This
13 Act does not affect any act done, ratified, or canceled, or any
14 right occurring or established, before the effective date of
15 Executive Order 3 (2005) in connection with any State
16 healthcare purchasing function transferred under this Act.
17 This Act does not affect any action or proceeding had or
18 commenced before the effective date of Executive Order 3 (2005)
19 in an administrative, civil, or criminal cause regarding a
20 State healthcare purchasing function transferred from the
21 Department of Central Management Services, the Department of
22 Corrections, the Department of Human Services, or the
23 Department of Veterans' Affairs under this Act, but any such
24 action or proceeding may be defended, prosecuted, or continued
25 by the Department of Healthcare and Family Services.

26 Section 70. Rules.

27 (a) Any rule of the Department of Central Management
28 Services, the Department of Corrections, the Department of
29 Human Services, or the Department of Veterans' Affairs that (i)
30 relates to any of the State healthcare purchasing functions
31 transferred under this Act, (ii) was in full force on the
32 effective date of Executive Order 3 (2005), and (iii) was duly
33 adopted by one of those agencies shall become the rule of the

1 Department of Healthcare and Family Services. This Act does not
2 affect the legality of any such rules contained in the Illinois
3 Administrative Code.

4 (b) Any proposed rule filed with the Secretary of State by
5 the Department of Central Management Services, the Department
6 of Corrections, the Department of Human Services, or the
7 Department of Veterans' Affairs that was pending in the
8 rulemaking process on the effective date of Executive Order 3
9 (2005) and that pertains to any of the State healthcare
10 purchasing functions transferred under this Act shall be deemed
11 to have been filed by the Department of Healthcare and Family
12 Services.

13 (c) As soon as practical after the effective date of this
14 Act, the Department of Healthcare and Family Services shall
15 revise and clarify the rules transferred to it under this
16 Section to reflect the reorganization of rights, powers, and
17 duties effected by this Act, using the procedures for
18 recodification of rules available under the Illinois
19 Administrative Procedure Act, except that existing title,
20 part, and section numbering for the affected rules may be
21 retained.

22 (d) The Department of Healthcare and Family Services may
23 propose and adopt, under the Illinois Administrative Procedure
24 Act, other rules of the Department of Central Management
25 Services, the Department of Corrections, the Department of
26 Human Services, or the Department of Veterans' Affairs that
27 will now be administered by the Department of Healthcare and
28 Family Services.

29 Section 75. Interagency agreements. To the extent
30 necessary or prudent to fully implement the intent of this Act,
31 the Department of Central Management Services, the Department
32 of Corrections, the Department of Human Services, the
33 Department of Veterans' Affairs, and the Department of
34 Healthcare and Family Services may enter into one or more
35 interagency agreements to ensure the full and appropriate

1 transfer of all State healthcare purchasing functions
2 transferred to the Department of Healthcare and Family Services
3 under this Act.

4 Section 9005. The Illinois Administrative Procedure Act is
5 amended by changing Sections 5-45 and 10-65 as follows:

6 (5 ILCS 100/5-45) (from Ch. 127, par. 1005-45)

7 Sec. 5-45. Emergency rulemaking.

8 (a) "Emergency" means the existence of any situation that
9 any agency finds reasonably constitutes a threat to the public
10 interest, safety, or welfare.

11 (b) If any agency finds that an emergency exists that
12 requires adoption of a rule upon fewer days than is required by
13 Section 5-40 and states in writing its reasons for that
14 finding, the agency may adopt an emergency rule without prior
15 notice or hearing upon filing a notice of emergency rulemaking
16 with the Secretary of State under Section 5-70. The notice
17 shall include the text of the emergency rule and shall be
18 published in the Illinois Register. Consent orders or other
19 court orders adopting settlements negotiated by an agency may
20 be adopted under this Section. Subject to applicable
21 constitutional or statutory provisions, an emergency rule
22 becomes effective immediately upon filing under Section 5-65 or
23 at a stated date less than 10 days thereafter. The agency's
24 finding and a statement of the specific reasons for the finding
25 shall be filed with the rule. The agency shall take reasonable
26 and appropriate measures to make emergency rules known to the
27 persons who may be affected by them.

28 (c) An emergency rule may be effective for a period of not
29 longer than 150 days, but the agency's authority to adopt an
30 identical rule under Section 5-40 is not precluded. No
31 emergency rule may be adopted more than once in any 24 month
32 period, except that this limitation on the number of emergency
33 rules that may be adopted in a 24 month period does not apply
34 to (i) emergency rules that make additions to and deletions

1 from the Drug Manual under Section 5-5.16 of the Illinois
2 Public Aid Code or the generic drug formulary under Section
3 3.14 of the Illinois Food, Drug and Cosmetic Act, (ii)
4 emergency rules adopted by the Pollution Control Board before
5 July 1, 1997 to implement portions of the Livestock Management
6 Facilities Act, or (iii) emergency rules adopted by the
7 Illinois Department of Public Health under subsections (a)
8 through (i) of Section 2 of the Department of Public Health Act
9 when necessary to protect the public's health. Two or more
10 emergency rules having substantially the same purpose and
11 effect shall be deemed to be a single rule for purposes of this
12 Section.

13 (d) In order to provide for the expeditious and timely
14 implementation of the State's fiscal year 1999 budget,
15 emergency rules to implement any provision of Public Act 90-587
16 or 90-588 or any other budget initiative for fiscal year 1999
17 may be adopted in accordance with this Section by the agency
18 charged with administering that provision or initiative,
19 except that the 24-month limitation on the adoption of
20 emergency rules and the provisions of Sections 5-115 and 5-125
21 do not apply to rules adopted under this subsection (d). The
22 adoption of emergency rules authorized by this subsection (d)
23 shall be deemed to be necessary for the public interest,
24 safety, and welfare.

25 (e) In order to provide for the expeditious and timely
26 implementation of the State's fiscal year 2000 budget,
27 emergency rules to implement any provision of this amendatory
28 Act of the 91st General Assembly or any other budget initiative
29 for fiscal year 2000 may be adopted in accordance with this
30 Section by the agency charged with administering that provision
31 or initiative, except that the 24-month limitation on the
32 adoption of emergency rules and the provisions of Sections
33 5-115 and 5-125 do not apply to rules adopted under this
34 subsection (e). The adoption of emergency rules authorized by
35 this subsection (e) shall be deemed to be necessary for the
36 public interest, safety, and welfare.

1 (f) In order to provide for the expeditious and timely
2 implementation of the State's fiscal year 2001 budget,
3 emergency rules to implement any provision of this amendatory
4 Act of the 91st General Assembly or any other budget initiative
5 for fiscal year 2001 may be adopted in accordance with this
6 Section by the agency charged with administering that provision
7 or initiative, except that the 24-month limitation on the
8 adoption of emergency rules and the provisions of Sections
9 5-115 and 5-125 do not apply to rules adopted under this
10 subsection (f). The adoption of emergency rules authorized by
11 this subsection (f) shall be deemed to be necessary for the
12 public interest, safety, and welfare.

13 (g) In order to provide for the expeditious and timely
14 implementation of the State's fiscal year 2002 budget,
15 emergency rules to implement any provision of this amendatory
16 Act of the 92nd General Assembly or any other budget initiative
17 for fiscal year 2002 may be adopted in accordance with this
18 Section by the agency charged with administering that provision
19 or initiative, except that the 24-month limitation on the
20 adoption of emergency rules and the provisions of Sections
21 5-115 and 5-125 do not apply to rules adopted under this
22 subsection (g). The adoption of emergency rules authorized by
23 this subsection (g) shall be deemed to be necessary for the
24 public interest, safety, and welfare.

25 (h) In order to provide for the expeditious and timely
26 implementation of the State's fiscal year 2003 budget,
27 emergency rules to implement any provision of this amendatory
28 Act of the 92nd General Assembly or any other budget initiative
29 for fiscal year 2003 may be adopted in accordance with this
30 Section by the agency charged with administering that provision
31 or initiative, except that the 24-month limitation on the
32 adoption of emergency rules and the provisions of Sections
33 5-115 and 5-125 do not apply to rules adopted under this
34 subsection (h). The adoption of emergency rules authorized by
35 this subsection (h) shall be deemed to be necessary for the
36 public interest, safety, and welfare.

1 (i) In order to provide for the expeditious and timely
2 implementation of the State's fiscal year 2004 budget,
3 emergency rules to implement any provision of this amendatory
4 Act of the 93rd General Assembly or any other budget initiative
5 for fiscal year 2004 may be adopted in accordance with this
6 Section by the agency charged with administering that provision
7 or initiative, except that the 24-month limitation on the
8 adoption of emergency rules and the provisions of Sections
9 5-115 and 5-125 do not apply to rules adopted under this
10 subsection (i). The adoption of emergency rules authorized by
11 this subsection (i) shall be deemed to be necessary for the
12 public interest, safety, and welfare.

13 (j) In order to provide for the expeditious and timely
14 implementation of the provisions of the State's fiscal year
15 2005 budget as provided under the Fiscal Year 2005 Budget
16 Implementation (Human Services) Act, emergency rules to
17 implement any provision of the Fiscal Year 2005 Budget
18 Implementation (Human Services) Act may be adopted in
19 accordance with this Section by the agency charged with
20 administering that provision, except that the 24-month
21 limitation on the adoption of emergency rules and the
22 provisions of Sections 5-115 and 5-125 do not apply to rules
23 adopted under this subsection (j). The Department of Public Aid
24 may also adopt rules under this subsection (j) necessary to
25 administer the Illinois Public Aid Code and the Children's
26 Health Insurance Program Act. The adoption of emergency rules
27 authorized by this subsection (j) shall be deemed to be
28 necessary for the public interest, safety, and welfare.

29 (k) In order to provide for the expeditious and timely
30 implementation of the provisions of the State's fiscal year
31 2006 budget, emergency rules to implement any provision of this
32 amendatory Act of the 94th General Assembly or any other budget
33 initiative for fiscal year 2006 may be adopted in accordance
34 with this Section by the agency charged with administering that
35 provision or initiative, except that the 24-month limitation on
36 the adoption of emergency rules and the provisions of Sections

1 5-115 and 5-125 do not apply to rules adopted under this
2 subsection (k). The Department of Healthcare and Family
3 Services ~~Public Aid~~ may also adopt rules under this subsection
4 (k) necessary to administer the Illinois Public Aid Code, the
5 Senior Citizens and Disabled Persons Property Tax Relief and
6 Pharmaceutical Assistance Act, the Senior Citizens and
7 Disabled Persons Prescription Drug Discount Program Act, and
8 the Children's Health Insurance Program Act. The adoption of
9 emergency rules authorized by this subsection (k) shall be
10 deemed to be necessary for the public interest, safety, and
11 welfare.

12 (Source: P.A. 93-20, eff. 6-20-03; 93-829, eff. 7-28-04;
13 93-841, eff. 7-30-04; 94-48, eff. 7-1-05.)

14 (5 ILCS 100/10-65) (from Ch. 127, par. 1010-65)

15 Sec. 10-65. Licenses.

16 (a) When any licensing is required by law to be preceded by
17 notice and an opportunity for a hearing, the provisions of this
18 Act concerning contested cases shall apply.

19 (b) When a licensee has made timely and sufficient
20 application for the renewal of a license or a new license with
21 reference to any activity of a continuing nature, the existing
22 license shall continue in full force and effect until the final
23 agency decision on the application has been made unless a later
24 date is fixed by order of a reviewing court.

25 (c) Except as provided in Section 1-27 of the Department of
26 Natural Resources Act, an application for the renewal of a
27 license or a new license shall include the applicant's social
28 security number. Each agency shall require the licensee to
29 certify on the application form, under penalty of perjury, that
30 he or she is not more than 30 days delinquent in complying with
31 a child support order. Every application shall state that
32 failure to so certify shall result in disciplinary action, and
33 that making a false statement may subject the licensee to
34 contempt of court. The agency shall notify each applicant or
35 licensee who acknowledges a delinquency or who, contrary to his

1 or her certification, is found to be delinquent or who after
2 receiving notice, fails to comply with a subpoena or warrant
3 relating to a paternity or a child support proceeding, that the
4 agency intends to take disciplinary action. Accordingly, the
5 agency shall provide written notice of the facts or conduct
6 upon which the agency will rely to support its proposed action
7 and the applicant or licensee shall be given an opportunity for
8 a hearing in accordance with the provisions of the Act
9 concerning contested cases. Any delinquency in complying with a
10 child support order can be remedied by arranging for payment of
11 past due and current support. Any failure to comply with a
12 subpoena or warrant relating to a paternity or child support
13 proceeding can be remedied by complying with the subpoena or
14 warrant. Upon a final finding of delinquency or failure to
15 comply with a subpoena or warrant, the agency shall suspend,
16 revoke, or refuse to issue or renew the license. In cases in
17 which the Department of Healthcare and Family Services
18 (formerly Department of Public Aid) has previously determined
19 that an applicant or a licensee is more than 30 days delinquent
20 in the payment of child support and has subsequently certified
21 the delinquency to the licensing agency, and in cases in which
22 a court has previously determined that an applicant or licensee
23 has been in violation of the Non-Support Punishment Act for
24 more than 60 days, the licensing agency shall refuse to issue
25 or renew or shall revoke or suspend that person's license based
26 solely upon the certification of delinquency made by the
27 Department of Healthcare and Family Services (formerly
28 Department of Public Aid) or the certification of violation
29 made by the court. Further process, hearings, or
30 redetermination of the delinquency or violation by the
31 licensing agency shall not be required. The licensing agency
32 may issue or renew a license if the licensee has arranged for
33 payment of past and current child support obligations in a
34 manner satisfactory to the Department of Healthcare and Family
35 Services (formerly Department of Public Aid) or the court. The
36 licensing agency may impose conditions, restrictions, or

1 disciplinary action upon that license.

2 (d) Except as provided in subsection (c), no agency shall
3 revoke, suspend, annul, withdraw, amend materially, or refuse
4 to renew any valid license without first giving written notice
5 to the licensee of the facts or conduct upon which the agency
6 will rely to support its proposed action and an opportunity for
7 a hearing in accordance with the provisions of this Act
8 concerning contested cases. At the hearing, the licensee shall
9 have the right to show compliance with all lawful requirements
10 for the retention, continuation, or renewal of the license. If,
11 however, the agency finds that the public interest, safety, or
12 welfare imperatively requires emergency action, and if the
13 agency incorporates a finding to that effect in its order,
14 summary suspension of a license may be ordered pending
15 proceedings for revocation or other action. Those proceedings
16 shall be promptly instituted and determined.

17 (e) Any application for renewal of a license that contains
18 required and relevant information, data, material, or
19 circumstances that were not contained in an application for the
20 existing license shall be subject to the provisions of
21 subsection (a).

22 (Source: P.A. 94-40, eff. 1-1-06.)

23 Section 9010. The Freedom of Information Act is amended by
24 changing Section 7.1 as follows:

25 (5 ILCS 140/7.1) (from Ch. 116, par. 207.1)

26 Sec. 7.1. Nothing in this Act shall be construed to
27 prohibit publication and dissemination by the Department of
28 Healthcare and Family Services ~~Public Aid~~ or the Department of
29 Human Services of the names and addresses of entities which
30 have had receipt of benefits or payments under the Illinois
31 Public Aid Code suspended or terminated or future receipt
32 barred, pursuant to Section 11-26 of that Code.

33 (Source: P.A. 89-507, eff. 7-1-97.)

1 Section 9015. The Intergovernmental Cooperation Act is
2 amended by changing Section 3 as follows:

3 (5 ILCS 220/3) (from Ch. 127, par. 743)

4 Sec. 3. Intergovernmental cooperation. Any power or
5 powers, privileges, functions, or authority exercised or which
6 may be exercised by a public agency of this State may be
7 exercised, combined, transferred, and enjoyed jointly with any
8 other public agency of this State and jointly with any public
9 agency of any other state or of the United States to the extent
10 that laws of such other state or of the United States do not
11 prohibit joint exercise or enjoyment and except where
12 specifically and expressly prohibited by law. This includes,
13 but is not limited to, (i) arrangements between the Illinois
14 Student Assistance Commission and agencies in other states
15 which issue professional licenses and (ii) agreements between
16 the Department of Healthcare and Family Services (formerly
17 Illinois Department of Public Aid) and public agencies for the
18 establishment and enforcement of child support orders and for
19 the exchange of information that may be necessary for the
20 enforcement of those child support orders.

21 (Source: P.A. 90-18, eff. 7-1-97; 91-298, eff. 7-29-99.)

22 Section 9020. The State Employees Group Insurance Act of
23 1971 is amended by adding Section 2.5 and changing Sections 3,
24 4, 6.5, 6.9, 7, 10, and 15 as follows:

25 (5 ILCS 375/2.5 new)

26 Sec. 2.5. State healthcare purchasing; administration and
27 management of employee benefits. On and after the effective
28 date of this amendatory Act of the 94th General Assembly, as
29 provided in the Executive Order 3 (2005) Implementation Act:

30 (1) The Department of Healthcare and Family Services
31 shall perform all State healthcare purchasing functions in
32 connection with health benefits under this Act.

33 (2) The Department of Central Management Services

1 shall perform all functions with respect to the
2 administration and management of employee benefits in
3 connection with health benefits under this Act.

4 (3) The Department of Central Management Services
5 shall perform all functions under this Act in connection
6 with employee benefits other than health benefits.

7 (5 ILCS 375/3) (from Ch. 127, par. 523)

8 Sec. 3. Definitions. Unless the context otherwise
9 requires, the following words and phrases as used in this Act
10 shall have the following meanings. The Department of Healthcare
11 and Family Services or the Department of Central Management
12 Services, as appropriate, in accordance with Section 2.5, may
13 define these and other words and phrases separately for the
14 purpose of implementing specific programs providing benefits
15 under this Act.

16 (a) "Administrative service organization" means any
17 person, firm or corporation experienced in the handling of
18 claims which is fully qualified, financially sound and capable
19 of meeting the service requirements of a contract of
20 administration executed with the Department.

21 (b) "Annuitant" means (1) an employee who retires, or has
22 retired, on or after January 1, 1966 on an immediate annuity
23 under the provisions of Articles 2, 14 (including an employee
24 who has elected to receive an alternative retirement
25 cancellation payment under Section 14-108.5 of the Illinois
26 Pension Code in lieu of an annuity), 15 (including an employee
27 who has retired under the optional retirement program
28 established under Section 15-158.2), paragraphs (2), (3), or
29 (5) of Section 16-106, or Article 18 of the Illinois Pension
30 Code; (2) any person who was receiving group insurance coverage
31 under this Act as of March 31, 1978 by reason of his status as
32 an annuitant, even though the annuity in relation to which such
33 coverage was provided is a proportional annuity based on less
34 than the minimum period of service required for a retirement
35 annuity in the system involved; (3) any person not otherwise

1 covered by this Act who has retired as a participating member
2 under Article 2 of the Illinois Pension Code but is ineligible
3 for the retirement annuity under Section 2-119 of the Illinois
4 Pension Code; (4) the spouse of any person who is receiving a
5 retirement annuity under Article 18 of the Illinois Pension
6 Code and who is covered under a group health insurance program
7 sponsored by a governmental employer other than the State of
8 Illinois and who has irrevocably elected to waive his or her
9 coverage under this Act and to have his or her spouse
10 considered as the "annuitant" under this Act and not as a
11 "dependent"; or (5) an employee who retires, or has retired,
12 from a qualified position, as determined according to rules
13 promulgated by the Director, under a qualified local government
14 or a qualified rehabilitation facility or a qualified domestic
15 violence shelter or service. (For definition of "retired
16 employee", see (p) post).

17 (b-5) "New SERS annuitant" means a person who, on or after
18 January 1, 1998, becomes an annuitant, as defined in subsection
19 (b), by virtue of beginning to receive a retirement annuity
20 under Article 14 of the Illinois Pension Code (including an
21 employee who has elected to receive an alternative retirement
22 cancellation payment under Section 14-108.5 of that Code in
23 lieu of an annuity), and is eligible to participate in the
24 basic program of group health benefits provided for annuitants
25 under this Act.

26 (b-6) "New SURS annuitant" means a person who (1) on or
27 after January 1, 1998, becomes an annuitant, as defined in
28 subsection (b), by virtue of beginning to receive a retirement
29 annuity under Article 15 of the Illinois Pension Code, (2) has
30 not made the election authorized under Section 15-135.1 of the
31 Illinois Pension Code, and (3) is eligible to participate in
32 the basic program of group health benefits provided for
33 annuitants under this Act.

34 (b-7) "New TRS State annuitant" means a person who, on or
35 after July 1, 1998, becomes an annuitant, as defined in
36 subsection (b), by virtue of beginning to receive a retirement

1 annuity under Article 16 of the Illinois Pension Code based on
2 service as a teacher as defined in paragraph (2), (3), or (5)
3 of Section 16-106 of that Code, and is eligible to participate
4 in the basic program of group health benefits provided for
5 annuitants under this Act.

6 (c) "Carrier" means (1) an insurance company, a corporation
7 organized under the Limited Health Service Organization Act or
8 the Voluntary Health Services Plan Act, a partnership, or other
9 nongovernmental organization, which is authorized to do group
10 life or group health insurance business in Illinois, or (2) the
11 State of Illinois as a self-insurer.

12 (d) "Compensation" means salary or wages payable on a
13 regular payroll by the State Treasurer on a warrant of the
14 State Comptroller out of any State, trust or federal fund, or
15 by the Governor of the State through a disbursing officer of
16 the State out of a trust or out of federal funds, or by any
17 Department out of State, trust, federal or other funds held by
18 the State Treasurer or the Department, to any person for
19 personal services currently performed, and ordinary or
20 accidental disability benefits under Articles 2, 14, 15
21 (including ordinary or accidental disability benefits under
22 the optional retirement program established under Section
23 15-158.2), paragraphs (2), (3), or (5) of Section 16-106, or
24 Article 18 of the Illinois Pension Code, for disability
25 incurred after January 1, 1966, or benefits payable under the
26 Workers' Compensation or Occupational Diseases Act or benefits
27 payable under a sick pay plan established in accordance with
28 Section 36 of the State Finance Act. "Compensation" also means
29 salary or wages paid to an employee of any qualified local
30 government or qualified rehabilitation facility or a qualified
31 domestic violence shelter or service.

32 (e) "Commission" means the State Employees Group Insurance
33 Advisory Commission authorized by this Act. Commencing July 1,
34 1984, "Commission" as used in this Act means the Commission on
35 Government Forecasting and Accountability as established by
36 the Legislative Commission Reorganization Act of 1984.

1 (f) "Contributory", when referred to as contributory
2 coverage, shall mean optional coverages or benefits elected by
3 the member toward the cost of which such member makes
4 contribution, or which are funded in whole or in part through
5 the acceptance of a reduction in earnings or the foregoing of
6 an increase in earnings by an employee, as distinguished from
7 noncontributory coverage or benefits which are paid entirely by
8 the State of Illinois without reduction of the member's salary.

9 (g) "Department" means any department, institution, board,
10 commission, officer, court or any agency of the State
11 government receiving appropriations and having power to
12 certify payrolls to the Comptroller authorizing payments of
13 salary and wages against such appropriations as are made by the
14 General Assembly from any State fund, or against trust funds
15 held by the State Treasurer and includes boards of trustees of
16 the retirement systems created by Articles 2, 14, 15, 16 and 18
17 of the Illinois Pension Code. "Department" also includes the
18 Illinois Comprehensive Health Insurance Board, the Board of
19 Examiners established under the Illinois Public Accounting
20 Act, and the Illinois Finance Authority.

21 (h) "Dependent", when the term is used in the context of
22 the health and life plan, means a member's spouse and any
23 unmarried child (1) from birth to age 19 including an adopted
24 child, a child who lives with the member from the time of the
25 filing of a petition for adoption until entry of an order of
26 adoption, a stepchild or recognized child who lives with the
27 member in a parent-child relationship, or a child who lives
28 with the member if such member is a court appointed guardian of
29 the child, or (2) age 19 to 23 enrolled as a full-time student
30 in any accredited school, financially dependent upon the
31 member, and eligible to be claimed as a dependent for income
32 tax purposes, or (3) age 19 or over who is mentally or
33 physically handicapped. For the purposes of item (2), an
34 unmarried child age 19 to 23 who is a member of the United
35 States Armed Services, including the Illinois National Guard,
36 and is mobilized to active duty shall qualify as a dependent

1 beyond the age of 23 and until the age of 25 and while a
2 full-time student for the amount of time spent on active duty
3 between the ages of 19 and 23. The individual attempting to
4 qualify for this additional time must submit written
5 documentation of active duty service to the Director. The
6 changes made by this amendatory Act of the 94th General
7 Assembly apply only to individuals mobilized to active duty in
8 the United States Armed Services, including the Illinois
9 National Guard, on or after January 1, 2002. For the health
10 plan only, the term "dependent" also includes any person
11 enrolled prior to the effective date of this Section who is
12 dependent upon the member to the extent that the member may
13 claim such person as a dependent for income tax deduction
14 purposes; no other such person may be enrolled. For the health
15 plan only, the term "dependent" also includes any person who
16 has received after June 30, 2000 an organ transplant and who is
17 financially dependent upon the member and eligible to be
18 claimed as a dependent for income tax purposes.

19 (i) "Director" means the Director of Healthcare and Family
20 Services or the Director of the Illinois Department of Central
21 Management Services, as appropriate, in accordance with
22 Section 2.5.

23 (j) "Eligibility period" means the period of time a member
24 has to elect enrollment in programs or to select benefits
25 without regard to age, sex or health.

26 (k) "Employee" means and includes each officer or employee
27 in the service of a department who (1) receives his
28 compensation for service rendered to the department on a
29 warrant issued pursuant to a payroll certified by a department
30 or on a warrant or check issued and drawn by a department upon
31 a trust, federal or other fund or on a warrant issued pursuant
32 to a payroll certified by an elected or duly appointed officer
33 of the State or who receives payment of the performance of
34 personal services on a warrant issued pursuant to a payroll
35 certified by a Department and drawn by the Comptroller upon the
36 State Treasurer against appropriations made by the General

1 Assembly from any fund or against trust funds held by the State
2 Treasurer, and (2) is employed full-time or part-time in a
3 position normally requiring actual performance of duty during
4 not less than 1/2 of a normal work period, as established by
5 the Director in cooperation with each department, except that
6 persons elected by popular vote will be considered employees
7 during the entire term for which they are elected regardless of
8 hours devoted to the service of the State, and (3) except that
9 "employee" does not include any person who is not eligible by
10 reason of such person's employment to participate in one of the
11 State retirement systems under Articles 2, 14, 15 (either the
12 regular Article 15 system or the optional retirement program
13 established under Section 15-158.2) or 18, or under paragraph
14 (2), (3), or (5) of Section 16-106, of the Illinois Pension
15 Code, but such term does include persons who are employed
16 during the 6 month qualifying period under Article 14 of the
17 Illinois Pension Code. Such term also includes any person who
18 (1) after January 1, 1966, is receiving ordinary or accidental
19 disability benefits under Articles 2, 14, 15 (including
20 ordinary or accidental disability benefits under the optional
21 retirement program established under Section 15-158.2),
22 paragraphs (2), (3), or (5) of Section 16-106, or Article 18 of
23 the Illinois Pension Code, for disability incurred after
24 January 1, 1966, (2) receives total permanent or total
25 temporary disability under the Workers' Compensation Act or
26 Occupational Disease Act as a result of injuries sustained or
27 illness contracted in the course of employment with the State
28 of Illinois, or (3) is not otherwise covered under this Act and
29 has retired as a participating member under Article 2 of the
30 Illinois Pension Code but is ineligible for the retirement
31 annuity under Section 2-119 of the Illinois Pension Code.
32 However, a person who satisfies the criteria of the foregoing
33 definition of "employee" except that such person is made
34 ineligible to participate in the State Universities Retirement
35 System by clause (4) of subsection (a) of Section 15-107 of the
36 Illinois Pension Code is also an "employee" for the purposes of

1 this Act. "Employee" also includes any person receiving or
2 eligible for benefits under a sick pay plan established in
3 accordance with Section 36 of the State Finance Act. "Employee"
4 also includes each officer or employee in the service of a
5 qualified local government, including persons appointed as
6 trustees of sanitary districts regardless of hours devoted to
7 the service of the sanitary district, and each employee in the
8 service of a qualified rehabilitation facility and each
9 full-time employee in the service of a qualified domestic
10 violence shelter or service, as determined according to rules
11 promulgated by the Director.

12 (l) "Member" means an employee, annuitant, retired
13 employee or survivor.

14 (m) "Optional coverages or benefits" means those coverages
15 or benefits available to the member on his or her voluntary
16 election, and at his or her own expense.

17 (n) "Program" means the group life insurance, health
18 benefits and other employee benefits designed and contracted
19 for by the Director under this Act.

20 (o) "Health plan" means a health benefits program offered
21 by the State of Illinois for persons eligible for the plan.

22 (p) "Retired employee" means any person who would be an
23 annuitant as that term is defined herein but for the fact that
24 such person retired prior to January 1, 1966. Such term also
25 includes any person formerly employed by the University of
26 Illinois in the Cooperative Extension Service who would be an
27 annuitant but for the fact that such person was made ineligible
28 to participate in the State Universities Retirement System by
29 clause (4) of subsection (a) of Section 15-107 of the Illinois
30 Pension Code.

31 (q) "Survivor" means a person receiving an annuity as a
32 survivor of an employee or of an annuitant. "Survivor" also
33 includes: (1) the surviving dependent of a person who satisfies
34 the definition of "employee" except that such person is made
35 ineligible to participate in the State Universities Retirement
36 System by clause (4) of subsection (a) of Section 15-107 of the

1 Illinois Pension Code; (2) the surviving dependent of any
2 person formerly employed by the University of Illinois in the
3 Cooperative Extension Service who would be an annuitant except
4 for the fact that such person was made ineligible to
5 participate in the State Universities Retirement System by
6 clause (4) of subsection (a) of Section 15-107 of the Illinois
7 Pension Code; and (3) the surviving dependent of a person who
8 was an annuitant under this Act by virtue of receiving an
9 alternative retirement cancellation payment under Section
10 14-108.5 of the Illinois Pension Code.

11 (q-2) "SERS" means the State Employees' Retirement System
12 of Illinois, created under Article 14 of the Illinois Pension
13 Code.

14 (q-3) "SURS" means the State Universities Retirement
15 System, created under Article 15 of the Illinois Pension Code.

16 (q-4) "TRS" means the Teachers' Retirement System of the
17 State of Illinois, created under Article 16 of the Illinois
18 Pension Code.

19 (q-5) "New SERS survivor" means a survivor, as defined in
20 subsection (q), whose annuity is paid under Article 14 of the
21 Illinois Pension Code and is based on the death of (i) an
22 employee whose death occurs on or after January 1, 1998, or
23 (ii) a new SERS annuitant as defined in subsection (b-5). "New
24 SERS survivor" includes the surviving dependent of a person who
25 was an annuitant under this Act by virtue of receiving an
26 alternative retirement cancellation payment under Section
27 14-108.5 of the Illinois Pension Code.

28 (q-6) "New SURS survivor" means a survivor, as defined in
29 subsection (q), whose annuity is paid under Article 15 of the
30 Illinois Pension Code and is based on the death of (i) an
31 employee whose death occurs on or after January 1, 1998, or
32 (ii) a new SURS annuitant as defined in subsection (b-6).

33 (q-7) "New TRS State survivor" means a survivor, as defined
34 in subsection (q), whose annuity is paid under Article 16 of
35 the Illinois Pension Code and is based on the death of (i) an
36 employee who is a teacher as defined in paragraph (2), (3), or

1 (5) of Section 16-106 of that Code and whose death occurs on or
2 after July 1, 1998, or (ii) a new TRS State annuitant as
3 defined in subsection (b-7).

4 (r) "Medical services" means the services provided within
5 the scope of their licenses by practitioners in all categories
6 licensed under the Medical Practice Act of 1987.

7 (s) "Unit of local government" means any county,
8 municipality, township, school district (including a
9 combination of school districts under the Intergovernmental
10 Cooperation Act), special district or other unit, designated as
11 a unit of local government by law, which exercises limited
12 governmental powers or powers in respect to limited
13 governmental subjects, any not-for-profit association with a
14 membership that primarily includes townships and township
15 officials, that has duties that include provision of research
16 service, dissemination of information, and other acts for the
17 purpose of improving township government, and that is funded
18 wholly or partly in accordance with Section 85-15 of the
19 Township Code; any not-for-profit corporation or association,
20 with a membership consisting primarily of municipalities, that
21 operates its own utility system, and provides research,
22 training, dissemination of information, or other acts to
23 promote cooperation between and among municipalities that
24 provide utility services and for the advancement of the goals
25 and purposes of its membership; the Southern Illinois
26 Collegiate Common Market, which is a consortium of higher
27 education institutions in Southern Illinois; the Illinois
28 Association of Park Districts; and any hospital provider that
29 is owned by a county that has 100 or fewer hospital beds and
30 has not already joined the program. "Qualified local
31 government" means a unit of local government approved by the
32 Director and participating in a program created under
33 subsection (i) of Section 10 of this Act.

34 (t) "Qualified rehabilitation facility" means any
35 not-for-profit organization that is accredited by the
36 Commission on Accreditation of Rehabilitation Facilities or

1 certified by the Department of Human Services (as successor to
2 the Department of Mental Health and Developmental
3 Disabilities) to provide services to persons with disabilities
4 and which receives funds from the State of Illinois for
5 providing those services, approved by the Director and
6 participating in a program created under subsection (j) of
7 Section 10 of this Act.

8 (u) "Qualified domestic violence shelter or service" means
9 any Illinois domestic violence shelter or service and its
10 administrative offices funded by the Department of Human
11 Services (as successor to the Illinois Department of Public
12 Aid), approved by the Director and participating in a program
13 created under subsection (k) of Section 10.

14 (v) "TRS benefit recipient" means a person who:

15 (1) is not a "member" as defined in this Section; and

16 (2) is receiving a monthly benefit or retirement
17 annuity under Article 16 of the Illinois Pension Code; and

18 (3) either (i) has at least 8 years of creditable
19 service under Article 16 of the Illinois Pension Code, or
20 (ii) was enrolled in the health insurance program offered
21 under that Article on January 1, 1996, or (iii) is the
22 survivor of a benefit recipient who had at least 8 years of
23 creditable service under Article 16 of the Illinois Pension
24 Code or was enrolled in the health insurance program
25 offered under that Article on the effective date of this
26 amendatory Act of 1995, or (iv) is a recipient or survivor
27 of a recipient of a disability benefit under Article 16 of
28 the Illinois Pension Code.

29 (w) "TRS dependent beneficiary" means a person who:

30 (1) is not a "member" or "dependent" as defined in this
31 Section; and

32 (2) is a TRS benefit recipient's: (A) spouse, (B)
33 dependent parent who is receiving at least half of his or
34 her support from the TRS benefit recipient, or (C)
35 unmarried natural or adopted child who is (i) under age 19,
36 or (ii) enrolled as a full-time student in an accredited

1 school, financially dependent upon the TRS benefit
2 recipient, eligible to be claimed as a dependent for income
3 tax purposes, and either is under age 24 or was, on January
4 1, 1996, participating as a dependent beneficiary in the
5 health insurance program offered under Article 16 of the
6 Illinois Pension Code, or (iii) age 19 or over who is
7 mentally or physically handicapped.

8 (x) "Military leave with pay and benefits" refers to
9 individuals in basic training for reserves, special/advanced
10 training, annual training, emergency call up, or activation by
11 the President of the United States with approved pay and
12 benefits.

13 (y) "Military leave without pay and benefits" refers to
14 individuals who enlist for active duty in a regular component
15 of the U.S. Armed Forces or other duty not specified or
16 authorized under military leave with pay and benefits.

17 (z) "Community college benefit recipient" means a person
18 who:

19 (1) is not a "member" as defined in this Section; and

20 (2) is receiving a monthly survivor's annuity or
21 retirement annuity under Article 15 of the Illinois Pension
22 Code; and

23 (3) either (i) was a full-time employee of a community
24 college district or an association of community college
25 boards created under the Public Community College Act
26 (other than an employee whose last employer under Article
27 15 of the Illinois Pension Code was a community college
28 district subject to Article VII of the Public Community
29 College Act) and was eligible to participate in a group
30 health benefit plan as an employee during the time of
31 employment with a community college district (other than a
32 community college district subject to Article VII of the
33 Public Community College Act) or an association of
34 community college boards, or (ii) is the survivor of a
35 person described in item (i).

36 (aa) "Community college dependent beneficiary" means a

1 person who:

2 (1) is not a "member" or "dependent" as defined in this
3 Section; and

4 (2) is a community college benefit recipient's: (A)
5 spouse, (B) dependent parent who is receiving at least half
6 of his or her support from the community college benefit
7 recipient, or (C) unmarried natural or adopted child who is
8 (i) under age 19, or (ii) enrolled as a full-time student
9 in an accredited school, financially dependent upon the
10 community college benefit recipient, eligible to be
11 claimed as a dependent for income tax purposes and under
12 age 23, or (iii) age 19 or over and mentally or physically
13 handicapped.

14 (Source: P.A. 93-205, eff. 1-1-04; 93-839, eff. 7-30-04;
15 93-1067, eff. 1-15-05; 94-32, eff. 6-15-05; 94-82, eff. 1-1-06;
16 revised 8-9-05.)

17 (5 ILCS 375/4) (from Ch. 127, par. 524)

18 Sec. 4. The Commission shall meet with the Department of
19 Healthcare and Family Services and the Department of Central
20 Management Services and advise each department ~~the Department~~
21 ~~of Central Management Services~~ on all matters relating to
22 policy and each department's ~~the~~ administration of this Act.

23 (Source: P.A. 85-848.)

24 (5 ILCS 375/6.5)

25 Sec. 6.5. Health benefits for TRS benefit recipients and
26 TRS dependent beneficiaries.

27 (a) Purpose. It is the purpose of this amendatory Act of
28 1995 to transfer the administration of the program of health
29 benefits established for benefit recipients and their
30 dependent beneficiaries under Article 16 of the Illinois
31 Pension Code to the Department of Central Management Services.

32 (b) Transition provisions. The Board of Trustees of the
33 Teachers' Retirement System shall continue to administer the
34 health benefit program established under Article 16 of the

1 Illinois Pension Code through December 31, 1995. Beginning
2 January 1, 1996, except as provided in Section 2.5, the
3 Department of Central Management Services shall be responsible
4 for administering a program of health benefits for TRS benefit
5 recipients and TRS dependent beneficiaries under this Section.
6 The Department of Central Management Services and the Teachers'
7 Retirement System shall cooperate in this endeavor and shall
8 coordinate their activities so as to ensure a smooth transition
9 and uninterrupted health benefit coverage.

10 (c) Eligibility. All persons who were enrolled in the
11 Article 16 program at the time of the transfer shall be
12 eligible to participate in the program established under this
13 Section without any interruption or delay in coverage or
14 limitation as to pre-existing medical conditions. Eligibility
15 to participate shall be determined by the Teachers' Retirement
16 System. Eligibility information shall be communicated to the
17 Department of Central Management Services in a format
18 acceptable to the Department.

19 A TRS dependent beneficiary who is an unmarried child age
20 19 or over and mentally or physically disabled does not become
21 ineligible to participate by reason of (i) becoming ineligible
22 to be claimed as a dependent for Illinois or federal income tax
23 purposes or (ii) receiving earned income, so long as those
24 earnings are insufficient for the child to be fully
25 self-sufficient.

26 (d) Coverage. The level of health benefits provided under
27 this Section shall be similar to the level of benefits provided
28 by the program previously established under Article 16 of the
29 Illinois Pension Code.

30 Group life insurance benefits are not included in the
31 benefits to be provided to TRS benefit recipients and TRS
32 dependent beneficiaries under this Act.

33 The program of health benefits under this Section may
34 include any or all of the benefit limitations, including but
35 not limited to a reduction in benefits based on eligibility for
36 federal medicare benefits, that are provided under subsection

1 (a) of Section 6 of this Act for other health benefit programs
2 under this Act.

3 (e) Insurance rates and premiums. The Director shall
4 determine the insurance rates and premiums for TRS benefit
5 recipients and TRS dependent beneficiaries, and shall present
6 to the Teachers' Retirement System of the State of Illinois, by
7 April 15 of each calendar year, the rate-setting methodology
8 (including but not limited to utilization levels and costs)
9 used to determine the amount of the health care premiums.

10 For Fiscal Year 1996, the premium shall be equal to the
11 premium actually charged in Fiscal Year 1995; in subsequent
12 years, the premium shall never be lower than the premium
13 charged in Fiscal Year 1995.

14 For Fiscal Year 2003, the premium shall not exceed 110%
15 of the premium actually charged in Fiscal Year 2002.

16 For Fiscal Year 2004, the premium shall not exceed 112%
17 of the premium actually charged in Fiscal Year 2003.

18 For Fiscal Year 2005, the premium shall not exceed a
19 weighted average of 106.6% of the premium actually charged
20 in Fiscal Year 2004.

21 For Fiscal Year 2006, the premium shall not exceed a
22 weighted average of 109.1% of the premium actually charged
23 in Fiscal Year 2005.

24 For Fiscal Year 2007, the premium shall not exceed a
25 weighted average of 103.9% of the premium actually charged
26 in Fiscal Year 2006.

27 For Fiscal Year 2008 and thereafter, the premium in
28 each fiscal year shall not exceed 105% of the premium
29 actually charged in the previous fiscal year.

30 Rates and premiums may be based in part on age and
31 eligibility for federal medicare coverage. However, the cost of
32 participation for a TRS dependent beneficiary who is an
33 unmarried child age 19 or over and mentally or physically
34 disabled shall not exceed the cost for a TRS dependent
35 beneficiary who is an unmarried child under age 19 and
36 participates in the same major medical or managed care program.

1 The cost of health benefits under the program shall be paid
2 as follows:

3 (1) For a TRS benefit recipient selecting a managed
4 care program, up to 75% of the total insurance rate shall
5 be paid from the Teacher Health Insurance Security Fund.
6 Effective with Fiscal Year 2007 and thereafter, for a TRS
7 benefit recipient selecting a managed care program, 75% of
8 the total insurance rate shall be paid from the Teacher
9 Health Insurance Security Fund.

10 (2) For a TRS benefit recipient selecting the major
11 medical coverage program, up to 50% of the total insurance
12 rate shall be paid from the Teacher Health Insurance
13 Security Fund if a managed care program is accessible, as
14 determined by the Teachers' Retirement System. Effective
15 with Fiscal Year 2007 and thereafter, for a TRS benefit
16 recipient selecting the major medical coverage program,
17 50% of the total insurance rate shall be paid from the
18 Teacher Health Insurance Security Fund if a managed care
19 program is accessible, as determined by the Department of
20 Central Management Services.

21 (3) For a TRS benefit recipient selecting the major
22 medical coverage program, up to 75% of the total insurance
23 rate shall be paid from the Teacher Health Insurance
24 Security Fund if a managed care program is not accessible,
25 as determined by the Teachers' Retirement System.
26 Effective with Fiscal Year 2007 and thereafter, for a TRS
27 benefit recipient selecting the major medical coverage
28 program, 75% of the total insurance rate shall be paid from
29 the Teacher Health Insurance Security Fund if a managed
30 care program is not accessible, as determined by the
31 Department of Central Management Services.

32 (3.1) For a TRS dependent beneficiary who is Medicare
33 primary and enrolled in a managed care plan, or the major
34 medical coverage program if a managed care plan is not
35 available, 25% of the total insurance rate shall be paid
36 from the Teacher Health Security Fund as determined by the

1 Department of Central Management Services. For the purpose
2 of this item (3.1), the term "TRS dependent beneficiary who
3 is Medicare primary" means a TRS dependent beneficiary who
4 is participating in Medicare Parts A and B.

5 (4) Except as otherwise provided in item (3.1), the
6 balance of the rate of insurance, including the entire
7 premium of any coverage for TRS dependent beneficiaries
8 that has been elected, shall be paid by deductions
9 authorized by the TRS benefit recipient to be withheld from
10 his or her monthly annuity or benefit payment from the
11 Teachers' Retirement System; except that (i) if the balance
12 of the cost of coverage exceeds the amount of the monthly
13 annuity or benefit payment, the difference shall be paid
14 directly to the Teachers' Retirement System by the TRS
15 benefit recipient, and (ii) all or part of the balance of
16 the cost of coverage may, at the school board's option, be
17 paid to the Teachers' Retirement System by the school board
18 of the school district from which the TRS benefit recipient
19 retired, in accordance with Section 10-22.3b of the School
20 Code. The Teachers' Retirement System shall promptly
21 deposit all moneys withheld by or paid to it under this
22 subdivision (e)(4) into the Teacher Health Insurance
23 Security Fund. These moneys shall not be considered assets
24 of the Retirement System.

25 (f) Financing. Beginning July 1, 1995, all revenues arising
26 from the administration of the health benefit programs
27 established under Article 16 of the Illinois Pension Code or
28 this Section shall be deposited into the Teacher Health
29 Insurance Security Fund, which is hereby created as a
30 nonappropriated trust fund to be held outside the State
31 Treasury, with the State Treasurer as custodian. Any interest
32 earned on moneys in the Teacher Health Insurance Security Fund
33 shall be deposited into the Fund.

34 Moneys in the Teacher Health Insurance Security Fund shall
35 be used only to pay the costs of the health benefit program
36 established under this Section, including associated

1 administrative costs, and the costs associated with the health
2 benefit program established under Article 16 of the Illinois
3 Pension Code, as authorized in this Section. Beginning July 1,
4 1995, the Department of Central Management Services may make
5 expenditures from the Teacher Health Insurance Security Fund
6 for those costs.

7 After other funds authorized for the payment of the costs
8 of the health benefit program established under Article 16 of
9 the Illinois Pension Code are exhausted and until January 1,
10 1996 (or such later date as may be agreed upon by the Director
11 of Central Management Services and the Secretary of the
12 Teachers' Retirement System), the Secretary of the Teachers'
13 Retirement System may make expenditures from the Teacher Health
14 Insurance Security Fund as necessary to pay up to 75% of the
15 cost of providing health coverage to eligible benefit
16 recipients (as defined in Sections 16-153.1 and 16-153.3 of the
17 Illinois Pension Code) who are enrolled in the Article 16
18 health benefit program and to facilitate the transfer of
19 administration of the health benefit program to the Department
20 of Central Management Services.

21 (g) Contract for benefits. The Director shall by contract,
22 self-insurance, or otherwise make available the program of
23 health benefits for TRS benefit recipients and their TRS
24 dependent beneficiaries that is provided for in this Section.
25 The contract or other arrangement for the provision of these
26 health benefits shall be on terms deemed by the Director to be
27 in the best interest of the State of Illinois and the TRS
28 benefit recipients based on, but not limited to, such criteria
29 as administrative cost, service capabilities of the carrier or
30 other contractor, and the costs of the benefits.

31 (g-5) Committee. A Teacher Retirement Insurance Program
32 Committee shall be established, to consist of 10 persons
33 appointed by the Governor.

34 The Committee shall convene at least 4 times each year, and
35 shall consider and make recommendations on issues affecting the
36 program of health benefits provided under this Section.

1 Recommendations of the Committee shall be based on a consensus
2 of the members of the Committee.

3 If the Teacher Health Insurance Security Fund experiences a
4 deficit balance based upon the contribution and subsidy rates
5 established in this Section and Section 6.6 for Fiscal Year
6 2008 or thereafter, the Committee shall make recommendations
7 for adjustments to the funding sources established under these
8 Sections.

9 (h) Continuation of program. It is the intention of the
10 General Assembly that the program of health benefits provided
11 under this Section be maintained on an ongoing, affordable
12 basis.

13 The program of health benefits provided under this Section
14 may be amended by the State and is not intended to be a pension
15 or retirement benefit subject to protection under Article XIII,
16 Section 5 of the Illinois Constitution.

17 (i) Repeal. (Blank).

18 (Source: P.A. 92-505, eff. 12-20-01; 92-862, eff. 1-3-03;
19 93-679, eff. 6-30-04.)

20 (5 ILCS 375/6.9)

21 Sec. 6.9. Health benefits for community college benefit
22 recipients and community college dependent beneficiaries.

23 (a) Purpose. It is the purpose of this amendatory Act of
24 1997 to establish a uniform program of health benefits for
25 community college benefit recipients and their dependent
26 beneficiaries under the administration of the Department of
27 Central Management Services.

28 (b) Creation of program. Beginning July 1, 1999, except as
29 provided in Section 2.5, the Department of Central Management
30 Services shall be responsible for administering a program of
31 health benefits for community college benefit recipients and
32 community college dependent beneficiaries under this Section.
33 The State Universities Retirement System and the boards of
34 trustees of the various community college districts shall
35 cooperate with the Department in this endeavor.

1 (c) Eligibility. All community college benefit recipients
2 and community college dependent beneficiaries shall be
3 eligible to participate in the program established under this
4 Section, without any interruption or delay in coverage or
5 limitation as to pre-existing medical conditions. Eligibility
6 to participate shall be determined by the State Universities
7 Retirement System. Eligibility information shall be
8 communicated to the Department of Central Management Services
9 in a format acceptable to the Department.

10 (d) Coverage. The health benefit coverage provided under
11 this Section shall be a program of health, dental, and vision
12 benefits.

13 The program of health benefits under this Section may
14 include any or all of the benefit limitations, including but
15 not limited to a reduction in benefits based on eligibility for
16 federal medicare benefits, that are provided under subsection
17 (a) of Section 6 of this Act for other health benefit programs
18 under this Act.

19 (e) Insurance rates and premiums. The Director shall
20 determine the insurance rates and premiums for community
21 college benefit recipients and community college dependent
22 beneficiaries. Rates and premiums may be based in part on age
23 and eligibility for federal Medicare coverage. The Director
24 shall also determine premiums that will allow for the
25 establishment of an actuarially sound reserve for this program.

26 The cost of health benefits under the program shall be paid
27 as follows:

28 (1) For a community college benefit recipient, up to
29 75% of the total insurance rate shall be paid from the
30 Community College Health Insurance Security Fund.

31 (2) The balance of the rate of insurance, including the
32 entire premium for any coverage for community college
33 dependent beneficiaries that has been elected, shall be
34 paid by deductions authorized by the community college
35 benefit recipient to be withheld from his or her monthly
36 annuity or benefit payment from the State Universities

1 Retirement System; except that (i) if the balance of the
2 cost of coverage exceeds the amount of the monthly annuity
3 or benefit payment, the difference shall be paid directly
4 to the State Universities Retirement System by the
5 community college benefit recipient, and (ii) all or part
6 of the balance of the cost of coverage may, at the option
7 of the board of trustees of the community college district,
8 be paid to the State Universities Retirement System by the
9 board of the community college district from which the
10 community college benefit recipient retired. The State
11 Universities Retirement System shall promptly deposit all
12 moneys withheld by or paid to it under this subdivision
13 (e) (2) into the Community College Health Insurance
14 Security Fund. These moneys shall not be considered assets
15 of the State Universities Retirement System.

16 (f) Financing. All revenues arising from the
17 administration of the health benefit program established under
18 this Section shall be deposited into the Community College
19 Health Insurance Security Fund, which is hereby created as a
20 nonappropriated trust fund to be held outside the State
21 Treasury, with the State Treasurer as custodian. Any interest
22 earned on moneys in the Community College Health Insurance
23 Security Fund shall be deposited into the Fund.

24 Moneys in the Community College Health Insurance Security
25 Fund shall be used only to pay the costs of the health benefit
26 program established under this Section, including associated
27 administrative costs and the establishment of a program
28 reserve. Beginning January 1, 1999, the Department of Central
29 Management Services may make expenditures from the Community
30 College Health Insurance Security Fund for those costs.

31 (g) Contract for benefits. The Director shall by contract,
32 self-insurance, or otherwise make available the program of
33 health benefits for community college benefit recipients and
34 their community college dependent beneficiaries that is
35 provided for in this Section. The contract or other arrangement
36 for the provision of these health benefits shall be on terms

1 deemed by the Director to be in the best interest of the State
2 of Illinois and the community college benefit recipients based
3 on, but not limited to, such criteria as administrative cost,
4 service capabilities of the carrier or other contractor, and
5 the costs of the benefits.

6 (h) Continuation of program. It is the intention of the
7 General Assembly that the program of health benefits provided
8 under this Section be maintained on an ongoing, affordable
9 basis. The program of health benefits provided under this
10 Section may be amended by the State and is not intended to be a
11 pension or retirement benefit subject to protection under
12 Article XIII, Section 5 of the Illinois Constitution.

13 (i) Other health benefit plans. A health benefit plan
14 provided by a community college district (other than a
15 community college district subject to Article VII of the Public
16 Community College Act) under the terms of a collective
17 bargaining agreement in effect on or prior to the effective
18 date of this amendatory Act of 1997 shall continue in force
19 according to the terms of that agreement, unless otherwise
20 mutually agreed by the parties to that agreement and the
21 affected retiree. A community college benefit recipient or
22 community college dependent beneficiary whose coverage under
23 such a plan expires shall be eligible to begin participating in
24 the program established under this Section without any
25 interruption or delay in coverage or limitation as to
26 pre-existing medical conditions.

27 This Act does not prohibit any community college district
28 from offering additional health benefits for its retirees or
29 their dependents or survivors.

30 (Source: P.A. 90-497, eff. 8-18-97; 90-655, eff. 7-30-98.)

31 (5 ILCS 375/7) (from Ch. 127, par. 527)

32 Sec. 7. Group life insurance program.

33 (a) The basic noncontributory group life insurance program
34 shall provide coverage as follows:

35 (1) employees shall be insured in an amount equal to

1 the basic annual salary rate, exclusive of overtime, bonus,
2 or other cumulative additional income factors, raised to
3 the next round hundred dollar amount if it is not already a
4 round hundred dollar amount;

5 (2) annuitants shall be insured in the same manner as
6 described for active employees, based on the salary in
7 force immediately before retirement, with coverage
8 becoming effective on the effective date of retirement
9 benefits or the first day of the month of application,
10 whichever occurs later, except that at age 60 the amount of
11 coverage for the annuitant shall be reduced to \$5,000;

12 (3) survivors whose coverage became effective prior to
13 September 22, 1979 shall be insured for \$2,000;

14 (4) retired employees shall not be eligible under the
15 group life insurance program contracted to begin or
16 continue after June 30, 1973.

17 (a-5) There shall also be available on an optional basis to
18 employees, annuitants whose retirement benefits begin within
19 one year of their receipt of final compensation, and survivors
20 whose coverage became effective prior to September 22, 1979, a
21 contributory program of:

22 (1) supplemental life insurance in an amount not
23 exceeding 8 times the basic life benefits for active
24 employees and annuitants under age 60 and not exceeding 4
25 times the basic life benefits for annuitants age 60 and
26 over, as described above, except that (a) amounts selected
27 by employees and annuitants must be in full multiples of
28 the basic amount, and (b) premiums may be adjusted by age
29 bracket established in rules supplementing this Act;
30 beginning July 1, 1981, survivors whose coverage becomes
31 effective on or after September 22, 1979, shall have the
32 option of participating in the contributory program of life
33 insurance in an amount of \$5,000 coverage;

34 (2) accidental death and dismemberment, with the
35 employee and annuitant having the option of electing an
36 amount equal to the basic noncontributory life benefits

1 only, or an amount equaling the combined total of basic
2 plus optional life benefits not exceeding 5 times basic
3 life benefits, or \$3,000,000, whichever is less;

4 (3) dependent life insurance in an amount of \$10,000
5 coverage on the spouse; however, coverage reduces to \$5,000
6 when the eligible annuitant turns 60; and

7 (4) dependent life insurance in an amount of \$10,000
8 coverage on each dependent other than the spouse.

9 (b) A member, not otherwise covered by this Act, who has
10 retired as a participating member under Article 2 of the
11 Illinois Pension Code, but is ineligible for the retirement
12 annuity under Section 2-119 of the Illinois Pension Code, shall
13 pay the premiums for coverage under the group life insurance
14 program under this Act. The Director of Central Management
15 Services shall promulgate rules and regulations to determine
16 the premiums to be paid by a member under this subsection (b).

17 (Source: P.A. 94-95, eff. 7-1-05.)

18 (5 ILCS 375/10) (from Ch. 127, par. 530)

19 Sec. 10. Payments by State; premiums.

20 (a) The State shall pay the cost of basic non-contributory
21 group life insurance and, subject to member paid contributions
22 set by the Department or required by this Section, the basic
23 program of group health benefits on each eligible member,
24 except a member, not otherwise covered by this Act, who has
25 retired as a participating member under Article 2 of the
26 Illinois Pension Code but is ineligible for the retirement
27 annuity under Section 2-119 of the Illinois Pension Code, and
28 part of each eligible member's and retired member's premiums
29 for health insurance coverage for enrolled dependents as
30 provided by Section 9. The State shall pay the cost of the
31 basic program of group health benefits only after benefits are
32 reduced by the amount of benefits covered by Medicare for all
33 members and dependents who are eligible for benefits under
34 Social Security or the Railroad Retirement system or who had
35 sufficient Medicare-covered government employment, except that

1 such reduction in benefits shall apply only to those members
2 and dependents who (1) first become eligible for such Medicare
3 coverage on or after July 1, 1992; or (2) are Medicare-eligible
4 members or dependents of a local government unit which began
5 participation in the program on or after July 1, 1992; or (3)
6 remain eligible for, but no longer receive Medicare coverage
7 which they had been receiving on or after July 1, 1992. The
8 Department may determine the aggregate level of the State's
9 contribution on the basis of actual cost of medical services
10 adjusted for age, sex or geographic or other demographic
11 characteristics which affect the costs of such programs.

12 The cost of participation in the basic program of group
13 health benefits for the dependent or survivor of a living or
14 deceased retired employee who was formerly employed by the
15 University of Illinois in the Cooperative Extension Service and
16 would be an annuitant but for the fact that he or she was made
17 ineligible to participate in the State Universities Retirement
18 System by clause (4) of subsection (a) of Section 15-107 of the
19 Illinois Pension Code shall not be greater than the cost of
20 participation that would otherwise apply to that dependent or
21 survivor if he or she were the dependent or survivor of an
22 annuitant under the State Universities Retirement System.

23 (a-1) Beginning January 1, 1998, for each person who
24 becomes a new SERS annuitant and participates in the basic
25 program of group health benefits, the State shall contribute
26 toward the cost of the annuitant's coverage under the basic
27 program of group health benefits an amount equal to 5% of that
28 cost for each full year of creditable service upon which the
29 annuitant's retirement annuity is based, up to a maximum of
30 100% for an annuitant with 20 or more years of creditable
31 service. The remainder of the cost of a new SERS annuitant's
32 coverage under the basic program of group health benefits shall
33 be the responsibility of the annuitant. In the case of a new
34 SERS annuitant who has elected to receive an alternative
35 retirement cancellation payment under Section 14-108.5 of the
36 Illinois Pension Code in lieu of an annuity, for the purposes

1 of this subsection the annuitant shall be deemed to be
2 receiving a retirement annuity based on the number of years of
3 creditable service that the annuitant had established at the
4 time of his or her termination of service under SERS.

5 (a-2) Beginning January 1, 1998, for each person who
6 becomes a new SERS survivor and participates in the basic
7 program of group health benefits, the State shall contribute
8 toward the cost of the survivor's coverage under the basic
9 program of group health benefits an amount equal to 5% of that
10 cost for each full year of the deceased employee's or deceased
11 annuitant's creditable service in the State Employees'
12 Retirement System of Illinois on the date of death, up to a
13 maximum of 100% for a survivor of an employee or annuitant with
14 20 or more years of creditable service. The remainder of the
15 cost of the new SERS survivor's coverage under the basic
16 program of group health benefits shall be the responsibility of
17 the survivor. In the case of a new SERS survivor who was the
18 dependent of an annuitant who elected to receive an alternative
19 retirement cancellation payment under Section 14-108.5 of the
20 Illinois Pension Code in lieu of an annuity, for the purposes
21 of this subsection the deceased annuitant's creditable service
22 shall be determined as of the date of termination of service
23 rather than the date of death.

24 (a-3) Beginning January 1, 1998, for each person who
25 becomes a new SURS annuitant and participates in the basic
26 program of group health benefits, the State shall contribute
27 toward the cost of the annuitant's coverage under the basic
28 program of group health benefits an amount equal to 5% of that
29 cost for each full year of creditable service upon which the
30 annuitant's retirement annuity is based, up to a maximum of
31 100% for an annuitant with 20 or more years of creditable
32 service. The remainder of the cost of a new SURS annuitant's
33 coverage under the basic program of group health benefits shall
34 be the responsibility of the annuitant.

35 (a-4) (Blank).

36 (a-5) Beginning January 1, 1998, for each person who

1 becomes a new SURS survivor and participates in the basic
2 program of group health benefits, the State shall contribute
3 toward the cost of the survivor's coverage under the basic
4 program of group health benefits an amount equal to 5% of that
5 cost for each full year of the deceased employee's or deceased
6 annuitant's creditable service in the State Universities
7 Retirement System on the date of death, up to a maximum of 100%
8 for a survivor of an employee or annuitant with 20 or more
9 years of creditable service. The remainder of the cost of the
10 new SURS survivor's coverage under the basic program of group
11 health benefits shall be the responsibility of the survivor.

12 (a-6) Beginning July 1, 1998, for each person who becomes a
13 new TRS State annuitant and participates in the basic program
14 of group health benefits, the State shall contribute toward the
15 cost of the annuitant's coverage under the basic program of
16 group health benefits an amount equal to 5% of that cost for
17 each full year of creditable service as a teacher as defined in
18 paragraph (2), (3), or (5) of Section 16-106 of the Illinois
19 Pension Code upon which the annuitant's retirement annuity is
20 based, up to a maximum of 100%; except that the State
21 contribution shall be 12.5% per year (rather than 5%) for each
22 full year of creditable service as a regional superintendent or
23 assistant regional superintendent of schools. The remainder of
24 the cost of a new TRS State annuitant's coverage under the
25 basic program of group health benefits shall be the
26 responsibility of the annuitant.

27 (a-7) Beginning July 1, 1998, for each person who becomes a
28 new TRS State survivor and participates in the basic program of
29 group health benefits, the State shall contribute toward the
30 cost of the survivor's coverage under the basic program of
31 group health benefits an amount equal to 5% of that cost for
32 each full year of the deceased employee's or deceased
33 annuitant's creditable service as a teacher as defined in
34 paragraph (2), (3), or (5) of Section 16-106 of the Illinois
35 Pension Code on the date of death, up to a maximum of 100%;
36 except that the State contribution shall be 12.5% per year

1 (rather than 5%) for each full year of the deceased employee's
2 or deceased annuitant's creditable service as a regional
3 superintendent or assistant regional superintendent of
4 schools. The remainder of the cost of the new TRS State
5 survivor's coverage under the basic program of group health
6 benefits shall be the responsibility of the survivor.

7 (a-8) A new SERS annuitant, new SERS survivor, new SURS
8 annuitant, new SURS survivor, new TRS State annuitant, or new
9 TRS State survivor may waive or terminate coverage in the
10 program of group health benefits. Any such annuitant or
11 survivor who has waived or terminated coverage may enroll or
12 re-enroll in the program of group health benefits only during
13 the annual benefit choice period, as determined by the
14 Director; except that in the event of termination of coverage
15 due to nonpayment of premiums, the annuitant or survivor may
16 not re-enroll in the program.

17 (a-9) No later than May 1 of each calendar year, the
18 Director ~~of Central Management Services~~ shall certify in
19 writing to the Executive Secretary of the State Employees'
20 Retirement System of Illinois the amounts of the Medicare
21 supplement health care premiums and the amounts of the health
22 care premiums for all other retirees who are not Medicare
23 eligible.

24 A separate calculation of the premiums based upon the
25 actual cost of each health care plan shall be so certified.

26 The Director ~~of Central Management Services~~ shall provide
27 to the Executive Secretary of the State Employees' Retirement
28 System of Illinois such information, statistics, and other data
29 as he or she may require to review the premium amounts
30 certified by the Director ~~of Central Management Services~~.

31 (b) State employees who become eligible for this program on
32 or after January 1, 1980 in positions normally requiring actual
33 performance of duty not less than 1/2 of a normal work period
34 but not equal to that of a normal work period, shall be given
35 the option of participating in the available program. If the
36 employee elects coverage, the State shall contribute on behalf

1 of such employee to the cost of the employee's benefit and any
2 applicable dependent supplement, that sum which bears the same
3 percentage as that percentage of time the employee regularly
4 works when compared to normal work period.

5 (c) The basic non-contributory coverage from the basic
6 program of group health benefits shall be continued for each
7 employee not in pay status or on active service by reason of
8 (1) leave of absence due to illness or injury, (2) authorized
9 educational leave of absence or sabbatical leave, or (3)
10 military leave with pay and benefits. This coverage shall
11 continue until expiration of authorized leave and return to
12 active service, but not to exceed 24 months for leaves under
13 item (1) or (2). This 24-month limitation and the requirement
14 of returning to active service shall not apply to persons
15 receiving ordinary or accidental disability benefits or
16 retirement benefits through the appropriate State retirement
17 system or benefits under the Workers' Compensation or
18 Occupational Disease Act.

19 (d) The basic group life insurance coverage shall continue,
20 with full State contribution, where such person is (1) absent
21 from active service by reason of disability arising from any
22 cause other than self-inflicted, (2) on authorized educational
23 leave of absence or sabbatical leave, or (3) on military leave
24 with pay and benefits.

25 (e) Where the person is in non-pay status for a period in
26 excess of 30 days or on leave of absence, other than by reason
27 of disability, educational or sabbatical leave, or military
28 leave with pay and benefits, such person may continue coverage
29 only by making personal payment equal to the amount normally
30 contributed by the State on such person's behalf. Such payments
31 and coverage may be continued: (1) until such time as the
32 person returns to a status eligible for coverage at State
33 expense, but not to exceed 24 months, (2) until such person's
34 employment or annuitant status with the State is terminated, or
35 (3) for a maximum period of 4 years for members on military
36 leave with pay and benefits and military leave without pay and

1 benefits (exclusive of any additional service imposed pursuant
2 to law).

3 (f) The Department of Central Management Services shall
4 establish by rule the extent to which other employee benefits
5 will continue for persons in non-pay status or who are not in
6 active service.

7 (g) The State shall not pay the cost of the basic
8 non-contributory group life insurance, program of health
9 benefits and other employee benefits for members who are
10 survivors as defined by paragraphs (1) and (2) of subsection
11 (q) of Section 3 of this Act. The costs of benefits for these
12 survivors shall be paid by the survivors or by the University
13 of Illinois Cooperative Extension Service, or any combination
14 thereof. However, the State shall pay the amount of the
15 reduction in the cost of participation, if any, resulting from
16 the amendment to subsection (a) made by this amendatory Act of
17 the 91st General Assembly.

18 (h) Those persons occupying positions with any department
19 as a result of emergency appointments pursuant to Section 8b.8
20 of the Personnel Code who are not considered employees under
21 this Act shall be given the option of participating in the
22 programs of group life insurance, health benefits and other
23 employee benefits. Such persons electing coverage may
24 participate only by making payment equal to the amount normally
25 contributed by the State for similarly situated employees. Such
26 amounts shall be determined by the Director. Such payments and
27 coverage may be continued until such time as the person becomes
28 an employee pursuant to this Act or such person's appointment
29 is terminated.

30 (i) Any unit of local government within the State of
31 Illinois may apply to the Director to have its employees,
32 annuitants, and their dependents provided group health
33 coverage under this Act on a non-insured basis. To participate,
34 a unit of local government must agree to enroll all of its
35 employees, who may select coverage under either the State group
36 health benefits plan or a health maintenance organization that

1 has contracted with the State to be available as a health care
2 provider for employees as defined in this Act. A unit of local
3 government must remit the entire cost of providing coverage
4 under the State group health benefits plan or, for coverage
5 under a health maintenance organization, an amount determined
6 by the Director based on an analysis of the sex, age,
7 geographic location, or other relevant demographic variables
8 for its employees, except that the unit of local government
9 shall not be required to enroll those of its employees who are
10 covered spouses or dependents under this plan or another group
11 policy or plan providing health benefits as long as (1) an
12 appropriate official from the unit of local government attests
13 that each employee not enrolled is a covered spouse or
14 dependent under this plan or another group policy or plan, and
15 (2) at least 85% of the employees are enrolled and the unit of
16 local government remits the entire cost of providing coverage
17 to those employees, except that a participating school district
18 must have enrolled at least 85% of its full-time employees who
19 have not waived coverage under the district's group health plan
20 by participating in a component of the district's cafeteria
21 plan. A participating school district is not required to enroll
22 a full-time employee who has waived coverage under the
23 district's health plan, provided that an appropriate official
24 from the participating school district attests that the
25 full-time employee has waived coverage by participating in a
26 component of the district's cafeteria plan. For the purposes of
27 this subsection, "participating school district" includes a
28 unit of local government whose primary purpose is education as
29 defined by the Department's rules.

30 Employees of a participating unit of local government who
31 are not enrolled due to coverage under another group health
32 policy or plan may enroll in the event of a qualifying change
33 in status, special enrollment, special circumstance as defined
34 by the Director, or during the annual Benefit Choice Period. A
35 participating unit of local government may also elect to cover
36 its annuitants. Dependent coverage shall be offered on an

1 optional basis, with the costs paid by the unit of local
2 government, its employees, or some combination of the two as
3 determined by the unit of local government. The unit of local
4 government shall be responsible for timely collection and
5 transmission of dependent premiums.

6 The Director shall annually determine monthly rates of
7 payment, subject to the following constraints:

8 (1) In the first year of coverage, the rates shall be
9 equal to the amount normally charged to State employees for
10 elected optional coverages or for enrolled dependents
11 coverages or other contributory coverages, or contributed
12 by the State for basic insurance coverages on behalf of its
13 employees, adjusted for differences between State
14 employees and employees of the local government in age,
15 sex, geographic location or other relevant demographic
16 variables, plus an amount sufficient to pay for the
17 additional administrative costs of providing coverage to
18 employees of the unit of local government and their
19 dependents.

20 (2) In subsequent years, a further adjustment shall be
21 made to reflect the actual prior years' claims experience
22 of the employees of the unit of local government.

23 In the case of coverage of local government employees under
24 a health maintenance organization, the Director shall annually
25 determine for each participating unit of local government the
26 maximum monthly amount the unit may contribute toward that
27 coverage, based on an analysis of (i) the age, sex, geographic
28 location, and other relevant demographic variables of the
29 unit's employees and (ii) the cost to cover those employees
30 under the State group health benefits plan. The Director may
31 similarly determine the maximum monthly amount each unit of
32 local government may contribute toward coverage of its
33 employees' dependents under a health maintenance organization.

34 Monthly payments by the unit of local government or its
35 employees for group health benefits plan or health maintenance
36 organization coverage shall be deposited in the Local

1 Government Health Insurance Reserve Fund.

2 The Local Government Health Insurance Reserve Fund shall be
3 a continuing fund not subject to fiscal year limitations. All
4 expenditures from this Fund shall be used for payments for
5 health care benefits for local government and rehabilitation
6 facility employees, annuitants, and dependents, and to
7 reimburse the Department or its administrative service
8 organization for all expenses incurred in the administration of
9 benefits. No other State funds may be used for these purposes.

10 A local government employer's participation or desire to
11 participate in a program created under this subsection shall
12 not limit that employer's duty to bargain with the
13 representative of any collective bargaining unit of its
14 employees.

15 (j) Any rehabilitation facility within the State of
16 Illinois may apply to the Director to have its employees,
17 annuitants, and their eligible dependents provided group
18 health coverage under this Act on a non-insured basis. To
19 participate, a rehabilitation facility must agree to enroll all
20 of its employees and remit the entire cost of providing such
21 coverage for its employees, except that the rehabilitation
22 facility shall not be required to enroll those of its employees
23 who are covered spouses or dependents under this plan or
24 another group policy or plan providing health benefits as long
25 as (1) an appropriate official from the rehabilitation facility
26 attests that each employee not enrolled is a covered spouse or
27 dependent under this plan or another group policy or plan, and
28 (2) at least 85% of the employees are enrolled and the
29 rehabilitation facility remits the entire cost of providing
30 coverage to those employees. Employees of a participating
31 rehabilitation facility who are not enrolled due to coverage
32 under another group health policy or plan may enroll in the
33 event of a qualifying change in status, special enrollment,
34 special circumstance as defined by the Director, or during the
35 annual Benefit Choice Period. A participating rehabilitation
36 facility may also elect to cover its annuitants. Dependent

1 coverage shall be offered on an optional basis, with the costs
2 paid by the rehabilitation facility, its employees, or some
3 combination of the 2 as determined by the rehabilitation
4 facility. The rehabilitation facility shall be responsible for
5 timely collection and transmission of dependent premiums.

6 The Director shall annually determine quarterly rates of
7 payment, subject to the following constraints:

8 (1) In the first year of coverage, the rates shall be
9 equal to the amount normally charged to State employees for
10 elected optional coverages or for enrolled dependents
11 coverages or other contributory coverages on behalf of its
12 employees, adjusted for differences between State
13 employees and employees of the rehabilitation facility in
14 age, sex, geographic location or other relevant
15 demographic variables, plus an amount sufficient to pay for
16 the additional administrative costs of providing coverage
17 to employees of the rehabilitation facility and their
18 dependents.

19 (2) In subsequent years, a further adjustment shall be
20 made to reflect the actual prior years' claims experience
21 of the employees of the rehabilitation facility.

22 Monthly payments by the rehabilitation facility or its
23 employees for group health benefits shall be deposited in the
24 Local Government Health Insurance Reserve Fund.

25 (k) Any domestic violence shelter or service within the
26 State of Illinois may apply to the Director to have its
27 employees, annuitants, and their dependents provided group
28 health coverage under this Act on a non-insured basis. To
29 participate, a domestic violence shelter or service must agree
30 to enroll all of its employees and pay the entire cost of
31 providing such coverage for its employees. A participating
32 domestic violence shelter may also elect to cover its
33 annuitants. Dependent coverage shall be offered on an optional
34 basis, with employees, or some combination of the 2 as
35 determined by the domestic violence shelter or service. The
36 domestic violence shelter or service shall be responsible for

1 timely collection and transmission of dependent premiums.

2 The Director shall annually determine rates of payment,
3 subject to the following constraints:

4 (1) In the first year of coverage, the rates shall be
5 equal to the amount normally charged to State employees for
6 elected optional coverages or for enrolled dependents
7 coverages or other contributory coverages on behalf of its
8 employees, adjusted for differences between State
9 employees and employees of the domestic violence shelter or
10 service in age, sex, geographic location or other relevant
11 demographic variables, plus an amount sufficient to pay for
12 the additional administrative costs of providing coverage
13 to employees of the domestic violence shelter or service
14 and their dependents.

15 (2) In subsequent years, a further adjustment shall be
16 made to reflect the actual prior years' claims experience
17 of the employees of the domestic violence shelter or
18 service.

19 Monthly payments by the domestic violence shelter or
20 service or its employees for group health insurance shall be
21 deposited in the Local Government Health Insurance Reserve
22 Fund.

23 (1) A public community college or entity organized pursuant
24 to the Public Community College Act may apply to the Director
25 initially to have only annuitants not covered prior to July 1,
26 1992 by the district's health plan provided health coverage
27 under this Act on a non-insured basis. The community college
28 must execute a 2-year contract to participate in the Local
29 Government Health Plan. Any annuitant may enroll in the event
30 of a qualifying change in status, special enrollment, special
31 circumstance as defined by the Director, or during the annual
32 Benefit Choice Period.

33 The Director shall annually determine monthly rates of
34 payment subject to the following constraints: for those
35 community colleges with annuitants only enrolled, first year
36 rates shall be equal to the average cost to cover claims for a

1 State member adjusted for demographics, Medicare
2 participation, and other factors; and in the second year, a
3 further adjustment of rates shall be made to reflect the actual
4 first year's claims experience of the covered annuitants.

5 (l-5) The provisions of subsection (l) become inoperative
6 on July 1, 1999.

7 (m) The Director shall adopt any rules deemed necessary for
8 implementation of this amendatory Act of 1989 (Public Act
9 86-978).

10 (Source: P.A. 92-16, eff. 6-28-01; 93-839, eff. 7-30-04.)

11 (5 ILCS 375/15) (from Ch. 127, par. 535)

12 Sec. 15. Administration; rules; audit; review.

13 (a) The Director of Healthcare and Family Services (with
14 respect to State healthcare purchasing functions) and the
15 Director of Central Management Services (with respect to the
16 administration and management of employee health benefits
17 other than the performance of any State healthcare purchasing
18 functions and with respect to all benefits other than health
19 benefits) shall administer this Act and shall prescribe such
20 rules and regulations as are necessary to give full effect to
21 the purposes of this Act.

22 (b) These rules may fix reasonable standards for the group
23 life and group health programs and other benefit programs
24 offered under this Act, and for the contractors providing them.

25 (c) These rules shall specify that covered and optional
26 medical services of the program are services provided within
27 the scope of their licenses by practitioners in all categories
28 licensed under the Medical Practice Act of 1987 and shall
29 provide that all eligible persons be fully informed of this
30 specification.

31 (d) These rules shall establish eligibility requirements
32 for members and dependents as may be necessary to supplement or
33 clarify requirements contained in this Act.

34 (e) Each affected department of the State, the State
35 Universities Retirement System, the Teachers' Retirement

1 System, and each qualified local government, rehabilitation
2 facility, or domestic violence shelter or service, shall keep
3 such records, make such certifications, and furnish the
4 Director such information as may be necessary for the
5 administration of this Act, including information concerning
6 number and total amounts of payroll of employees of the
7 department who are paid from trust funds or federal funds.

8 (f) Each member, each community college benefit recipient
9 to whom this Act applies, and each TRS benefit recipient to
10 whom this Act applies shall furnish the Director, in such form
11 as may be required, any information that may be necessary to
12 enroll such member or benefit recipient and, if applicable, his
13 or her dependents or dependent beneficiaries under the programs
14 or plan, including such data as may be required to allow the
15 Director to accumulate statistics on data normally considered
16 in actuarial studies of employee groups. Information about
17 community college benefit recipients and community college
18 dependent beneficiaries shall be furnished through the State
19 Universities Retirement System. Information about TRS benefit
20 recipients and TRS dependent beneficiaries shall be furnished
21 through the Teachers' Retirement System.

22 (g) There shall be audits and reports on the programs
23 authorized and established by this Act prepared by the Director
24 with the assistance of a qualified, independent accounting
25 firm. The reports shall provide information on the experience,
26 and administrative effectiveness and adequacy of the program
27 including, when applicable, recommendations on up-grading of
28 benefits and improvement of the program.

29 (h) Any final order, decision or other determination made,
30 issued or executed by the Director under the provisions of this
31 Act whereby any contractor or person is aggrieved shall be
32 subject to review in accordance with the provisions of the
33 Administrative Review Law and all amendments and modifications
34 thereof, and the rules adopted pursuant thereto, shall apply to
35 and govern all proceedings for the judicial review of final
36 administrative decisions of the Director.

1 (Source: P.A. 90-497, eff. 8-18-97; 91-390, eff. 7-30-99.)

2 Section 9025. The Election Code is amended by changing
3 Sections 1A-15, 4-6.2, 5-16.2, and 6-50.2 as follows:

4 (10 ILCS 5/1A-15) (from Ch. 46, par. 1A-15)

5 Sec. 1A-15. On the request of the Department of Healthcare
6 and Family Services ~~Illinois Department of Public Aid~~, the
7 State Board of Elections shall provide the Department with
8 tapes, discs, other electronic data or compilations thereof
9 which only provide the name, address and, when available, the
10 Social Security number of registered voters for the purpose of
11 tracing absent parents and the collection of child support.
12 Such information shall be provided at reasonable cost, which
13 shall include the cost of duplication plus 15% for
14 administration. The confidentiality of all information
15 contained on such tapes, discs and other electronic data or
16 combination thereof shall be protected as provided in Section
17 11-9 of "The Illinois Public Aid Code".

18 (Source: P.A. 85-114.)

19 (10 ILCS 5/4-6.2) (from Ch. 46, par. 4-6.2)

20 Sec. 4-6.2. (a) The county clerk shall appoint all
21 municipal and township or road district clerks or their duly
22 authorized deputies as deputy registrars who may accept the
23 registration of all qualified residents of the State.

24 The county clerk shall appoint all precinct
25 committeepersons in the county as deputy registrars who may
26 accept the registration of any qualified resident of the State,
27 except during the 27 days preceding an election.

28 The election authority shall appoint as deputy registrars a
29 reasonable number of employees of the Secretary of State
30 located at driver's license examination stations and
31 designated to the election authority by the Secretary of State
32 who may accept the registration of any qualified residents of
33 the State at any such driver's license examination stations.

1 The appointment of employees of the Secretary of State as
2 deputy registrars shall be made in the manner provided in
3 Section 2-105 of the Illinois Vehicle Code.

4 The county clerk shall appoint each of the following named
5 persons as deputy registrars upon the written request of such
6 persons:

7 1. The chief librarian, or a qualified person
8 designated by the chief librarian, of any public library
9 situated within the election jurisdiction, who may accept
10 the registrations of any qualified resident of the State,
11 at such library.

12 2. The principal, or a qualified person designated by
13 the principal, of any high school, elementary school, or
14 vocational school situated within the election
15 jurisdiction, who may accept the registrations of any
16 qualified resident of the State, at such school. The county
17 clerk shall notify every principal and vice-principal of
18 each high school, elementary school, and vocational school
19 situated within the election jurisdiction of their
20 eligibility to serve as deputy registrars and offer
21 training courses for service as deputy registrars at
22 conveniently located facilities at least 4 months prior to
23 every election.

24 3. The president, or a qualified person designated by
25 the president, of any university, college, community
26 college, academy or other institution of learning situated
27 within the election jurisdiction, who may accept the
28 registrations of any resident of the State, at such
29 university, college, community college, academy or
30 institution.

31 4. A duly elected or appointed official of a bona fide
32 labor organization, or a reasonable number of qualified
33 members designated by such official, who may accept the
34 registrations of any qualified resident of the State.

35 5. A duly elected or appointed official of a bonafide
36 State civic organization, as defined and determined by rule

1 of the State Board of Elections, or qualified members
2 designated by such official, who may accept the
3 registration of any qualified resident of the State. In
4 determining the number of deputy registrars that shall be
5 appointed, the county clerk shall consider the population
6 of the jurisdiction, the size of the organization, the
7 geographic size of the jurisdiction, convenience for the
8 public, the existing number of deputy registrars in the
9 jurisdiction and their location, the registration
10 activities of the organization and the need to appoint
11 deputy registrars to assist and facilitate the
12 registration of non-English speaking individuals. In no
13 event shall a county clerk fix an arbitrary number
14 applicable to every civic organization requesting
15 appointment of its members as deputy registrars. The State
16 Board of Elections shall by rule provide for certification
17 of bonafide State civic organizations. Such appointments
18 shall be made for a period not to exceed 2 years,
19 terminating on the first business day of the month
20 following the month of the general election, and shall be
21 valid for all periods of voter registration as provided by
22 this Code during the terms of such appointments.

23 6. The Director of Healthcare and Family Services ~~the~~
24 ~~Illinois Department of Public Aid~~, or a reasonable number
25 of employees designated by the Director and located at
26 public aid offices, who may accept the registration of any
27 qualified resident of the county at any such public aid
28 office.

29 7. The Director of the Illinois Department of
30 Employment Security, or a reasonable number of employees
31 designated by the Director and located at unemployment
32 offices, who may accept the registration of any qualified
33 resident of the county at any such unemployment office.

34 8. The president of any corporation as defined by the
35 Business Corporation Act of 1983, or a reasonable number of
36 employees designated by such president, who may accept the

1 registrations of any qualified resident of the State.

2 If the request to be appointed as deputy registrar is
3 denied, the county clerk shall, within 10 days after the date
4 the request is submitted, provide the affected individual or
5 organization with written notice setting forth the specific
6 reasons or criteria relied upon to deny the request to be
7 appointed as deputy registrar.

8 The county clerk may appoint as many additional deputy
9 registrars as he considers necessary. The county clerk shall
10 appoint such additional deputy registrars in such manner that
11 the convenience of the public is served, giving due
12 consideration to both population concentration and area. Some
13 of the additional deputy registrars shall be selected so that
14 there are an equal number from each of the 2 major political
15 parties in the election jurisdiction. The county clerk, in
16 appointing an additional deputy registrar, shall make the
17 appointment from a list of applicants submitted by the Chairman
18 of the County Central Committee of the applicant's political
19 party. A Chairman of a County Central Committee shall submit a
20 list of applicants to the county clerk by November 30 of each
21 year. The county clerk may require a Chairman of a County
22 Central Committee to furnish a supplemental list of applicants.

23 Deputy registrars may accept registrations at any time
24 other than the 27 day period preceding an election. All persons
25 appointed as deputy registrars shall be registered voters
26 within the county and shall take and subscribe to the following
27 oath or affirmation:

28 "I do solemnly swear (or affirm, as the case may be) that I
29 will support the Constitution of the United States, and the
30 Constitution of the State of Illinois, and that I will
31 faithfully discharge the duties of the office of deputy
32 registrar to the best of my ability and that I will register no
33 person nor cause the registration of any person except upon his
34 personal application before me.

35

36 (Signature Deputy Registrar)"

1 This oath shall be administered by the county clerk, or by
2 one of his deputies, or by any person qualified to take
3 acknowledgement of deeds and shall immediately thereafter be
4 filed with the county clerk.

5 Appointments of deputy registrars under this Section,
6 except precinct committeemen, shall be for 2-year terms,
7 commencing on December 1 following the general election of each
8 even-numbered year; except that the terms of the initial
9 appointments shall be until December 1st following the next
10 general election. Appointments of precinct committeemen shall
11 be for 2-year terms commencing on the date of the county
12 convention following the general primary at which they were
13 elected. The county clerk shall issue a certificate of
14 appointment to each deputy registrar, and shall maintain in his
15 office for public inspection a list of the names of all
16 appointees.

17 (b) The county clerk shall be responsible for training all
18 deputy registrars appointed pursuant to subsection (a), at
19 times and locations reasonably convenient for both the county
20 clerk and such appointees. The county clerk shall be
21 responsible for certifying and supervising all deputy
22 registrars appointed pursuant to subsection (a). Deputy
23 registrars appointed under subsection (a) shall be subject to
24 removal for cause.

25 (c) Completed registration materials under the control of
26 deputy registrars, appointed pursuant to subsection (a), shall
27 be returned to the appointing election authority within 7 days,
28 except that completed registration materials received by the
29 deputy registrars during the period between the 35th and 28th
30 day preceding an election shall be returned by the deputy
31 registrars to the appointing election authority within 48 hours
32 after receipt thereof. The completed registration materials
33 received by the deputy registrars on the 28th day preceding an
34 election shall be returned by the deputy registrars within 24
35 hours after receipt thereof. Unused materials shall be returned
36 by deputy registrars appointed pursuant to paragraph 4 of

1 subsection (a), not later than the next working day following
2 the close of registration.

3 (d) The county clerk or board of election commissioners, as
4 the case may be, must provide any additional forms requested by
5 any deputy registrar regardless of the number of unaccounted
6 registration forms the deputy registrar may have in his or her
7 possession.

8 (e) No deputy registrar shall engage in any electioneering
9 or the promotion of any cause during the performance of his or
10 her duties.

11 (f) The county clerk shall not be criminally or civilly
12 liable for the acts or omissions of any deputy registrar. Such
13 deputy registrars shall not be deemed to be employees of the
14 county clerk.

15 (g) Completed registration materials returned by deputy
16 registrars for persons residing outside the county shall be
17 transmitted by the county clerk within 2 days after receipt to
18 the election authority of the person's election jurisdiction of
19 residence.

20 (Source: P.A. 93-574, eff. 8-21-03; 94-645, eff. 8-22-05.)

21 (10 ILCS 5/5-16.2) (from Ch. 46, par. 5-16.2)

22 Sec. 5-16.2. (a) The county clerk shall appoint all
23 municipal and township clerks or their duly authorized deputies
24 as deputy registrars who may accept the registration of all
25 qualified residents of the State.

26 The county clerk shall appoint all precinct
27 committeepersons in the county as deputy registrars who may
28 accept the registration of any qualified resident of the State,
29 except during the 27 days preceding an election.

30 The election authority shall appoint as deputy registrars a
31 reasonable number of employees of the Secretary of State
32 located at driver's license examination stations and
33 designated to the election authority by the Secretary of State
34 who may accept the registration of any qualified residents of
35 the State at any such driver's license examination stations.

1 The appointment of employees of the Secretary of State as
2 deputy registrars shall be made in the manner provided in
3 Section 2-105 of the Illinois Vehicle Code.

4 The county clerk shall appoint each of the following named
5 persons as deputy registrars upon the written request of such
6 persons:

7 1. The chief librarian, or a qualified person
8 designated by the chief librarian, of any public library
9 situated within the election jurisdiction, who may accept
10 the registrations of any qualified resident of the State,
11 at such library.

12 2. The principal, or a qualified person designated by
13 the principal, of any high school, elementary school, or
14 vocational school situated within the election
15 jurisdiction, who may accept the registrations of any
16 resident of the State, at such school. The county clerk
17 shall notify every principal and vice-principal of each
18 high school, elementary school, and vocational school
19 situated within the election jurisdiction of their
20 eligibility to serve as deputy registrars and offer
21 training courses for service as deputy registrars at
22 conveniently located facilities at least 4 months prior to
23 every election.

24 3. The president, or a qualified person designated by
25 the president, of any university, college, community
26 college, academy or other institution of learning situated
27 within the election jurisdiction, who may accept the
28 registrations of any resident of the State, at such
29 university, college, community college, academy or
30 institution.

31 4. A duly elected or appointed official of a bona fide
32 labor organization, or a reasonable number of qualified
33 members designated by such official, who may accept the
34 registrations of any qualified resident of the State.

35 5. A duly elected or appointed official of a bona fide
36 State civic organization, as defined and determined by rule

1 of the State Board of Elections, or qualified members
2 designated by such official, who may accept the
3 registration of any qualified resident of the State. In
4 determining the number of deputy registrars that shall be
5 appointed, the county clerk shall consider the population
6 of the jurisdiction, the size of the organization, the
7 geographic size of the jurisdiction, convenience for the
8 public, the existing number of deputy registrars in the
9 jurisdiction and their location, the registration
10 activities of the organization and the need to appoint
11 deputy registrars to assist and facilitate the
12 registration of non-English speaking individuals. In no
13 event shall a county clerk fix an arbitrary number
14 applicable to every civic organization requesting
15 appointment of its members as deputy registrars. The State
16 Board of Elections shall by rule provide for certification
17 of bona fide State civic organizations. Such appointments
18 shall be made for a period not to exceed 2 years,
19 terminating on the first business day of the month
20 following the month of the general election, and shall be
21 valid for all periods of voter registration as provided by
22 this Code during the terms of such appointments.

23 6. The Director of Healthcare and Family Services ~~the~~
24 ~~Illinois Department of Public Aid~~, or a reasonable number
25 of employees designated by the Director and located at
26 public aid offices, who may accept the registration of any
27 qualified resident of the county at any such public aid
28 office.

29 7. The Director of the Illinois Department of
30 Employment Security, or a reasonable number of employees
31 designated by the Director and located at unemployment
32 offices, who may accept the registration of any qualified
33 resident of the county at any such unemployment office.

34 8. The president of any corporation as defined by the
35 Business Corporation Act of 1983, or a reasonable number of
36 employees designated by such president, who may accept the

1 registrations of any qualified resident of the State.

2 If the request to be appointed as deputy registrar is
3 denied, the county clerk shall, within 10 days after the date
4 the request is submitted, provide the affected individual or
5 organization with written notice setting forth the specific
6 reasons or criteria relied upon to deny the request to be
7 appointed as deputy registrar.

8 The county clerk may appoint as many additional deputy
9 registrars as he considers necessary. The county clerk shall
10 appoint such additional deputy registrars in such manner that
11 the convenience of the public is served, giving due
12 consideration to both population concentration and area. Some
13 of the additional deputy registrars shall be selected so that
14 there are an equal number from each of the 2 major political
15 parties in the election jurisdiction. The county clerk, in
16 appointing an additional deputy registrar, shall make the
17 appointment from a list of applicants submitted by the Chairman
18 of the County Central Committee of the applicant's political
19 party. A Chairman of a County Central Committee shall submit a
20 list of applicants to the county clerk by November 30 of each
21 year. The county clerk may require a Chairman of a County
22 Central Committee to furnish a supplemental list of applicants.

23 Deputy registrars may accept registrations at any time
24 other than the 27 day period preceding an election. All persons
25 appointed as deputy registrars shall be registered voters
26 within the county and shall take and subscribe to the following
27 oath or affirmation:

28 "I do solemnly swear (or affirm, as the case may be) that I
29 will support the Constitution of the United States, and the
30 Constitution of the State of Illinois, and that I will
31 faithfully discharge the duties of the office of deputy
32 registrar to the best of my ability and that I will register no
33 person nor cause the registration of any person except upon his
34 personal application before me.

35

36 (Signature of Deputy Registrar)"

1 This oath shall be administered by the county clerk, or by
2 one of his deputies, or by any person qualified to take
3 acknowledgement of deeds and shall immediately thereafter be
4 filed with the county clerk.

5 Appointments of deputy registrars under this Section,
6 except precinct committeemen, shall be for 2-year terms,
7 commencing on December 1 following the general election of each
8 even-numbered year, except that the terms of the initial
9 appointments shall be until December 1st following the next
10 general election. Appointments of precinct committeemen shall
11 be for 2-year terms commencing on the date of the county
12 convention following the general primary at which they were
13 elected. The county clerk shall issue a certificate of
14 appointment to each deputy registrar, and shall maintain in his
15 office for public inspection a list of the names of all
16 appointees.

17 (b) The county clerk shall be responsible for training all
18 deputy registrars appointed pursuant to subsection (a), at
19 times and locations reasonably convenient for both the county
20 clerk and such appointees. The county clerk shall be
21 responsible for certifying and supervising all deputy
22 registrars appointed pursuant to subsection (a). Deputy
23 registrars appointed under subsection (a) shall be subject to
24 removal for cause.

25 (c) Completed registration materials under the control of
26 deputy registrars, appointed pursuant to subsection (a), shall
27 be returned to the appointing election authority within 7 days,
28 except that completed registration materials received by the
29 deputy registrars during the period between the 35th and 28th
30 day preceding an election shall be returned by the deputy
31 registrars to the appointing election authority within 48 hours
32 after receipt thereof. The completed registration materials
33 received by the deputy registrars on the 28th day preceding an
34 election shall be returned by the deputy registrars within 24
35 hours after receipt thereof. Unused materials shall be returned
36 by deputy registrars appointed pursuant to paragraph 4 of

1 subsection (a), not later than the next working day following
2 the close of registration.

3 (d) The county clerk or board of election commissioners, as
4 the case may be, must provide any additional forms requested by
5 any deputy registrar regardless of the number of unaccounted
6 registration forms the deputy registrar may have in his or her
7 possession.

8 (e) No deputy registrar shall engage in any electioneering
9 or the promotion of any cause during the performance of his or
10 her duties.

11 (f) The county clerk shall not be criminally or civilly
12 liable for the acts or omissions of any deputy registrar. Such
13 deputy registers shall not be deemed to be employees of the
14 county clerk.

15 (g) Completed registration materials returned by deputy
16 registrars for persons residing outside the county shall be
17 transmitted by the county clerk within 2 days after receipt to
18 the election authority of the person's election jurisdiction of
19 residence.

20 (Source: P.A. 93-574, eff. 8-21-03; 94-645, eff. 8-22-05.)

21 (10 ILCS 5/6-50.2) (from Ch. 46, par. 6-50.2)

22 Sec. 6-50.2. (a) The board of election commissioners shall
23 appoint all precinct committeepersons in the election
24 jurisdiction as deputy registrars who may accept the
25 registration of any qualified resident of the State, except
26 during the 27 days preceding an election.

27 The election authority shall appoint as deputy registrars a
28 reasonable number of employees of the Secretary of State
29 located at driver's license examination stations and
30 designated to the election authority by the Secretary of State
31 who may accept the registration of any qualified residents of
32 the State at any such driver's license examination stations.
33 The appointment of employees of the Secretary of State as
34 deputy registrars shall be made in the manner provided in
35 Section 2-105 of the Illinois Vehicle Code.

1 The board of election commissioners shall appoint each of
2 the following named persons as deputy registrars upon the
3 written request of such persons:

4 1. The chief librarian, or a qualified person
5 designated by the chief librarian, of any public library
6 situated within the election jurisdiction, who may accept
7 the registrations of any qualified resident of the State,
8 at such library.

9 2. The principal, or a qualified person designated by
10 the principal, of any high school, elementary school, or
11 vocational school situated within the election
12 jurisdiction, who may accept the registrations of any
13 resident of the State, at such school. The board of
14 election commissioners shall notify every principal and
15 vice-principal of each high school, elementary school, and
16 vocational school situated in the election jurisdiction of
17 their eligibility to serve as deputy registrars and offer
18 training courses for service as deputy registrars at
19 conveniently located facilities at least 4 months prior to
20 every election.

21 3. The president, or a qualified person designated by
22 the president, of any university, college, community
23 college, academy or other institution of learning situated
24 within the State, who may accept the registrations of any
25 resident of the election jurisdiction, at such university,
26 college, community college, academy or institution.

27 4. A duly elected or appointed official of a bona fide
28 labor organization, or a reasonable number of qualified
29 members designated by such official, who may accept the
30 registrations of any qualified resident of the State.

31 5. A duly elected or appointed official of a bona fide
32 State civic organization, as defined and determined by rule
33 of the State Board of Elections, or qualified members
34 designated by such official, who may accept the
35 registration of any qualified resident of the State. In
36 determining the number of deputy registrars that shall be

1 appointed, the board of election commissioners shall
2 consider the population of the jurisdiction, the size of
3 the organization, the geographic size of the jurisdiction,
4 convenience for the public, the existing number of deputy
5 registrars in the jurisdiction and their location, the
6 registration activities of the organization and the need to
7 appoint deputy registrars to assist and facilitate the
8 registration of non-English speaking individuals. In no
9 event shall a board of election commissioners fix an
10 arbitrary number applicable to every civic organization
11 requesting appointment of its members as deputy
12 registrars. The State Board of Elections shall by rule
13 provide for certification of bona fide State civic
14 organizations. Such appointments shall be made for a period
15 not to exceed 2 years, terminating on the first business
16 day of the month following the month of the general
17 election, and shall be valid for all periods of voter
18 registration as provided by this Code during the terms of
19 such appointments.

20 6. The Director of Healthcare and Family Services ~~the~~
21 ~~Illinois Department of Public Aid~~, or a reasonable number
22 of employees designated by the Director and located at
23 public aid offices, who may accept the registration of any
24 qualified resident of the election jurisdiction at any such
25 public aid office.

26 7. The Director of the Illinois Department of
27 Employment Security, or a reasonable number of employees
28 designated by the Director and located at unemployment
29 offices, who may accept the registration of any qualified
30 resident of the election jurisdiction at any such
31 unemployment office. If the request to be appointed as
32 deputy registrar is denied, the board of election
33 commissioners shall, within 10 days after the date the
34 request is submitted, provide the affected individual or
35 organization with written notice setting forth the
36 specific reasons or criteria relied upon to deny the

1 request to be appointed as deputy registrar.

2 8. The president of any corporation, as defined by the
3 Business Corporation Act of 1983, or a reasonable number of
4 employees designated by such president, who may accept the
5 registrations of any qualified resident of the State.

6 The board of election commissioners may appoint as many
7 additional deputy registrars as it considers necessary. The
8 board of election commissioners shall appoint such additional
9 deputy registrars in such manner that the convenience of the
10 public is served, giving due consideration to both population
11 concentration and area. Some of the additional deputy
12 registrars shall be selected so that there are an equal number
13 from each of the 2 major political parties in the election
14 jurisdiction. The board of election commissioners, in
15 appointing an additional deputy registrar, shall make the
16 appointment from a list of applicants submitted by the Chairman
17 of the County Central Committee of the applicant's political
18 party. A Chairman of a County Central Committee shall submit a
19 list of applicants to the board by November 30 of each year.
20 The board may require a Chairman of a County Central Committee
21 to furnish a supplemental list of applicants.

22 Deputy registrars may accept registrations at any time
23 other than the 27 day period preceding an election. All persons
24 appointed as deputy registrars shall be registered voters
25 within the election jurisdiction and shall take and subscribe
26 to the following oath or affirmation:

27 "I do solemnly swear (or affirm, as the case may be) that I
28 will support the Constitution of the United States, and the
29 Constitution of the State of Illinois, and that I will
30 faithfully discharge the duties of the office of registration
31 officer to the best of my ability and that I will register no
32 person nor cause the registration of any person except upon his
33 personal application before me.

34

35 (Signature of Registration Officer)"

36 This oath shall be administered and certified to by one of

1 the commissioners or by the executive director or by some
2 person designated by the board of election commissioners, and
3 shall immediately thereafter be filed with the board of
4 election commissioners. The members of the board of election
5 commissioners and all persons authorized by them under the
6 provisions of this Article to take registrations, after
7 themselves taking and subscribing to the above oath, are
8 authorized to take or administer such oaths and execute such
9 affidavits as are required by this Article.

10 Appointments of deputy registrars under this Section,
11 except precinct committeemen, shall be for 2-year terms,
12 commencing on December 1 following the general election of each
13 even-numbered year, except that the terms of the initial
14 appointments shall be until December 1st following the next
15 general election. Appointments of precinct committeemen shall
16 be for 2-year terms commencing on the date of the county
17 convention following the general primary at which they were
18 elected. The county clerk shall issue a certificate of
19 appointment to each deputy registrar, and shall maintain in his
20 office for public inspection a list of the names of all
21 appointees.

22 (b) The board of election commissioners shall be
23 responsible for training all deputy registrars appointed
24 pursuant to subsection (a), at times and locations reasonably
25 convenient for both the board of election commissioners and
26 such appointees. The board of election commissioners shall be
27 responsible for certifying and supervising all deputy
28 registrars appointed pursuant to subsection (a). Deputy
29 registrars appointed under subsection (a) shall be subject to
30 removal for cause.

31 (c) Completed registration materials under the control of
32 deputy registrars appointed pursuant to subsection (a) shall be
33 returned to the appointing election authority within 7 days,
34 except that completed registration materials received by the
35 deputy registrars during the period between the 35th and 28th
36 day preceding an election shall be returned by the deputy

1 registrars to the appointing election authority within 48 hours
2 after receipt thereof. The completed registration materials
3 received by the deputy registrars on the 28th day preceding an
4 election shall be returned by the deputy registrars within 24
5 hours after receipt thereof. Unused materials shall be returned
6 by deputy registrars appointed pursuant to paragraph 4 of
7 subsection (a), not later than the next working day following
8 the close of registration.

9 (d) The county clerk or board of election commissioners, as
10 the case may be, must provide any additional forms requested by
11 any deputy registrar regardless of the number of unaccounted
12 registration forms the deputy registrar may have in his or her
13 possession.

14 (e) No deputy registrar shall engage in any electioneering
15 or the promotion of any cause during the performance of his or
16 her duties.

17 (f) The board of election commissioners shall not be
18 criminally or civilly liable for the acts or omissions of any
19 deputy registrar. Such deputy registrars shall not be deemed to
20 be employees of the board of election commissioners.

21 (g) Completed registration materials returned by deputy
22 registrars for persons residing outside the election
23 jurisdiction shall be transmitted by the board of election
24 commissioners within 2 days after receipt to the election
25 authority of the person's election jurisdiction of residence.

26 (Source: P.A. 93-574, eff. 8-21-03; 94-645, eff. 8-22-05.)

27 Section 9030. The State Comptroller Act is amended by
28 changing Section 10.05a as follows:

29 (15 ILCS 405/10.05a) (from Ch. 15, par. 210.05a)

30 Sec. 10.05a. Deductions from Warrants and Payments for
31 Satisfaction of Past Due Child Support. At the direction of the
32 Department of Healthcare and Family Services ~~Public Aid~~, the
33 Comptroller shall deduct from a warrant or other payment
34 described in Section 10.05 of this Act, in accordance with the

1 procedures provided therein, and pay over to the Department or
2 the State Disbursement Unit established under Section 10-26 of
3 the Illinois Public Aid Code, at the direction of the
4 Department, that amount certified as necessary to satisfy, in
5 whole or in part, past due support owed by a person on account
6 of support action being taken by the Department under Article X
7 of the Illinois Public Aid Code, whether or not such support is
8 owed to the State. Such deduction shall have priority over any
9 garnishment except that for payment of state or federal taxes.
10 In the case of joint payees, the Comptroller shall deduct and
11 pay over to the Department or the State Disbursement Unit, as
12 directed by the Department, the entire amount certified. The
13 Comptroller shall provide the Department with the address to
14 which the warrant or other payment was to be mailed and the
15 social security number of each person from whom a deduction is
16 made pursuant to this Section.

17 (Source: P.A. 91-212, eff. 7-20-99; 91-712, eff. 7-1-00.)

18 Section 9035. The Civil Administrative Code of Illinois is
19 amended by changing Sections 1-5, 5-15, 5-20, 5-165, 5-230, and
20 5-395 as follows:

21 (20 ILCS 5/1-5)

22 Sec. 1-5. Articles. The Civil Administrative Code of
23 Illinois consists of the following Articles:

24 Article 1. General Provisions (20 ILCS 5/1-1 and
25 following).

26 Article 5. Departments of State Government Law (20 ILCS
27 5/5-1 and following).

28 Article 50. State Budget Law (15 ILCS 20/).

29 Article 110. Department on Aging Law (20 ILCS 110/).

30 Article 205. Department of Agriculture Law (20 ILCS 205/).

31 Article 250. State Fair Grounds Title Law (5 ILCS 620/).

32 Article 310. Department of Human Services (Alcoholism and
33 Substance Abuse) Law (20 ILCS 310/).

34 Article 405. Department of Central Management Services Law

1 (20 ILCS 405/).

2 Article 510. Department of Children and Family Services
3 Powers Law (20 ILCS 510/).

4 Article 605. Department of Commerce and Economic
5 Opportunity Law (20 ILCS 605/).

6 Article 805. Department of Natural Resources
7 (Conservation) Law (20 ILCS 805/).

8 Article 1005. Department of Employment Security Law (20
9 ILCS 1005/).

10 Article 1405. Department of Insurance Law (20 ILCS 1405/).

11 Article 1505. Department of Labor Law (20 ILCS 1505/).

12 Article 1710. Department of Human Services (Mental Health
13 and Developmental Disabilities) Law (20 ILCS 1710/).

14 Article 1905. Department of Natural Resources (Mines and
15 Minerals) Law (20 ILCS 1905/).

16 Article 2005. Department of Nuclear Safety Law (20 ILCS
17 2005/).

18 Article 2105. Department of Professional Regulation Law
19 (20 ILCS 2105/).

20 Article 2205. Department of Healthcare and Family Services
21 ~~Public Aid~~ Law (20 ILCS 2205/).

22 Article 2310. Department of Public Health Powers and Duties
23 Law (20 ILCS 2310/).

24 Article 2505. Department of Revenue Law (20 ILCS 2505/).

25 Article 2510. Certified Audit Program Law (20 ILCS 2510/).

26 Article 2605. Department of State Police Law (20 ILCS
27 2605/).

28 Article 2705. Department of Transportation Law (20 ILCS
29 2705/).

30 Article 3000. University of Illinois Exercise of Functions
31 and Duties Law (110 ILCS 355/).

32 (Source: P.A. 92-16, eff. 6-28-01; 92-651, eff. 7-11-02; 93-25,
33 eff. 6-20-03.)

34 (20 ILCS 5/5-15) (was 20 ILCS 5/3)

35 Sec. 5-15. Departments of State government. The

1 Departments of State government are created as follows:

2 The Department on Aging.

3 The Department of Agriculture.

4 The Department of Central Management Services.

5 The Department of Children and Family Services.

6 The Department of Commerce and Economic Opportunity.

7 The Department of Corrections.

8 The Department of Employment Security.

9 The Emergency Management Agency.

10 The Department of Financial Institutions.

11 The Department of Healthcare and Family Services.

12 The Department of Human Rights.

13 The Department of Human Services.

14 The Department of Insurance.

15 The Department of Labor.

16 The Department of the Lottery.

17 The Department of Natural Resources.

18 The Department of Professional Regulation.

19 ~~The Department of Public Aid.~~

20 The Department of Public Health.

21 The Department of Revenue.

22 The Department of State Police.

23 The Department of Transportation.

24 The Department of Veterans' Affairs.

25 (Source: P.A. 93-25, eff. 6-20-03; 93-1029, eff. 8-25-04.)

26 (20 ILCS 5/5-20) (was 20 ILCS 5/4)

27 Sec. 5-20. Heads of departments. Each department shall have
28 an officer as its head who shall be known as director or
29 secretary and who shall, subject to the provisions of the Civil
30 Administrative Code of Illinois, execute the powers and
31 discharge the duties vested by law in his or her respective
32 department.

33 The following officers are hereby created:

34 Director of Aging, for the Department on Aging.

35 Director of Agriculture, for the Department of

1 Agriculture.

2 Director of Central Management Services, for the
3 Department of Central Management Services.

4 Director of Children and Family Services, for the
5 Department of Children and Family Services.

6 Director of Commerce and Economic Opportunity, for the
7 Department of Commerce and Economic Opportunity.

8 Director of Corrections, for the Department of
9 Corrections.

10 Director of Emergency Management Agency, for the Emergency
11 Management Agency.

12 Director of Employment Security, for the Department of
13 Employment Security.

14 Director of Financial Institutions, for the Department of
15 Financial Institutions.

16 Director of Healthcare and Family Services, for the
17 Department of Healthcare and Family Services.

18 Director of Human Rights, for the Department of Human
19 Rights.

20 Secretary of Human Services, for the Department of Human
21 Services.

22 Director of Insurance, for the Department of Insurance.

23 Director of Labor, for the Department of Labor.

24 Director of the Lottery, for the Department of the Lottery.

25 Director of Natural Resources, for the Department of
26 Natural Resources.

27 Director of Professional Regulation, for the Department of
28 Professional Regulation.

29 ~~Director of Public Aid, for the Department of Public Aid.~~

30 Director of Public Health, for the Department of Public
31 Health.

32 Director of Revenue, for the Department of Revenue.

33 Director of State Police, for the Department of State
34 Police.

35 Secretary of Transportation, for the Department of
36 Transportation.

1 Director of Veterans' Affairs, for the Department of
2 Veterans' Affairs.

3 (Source: P.A. 93-25, eff. 6-20-03; 93-1029, eff. 8-25-04.)

4 (20 ILCS 5/5-165) (was 20 ILCS 5/5.13c)

5 Sec. 5-165. In the Department of Healthcare and Family
6 Services ~~Public Aid~~. Assistant Director of Healthcare and
7 Family Services ~~Public Aid~~.

8 (Source: P.A. 91-239, eff. 1-1-00.)

9 (20 ILCS 5/5-230) (was 20 ILCS 5/7.09)

10 Sec. 5-230. Director and Assistant Director of Healthcare
11 and Family Services ~~Public Aid~~. The Director of Healthcare and
12 Family Services ~~Public Aid~~ shall (1) have substantial
13 experience in responsible positions requiring skill in
14 administration and fiscal management and (2) be actively
15 interested in the development of effective programs for the
16 alleviation of poverty and the reduction of dependency and
17 social maladjustment.

18 The Assistant Director of Healthcare and Family Services
19 ~~Public Aid~~ shall have the same general qualifications as those
20 set forth for the Director of Healthcare and Family Services
21 ~~Public Aid~~ in clauses (1) and (2) of the preceding paragraph.

22 (Source: P.A. 91-239, eff. 1-1-00.)

23 (20 ILCS 5/5-395) (was 20 ILCS 5/9.17)

24 Sec. 5-395. In the Department of Healthcare and Family
25 Services ~~Public Aid~~. The Director of Healthcare and Family
26 Services ~~Public Aid~~ shall receive an annual salary as set by
27 the Governor from time to time or as set by the Compensation
28 Review Board, whichever is greater.

29 The Assistant Director of Healthcare and Family Services
30 ~~Public Aid~~ shall receive an annual salary as set by the
31 Governor from time to time or as set by the Compensation Review
32 Board, whichever is greater.

33 (Source: P.A. 91-25, eff. 6-9-99; 91-239, eff. 1-1-00; 92-16,

1 eff. 6-28-01.)

2 Section 9040. The Illinois Welfare and Rehabilitation
3 Services Planning Act is amended by changing Section 4 as
4 follows:

5 (20 ILCS 10/4) (from Ch. 127, par. 954)

6 Sec. 4. (a) Plans required by Section 3 shall be prepared
7 by and submitted on behalf of the following State agencies, and
8 may be prepared and submitted by another State Agency
9 designated by the Governor:

10 (1) the Department of Children and Family Services;

11 (2) the Department of Healthcare and Family Services ~~Public~~
12 ~~Aid~~;

13 (3) the Department of Corrections;

14 (4) the Department of Human Services;

15 (5) (blank);

16 (6) the Department on ~~of~~ Aging;

17 (7) the Department of Public Health;

18 (8) the Department of Employment Security.

19 (b) The plans required by Section 3 of this Act shall be
20 co-ordinated with the plan adopted by the Department of Human
21 Services under Sections 48 through 52 of the Mental Health and
22 Developmental Disabilities Administrative Act and any plan
23 adopted, re-adopted or amended by the Department of Human
24 Services under those Sections shall be coordinated with plans
25 required under Section 3 of this Act.

26 (Source: P.A. 89-507, eff. 7-1-97; revised 8-30-05.)

27 Section 9045. The Illinois Act on the Aging is amended by
28 changing Sections 4.02, 4.04a, and 4.06 as follows:

29 (20 ILCS 105/4.02) (from Ch. 23, par. 6104.02)

30 Sec. 4.02. The Department shall establish a program of
31 services to prevent unnecessary institutionalization of
32 persons age 60 and older in need of long term care or who are

1 established as persons who suffer from Alzheimer's disease or a
2 related disorder under the Alzheimer's Disease Assistance Act,
3 thereby enabling them to remain in their own homes or in other
4 living arrangements. Such preventive services, which may be
5 coordinated with other programs for the aged and monitored by
6 area agencies on aging in cooperation with the Department, may
7 include, but are not limited to, any or all of the following:

8 (a) home health services;

9 (b) home nursing services;

10 (c) homemaker services;

11 (d) chore and housekeeping services;

12 (e) day care services;

13 (f) home-delivered meals;

14 (g) education in self-care;

15 (h) personal care services;

16 (i) adult day health services;

17 (j) habilitation services;

18 (k) respite care;

19 (k-5) community reintegration services;

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

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

25 The Department shall establish eligibility standards for
26 such services taking into consideration the unique economic and
27 social needs of the target population for whom they are to be
28 provided. Such eligibility standards shall be based on the
29 recipient's ability to pay for services; provided, however,
30 that in determining the amount and nature of services for which
31 a person may qualify, consideration shall not be given to the
32 value of cash, property or other assets held in the name of the
33 person's spouse pursuant to a written agreement dividing
34 marital property into equal but separate shares or pursuant to
35 a transfer of the person's interest in a home to his spouse,
36 provided that the spouse's share of the marital property is not

1 made available to the person seeking such services.

2 Beginning July 1, 2002, the Department shall require as a
3 condition of eligibility that all financially eligible
4 applicants and recipients apply for medical assistance under
5 Article V of the Illinois Public Aid Code in accordance with
6 rules promulgated by the Department.

7 The Department shall, in conjunction with the Department of
8 Public Aid (now Department of Healthcare and Family Services),
9 seek appropriate amendments under Sections 1915 and 1924 of the
10 Social Security Act. The purpose of the amendments shall be to
11 extend eligibility for home and community based services under
12 Sections 1915 and 1924 of the Social Security Act to persons
13 who transfer to or for the benefit of a spouse those amounts of
14 income and resources allowed under Section 1924 of the Social
15 Security Act. Subject to the approval of such amendments, the
16 Department shall extend the provisions of Section 5-4 of the
17 Illinois Public Aid Code to persons who, but for the provision
18 of home or community-based services, would require the level of
19 care provided in an institution, as is provided for in federal
20 law. Those persons no longer found to be eligible for receiving
21 noninstitutional services due to changes in the eligibility
22 criteria shall be given 60 days notice prior to actual
23 termination. Those persons receiving notice of termination may
24 contact the Department and request the determination be
25 appealed at any time during the 60 day notice period. With the
26 exception of the lengthened notice and time frame for the
27 appeal request, the appeal process shall follow the normal
28 procedure. In addition, each person affected regardless of the
29 circumstances for discontinued eligibility shall be given
30 notice and the opportunity to purchase the necessary services
31 through the Community Care Program. If the individual does not
32 elect to purchase services, the Department shall advise the
33 individual of alternative services. The target population
34 identified for the purposes of this Section are persons age 60
35 and older with an identified service need. Priority shall be
36 given to those who are at imminent risk of

1 institutionalization. The services shall be provided to
2 eligible persons age 60 and older to the extent that the cost
3 of the services together with the other personal maintenance
4 expenses of the persons are reasonably related to the standards
5 established for care in a group facility appropriate to the
6 person's condition. These non-institutional services, pilot
7 projects or experimental facilities may be provided as part of
8 or in addition to those authorized by federal law or those
9 funded and administered by the Department of Human Services.
10 The Departments of Human Services, Healthcare and Family
11 Services ~~Public Aid~~, Public Health, Veterans' Affairs, and
12 Commerce and Economic Opportunity and other appropriate
13 agencies of State, federal and local governments shall
14 cooperate with the Department on Aging in the establishment and
15 development of the non-institutional services. The Department
16 shall require an annual audit from all chore/housekeeping and
17 homemaker vendors contracting with the Department under this
18 Section. The annual audit shall assure that each audited
19 vendor's procedures are in compliance with Department's
20 financial reporting guidelines requiring an administrative and
21 employee wage and benefits cost split as defined in
22 administrative rules. The audit is a public record under the
23 Freedom of Information Act. The Department shall execute,
24 relative to the nursing home prescreening project, written
25 inter-agency agreements with the Department of Human Services
26 and the Department of Healthcare and Family Services ~~Public~~
27 ~~Aid~~, to effect the following: (1) intake procedures and common
28 eligibility criteria for those persons who are receiving
29 non-institutional services; and (2) the establishment and
30 development of non-institutional services in areas of the State
31 where they are not currently available or are undeveloped. On
32 and after July 1, 1996, all nursing home prescreenings for
33 individuals 60 years of age or older shall be conducted by the
34 Department.

35 As part of the Department on Aging's routine training of
36 case managers and case manager supervisors, the Department may

1 include information on family futures planning for persons who
2 are age 60 or older and who are caregivers of their adult
3 children with developmental disabilities. The content of the
4 training shall be at the Department's discretion.

5 The Department is authorized to establish a system of
6 recipient copayment for services provided under this Section,
7 such copayment to be based upon the recipient's ability to pay
8 but in no case to exceed the actual cost of the services
9 provided. Additionally, any portion of a person's income which
10 is equal to or less than the federal poverty standard shall not
11 be considered by the Department in determining the copayment.
12 The level of such copayment shall be adjusted whenever
13 necessary to reflect any change in the officially designated
14 federal poverty standard.

15 The Department, or the Department's authorized
16 representative, shall recover the amount of moneys expended for
17 services provided to or in behalf of a person under this
18 Section by a claim against the person's estate or against the
19 estate of the person's surviving spouse, but no recovery may be
20 had until after the death of the surviving spouse, if any, and
21 then only at such time when there is no surviving child who is
22 under age 21, blind, or permanently and totally disabled. This
23 paragraph, however, shall not bar recovery, at the death of the
24 person, of moneys for services provided to the person or in
25 behalf of the person under this Section to which the person was
26 not entitled; provided that such recovery shall not be enforced
27 against any real estate while it is occupied as a homestead by
28 the surviving spouse or other dependent, if no claims by other
29 creditors have been filed against the estate, or, if such
30 claims have been filed, they remain dormant for failure of
31 prosecution or failure of the claimant to compel administration
32 of the estate for the purpose of payment. This paragraph shall
33 not bar recovery from the estate of a spouse, under Sections
34 1915 and 1924 of the Social Security Act and Section 5-4 of the
35 Illinois Public Aid Code, who precedes a person receiving
36 services under this Section in death. All moneys for services

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

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

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

35 The Department is required to develop a system to ensure
36 that persons working as homemakers and chore housekeepers

1 receive increases in their wages when the federal minimum wage
2 is increased by requiring vendors to certify that they are
3 meeting the federal minimum wage statute for homemakers and
4 chore housekeepers. An employer that cannot ensure that the
5 minimum wage increase is being given to homemakers and chore
6 housekeepers shall be denied any increase in reimbursement
7 costs.

8 The Community Care Program Advisory Committee is created in
9 the Department on Aging. The Director shall appoint individuals
10 to serve in the Committee, who shall serve at their own
11 expense. Members of the Committee must abide by all applicable
12 ethics laws. The Committee shall advise the Department on
13 issues related to the Department's program of services to
14 prevent unnecessary institutionalization. The Committee shall
15 meet on a bi-monthly basis and shall serve to identify and
16 advise the Department on present and potential issues affecting
17 the service delivery network, the program's clients, and the
18 Department and to recommend solution strategies. Persons
19 appointed to the Committee shall be appointed on, but not
20 limited to, their own and their agency's experience with the
21 program, geographic representation, and willingness to serve.
22 The Committee shall include, but not be limited to,
23 representatives from the following agencies and organizations:

- 24 (a) at least 4 adult day service representatives;
- 25 (b) at least 4 case coordination unit representatives;
- 26 (c) at least 4 representatives from in-home direct care
27 service agencies;
- 28 (d) at least 2 representatives of statewide trade or
29 labor unions that represent in-home direct care service
30 staff;
- 31 (e) at least 2 representatives of Area Agencies on
32 Aging;
- 33 (f) at least 2 non-provider representatives from a
34 policy, advocacy, research, or other service organization;
- 35 (g) at least 2 representatives from a statewide
36 membership organization for senior citizens; and

1 (h) at least 2 citizen members 60 years of age or
2 older.

3 Nominations may be presented from any agency or State
4 association with interest in the program. The Director, or his
5 or her designee, shall serve as the permanent co-chair of the
6 advisory committee. One other co-chair shall be nominated and
7 approved by the members of the committee on an annual basis.
8 Committee members' terms of appointment shall be for 4 years
9 with one-quarter of the appointees' terms expiring each year.
10 At no time may a member serve more than one consecutive term in
11 any capacity on the committee. The Department shall fill
12 vacancies that have a remaining term of over one year, and this
13 replacement shall occur through the annual replacement of
14 expiring terms. The Director shall designate Department staff
15 to provide technical assistance and staff support to the
16 committee. Department representation shall not constitute
17 membership of the committee. All Committee papers, issues,
18 recommendations, reports, and meeting memoranda are advisory
19 only. The Director, or his or her designee, shall make a
20 written report, as requested by the Committee, regarding issues
21 before the Committee.

22 The Department on Aging and the Department of Human
23 Services shall cooperate in the development and submission of
24 an annual report on programs and services provided under this
25 Section. Such joint report shall be filed with the Governor and
26 the General Assembly on or before September 30 each year.

27 The requirement for reporting to the General Assembly shall
28 be satisfied by filing copies of the report with the Speaker,
29 the Minority Leader and the Clerk of the House of
30 Representatives and the President, the Minority Leader and the
31 Secretary of the Senate and the Legislative Research Unit, as
32 required by Section 3.1 of the General Assembly Organization
33 Act and filing such additional copies with the State Government
34 Report Distribution Center for the General Assembly as is
35 required under paragraph (t) of Section 7 of the State Library
36 Act.

1 Those persons previously found eligible for receiving
2 non-institutional services whose services were discontinued
3 under the Emergency Budget Act of Fiscal Year 1992, and who do
4 not meet the eligibility standards in effect on or after July
5 1, 1992, shall remain ineligible on and after July 1, 1992.
6 Those persons previously not required to cost-share and who
7 were required to cost-share effective March 1, 1992, shall
8 continue to meet cost-share requirements on and after July 1,
9 1992. Beginning July 1, 1992, all clients will be required to
10 meet eligibility, cost-share, and other requirements and will
11 have services discontinued or altered when they fail to meet
12 these requirements.

13 (Source: P.A. 93-85, eff. 1-1-04; 93-902, eff. 8-10-04; 94-48,
14 eff. 7-1-05; 94-269, eff. 7-19-05; 94-336, eff. 7-26-05;
15 revised 8-19-05.)

16 (20 ILCS 105/4.04a)

17 Sec. 4.04a. Illinois Long-Term Care Council.

18 (a) Purpose. The purpose of this Section is to ensure that
19 consumers over the age of 60 residing in facilities licensed or
20 regulated under the Nursing Home Care Act, Skilled Nursing and
21 Intermediate Care Facilities Code, Sheltered Care Facilities
22 Code, and the Illinois Veterans' Homes Code receive high
23 quality long-term care through an effective Illinois Long-Term
24 Care Council.

25 (b) Maintenance and operation of the Illinois Long-Term
26 Care Council.

27 (1) The Department shall develop a fair and impartial
28 process for recruiting and receiving nominations for
29 members for the Illinois Long-Term Care Council from the
30 State Long-Term Care Ombudsman, the area agencies on aging,
31 regional ombudsman programs, provider agencies, and other
32 public agencies, using a nomination form provided by the
33 Department.

34 (2) The Department shall appoint members to the
35 Illinois Long-Term Care Council in a timely manner.

1 (3) The Department shall consider and act in good faith
2 regarding the Illinois Long-Term Care Council's annual
3 report and its recommendations.

4 (4) The Director shall appoint to the Illinois
5 Long-Term Care Council at least 18 but not more than 25
6 members.

7 (c) Responsibilities of the State Long-Term Care
8 Ombudsman, area agencies on aging, regional long-term care
9 ombudsman programs, and provider agencies. The State Long-Term
10 Care Ombudsman and each area agency on aging, regional
11 long-term care ombudsman program, and provider agency shall
12 solicit names and recommend members to the Department for
13 appointment to the Illinois Long-Term Care Council.

14 (d) Powers and duties. The Illinois Long-Term Care Council
15 shall do the following:

16 (1) Make recommendations and comment on issues
17 pertaining to long-term care and the State Long-Term Care
18 Ombudsman Program to the Department.

19 (2) Advise the Department on matters pertaining to the
20 quality of life and quality of care in the continuum of
21 long-term care.

22 (3) Evaluate, comment on reports regarding, and make
23 recommendations on, the quality of life and quality of care
24 in long-term care facilities and on the duties and
25 responsibilities of the State Long-Term Care Ombudsman
26 Program.

27 (4) Prepare and circulate an annual report to the
28 Governor, the General Assembly, and other interested
29 parties concerning the duties and accomplishments of the
30 Illinois Long-Term Care Council and all other related
31 matters pertaining to long-term care and the protection of
32 residents' rights.

33 (5) Provide an opportunity for public input at each
34 scheduled meeting.

35 (6) Make recommendations to the Director, upon his or
36 her request, as to individuals who are capable of serving

1 as the State Long-Term Care Ombudsman and who should make
2 appropriate application for that position should it become
3 vacant.

4 (e) Composition and operation. The Illinois Long-Term Care
5 Council shall be composed of at least 18 but not more than 25
6 members concerned about the quality of life in long-term care
7 facilities and protecting the rights of residents, including
8 members from long-term care facilities. The State Long-Term
9 Care Ombudsman shall be a permanent member of the Long-Term
10 Care Council. Members shall be appointed for a 4-year term with
11 initial appointments staggered with 2-year, 3-year, and 4-year
12 terms. A lottery will determine the terms of office for the
13 members of the first term. Members may be reappointed to a term
14 but no member may be reappointed to more than 2 consecutive
15 terms. The Illinois Long-Term Care Council shall meet a minimum
16 of 3 times per calendar year.

17 (f) Member requirements. All members shall be individuals
18 who have demonstrated concern about the quality of life in
19 long-term care facilities. A minimum of 3 members must be
20 current or former residents of long-term care facilities or the
21 family member of a current or former resident of a long-term
22 care facility. A minimum of 2 members shall represent current
23 or former long-term care facility resident councils or family
24 councils. A minimum of 4 members shall be selected from
25 recommendations by organizations whose members consist of
26 long-term care facilities. A representative of long-term care
27 facility employees must also be included as a member. A minimum
28 of 2 members shall be selected from recommendations of
29 membership-based senior advocacy groups or consumer
30 organizations that engage solely in legal representation on
31 behalf of residents and immediate families. There shall be
32 non-voting State agency members on the Long-Term Care Council
33 from the following agencies: (i) the Department of Veterans'
34 Affairs; (ii) the Department of Human Services; (iii) the
35 Department of Public Health; (iv) the Department on Aging; (v)
36 the Department of Healthcare and Family Services ~~Public Aid~~;

1 (vi) the Illinois State Police Medicaid Fraud Control Unit; and
2 (vii) others as appropriate.

3 (Source: P.A. 93-498, eff. 8-11-03.)

4 (20 ILCS 105/4.06)

5 Sec. 4.06. Minority Senior Citizen Program. The Department
6 shall develop a program to identify the special needs and
7 problems of minority senior citizens and evaluate the adequacy
8 and accessibility of existing programs and information for
9 minority senior citizens. The Department shall coordinate
10 services for minority senior citizens through the Department of
11 Public Health, the Department of Healthcare and Family Services
12 ~~Public Aid~~, and the Department of Human Services.

13 The Department shall develop procedures to enhance and
14 identify availability of services and shall promulgate
15 administrative rules to establish the responsibilities of the
16 Department.

17 The Department on Aging, the Department of Public Health,
18 the Department of Healthcare and Family Services ~~Public Aid~~,
19 and the Department of Human Services shall cooperate in the
20 development and submission of an annual report on programs and
21 services provided under this Section. The joint report shall be
22 filed with the Governor and the General Assembly on or before
23 September 30 of each year.

24 (Source: P.A. 88-254; 89-507, eff. 7-1-97.)

25 Section 9050. The Alcoholism and Other Drug Abuse and
26 Dependency Act is amended by changing Sections 5-10 and 10-45
27 as follows:

28 (20 ILCS 301/5-10)

29 Sec. 5-10. Functions of the Department.

30 (a) In addition to the powers, duties and functions vested
31 in the Department by this Act, or by other laws of this State,
32 the Department shall carry out the following activities:

33 (1) Design, coordinate and fund a comprehensive and

1 coordinated community-based and culturally and
2 gender-appropriate array of services throughout the State
3 for the prevention, intervention, treatment and
4 rehabilitation of alcohol and other drug abuse and
5 dependency that is accessible and addresses the needs of
6 at-risk or addicted individuals and their families.

7 (2) Act as the exclusive State agency to accept,
8 receive and expend, pursuant to appropriation, any public
9 or private monies, grants or services, including those
10 received from the federal government or from other State
11 agencies, for the purpose of providing an array of services
12 for the prevention, intervention, treatment and
13 rehabilitation of alcoholism or other drug abuse or
14 dependency. Monies received by the Department shall be
15 deposited into appropriate funds as may be created by State
16 law or administrative action.

17 (3) Coordinate a statewide strategy among State
18 agencies for the prevention, intervention, treatment and
19 rehabilitation of alcohol and other drug abuse and
20 dependency. This strategy shall include the development of
21 an annual comprehensive State plan for the provision of an
22 array of services for education, prevention, intervention,
23 treatment, relapse prevention and other services and
24 activities to alleviate alcoholism and other drug abuse and
25 dependency. The plan shall be based on local
26 community-based needs and upon data including, but not
27 limited to, that which defines the prevalence of and costs
28 associated with the abuse of and dependency upon alcohol
29 and other drugs. This comprehensive State plan shall
30 include identification of problems, needs, priorities,
31 services and other pertinent information, including the
32 needs of minorities and other specific populations in the
33 State, and shall describe how the identified problems and
34 needs will be addressed. For purposes of this paragraph,
35 the term "minorities and other specific populations" may
36 include, but shall not be limited to, groups such as women,

1 children, intravenous drug users, persons with AIDS or who
2 are HIV infected, African-Americans, Puerto Ricans,
3 Hispanics, Asian Americans, the elderly, persons in the
4 criminal justice system, persons who are clients of
5 services provided by other State agencies, persons with
6 disabilities and such other specific populations as the
7 Department may from time to time identify. In developing
8 the plan, the Department shall seek input from providers,
9 parent groups, associations and interested citizens.

10 Beginning with State fiscal year 1996, the annual
11 comprehensive State plan developed under this Section
12 shall include an explanation of the rationale to be used in
13 ensuring that funding shall be based upon local community
14 needs, including, but not limited to, the incidence and
15 prevalence of, and costs associated with, the abuse of and
16 dependency upon alcohol and other drugs, as well as upon
17 demonstrated program performance.

18 The annual comprehensive State plan developed under
19 this Section shall contain a report detailing the
20 activities of and progress made by the programs for the
21 care and treatment of addicted pregnant women, addicted
22 mothers and their children established under subsection
23 (j) of Section 35-5 of this Act.

24 Each State agency which provides or funds alcohol or
25 drug prevention, intervention and treatment services shall
26 annually prepare an agency plan for providing such
27 services, and these shall be used by the Department in
28 preparing the annual comprehensive statewide plan. Each
29 agency's annual plan for alcohol and drug abuse services
30 shall contain a report on the activities and progress of
31 such services in the prior year. The Department may provide
32 technical assistance to other State agencies, as required,
33 in the development of their agency plans.

34 (4) Lead, foster and develop cooperation, coordination
35 and agreements among federal and State governmental
36 agencies and local providers that provide assistance,

1 services, funding or other functions, peripheral or
2 direct, in the prevention, intervention, treatment or
3 rehabilitation of alcoholism and other drug abuse and
4 dependency. This shall include, but shall not be limited
5 to, the following:

6 (A) Cooperate with and assist the Department of
7 Corrections and the Department on Aging in
8 establishing and conducting programs relating to
9 alcoholism and other drug abuse and dependency among
10 those populations which they respectively serve.

11 (B) Cooperate with and assist the Illinois
12 Department of Public Health in the establishment,
13 funding and support of programs and services for the
14 promotion of maternal and child health and the
15 prevention and treatment of infectious diseases,
16 including but not limited to HIV infection, especially
17 with respect to those persons who may abuse drugs by
18 intravenous injection, or may have been sexual
19 partners of drug abusers, or may have abused substances
20 so that their immune systems are impaired, causing them
21 to be at high risk.

22 (C) Supply to the Department of Public Health and
23 prenatal care providers a list of all alcohol and other
24 drug abuse service providers for addicted pregnant
25 women in this State.

26 (D) Assist in the placement of child abuse or
27 neglect perpetrators (identified by the Illinois
28 Department of Children and Family Services) who have
29 been determined to be in need of alcohol or other drug
30 abuse services pursuant to Section 8.2 of the Abused
31 and Neglected Child Reporting Act.

32 (E) Cooperate with and assist the Illinois
33 Department of Children and Family Services in carrying
34 out its mandates to:

35 (i) identify alcohol and other drug abuse
36 issues among its clients and their families; and

1 (ii) develop programs and services to deal
2 with such problems.

3 These programs and services may include, but shall not
4 be limited to, programs to prevent the abuse of alcohol
5 or other drugs by DCFS clients and their families,
6 rehabilitation services, identifying child care needs
7 within the array of alcohol and other drug abuse
8 services, and assistance with other issues as
9 required.

10 (F) Cooperate with and assist the Illinois
11 Criminal Justice Information Authority with respect to
12 statistical and other information concerning drug
13 abuse incidence and prevalence.

14 (G) Cooperate with and assist the State
15 Superintendent of Education, boards of education,
16 schools, police departments, the Illinois Department
17 of State Police, courts and other public and private
18 agencies and individuals in establishing prevention
19 programs statewide and preparing curriculum materials
20 for use at all levels of education. An agreement shall
21 be entered into with the State Superintendent of
22 Education to assist in the establishment of such
23 programs.

24 (H) Cooperate with and assist the Illinois
25 Department of Healthcare and Family Services ~~Public~~
26 ~~Aid~~ in the development and provision of services
27 offered to recipients of public assistance for the
28 treatment and prevention of alcoholism and other drug
29 abuse and dependency.

30 (I) Provide training recommendations to other
31 State agencies funding alcohol or other drug abuse
32 prevention, intervention, treatment or rehabilitation
33 services.

34 (5) From monies appropriated to the Department from the
35 Drunk and Drugged Driving Prevention Fund, make grants to
36 reimburse DUI evaluation and remedial education programs

1 licensed by the Department for the costs of providing
2 indigent persons with free or reduced-cost services
3 relating to a charge of driving under the influence of
4 alcohol or other drugs.

5 (6) Promulgate regulations to provide appropriate
6 standards for publicly and privately funded programs as
7 well as for levels of payment to government funded programs
8 which provide an array of services for prevention,
9 intervention, treatment and rehabilitation for alcoholism
10 and other drug abuse or dependency.

11 (7) In consultation with local service providers,
12 specify a uniform statistical methodology for use by
13 agencies, organizations, individuals and the Department
14 for collection and dissemination of statistical
15 information regarding services related to alcoholism and
16 other drug use and abuse. This shall include prevention
17 services delivered, the number of persons treated,
18 frequency of admission and readmission, and duration of
19 treatment.

20 (8) Receive data and assistance from federal, State and
21 local governmental agencies, and obtain copies of
22 identification and arrest data from all federal, State and
23 local law enforcement agencies for use in carrying out the
24 purposes and functions of the Department.

25 (9) Designate and license providers to conduct
26 screening, assessment, referral and tracking of clients
27 identified by the criminal justice system as having
28 indications of alcoholism or other drug abuse or dependency
29 and being eligible to make an election for treatment under
30 Section 40-5 of this Act, and assist in the placement of
31 individuals who are under court order to participate in
32 treatment.

33 (10) Designate medical examination and other programs
34 for determining alcoholism and other drug abuse and
35 dependency.

36 (11) Encourage service providers who receive financial

1 assistance in any form from the State to assess and collect
2 fees for services rendered.

3 (12) Make grants with funds appropriated from the Drug
4 Treatment Fund in accordance with Section 7 of the
5 Controlled Substance and Cannabis Nuisance Act, or in
6 accordance with Section 80 of the Methamphetamine Control
7 and Community Protection Act, or in accordance with
8 subsections (h) and (i) of Section 411.2 of the Illinois
9 Controlled Substances Act.

10 (13) Encourage all health and disability insurance
11 programs to include alcoholism and other drug abuse and
12 dependency as a covered illness.

13 (14) Make such agreements, grants-in-aid and
14 purchase-care arrangements with any other department,
15 authority or commission of this State, or any other state
16 or the federal government or with any public or private
17 agency, including the disbursement of funds and furnishing
18 of staff, to effectuate the purposes of this Act.

19 (15) Conduct a public information campaign to inform
20 the State's Hispanic residents regarding the prevention
21 and treatment of alcoholism.

22 (b) In addition to the powers, duties and functions vested
23 in it by this Act, or by other laws of this State, the
24 Department may undertake, but shall not be limited to, the
25 following activities:

26 (1) Require all programs funded by the Department to
27 include an education component to inform participants
28 regarding the causes and means of transmission and methods
29 of reducing the risk of acquiring or transmitting HIV
30 infection, and to include funding for such education
31 component in its support of the program.

32 (2) Review all State agency applications for federal
33 funds which include provisions relating to the prevention,
34 early intervention and treatment of alcoholism and other
35 drug abuse and dependency in order to ensure consistency
36 with the comprehensive statewide plan developed pursuant

1 to this Act.

2 (3) Prepare, publish, evaluate, disseminate and serve
3 as a central repository for educational materials dealing
4 with the nature and effects of alcoholism and other drug
5 abuse and dependency. Such materials may deal with the
6 educational needs of the citizens of Illinois, and may
7 include at least pamphlets which describe the causes and
8 effects of fetal alcohol syndrome, which the Department may
9 distribute free of charge to each county clerk in
10 sufficient quantities that the county clerk may provide a
11 pamphlet to the recipients of all marriage licenses issued
12 in the county.

13 (4) Develop and coordinate, with regional and local
14 agencies, education and training programs for persons
15 engaged in providing the array of services for persons
16 having alcoholism or other drug abuse and dependency
17 problems, which programs may include specific HIV
18 education and training for program personnel.

19 (5) Cooperate with and assist in the development of
20 education, prevention and treatment programs for employees
21 of State and local governments and businesses in the State.

22 (6) Utilize the support and assistance of interested
23 persons in the community, including recovering addicts and
24 alcoholics, to assist individuals and communities in
25 understanding the dynamics of addiction, and to encourage
26 individuals with alcohol or other drug abuse or dependency
27 problems to voluntarily undergo treatment.

28 (7) Promote, conduct, assist or sponsor basic
29 clinical, epidemiological and statistical research into
30 alcoholism and other drug abuse and dependency, and
31 research into the prevention of those problems either
32 solely or in conjunction with any public or private agency.

33 (8) Cooperate with public and private agencies,
34 organizations and individuals in the development of
35 programs, and to provide technical assistance and
36 consultation services for this purpose.

1 (9) Publish or provide for the publishing of a manual
2 to assist medical and social service providers in
3 identifying alcoholism and other drug abuse and dependency
4 and coordinating the multidisciplinary delivery of
5 services to addicted pregnant women, addicted mothers and
6 their children. The manual may be used only to provide
7 information and may not be used by the Department to
8 establish practice standards. The Department may not
9 require recipients to use specific providers nor may they
10 require providers to refer recipients to specific
11 providers. The manual may include, but need not be limited
12 to, the following:

13 (A) Information concerning risk assessments of
14 women seeking prenatal, natal, and postnatal medical
15 care.

16 (B) Information concerning risk assessments of
17 infants who may be substance-affected.

18 (C) Protocols that have been adopted by the
19 Illinois Department of Children and Family Services
20 for the reporting and investigation of allegations of
21 child abuse or neglect under the Abused and Neglected
22 Child Reporting Act.

23 (D) Summary of procedures utilized in juvenile
24 court in cases of children alleged or found to be
25 abused or neglected as a result of being born to
26 addicted women.

27 (E) Information concerning referral of addicted
28 pregnant women, addicted mothers and their children by
29 medical, social service, and substance abuse treatment
30 providers, by the Departments of Children and Family
31 Services, Public Aid, Public Health, and Human
32 Services.

33 (F) Effects of substance abuse on infants and
34 guidelines on the symptoms, care, and comfort of
35 drug-withdrawing infants.

36 (G) Responsibilities of the Illinois Department of

1 Public Health to maintain statistics on the number of
2 children in Illinois addicted at birth.

3 (10) To the extent permitted by federal law or
4 regulation, establish and maintain a clearinghouse and
5 central repository for the development and maintenance of a
6 centralized data collection and dissemination system and a
7 management information system for all alcoholism and other
8 drug abuse prevention, early intervention and treatment
9 services.

10 (11) Fund, promote or assist programs, services,
11 demonstrations or research dealing with addictive or
12 habituating behaviors detrimental to the health of
13 Illinois citizens.

14 (12) With monies appropriated from the Group Home Loan
15 Revolving Fund, make loans, directly or through
16 subcontract, to assist in underwriting the costs of housing
17 in which individuals recovering from alcohol or other drug
18 abuse or dependency may reside in groups of not less than 6
19 persons, pursuant to Section 50-40 of this Act.

20 (13) Promulgate such regulations as may be necessary
21 for the administration of grants or to otherwise carry out
22 the purposes and enforce the provisions of this Act.

23 (14) Fund programs to help parents be effective in
24 preventing substance abuse by building an awareness of
25 drugs and alcohol and the family's role in preventing abuse
26 through adjusting expectations, developing new skills, and
27 setting positive family goals. The programs shall include,
28 but not be limited to, the following subjects: healthy
29 family communication; establishing rules and limits; how
30 to reduce family conflict; how to build self-esteem,
31 competency, and responsibility in children; how to improve
32 motivation and achievement; effective discipline; problem
33 solving techniques; and how to talk about drugs and
34 alcohol. The programs shall be open to all parents.

35 (Source: P.A. 94-556, eff. 9-11-05.)

1 (20 ILCS 301/10-45)

2 Sec. 10-45. Membership. The Board shall consist of 16
3 members:

4 (a) The Director of Aging.

5 (b) The State Superintendent of Education.

6 (c) The Director of Corrections.

7 (d) The Director of State Police.

8 (e) The Director of Professional Regulation.

9 (f) (Blank).

10 (g) The Director of Children and Family Services.

11 (h) (Blank).

12 (i) The Director of Healthcare and Family Services
13 ~~Public Aid.~~

14 (j) The Director of Public Health.

15 (k) The Secretary of State.

16 (l) The Secretary of Transportation.

17 (m) The Director of Insurance.

18 (n) The Director of the Administrative Office of the
19 Illinois Courts.

20 (o) The Chairman of the Board of Higher Education.

21 (p) The Director of Revenue.

22 (q) The Executive Director of the Criminal Justice
23 Information Authority.

24 (r) A chairman who shall be appointed by the Governor
25 for a term of 3 years.

26 Each member may designate a representative to serve in his or
27 her place by written notice to the Department.

28 (Source: P.A. 92-16, eff. 6-28-01.)

29 Section 9055. The Personnel Code is amended by changing
30 Sections 8a, 8b.1, and 10 as follows:

31 (20 ILCS 415/8a) (from Ch. 127, par. 63b108a)

32 Sec. 8a. Jurisdiction A - Classification and pay. For
33 positions in the State service subject to the jurisdiction of
34 the Department of Central Management Services with respect to

1 the classification and pay:

2 (1) For the preparation, maintenance, and revision by the
3 Director, subject to approval by the Commission, of a position
4 classification plan for all positions subject to this Act,
5 based upon similarity of duties performed, responsibilities
6 assigned, and conditions of employment so that the same
7 schedule of pay may be equitably applied to all positions in
8 the same class. However, the pay of an employee whose position
9 is reduced in rank or grade by reallocation because of a loss
10 of duties or responsibilities after his appointment to such
11 position shall not be required to be lowered for a period of
12 one year after the reallocation of his position. Conditions of
13 employment shall not be used as a factor in the classification
14 of any position heretofore paid under the provisions of Section
15 1.22 of "An Act to standardize position titles and salary
16 rates", approved June 30, 1943, as amended. Unless the
17 Commission disapproves such classification plan within 60
18 days, or any revision thereof within 30 days, the Director
19 shall allocate every such position to one of the classes in the
20 plan. Any employee affected by the allocation of a position to
21 a class shall, after filing with the Director of Central
22 Management Services a written request for reconsideration
23 thereof in such manner and form as the Director may prescribe,
24 be given a reasonable opportunity to be heard by the Director.
25 If the employee does not accept the allocation of the position,
26 he shall then have the right of appeal to the Civil Service
27 Commission.

28 (2) For a pay plan to be prepared by the Director for all
29 employees subject to this Act after consultation with operating
30 agency heads and the Director of the Governor's Office of
31 Management and Budget ~~Bureau of the Budget~~. Such pay plan may
32 include provisions for uniformity of starting pay, an increment
33 plan, area differentials, a delay not to exceed one year prior
34 to the reduction of the pay of employees whose positions are
35 reduced in rank or grade by reallocation because of a loss of
36 duties or responsibilities after their appointments to such

1 positions, prevailing rates of wages in those classifications
2 in which employers are now paying or may hereafter pay such
3 rates of wage and other provisions. Such pay plan shall become
4 effective only after it has been approved by the Governor.
5 Amendments to the pay plan shall be made in the same manner.
6 Such pay plan shall provide that each employee shall be paid at
7 one of the rates set forth in the pay plan for the class of
8 position in which he is employed, subject to delay in the
9 reduction of pay of employees whose positions are reduced in
10 rank or grade by allocation as above set forth in this Section.
11 Such pay plan shall provide for a fair and reasonable
12 compensation for services rendered.

13 This section is inapplicable to the position of Assistant
14 Director of Healthcare and Family Services ~~Public Aid~~ in the
15 Department of Healthcare and Family Services ~~Public Aid~~. The
16 salary for this position shall be as established in "The Civil
17 Administrative Code of Illinois", approved March 7, 1917, as
18 amended.

19 (Source: P.A. 82-789; revised 8-23-03.)

20 (20 ILCS 415/8b.1) (from Ch. 127, par. 63b108b.1)

21 Sec. 8b.1. For open competitive examinations to test the
22 relative fitness of applicants for the respective positions.

23 Tests shall be designed to eliminate those who are not
24 qualified for entrance into or promotion within the service,
25 and to discover the relative fitness of those who are
26 qualified. The Director may use any one of or any combination
27 of the following examination methods which in his judgment best
28 serves this end: investigation of education; investigation of
29 experience; test of cultural knowledge; test of capacity; test
30 of knowledge; test of manual skill; test of linguistic ability;
31 test of character; test of physical fitness; test of
32 psychological fitness. No person with a record of misdemeanor
33 convictions except those under Sections 11-6, 11-7, 11-9,
34 11-14, 11-15, 11-17, 11-18, 11-19, 12-2, 12-6, 12-15, 14-4,
35 16-1, 21.1-3, 24-3.1, 24-5, 25-1, 28-3, 31-1, 31-4, 31-6, 31-7,

1 32-1, 32-2, 32-3, 32-4, 32-8 and sub-sections 1, 6 and 8 of
2 Section 24-1 of the Criminal Code of 1961 or arrested for any
3 cause but not convicted thereon shall be disqualified from
4 taking such examinations or subsequent appointment, unless the
5 person is attempting to qualify for a position which would give
6 him the powers of a peace officer, in which case the person's
7 conviction or arrest record may be considered as a factor in
8 determining the person's fitness for the position. The
9 eligibility conditions specified for the position of Assistant
10 Director of Healthcare and Family Services ~~Public Aid~~ in the
11 Department of Healthcare and Family Services ~~Public Aid~~ in
12 Section 5-230 of the Departments of State Government Law (20
13 ILCS 5/5-230) shall be applied to that position in addition to
14 other standards, tests or criteria established by the Director.
15 All examinations shall be announced publicly at least 2 weeks
16 in advance of the date of the examinations and may be
17 advertised through the press, radio and other media. The
18 Director may, however, in his discretion, continue to receive
19 applications and examine candidates long enough to assure a
20 sufficient number of eligibles to meet the needs of the service
21 and may add the names of successful candidates to existing
22 eligible lists in accordance with their respective ratings.

23 The Director may, in his discretion, accept the results of
24 competitive examinations conducted by any merit system
25 established by federal law or by the law of any State, and may
26 compile eligible lists therefrom or may add the names of
27 successful candidates in examinations conducted by those merit
28 systems to existing eligible lists in accordance with their
29 respective ratings. No person who is a non-resident of the
30 State of Illinois may be appointed from those eligible lists,
31 however, unless the requirement that applicants be residents of
32 the State of Illinois is waived by the Director of Central
33 Management Services and unless there are less than 3 Illinois
34 residents available for appointment from the appropriate
35 eligible list. The results of the examinations conducted by
36 other merit systems may not be used unless they are comparable

1 in difficulty and comprehensiveness to examinations conducted
2 by the Department of Central Management Services for similar
3 positions. Special linguistic options may also be established
4 where deemed appropriate.

5 (Source: P.A. 91-239, eff. 1-1-00.)

6 (20 ILCS 415/10) (from Ch. 127, par. 63b110)

7 Sec. 10. Duties and powers of the Commission. The Civil
8 Service Commission shall have duties and powers as follows:

9 (1) Upon written recommendations by the Director of the
10 Department of Central Management Services to exempt from
11 jurisdiction B of this Act positions which, in the judgment of
12 the Commission, involve either principal administrative
13 responsibility for the determination of policy or principal
14 administrative responsibility for the way in which policies are
15 carried out. This authority may not be exercised, however, with
16 respect to the position of Assistant Director of Healthcare and
17 Family Services ~~Public Aid~~ in the Department of Healthcare and
18 Family Services ~~Public Aid~~.

19 (2) To require such special reports from the Director as it
20 may consider desirable.

21 (3) To disapprove original rules or any part thereof within
22 90 days and any amendment thereof within 30 days after the
23 submission of such rules to the Civil Service Commission by the
24 Director, and to disapprove any amendments thereto in the same
25 manner.

26 (4) To approve or disapprove within 60 days from date of
27 submission the position classification P.A. submitted by the
28 Director as provided in the rules, and any revisions thereof
29 within 30 days from the date of submission.

30 (5) To hear appeals of employees who do not accept the
31 allocation of their positions under the position
32 classification plan.

33 (6) To hear and determine written charges filed seeking the
34 discharge, demotion of employees and suspension totaling more
35 than thirty days in any 12-month period, as provided in Section

1 11 hereof, and appeals from transfers from one geographical
2 area in the State to another, and in connection therewith to
3 administer oaths, subpoena witnesses, and compel the
4 production of books and papers.

5 (7) The fees of subpoenaed witnesses under this Act for
6 attendance and travel shall be the same as fees of witnesses
7 before the circuit courts of the State, such fees to be paid
8 when the witness is excused from further attendance. Whenever a
9 subpoena is issued the Commission may require that the cost of
10 service and the fee of the witness shall be borne by the party
11 at whose insistence the witness is summoned. The Commission has
12 the power, at its discretion, to require a deposit from such
13 party to cover the cost of service and witness fees and the
14 payment of the legal witness fee and mileage to the witness
15 served with the subpoena. A subpoena issued under this Act
16 shall be served in the same manner as a subpoena issued out of
17 a court.

18 Upon the failure or refusal to obey a subpoena, a petition
19 shall be prepared by the party serving the subpoena for
20 enforcement in the circuit court of the county in which the
21 person to whom the subpoena was directed either resides or has
22 his or her principal place of business.

23 Not less than five days before the petition is filed in the
24 appropriate court, it shall be served on the person along with
25 a notice of the time and place the petition is to be presented.

26 Following a hearing on the petition, the circuit court
27 shall have jurisdiction to enforce subpoenas issued pursuant to
28 this Section.

29 On motion and for good cause shown the Commission may quash
30 or modify any subpoena.

31 (8) To make an annual report regarding the work of the
32 Commission to the Governor, such report to be a public report.

33 (9) If any violation of this Act is found, the Commission
34 shall direct compliance in writing.

35 (10) To appoint a full-time executive secretary and such
36 other employees, experts, and special assistants as may be

1 necessary to carry out the powers and duties of the Commission
2 under this Act and employees, experts, and special assistants
3 so appointed by the Commission shall be subject to the
4 provisions of jurisdictions A, B and C of this Act. These
5 powers and duties supersede any contrary provisions herein
6 contained.

7 (11) To make rules to carry out and implement their powers
8 and duties under this Act, with authority to amend such rules
9 from time to time.

10 (12) To hear or conduct investigations as it deems
11 necessary of appeals of layoff filed by employees appointed
12 under Jurisdiction B after examination provided that such
13 appeals are filed within 15 calendar days following the
14 effective date of such layoff and are made on the basis that
15 the provisions of the Personnel Code or of the Rules of the
16 Department of Central Management Services relating to layoff
17 have been violated or have not been complied with.

18 All hearings shall be public. A decision shall be rendered
19 within 60 days after receipt of the transcript of the
20 proceedings. The Commission shall order the reinstatement of
21 the employee if it is proven that the provisions of the
22 Personnel Code or of the Rules of the Department of Central
23 Management Services relating to layoff have been violated or
24 have not been complied with. In connection therewith the
25 Commission may administer oaths, subpoena witnesses, and
26 compel the production of books and papers.

27 (13) Whenever the Civil Service Commission is authorized or
28 required by law to consider some aspect of criminal history
29 record information for the purpose of carrying out its
30 statutory powers and responsibilities, then, upon request and
31 payment of fees in conformance with the requirements of Section
32 2605-400 of the Department of State Police Law (20 ILCS
33 2605/2605-400), the Department of State Police is authorized to
34 furnish, pursuant to positive identification, such information
35 contained in State files as is necessary to fulfill the
36 request.

1 (Source: P.A. 91-239, eff. 1-1-00.)

2 Section 9060. The Children and Family Services Act is
3 amended by changing Section 9.1 as follows:

4 (20 ILCS 505/9.1) (from Ch. 23, par. 5009.1)

5 Sec. 9.1. The parents or guardians of the estates of
6 children accepted for care and training under the Juvenile
7 Court Act or the Juvenile Court Act of 1987, or through a
8 voluntary placement agreement with the parents or guardians
9 shall be liable for the payment to the Department, or to a
10 licensed or approved child care facility designated by the
11 Department of sums representing charges for the care and
12 training of those children at a rate to be determined by the
13 Department. The Department shall establish a standard by which
14 shall be measured the ability of parents or guardians to pay
15 for the care and training of their children, and shall
16 implement the standard by rules governing its application. The
17 standard and the rules shall take into account ability to pay
18 as measured by annual income and family size. Medical or other
19 treatment provided on behalf of the family may also be taken
20 into account in determining ability to pay if the Department
21 concludes that such treatment is appropriate.

22 In addition, the Department may provide by rule for
23 referral of Title IV-E foster care maintenance cases to the
24 Department of Healthcare and Family Services ~~Public Aid~~ for
25 child support enforcement services under Title IV-D of the
26 Social Security Act. The Department shall consider "good cause"
27 as defined in regulations promulgated under Title IV-A of the
28 Social Security Act, among other criteria, when determining
29 whether to refer a case and, upon referral, the parent or
30 guardian of the estate of a child who is receiving Title IV-E
31 foster care maintenance payments shall be deemed to have made
32 an assignment to the Department of any and all rights, title
33 and interest in any support obligation on behalf of a child.
34 The rights to support assigned to the Department shall

1 constitute an obligation owed the State by the person who is
2 responsible for providing the support, and shall be collectible
3 under all applicable processes.

4 The acceptance of children for services or care shall not
5 be limited or conditioned in any manner on the financial status
6 or ability of parents or guardians to make such payments.

7 (Source: P.A. 92-590, eff. 7-1-02.)

8 Section 9065. The Department of Employment Security Law of
9 the Civil Administrative Code of Illinois is amended by
10 changing Section 1005-130 as follows:

11 (20 ILCS 1005/1005-130) (was 20 ILCS 1005/43a.14)

12 Sec. 1005-130. Exchange of information for child support
13 enforcement.

14 (a) The Department has the power to exchange with the
15 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
16 ~~Aid~~ information that may be necessary for the enforcement of
17 child support orders entered pursuant to the Illinois Public
18 Aid Code, the Illinois Marriage and Dissolution of Marriage
19 Act, the Non-Support of Spouse and Children Act, the
20 Non-Support Punishment Act, the Revised Uniform Reciprocal
21 Enforcement of Support Act, the Uniform Interstate Family
22 Support Act, or the Illinois Parentage Act of 1984.

23 (b) Notwithstanding any provisions in the Civil
24 Administrative Code of Illinois to the contrary, the Department
25 of Employment Security shall not be liable to any person for
26 any disclosure of information to the Department of Healthcare
27 and Family Services (formerly Illinois Department of Public
28 Aid) under subsection (a) or for any other action taken in good
29 faith to comply with the requirements of subsection (a).

30 (Source: P.A. 91-239, eff. 1-1-00; 91-613, eff. 10-1-99; 92-16,
31 eff. 6-28-01.)

32 Section 9070. The New Hire Reporting Act is amended by
33 changing Section 35 as follows:

1 (20 ILCS 1020/35)

2 Sec. 35. Department of Healthcare and Family Services
3 ~~Public Aid~~ duties. The Department of Healthcare and Family
4 Services ~~Public Aid~~ shall establish a community advisory
5 committee for oversight of the implementation process,
6 toll-free telephone lines for employers with child support
7 questions, an expedited hearing process for non-custodial
8 parents who contest an employer's execution of an order for
9 withholding and brochures and public service announcements
10 that inform the general public about the New Hire Directory and
11 how to utilize it, within the federal and State confidentiality
12 laws, in pursuit of child support.

13 (Source: P.A. 90-425, eff. 8-15-97.)

14 Section 9072. The Department of Human Services Act is
15 amended by changing Section 1-20 as follows:

16 (20 ILCS 1305/1-20)

17 Sec. 1-20. General powers and duties.

18 (a) The Department shall exercise the rights, powers,
19 duties, and functions provided by law, including (but not
20 limited to) the rights, powers, duties, and functions
21 transferred to the Department under Article 80 and Article 90
22 of this Act.

23 (b) The Department may employ personnel (in accordance with
24 the Personnel Code), provide facilities, contract for goods and
25 services, and adopt rules as necessary to carry out its
26 functions and purposes, all in accordance with applicable State
27 and federal law.

28 (c) Notwithstanding any other provision of this Section,
29 the Department of Healthcare and Family Services shall perform
30 all healthcare purchasing functions in connection with health
31 care plans administered by the State on behalf of residents of
32 mental health facilities and developmental disabilities
33 facilities operated by the Department of Human Services, as

1 provided in the Executive Order 3 (2005) Implementation Act.

2 (Source: P.A. 89-507, eff. 7-3-96.)

3 Section 9075. The Illinois Lottery Law is amended by
4 changing Section 13 as follows:

5 (20 ILCS 1605/13) (from Ch. 120, par. 1163)

6 Sec. 13. Except as otherwise provided in Section 13.1, no
7 prize, nor any portion of a prize, nor any right of any person
8 to a prize awarded shall be assignable. Any prize, or portion
9 thereof remaining unpaid at the death of a prize winner, may be
10 paid to the estate of such deceased prize winner, or to the
11 trustee under a revocable living trust established by the
12 deceased prize winner as settlor, provided that a copy of such
13 a trust has been filed with the Department along with a
14 notarized letter of direction from the settlor and no written
15 notice of revocation has been received by the Department prior
16 to the settlor's death. Following such a settlor's death and
17 prior to any payment to such a successor trustee, the Director
18 shall obtain from the trustee and each trust beneficiary a
19 written agreement to indemnify and hold the Department harmless
20 with respect to any claims that may be asserted against the
21 Department arising from payment to or through the trust.
22 Notwithstanding any other provision of this Section, any person
23 pursuant to an appropriate judicial order may be paid the prize
24 to which a winner is entitled, and all or part of any prize
25 otherwise payable by State warrant under this Section shall be
26 withheld upon certification to the State Comptroller from the
27 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
28 ~~Aid~~ as provided in Section 10-17.5 of The Illinois Public Aid
29 Code. The Director shall be discharged of all further liability
30 upon payment of a prize pursuant to this Section.

31 (Source: P.A. 93-465, eff. 1-1-04.)

32 Section 9080. The Mental Health and Developmental
33 Disabilities Administrative Act is amended by changing

1 Sections 15.2, 15.3, 18, 50a, and 57 as follows:

2 (20 ILCS 1705/15.2) (from Ch. 91 1/2, par. 100-15.2)

3 Sec. 15.2. Quality Assurance for Adult Developmental
4 Training Services. Whenever the Department of Healthcare and
5 Family Services ~~Public Aid~~ or the Department of Human Services
6 pays the cost, directly or indirectly, in whole or part, for
7 adult developmental training day services for persons with
8 developmental disabilities, the provider of such services
9 shall meet minimum standards established by the Department.
10 Such minimum standards shall become effective July 1, 1986.
11 Interim program guidelines, established by the Department,
12 shall be utilized for programs operational prior to July 1,
13 1985.

14 The Department shall annually certify that adult
15 developmental training day services providers meet minimum
16 standards. The Department may determine that providers
17 accredited under nationally recognized accreditation programs
18 are deemed to have met the standards established by the
19 Department under this Section. The Department shall, at least
20 quarterly, review the services being provided to assure
21 compliance with the standards. The Department may suspend,
22 refuse to renew or deny certification to any provider who fails
23 to meet any or all such standards, as provided by rule.

24 For purposes of this Section, "adult developmental
25 training day service" means services designed to help persons
26 with developmental disabilities to develop functional skills
27 for living in such areas as motoric development, dressing and
28 grooming, toileting, eating, language, reading and writing,
29 quantitative skills development, independent living and
30 reduction of maladaptive behavior. Such programs may include
31 services designed to improve an individual's ability to engage
32 in productive work as defined for work activity centers in the
33 federal Fair Labor Standards Act, as amended.

34 For purposes of this Section, "providers of adult
35 developmental training day services" means any person, agency

1 or organization that provides such services for persons with
2 developmental disabilities as defined by the Mental Health and
3 Developmental Disabilities Code.

4 (Source: P.A. 89-507, eff. 7-1-97.)

5 (20 ILCS 1705/15.3) (from Ch. 91 1/2, par. 100-15.3)

6 Sec. 15.3. Quality assurance for community mental health
7 services. Whenever the Department of Healthcare and Family
8 Services ~~Public Aid~~ or the Department of Human Services pays
9 the cost, directly or indirectly, in whole or part, for
10 community mental health services and programs provided under
11 the Medicaid Clinic Option authorized by Title XIX of the
12 Social Security Act, the provider of such services shall meet
13 minimum standards established by the Department.

14 The Department shall annually certify that providers of
15 community mental health services under the Medicaid Clinic
16 Option meet minimum standards. The Department may suspend,
17 refuse to renew or deny certification to any provider who fails
18 to meet any or all such standards, as provided by rule.

19 For purposes of this Section, "community mental health
20 services and programs" means services designed to help persons
21 with mental illness develop skills for living, including but
22 not limited to the following:

- 23 (1) Mental health assessment;
- 24 (2) Psychological evaluation;
- 25 (3) Interdisciplinary treatment planning;
- 26 (4) Medication monitoring and training;
- 27 (5) Individual therapy;
- 28 (6) Group therapy;
- 29 (7) Family therapy;
- 30 (8) Crisis intervention;
- 31 (9) Case management;
- 32 (10) Intensive stabilization; and
- 33 (11) Extended treatment and rehabilitation.

34 (Source: P.A. 89-507, eff. 7-1-97.)

1 (20 ILCS 1705/18) (from Ch. 91 1/2, par. 100-18)

2 Sec. 18. To receive, hold, distribute and use for indicated
3 purposes and the benefit of recipients, monies and materials
4 made available by the federal government or other agency. The
5 Department specifically may claim federal reimbursement
6 through the ~~Illinois~~ Department of Healthcare and Family
7 Services ~~Public Aid~~ under the "Medicaid Waiver" provisions of
8 Section 1915(c) of the Social Security Act, as amended, for
9 providing community services to recipients of medical
10 assistance under Article V of the Illinois Public Aid Code. The
11 Department shall maintain a separate line item in its budget,
12 entitled "Developmental Disability Community Initiative", to
13 account for the expenditure of such monies.

14 (Source: P.A. 85-1209.)

15 (20 ILCS 1705/50a) (from Ch. 91 1/2, par. 100-50a)

16 Sec. 50a. OBRA plan. On or before February 1 of each year
17 the Department shall submit, in cooperation with the Department
18 of Healthcare and Family Services ~~Public Aid~~ and the Department
19 of Public Health, to the Governor and the General Assembly a
20 comprehensive status report on compliance with all mandatory
21 provisions of the federal Omnibus Budget Reconciliation Act of
22 1987. To the extent that the Department is mandated to provide
23 hearings under the federal Omnibus Budget Reconciliation Act of
24 1987, the Secretary's decision shall constitute a final
25 administrative decision under the Administrative Review Law.

26 (Source: P.A. 89-507, eff. 7-1-97.)

27 (20 ILCS 1705/57) (from Ch. 91 1/2, par. 100-57)

28 Sec. 57. The Department of Human Services shall
29 periodically convene a special task force of representatives of
30 the various State agencies with related programs and services
31 together with other interested parties and stakeholders to
32 study and assess service needs of persons with autism. The
33 Secretary of Human Services shall submit a report of the task
34 force's findings and recommendations and the Secretary's

1 priorities to the Governor and the General Assembly by
2 September 1, 2005. The Secretary shall provide annual progress
3 reports to the Governor and the General Assembly by January 1
4 of each year, beginning on January 1, 2006. The reports shall
5 include an analysis of progress made in the following areas:

6 a. Early intervention services for children with autism and
7 their parents;

8 b. Enhancement of family support mechanisms to enable
9 persons with autism to remain in a home-based or community
10 environment in the least-restrictive setting possible,
11 including progress on the implementation of plans to provide
12 assistance to individuals and families; the plan shall include,
13 but not be limited to, (i) identification of the services
14 required, (ii) the availability of services, especially those
15 within the home community of the person with autism, (iii) the
16 number of persons requiring the services, (iv) the cost of the
17 services, (v) the capacity of the person with autism and his or
18 her family to independently provide the services and the extent
19 to which the State may support the individual and family
20 effort, (vi) the extent of existing and planned State support,
21 (vii) the availability and utilization of federal financial
22 participation in the cost of services, and (viii) the outcomes
23 and impact of services being provided;

24 c. Services for adequate transition for people with autism
25 from public school programs to adult work and day programs; and

26 d. Plans, programs, and services under the Disabilities
27 Services Act of 2003.

28 The Department of Human Services and the Department of
29 Healthcare and Family Services ~~Public Aid~~ shall determine the
30 availability of federal financial participation in the cost of
31 developing a family support program, which would include
32 medical assistance coverage for children diagnosed with autism
33 who would otherwise qualify for medical assistance under the
34 Illinois Public Aid Code except for family income. The program
35 would include services to support persons with autism in their
36 homes and communities that are not provided through local

1 school systems, early intervention programs, or the medical
2 assistance program under the Illinois Public Aid Code. The
3 departments shall determine the feasibility of obtaining
4 federal financial participation and may apply for any
5 applicable waiver under Section 1915(c) of the federal Social
6 Security Act.

7 For the purpose of this service needs review, autism means
8 a severely incapacitating life-long developmental disability
9 which:

- 10 a. may be manifested before a person is 30 months of age,
11 b. may be caused by physical disorders of the brain, and
12 c. is characterized by uneven intellectual development and
13 a combination of disturbances in the rates and sequences of
14 cognitive, affective, psychomotor, language and speech
15 development. This syndrome is further evidenced by abnormal
16 responses to sensory stimuli, problems in developing social
17 relationships, and ritualistic and compulsive behavior.

18 (Source: P.A. 93-773, eff. 7-21-04.)

19 Section 9085. The Department of Professional Regulation
20 Law of the Civil Administrative Code of Illinois is amended by
21 changing Sections 2105-15 and 2105-155 as follows:

22 (20 ILCS 2105/2105-15) (was 20 ILCS 2105/60)

23 Sec. 2105-15. General powers and duties.

24 (a) The Department has, subject to the provisions of the
25 Civil Administrative Code of Illinois, the following powers and
26 duties:

27 (1) To authorize examinations in English to ascertain
28 the qualifications and fitness of applicants to exercise
29 the profession, trade, or occupation for which the
30 examination is held.

31 (2) To prescribe rules and regulations for a fair and
32 wholly impartial method of examination of candidates to
33 exercise the respective professions, trades, or
34 occupations.

1 (3) To pass upon the qualifications of applicants for
2 licenses, certificates, and authorities, whether by
3 examination, by reciprocity, or by endorsement.

4 (4) To prescribe rules and regulations defining, for
5 the respective professions, trades, and occupations, what
6 shall constitute a school, college, or university, or
7 department of a university, or other institution,
8 reputable and in good standing, and to determine the
9 reputability and good standing of a school, college, or
10 university, or department of a university, or other
11 institution, reputable and in good standing, by reference
12 to a compliance with those rules and regulations; provided,
13 that no school, college, or university, or department of a
14 university, or other institution that refuses admittance
15 to applicants solely on account of race, color, creed, sex,
16 or national origin shall be considered reputable and in
17 good standing.

18 (5) To conduct hearings on proceedings to revoke,
19 suspend, refuse to renew, place on probationary status, or
20 take other disciplinary action as authorized in any
21 licensing Act administered by the Department with regard to
22 licenses, certificates, or authorities of persons
23 exercising the respective professions, trades, or
24 occupations and to revoke, suspend, refuse to renew, place
25 on probationary status, or take other disciplinary action
26 as authorized in any licensing Act administered by the
27 Department with regard to those licenses, certificates, or
28 authorities. The Department shall issue a monthly
29 disciplinary report. The Department shall deny any license
30 or renewal authorized by the Civil Administrative Code of
31 Illinois to any person who has defaulted on an educational
32 loan or scholarship provided by or guaranteed by the
33 Illinois Student Assistance Commission or any governmental
34 agency of this State; however, the Department may issue a
35 license or renewal if the aforementioned persons have
36 established a satisfactory repayment record as determined

1 by the Illinois Student Assistance Commission or other
2 appropriate governmental agency of this State.
3 Additionally, beginning June 1, 1996, any license issued by
4 the Department may be suspended or revoked if the
5 Department, after the opportunity for a hearing under the
6 appropriate licensing Act, finds that the licensee has
7 failed to make satisfactory repayment to the Illinois
8 Student Assistance Commission for a delinquent or
9 defaulted loan. For the purposes of this Section,
10 "satisfactory repayment record" shall be defined by rule.
11 The Department shall refuse to issue or renew a license to,
12 or shall suspend or revoke a license of, any person who,
13 after receiving notice, fails to comply with a subpoena or
14 warrant relating to a paternity or child support
15 proceeding. However, the Department may issue a license or
16 renewal upon compliance with the subpoena or warrant.

17 The Department, without further process or hearings,
18 shall revoke, suspend, or deny any license or renewal
19 authorized by the Civil Administrative Code of Illinois to
20 a person who is certified by the Department of Healthcare
21 and Family Services (formerly Illinois Department of
22 Public Aid) as being more than 30 days delinquent in
23 complying with a child support order or who is certified by
24 a court as being in violation of the Non-Support Punishment
25 Act for more than 60 days. The Department may, however,
26 issue a license or renewal if the person has established a
27 satisfactory repayment record as determined by the
28 Department of Healthcare and Family Services (formerly
29 Illinois Department of Public Aid) or if the person is
30 determined by the court to be in compliance with the
31 Non-Support Punishment Act. The Department may implement
32 this paragraph as added by Public Act 89-6 through the use
33 of emergency rules in accordance with Section 5-45 of the
34 Illinois Administrative Procedure Act. For purposes of the
35 Illinois Administrative Procedure Act, the adoption of
36 rules to implement this paragraph shall be considered an

1 emergency and necessary for the public interest, safety,
2 and welfare.

3 (6) To transfer jurisdiction of any realty under the
4 control of the Department to any other department of the
5 State Government or to acquire or accept federal lands when
6 the transfer, acquisition, or acceptance is advantageous
7 to the State and is approved in writing by the Governor.

8 (7) To formulate rules and regulations necessary for
9 the enforcement of any Act administered by the Department.

10 (8) To exchange with the ~~Illinois~~ Department of
11 Healthcare and Family Services ~~Public Aid~~ information that
12 may be necessary for the enforcement of child support
13 orders entered pursuant to the Illinois Public Aid Code,
14 the Illinois Marriage and Dissolution of Marriage Act, the
15 Non-Support of Spouse and Children Act, the Non-Support
16 Punishment Act, the Revised Uniform Reciprocal Enforcement
17 of Support Act, the Uniform Interstate Family Support Act,
18 or the Illinois Parentage Act of 1984. Notwithstanding any
19 provisions in this Code to the contrary, the Department of
20 Professional Regulation shall not be liable under any
21 federal or State law to any person for any disclosure of
22 information to the Department of Healthcare and Family
23 Services (formerly Illinois Department of Public Aid)
24 under this paragraph (8) or for any other action taken in
25 good faith to comply with the requirements of this
26 paragraph (8).

27 (9) To perform other duties prescribed by law.

28 (b) The Department may, when a fee is payable to the
29 Department for a wall certificate of registration provided by
30 the Department of Central Management Services, require that
31 portion of the payment for printing and distribution costs be
32 made directly or through the Department to the Department of
33 Central Management Services for deposit into the Paper and
34 Printing Revolving Fund. The remainder shall be deposited into
35 the General Revenue Fund.

36 (c) For the purpose of securing and preparing evidence, and

1 for the purchase of controlled substances, professional
2 services, and equipment necessary for enforcement activities,
3 recoupment of investigative costs, and other activities
4 directed at suppressing the misuse and abuse of controlled
5 substances, including those activities set forth in Sections
6 504 and 508 of the Illinois Controlled Substances Act, the
7 Director and agents appointed and authorized by the Director
8 may expend sums from the Professional Regulation Evidence Fund
9 that the Director deems necessary from the amounts appropriated
10 for that purpose. Those sums may be advanced to the agent when
11 the Director deems that procedure to be in the public interest.
12 Sums for the purchase of controlled substances, professional
13 services, and equipment necessary for enforcement activities
14 and other activities as set forth in this Section shall be
15 advanced to the agent who is to make the purchase from the
16 Professional Regulation Evidence Fund on vouchers signed by the
17 Director. The Director and those agents are authorized to
18 maintain one or more commercial checking accounts with any
19 State banking corporation or corporations organized under or
20 subject to the Illinois Banking Act for the deposit and
21 withdrawal of moneys to be used for the purposes set forth in
22 this Section; provided, that no check may be written nor any
23 withdrawal made from any such account except upon the written
24 signatures of 2 persons designated by the Director to write
25 those checks and make those withdrawals. Vouchers for those
26 expenditures must be signed by the Director. All such
27 expenditures shall be audited by the Director, and the audit
28 shall be submitted to the Department of Central Management
29 Services for approval.

30 (d) Whenever the Department is authorized or required by
31 law to consider some aspect of criminal history record
32 information for the purpose of carrying out its statutory
33 powers and responsibilities, then, upon request and payment of
34 fees in conformance with the requirements of Section 2605-400
35 of the Department of State Police Law (20 ILCS 2605/2605-400),
36 the Department of State Police is authorized to furnish,

1 pursuant to positive identification, the information contained
2 in State files that is necessary to fulfill the request.

3 (e) The provisions of this Section do not apply to private
4 business and vocational schools as defined by Section 1 of the
5 Private Business and Vocational Schools Act.

6 (f) Beginning July 1, 1995, this Section does not apply to
7 those professions, trades, and occupations licensed under the
8 Real Estate License Act of 2000, nor does it apply to any
9 permits, certificates, or other authorizations to do business
10 provided for in the Land Sales Registration Act of 1989 or the
11 Illinois Real Estate Time-Share Act.

12 (g) Notwithstanding anything that may appear in any
13 individual licensing statute or administrative rule, the
14 Department shall deny any license application or renewal
15 authorized under any licensing Act administered by the
16 Department to any person who has failed to file a return, or to
17 pay the tax, penalty, or interest shown in a filed return, or
18 to pay any final assessment of tax, penalty, or interest, as
19 required by any tax Act administered by the Illinois Department
20 of Revenue, until such time as the requirement of any such tax
21 Act are satisfied; however, the Department may issue a license
22 or renewal if the person has established a satisfactory
23 repayment record as determined by the Illinois Department of
24 Revenue. For the purpose of this Section, "satisfactory
25 repayment record" shall be defined by rule.

26 In addition, a complaint filed with the Department by the
27 Illinois Department of Revenue that includes a certification,
28 signed by its Director or designee, attesting to the amount of
29 the unpaid tax liability or the years for which a return was
30 not filed, or both, is prima facie evidence of the licensee's
31 failure to comply with the tax laws administered by the
32 Illinois Department of Revenue. Upon receipt of that
33 certification, the Department shall, without a hearing,
34 immediately suspend all licenses held by the licensee.
35 Enforcement of the Department's order shall be stayed for 60
36 days. The Department shall provide notice of the suspension to

1 the licensee by mailing a copy of the Department's order by
2 certified and regular mail to the licensee's last known address
3 as registered with the Department. The notice shall advise the
4 licensee that the suspension shall be effective 60 days after
5 the issuance of the Department's order unless the Department
6 receives, from the licensee, a request for a hearing before the
7 Department to dispute the matters contained in the order.

8 Any suspension imposed under this subsection (g) shall be
9 terminated by the Department upon notification from the
10 Illinois Department of Revenue that the licensee is in
11 compliance with all tax laws administered by the Illinois
12 Department of Revenue.

13 The Department shall promulgate rules for the
14 administration of this subsection (g).

15 (h) ~~(g)~~ The Department may grant the title "Retired", to be
16 used immediately adjacent to the title of a profession
17 regulated by the Department, to eligible retirees. The use of
18 the title "Retired" shall not constitute representation of
19 current licensure, registration, or certification. Any person
20 without an active license, registration, or certificate in a
21 profession that requires licensure, registration, or
22 certification shall not be permitted to practice that
23 profession.

24 (Source: P.A. 94-452, eff. 1-1-06; 94-462, eff. 8-4-05; revised
25 8-19-05.)

26 (20 ILCS 2105/2105-155) (was 20 ILCS 2105/60n)

27 Sec. 2105-155. Suspension or termination of medical
28 services provider under the Public Aid Code. When the
29 Department receives notice from the Department of Healthcare
30 and Family Services ~~Public Aid~~, as required by Section 2205-10
31 of the Department of Healthcare and Family Services ~~Public Aid~~
32 Law (20 ILCS 2205/2205-10), that the authorization to provide
33 medical services under Article V of the Illinois Public Aid
34 Code has been suspended or terminated with respect to any
35 person, firm, corporation, association, agency, institution,

1 or other legal entity licensed under any Act administered by
2 the Department of Professional Regulation, the Department of
3 Professional Regulation shall determine whether there are
4 reasonable grounds to investigate the circumstances that
5 resulted in the suspension or termination. If reasonable
6 grounds are found, the Department of Professional Regulation
7 shall conduct an investigation and take the disciplinary action
8 against the licensee that the Department determines to be
9 required under the appropriate licensing Act.

10 (Source: P.A. 91-239, eff. 1-1-00.)

11 Section 9090. The Department of Public Aid Law of the Civil
12 Administrative Code of Illinois is amended by changing the
13 heading of Article 2205 and Sections 2205-1, 2205-5, and
14 2205-10 as follows:

15 (20 ILCS 2205/Art. 2205 heading)

16 ARTICLE 2205. DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES
17 ~~PUBLIC AID~~

18 (20 ILCS 2205/2205-1)

19 Sec. 2205-1. Article short title. This Article 2205 of the
20 Civil Administrative Code of Illinois may be cited as the
21 Department of Healthcare and Family Services ~~Public Aid~~ Law.

22 (Source: P.A. 91-239, eff. 1-1-00.)

23 (20 ILCS 2205/2205-5) (was 20 ILCS 2205/48a)

24 Sec. 2205-5. Public Aid Code. The Department of Healthcare
25 and Family Services ~~Public Aid~~ shall administer the Illinois
26 Public Aid Code as provided in that Code.

27 (Source: P.A. 91-239, eff. 1-1-00.)

28 (20 ILCS 2205/2205-10) (was 20 ILCS 2205/48b)

29 Sec. 2205-10. Suspension or termination of authorization
30 to provide medical services. Whenever the Department of
31 Healthcare and Family Services (formerly Department of Public

1 Aid) suspends or terminates the authorization of any person,
2 firm, corporation, association, agency, institution, or other
3 legal entity to provide medical services under Article V of the
4 Illinois Public Aid Code and the practice of providing those
5 services or the maintenance of facilities for those services is
6 licensed under a licensing Act administered by the Department
7 of Public Health or the Department of Professional Regulation,
8 the Department of Healthcare and Family Services ~~Public Aid~~
9 shall, within 30 days of the suspension or termination, give
10 written notice of the suspension or termination and transmit a
11 record of the evidence and specify the grounds on which the
12 suspension or termination is based to the Department that
13 administers the licensing Act under which that person, firm,
14 corporation, association, agency, institution, or other legal
15 entity is licensed, subject to any confidentiality
16 requirements imposed by applicable federal or State law. The
17 cost of any such record shall be borne by the Department to
18 which it is transmitted.

19 (Source: P.A. 91-239, eff. 1-1-00.)

20 Section 9095. The Illinois Health Finance Reform Act is
21 amended by changing Section 5-1 as follows:

22 (20 ILCS 2215/5-1) (from Ch. 111 1/2, par. 6505-1)

23 Sec. 5-1. Mandatory Utilization Review.

24 (a) Except as prohibited by Federal law or regulations, any
25 third party payor shall have the option to require utilization
26 review for hospital admissions and continued hospital stays,
27 except for the ~~Illinois~~ Department of Healthcare and Family
28 Services ~~Public Aid~~ for payment of hospital services for
29 recipients of assistance under Articles V, VI, and VII of the
30 Illinois Public Aid Code. The payor shall have the option to
31 contract with a medical peer review organization, provided that
32 the organization is at minimum, composed of 10% of area
33 physicians, or the hospital to perform utilization review or to
34 conduct its own utilization review. A medical peer review

1 organization, as defined, may also contract with hospitals to
2 perform reviews on a delegated basis. The utilization review
3 process shall provide for the timely notification of patients
4 by the third party payor or review organization that further
5 services are deemed inappropriate or medically unnecessary.
6 Such notification shall inform the patient that his third party
7 payor will cease coverage after a stated period from the date
8 of the notification. No third party payor shall be liable for
9 charges for health care services rendered by a hospital
10 subsequent to the end of the notification period.

11 Nothing in this Section shall be construed as authorizing
12 any person or third party payor, other than through the use of
13 physicians licensed to practice medicine in all of its branches
14 or other licensed health care professionals under the
15 supervision of said physicians, to conduct utilization review.

16 (b) All costs associated with utilization review under this
17 section shall be billed to and paid by the third party payor
18 ordering the review.

19 (c) Any third party payor for hospital services may
20 contract with a hospital for a program of utilization review
21 different than that required by this subsection, which contract
22 may provide for the withholding and denial of payment for
23 hospital services to a beneficiary, when such treatment is
24 found in the course of utilization review to have been
25 inappropriate and unwarranted in the case of that beneficiary.

26 (d) All records and reports arising as a result of this
27 subsection shall be strictly privileged and confidential, as
28 provided under Part 21 of Article VIII of the Code of Civil
29 Procedure.

30 (Source: P.A. 91-357, eff. 7-29-99.)

31 Section 9100. The Department of Public Health Powers and
32 Duties Law of the Civil Administrative Code of Illinois is
33 amended by changing Sections 2310-135, 2310-215, 2310-338,
34 2310-353, 2310-395, and 2310-445 as follows:

1 (20 ILCS 2310/2310-135) (was 20 ILCS 2310/55.37)

2 Sec. 2310-135. Notice of suspension or termination of
3 medical services provider under Public Aid Code. When the
4 Department receives notice from the Department of Healthcare
5 and Family Services (formerly Department of Public Aid), as
6 required by Section 2205-10 of the Department of Healthcare and
7 Family Services ~~Public Aid~~ Law (20 ILCS 2205/2205-10), that the
8 authorization to provide medical services under Article V of
9 the Illinois Public Aid Code has been suspended or terminated
10 with respect to any person, firm, corporation, association,
11 agency, institution, or other legal entity licensed under any
12 Act administered by the Department of Public Health, the
13 Department of Public Health shall determine whether there are
14 reasonable grounds to investigate the circumstances that
15 resulted in the suspension or termination. If such reasonable
16 grounds are found, the Department of Public Health shall
17 conduct an investigation and take disciplinary action against
18 the licensee that the Department determines to be required
19 under the appropriate licensing Act.

20 (Source: P.A. 91-239, eff. 1-1-00.)

21 (20 ILCS 2310/2310-215) (was 20 ILCS 2310/55.62)

22 Sec. 2310-215. Center for Minority Health Services.

23 (a) The Department shall establish a Center for Minority
24 Health Services to advise the Department on matters pertaining
25 to the health needs of minority populations within the State.

26 (b) The Center shall have the following duties:

27 (1) To assist in the assessment of the health needs of
28 minority populations in the State.

29 (2) To recommend treatment methods and programs that
30 are sensitive and relevant to the unique linguistic,
31 cultural, and ethnic characteristics of minority
32 populations.

33 (3) To provide consultation, technical assistance,
34 training programs, and reference materials to service
35 providers, organizations, and other agencies.

1 (4) To promote awareness of minority health concerns,
2 and encourage, promote, and aid in the establishment of
3 minority services.

4 (5) To disseminate information on available minority
5 services.

6 (6) To provide adequate and effective opportunities
7 for minority populations to express their views on
8 Departmental policy development and program
9 implementation.

10 (7) To coordinate with the Department on Aging and the
11 Department of Healthcare and Family Services ~~Public Aid~~ to
12 coordinate services designed to meet the needs of minority
13 senior citizens.

14 (8) To promote awareness of the incidence of
15 Alzheimer's disease and related dementias among minority
16 populations and to encourage, promote, and aid in the
17 establishment of prevention and treatment programs and
18 services relating to this health problem.

19 (c) For the purpose of this Section, "minority" shall mean
20 and include any person or group of persons who are:

21 (1) African-American (a person having origins in any of
22 the black racial groups in Africa);

23 (2) Hispanic (a person of Spanish or Portuguese culture
24 with origins in Mexico, South or Central America, or the
25 Caribbean Islands, regardless of race);

26 (3) Asian American (a person having origins in any of
27 the original peoples of the Far East, Southeast Asia, the
28 Indian Subcontinent or the Pacific Islands); or

29 (4) American Indian or Alaskan Native (a person having
30 origins in any of the original peoples of North America).

31 (Source: P.A. 93-929, eff. 8-12-04.)

32 (20 ILCS 2310/2310-338)

33 Sec. 2310-338. Asthma prevention and control program.

34 (a) Subject to appropriations for this purpose, the
35 Department shall establish an asthma prevention and control

1 program to provide leadership in Illinois for and coordination
2 of asthma prevention and intervention activities. The program
3 may include, but need not be limited to, the following
4 features:

5 (1) Monitoring of asthma prevalence in the State.

6 (2) Education and training of health care
7 professionals concerning the current methods of diagnosing
8 and treating asthma.

9 (3) Patient and family education concerning the
10 management of asthma.

11 (4) Dissemination of information on programs shown to
12 reduce hospitalization, emergency room visits, and
13 absenteeism due to asthma.

14 (5) Consultation with and support of community-based
15 asthma prevention and control programs.

16 (6) Monitoring of environmental hazards or exposures,
17 or both, that may increase the incidence of asthma.

18 (b) In implementing the program established under
19 subsection (a), the Department shall consult with the
20 Department of Healthcare and Family Services ~~Public Aid~~ and the
21 State Board of Education. In addition, the Department shall
22 seek advice from other organizations and public and private
23 entities concerned about the prevention and treatment of
24 asthma.

25 (c) The Department may accept federal funding and grants,
26 and may contract for work with outside vendors or individuals,
27 for the purpose of implementing the program established under
28 subsection (a).

29 (Source: P.A. 93-1015, eff. 8-24-04.)

30 (20 ILCS 2310/2310-353)

31 Sec. 2310-353. Cervical Cancer Elimination Task Force.

32 (a) A standing Task Force on Cervical Cancer Elimination
33 ("Task Force") is established within the Illinois Department of
34 Public Health.

35 (b) The Task Force shall have 12 members appointed by the

1 Director of Public Health as follows:

2 (1) A representative of an organization relating to
3 women and cancer.

4 (2) A representative of an organization providing
5 health care to women.

6 (3) A health educator.

7 (4) A representative of a national organization
8 relating to cancer treatment who is an oncologist.

9 (5) A representative of the health insurance industry.

10 (6) A representative of a national organization of
11 obstetricians and gynecologists.

12 (7) A representative of a national organization of
13 family physicians.

14 (8) The State Epidemiologist.

15 (9) A member at-large with an interest in women's
16 health.

17 (10) A social marketing expert on health issues.

18 (11) A licensed registered nurse.

19 (12) A member of the Illinois Breast and Cervical
20 Cancer Medical Advisory Committee.

21 The directors of Public Health and Healthcare and Family
22 Services ~~Public Aid~~, and the Secretary of Human Services, or
23 their designees, and the Chair and Vice-Chair of the Conference
24 of Women Legislators in Illinois, or their designees, shall be
25 ex officio members of the Task Force. The Director of Public
26 Health shall also consult with the Speaker of the House of
27 Representatives, the Minority Leader of the House of
28 Representatives, the President of the Senate, and the Minority
29 Leader of the Senate in the designation of members of the
30 Illinois General Assembly as ex-officio members.

31 Appointments to the Task Force should reflect the
32 composition of the Illinois population with regard to ethnic,
33 racial, age, and religious composition.

34 (c) The Director of Public Health shall appoint a Chair
35 from among the members of the Task Force. The Task Force shall
36 elect a Vice-Chair from its members. Initial appointments to

1 the Task Force shall be made not later than 30 days after the
2 effective date of this amendatory Act of the 93rd General
3 Assembly. A majority of the Task Force shall constitute a
4 quorum for the transaction of its business. The Task Force
5 shall meet at least quarterly. The Task Force Chair may
6 establish sub-committees for the purpose of making special
7 studies; such sub-committees may include non-Task-Force
8 members as resource persons.

9 (d) Members of the Task Force shall be reimbursed for their
10 necessary expenses incurred in performing their duties. The
11 Department of Public Health shall provide staff and technical
12 assistance to the Task Force to the extent possible within
13 annual appropriations for its ordinary and contingent
14 expenses.

15 (e) The Task Force shall have the following duties:

16 (1) To obtain from the Department of Public Health, if
17 available, data and analyses regarding the prevalence and
18 burden of cervical cancer. The Task Force may conduct or
19 arrange for independent studies and analyses.

20 (2) To coordinate the efforts of the Task Force with
21 existing State committees and programs providing cervical
22 cancer screening, education, and case management.

23 (3) To raise public awareness on the causes and nature
24 of cervical cancer, personal risk factors, the value of
25 prevention, early detection, options for testing,
26 treatment costs, new technology, medical care
27 reimbursement, and physician education.

28 (4) To identify priority strategies, new technologies,
29 and newly introduced vaccines that are effective in
30 preventing and controlling the risk of cervical cancer.

31 (5) To identify and examine the limitations of existing
32 laws, regulations, programs, and services with regard to
33 coverage and awareness issues for cervical cancer,
34 including requiring insurance or other coverage for PAP
35 smears and mammograms in accordance with the most recently
36 published American Cancer Society guidelines.

1 (6) To develop a statewide comprehensive Cervical
2 Cancer Prevention Plan and strategies for implementing the
3 Plan and for promoting the Plan to the general public,
4 State and local elected officials, and various public and
5 private organizations, associations, businesses,
6 industries, and agencies.

7 (7) To receive and to consider reports and testimony
8 from individuals, local health departments,
9 community-based organizations, voluntary health
10 organizations, and other public and private organizations
11 statewide to learn more about their contributions to
12 cervical cancer diagnosis, prevention, and treatment and
13 more about their ideas for improving cervical cancer
14 prevention, diagnosis, and treatment in Illinois.

15 (f) The Task Force shall submit a report to the Governor
16 and the General Assembly by April 1, 2005 and by April 1 of
17 each year thereafter. The report shall include (i) information
18 regarding the progress being made in fulfilling the duties of
19 the Task Force and in developing the Cervical Cancer Prevention
20 Plan and (ii) recommended strategies or actions to reduce the
21 occurrence of cervical cancer and the burdens from cervical
22 cancer suffered by citizens of this State.

23 (g) The Task Force shall expire on April 1, 2009, or upon
24 submission of the Task Force's final report to the Governor and
25 the General Assembly, whichever occurs earlier.

26 (Source: P.A. 93-956, eff. 8-19-04.)

27 (20 ILCS 2310/2310-395) (was 20 ILCS 2310/55.72)

28 Sec. 2310-395. Task Force on Organ Transplantation.

29 (a) There is established within the Department a Task Force
30 on Organ Transplantation ("the Task Force"). The Task Force
31 shall have the following 21 members:

32 (1) The Director, ex officio, or his or her designee.

33 (2) The Secretary of State, ex officio, or his or her
34 designee.

35 (3) Four members, appointed one each by the President

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

4 (4) Fifteen members appointed by the Director as
5 follows: 2 physicians (at least one of whom shall have
6 experience in organ transplantation); one representative
7 of medical schools; one representative of hospitals; one
8 representative of insurers or self-insurers; one
9 representative of an organization devoted to organ
10 donation or the coordination of organ donations; one
11 representative of an organization that deals with tissue
12 donation or the coordination of tissue donations; one
13 representative from the ~~Illinois~~ Department of Healthcare
14 and Family Services ~~Public Aid~~; one representative from the
15 Illinois Eye Bank Community; one representative from the
16 Illinois Hospital and Health Systems Association; one
17 representative from the Illinois State Coroners
18 Association; one representative from the Illinois State
19 Medical Society; one representative from Mid-America
20 Transplantation Services; and 2 members of the general
21 public who are knowledgeable in areas of the Task Force's
22 work.

23 (b) The Task Force shall conduct a comprehensive
24 examination of the medical, legal, ethical, economic, and
25 social issues presented by human organ procurement and
26 transplantation.

27 (c) The Task Force shall report its findings and
28 recommendations to the Governor and the General Assembly on or
29 before January 1, of each year, and the Task Force's final
30 report shall be filed on or before January 1, 1999. The report
31 shall include, but need not be limited to, the following:

32 (1) An assessment of public and private efforts to
33 procure human organs for transplantation and an
34 identification of factors that diminish the number of
35 organs available for transplantation.

36 (2) An assessment of problems in coordinating the

1 procurement of viable human organs and tissue including
2 skin and bones.

3 (3) Recommendations for the education and training of
4 health professionals, including physicians, nurses, and
5 hospital and emergency care personnel, with respect to
6 organ procurement.

7 (4) Recommendations for the education of the general
8 public, the clergy, law enforcement officers, members of
9 local fire departments, and other agencies and individuals
10 that may be instrumental in affecting organ procurement.

11 (5) Recommendations for ensuring equitable access by
12 patients to organ transplantation and for ensuring the
13 equitable allocation of donated organs among transplant
14 centers and among patients medically qualified for an organ
15 transplant.

16 (6) An identification of barriers to the donation of
17 organs to patients (with special emphasis on pediatric
18 patients), including an assessment of each of the
19 following:

20 (A) Barriers to the improved identification of
21 organ donors and their families and organ recipients.

22 (B) The number of potential organ donors and their
23 geographical distribution.

24 (C) Current health care services provided for
25 patients who need organ transplantation and organ
26 procurement procedures, systems, and programs that
27 affect those patients.

28 (D) Cultural factors affecting the facility with
29 respect to the donation of the organs.

30 (E) Ethical and economic issues relating to organ
31 transplantation needed by chronically ill patients.

32 (7) An analysis of the factors involved in insurance
33 reimbursement for transplant procedures by private
34 insurers and the public sector.

35 (8) An analysis of the manner in which organ
36 transplantation technology is diffused among and adopted

1 by qualified medical centers, including a specification of
2 the number and geographical distribution of qualified
3 medical centers using that technology and an assessment of
4 whether the number of centers using that technology is
5 sufficient or excessive and whether the public has
6 sufficient access to medical procedures using that
7 technology.

8 (9) Recommendations for legislative changes necessary
9 to make organ transplants more readily available to
10 Illinois citizens.

11 (d) The Director of Public Health shall review the progress
12 of the Task Force to determine the need for its continuance,
13 and the Director shall report this determination to the
14 Governor and the General Assembly on or before January 1, 1999.
15 (Source: P.A. 91-239, eff. 1-1-00.)

16 (20 ILCS 2310/2310-445) (was 20 ILCS 2310/55.71)

17 Sec. 2310-445. Interagency council on health care for
18 pregnant women and infants.

19 (a) On or before January 1, 1994, the Director, in
20 cooperation with the Director of Public Aid (now Director of
21 Healthcare and Family Services), the Director of Children and
22 Family Services, the Director of Alcoholism and Substance
23 Abuse, and the Director of Insurance, shall develop and submit
24 to the Governor a proposal for consolidating all existing
25 health programs required by law for pregnant women and infants
26 into one comprehensive plan to be implemented by one or several
27 agencies. The proposal shall:

- 28 (1) include a time schedule for implementing the plan;
29 (2) provide a cost estimate of the plan;
30 (3) identify federal waivers necessary to implement
31 the plan;
32 (4) examine innovative programs; and
33 (5) identify sources of funding for the plan.

34 (b) The plan developed under subsection (a) shall provide
35 the following services statewide:

1 (1) Comprehensive prenatal services for all pregnant
2 women who qualify for existing programs through the
3 Department of Public Aid (now Department of Healthcare and
4 Family Services) or the Department of Public Health or any
5 other government-funded programs.

6 (2) Comprehensive medical care for all infants under 1
7 year of age.

8 (3) A case management system under which each family
9 with a child under the plan is assigned a case manager and
10 under which every reasonable effort is made to assure
11 continuity of case management and access to other
12 appropriate social services.

13 (4) Services regardless of and fees for services based
14 on clients' ability to pay.

15 (Source: P.A. 91-239, eff. 1-1-00.)

16 Section 9105. The Disabled Persons Rehabilitation Act is
17 amended by changing Section 3 as follows:

18 (20 ILCS 2405/3) (from Ch. 23, par. 3434)

19 Sec. 3. Powers and duties. The Department shall have the
20 powers and duties enumerated herein:

21 (a) To co-operate with the federal government in the
22 administration of the provisions of the federal Rehabilitation
23 Act of 1973, as amended, of the Workforce Investment Act of
24 1998, and of the federal Social Security Act to the extent and
25 in the manner provided in these Acts.

26 (b) To prescribe and supervise such courses of vocational
27 training and provide such other services as may be necessary
28 for the habilitation and rehabilitation of persons with one or
29 more disabilities, including the administrative activities
30 under subsection (e) of this Section, and to co-operate with
31 State and local school authorities and other recognized
32 agencies engaged in habilitation, rehabilitation and
33 comprehensive rehabilitation services; and to cooperate with
34 the Department of Children and Family Services regarding the

1 care and education of children with one or more disabilities.

2 (c) (Blank).

3 (d) To report in writing, to the Governor, annually on or
4 before the first day of December, and at such other times and
5 in such manner and upon such subjects as the Governor may
6 require. The annual report shall contain (1) a statement of the
7 existing condition of comprehensive rehabilitation services,
8 habilitation and rehabilitation in the State; (2) a statement
9 of suggestions and recommendations with reference to the
10 development of comprehensive rehabilitation services,
11 habilitation and rehabilitation in the State; and (3) an
12 itemized statement of the amounts of money received from
13 federal, State and other sources, and of the objects and
14 purposes to which the respective items of these several amounts
15 have been devoted.

16 (e) (Blank).

17 (f) To establish a program of services to prevent
18 unnecessary institutionalization of persons with Alzheimer's
19 disease and related disorders or persons in need of long term
20 care who are established as blind or disabled as defined by the
21 Social Security Act, thereby enabling them to remain in their
22 own homes or other living arrangements. Such preventive
23 services may include, but are not limited to, any or all of the
24 following:

- 25 (1) home health services;
- 26 (2) home nursing services;
- 27 (3) homemaker services;
- 28 (4) chore and housekeeping services;
- 29 (5) day care services;
- 30 (6) home-delivered meals;
- 31 (7) education in self-care;
- 32 (8) personal care services;
- 33 (9) adult day health services;
- 34 (10) habilitation services;
- 35 (11) respite care; or
- 36 (12) other nonmedical social services that may enable

1 the person to become self-supporting.

2 The Department shall establish eligibility standards for
3 such services taking into consideration the unique economic and
4 social needs of the population for whom they are to be
5 provided. Such eligibility standards may be based on the
6 recipient's ability to pay for services; provided, however,
7 that any portion of a person's income that is equal to or less
8 than the "protected income" level shall not be considered by
9 the Department in determining eligibility. The "protected
10 income" level shall be determined by the Department, shall
11 never be less than the federal poverty standard, and shall be
12 adjusted each year to reflect changes in the Consumer Price
13 Index For All Urban Consumers as determined by the United
14 States Department of Labor. The standards must provide that a
15 person may have not more than \$10,000 in assets to be eligible
16 for the services, and the Department may increase the asset
17 limitation by rule. Additionally, in determining the amount and
18 nature of services for which a person may qualify,
19 consideration shall not be given to the value of cash, property
20 or other assets held in the name of the person's spouse
21 pursuant to a written agreement dividing marital property into
22 equal but separate shares or pursuant to a transfer of the
23 person's interest in a home to his spouse, provided that the
24 spouse's share of the marital property is not made available to
25 the person seeking such services.

26 The services shall be provided to eligible persons to
27 prevent unnecessary or premature institutionalization, to the
28 extent that the cost of the services, together with the other
29 personal maintenance expenses of the persons, are reasonably
30 related to the standards established for care in a group
31 facility appropriate to their condition. These
32 non-institutional services, pilot projects or experimental
33 facilities may be provided as part of or in addition to those
34 authorized by federal law or those funded and administered by
35 the Illinois Department on Aging.

36 Personal care attendants shall be paid:

1 (i) A \$5 per hour minimum rate beginning July 1, 1995.

2 (ii) A \$5.30 per hour minimum rate beginning July 1,
3 1997.

4 (iii) A \$5.40 per hour minimum rate beginning July 1,
5 1998.

6 Solely for the purposes of coverage under the Illinois
7 Public Labor Relations Act (5 ILCS 315/), personal care
8 attendants and personal assistants providing services under
9 the Department's Home Services Program shall be considered to
10 be public employees and the State of Illinois shall be
11 considered to be their employer as of the effective date of
12 this amendatory Act of the 93rd General Assembly, but not
13 before. The State shall engage in collective bargaining with an
14 exclusive representative of personal care attendants and
15 personal assistants working under the Home Services Program
16 concerning their terms and conditions of employment that are
17 within the State's control. Nothing in this paragraph shall be
18 understood to limit the right of the persons receiving services
19 defined in this Section to hire and fire personal care
20 attendants and personal assistants or supervise them within the
21 limitations set by the Home Services Program. The State shall
22 not be considered to be the employer of personal care
23 attendants and personal assistants for any purposes not
24 specifically provided in this amendatory Act of the 93rd
25 General Assembly, including but not limited to, purposes of
26 vicarious liability in tort and purposes of statutory
27 retirement or health insurance benefits. Personal care
28 attendants and personal assistants shall not be covered by the
29 State Employees Group Insurance Act of 1971 (5 ILCS 375/).

30 The Department shall execute, relative to the nursing home
31 prescreening project, as authorized by Section 4.03 of the
32 Illinois Act on the Aging, written inter-agency agreements with
33 the Department on Aging and the Department of Public Aid (now
34 Department of Healthcare and Family Services), to effect the
35 following: (i) intake procedures and common eligibility
36 criteria for those persons who are receiving non-institutional

1 services; and (ii) the establishment and development of
2 non-institutional services in areas of the State where they are
3 not currently available or are undeveloped. On and after July
4 1, 1996, all nursing home prescreenings for individuals 18
5 through 59 years of age shall be conducted by the Department.

6 The Department is authorized to establish a system of
7 recipient cost-sharing for services provided under this
8 Section. The cost-sharing shall be based upon the recipient's
9 ability to pay for services, but in no case shall the
10 recipient's share exceed the actual cost of the services
11 provided. Protected income shall not be considered by the
12 Department in its determination of the recipient's ability to
13 pay a share of the cost of services. The level of cost-sharing
14 shall be adjusted each year to reflect changes in the
15 "protected income" level. The Department shall deduct from the
16 recipient's share of the cost of services any money expended by
17 the recipient for disability-related expenses.

18 The Department, or the Department's authorized
19 representative, shall recover the amount of moneys expended for
20 services provided to or in behalf of a person under this
21 Section by a claim against the person's estate or against the
22 estate of the person's surviving spouse, but no recovery may be
23 had until after the death of the surviving spouse, if any, and
24 then only at such time when there is no surviving child who is
25 under age 21, blind, or permanently and totally disabled. This
26 paragraph, however, shall not bar recovery, at the death of the
27 person, of moneys for services provided to the person or in
28 behalf of the person under this Section to which the person was
29 not entitled; provided that such recovery shall not be enforced
30 against any real estate while it is occupied as a homestead by
31 the surviving spouse or other dependent, if no claims by other
32 creditors have been filed against the estate, or, if such
33 claims have been filed, they remain dormant for failure of
34 prosecution or failure of the claimant to compel administration
35 of the estate for the purpose of payment. This paragraph shall
36 not bar recovery from the estate of a spouse, under Sections

1 1915 and 1924 of the Social Security Act and Section 5-4 of the
2 Illinois Public Aid Code, who precedes a person receiving
3 services under this Section in death. All moneys for services
4 paid to or in behalf of the person under this Section shall be
5 claimed for recovery from the deceased spouse's estate.
6 "Homestead", as used in this paragraph, means the dwelling
7 house and contiguous real estate occupied by a surviving spouse
8 or relative, as defined by the rules and regulations of the
9 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
10 ~~Aid~~, regardless of the value of the property.

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

16 The requirement for reporting to the General Assembly shall
17 be satisfied by filing copies of the report with the Speaker,
18 the Minority Leader and the Clerk of the House of
19 Representatives and the President, the Minority Leader and the
20 Secretary of the Senate and the Legislative Research Unit, as
21 required by Section 3.1 of the General Assembly Organization
22 Act, and filing additional copies with the State Government
23 Report Distribution Center for the General Assembly as required
24 under paragraph (t) of Section 7 of the State Library Act.

25 (g) To establish such subdivisions of the Department as
26 shall be desirable and assign to the various subdivisions the
27 responsibilities and duties placed upon the Department by law.

28 (h) To cooperate and enter into any necessary agreements
29 with the Department of Employment Security for the provision of
30 job placement and job referral services to clients of the
31 Department, including job service registration of such clients
32 with Illinois Employment Security offices and making job
33 listings maintained by the Department of Employment Security
34 available to such clients.

35 (i) To possess all powers reasonable and necessary for the
36 exercise and administration of the powers, duties and

1 responsibilities of the Department which are provided for by
2 law.

3 (j) To establish a procedure whereby new providers of
4 personal care attendant services shall submit vouchers to the
5 State for payment two times during their first month of
6 employment and one time per month thereafter. In no case shall
7 the Department pay personal care attendants an hourly wage that
8 is less than the federal minimum wage.

9 (k) To provide adequate notice to providers of chore and
10 housekeeping services informing them that they are entitled to
11 an interest payment on bills which are not promptly paid
12 pursuant to Section 3 of the State Prompt Payment Act.

13 (l) To establish, operate and maintain a Statewide Housing
14 Clearinghouse of information on available, government
15 subsidized housing accessible to disabled persons and
16 available privately owned housing accessible to disabled
17 persons. The information shall include but not be limited to
18 the location, rental requirements, access features and
19 proximity to public transportation of available housing. The
20 Clearinghouse shall consist of at least a computerized database
21 for the storage and retrieval of information and a separate or
22 shared toll free telephone number for use by those seeking
23 information from the Clearinghouse. Department offices and
24 personnel throughout the State shall also assist in the
25 operation of the Statewide Housing Clearinghouse. Cooperation
26 with local, State and federal housing managers shall be sought
27 and extended in order to frequently and promptly update the
28 Clearinghouse's information.

29 (m) To assure that the names and case records of persons
30 who received or are receiving services from the Department,
31 including persons receiving vocational rehabilitation, home
32 services, or other services, and those attending one of the
33 Department's schools or other supervised facility shall be
34 confidential and not be open to the general public. Those case
35 records and reports or the information contained in those
36 records and reports shall be disclosed by the Director only to

1 proper law enforcement officials, individuals authorized by a
2 court, the General Assembly or any committee or commission of
3 the General Assembly, and other persons and for reasons as the
4 Director designates by rule. Disclosure by the Director may be
5 only in accordance with other applicable law.

6 (Source: P.A. 93-204, eff. 7-16-03; 94-252, eff. 1-1-06.)

7 Section 9110. The Disabilities Services Act of 2003 is
8 amended by changing Sections 10 and 20 as follows:

9 (20 ILCS 2407/10)

10 Sec. 10. Application of Act; definitions.

11 (a) This Act applies to persons with disabilities. The
12 disabilities included are defined for purposes of this Act as
13 follows:

14 "Disability" means a disability as defined by the Americans
15 with Disabilities Act of 1990 that is attributable to a
16 developmental disability, a mental illness, or a physical
17 disability, or combination of those.

18 "Developmental disability" means a disability that is
19 attributable to mental retardation or a related condition. A
20 related condition must meet all of the following conditions:

21 (1) It must be attributable to cerebral palsy,
22 epilepsy, or any other condition (other than mental
23 illness) found to be closely related to mental retardation
24 because that condition results in impairment of general
25 intellectual functioning or adaptive behavior similar to
26 that of individuals with mental retardation, and requires
27 treatment or services similar to those required for those
28 individuals. For purposes of this Section, autism is
29 considered a related condition.

30 (2) It must be manifested before the individual reaches
31 age 22.

32 (3) It must be likely to continue indefinitely.

33 (4) It must result in substantial functional
34 limitations in 3 or more of the following areas of major

1 life activity: self-care, language, learning, mobility,
2 self-direction, and capacity for independent living.

3 "Mental Illness" means a mental or emotional disorder
4 verified by a diagnosis contained in the Diagnostic and
5 Statistical Manual of Mental Disorders-Fourth Edition,
6 published by the American Psychiatric Association (DSM-IV), or
7 its successor, or International Classification of Diseases,
8 9th Revision, Clinical Modification (ICD-9-CM), or its
9 successor, that substantially impairs a person's cognitive,
10 emotional, or behavioral functioning, or any combination of
11 those, excluding (i) conditions that may be the focus of
12 clinical attention but are not of sufficient duration or
13 severity to be categorized as a mental illness, such as
14 parent-child relational problems, partner-relational problems,
15 sexual abuse of a child, bereavement, academic problems,
16 phase-of-life problems, and occupational problems
17 (collectively, "V codes"), (ii) organic disorders such as
18 substance intoxication dementia, substance withdrawal
19 dementia, Alzheimer's disease, vascular dementia, dementia due
20 to HIV infection, and dementia due to Creutzfeld-Jakob disease
21 and disorders associated with known or unknown physical
22 conditions such as hallucinosis ~~hallucinosis~~, amnestic
23 disorders and delirium, and psychoactive substance-induced
24 organic disorders, and (iii) mental retardation or
25 psychoactive substance use disorders.

26 "Mental retardation" means significantly sub-average
27 general intellectual functioning existing concurrently with
28 deficits in adaptive behavior and manifested before the age of
29 22 years.

30 "Physical disability" means a disability as defined by the
31 Americans with Disabilities Act of 1990 that meets the
32 following criteria:

- 33 (1) It is attributable to a physical impairment.
34 (2) It results in a substantial functional limitation
35 in any of the following areas of major life activity: (i)
36 self-care, (ii) receptive and expressive language, (iii)

1 learning, (iv) mobility, (v) self-direction, (vi) capacity
2 for independent living, and (vii) economic sufficiency.

3 (3) It reflects the person's need for a combination and
4 sequence of special, interdisciplinary, or general care,
5 treatment, or other services that are of lifelong or of
6 extended duration and must be individually planned and
7 coordinated.

8 (b) In this Act:

9 "Chronological age-appropriate services" means services,
10 activities, and strategies for persons with disabilities that
11 are representative of the lifestyle activities of nondisabled
12 peers of similar age in the community.

13 "Comprehensive evaluation" means procedures used by
14 qualified professionals selectively with an individual to
15 determine whether a person has a disability and the nature and
16 extent of the services that the person with a disability needs.

17 "Department" means the Department on Aging, the Department
18 of Human Services, the Department of Public Health, the
19 Department of Public Aid (now Department Healthcare and Family
20 Services), the University of Illinois Division of Specialized
21 Care for Children, the Department of Children and Family
22 Services, and the Illinois State Board of Education, where
23 appropriate, as designated in the implementation plan
24 developed under Section 20.

25 "Family" means a natural, adoptive, or foster parent or
26 parents or other person or persons responsible for the care of
27 an individual with a disability in a family setting.

28 "Family or individual support" means those resources and
29 services that are necessary to maintain an individual with a
30 disability within the family home or his or her own home. These
31 services may include, but are not limited to, cash subsidy,
32 respite care, and counseling services.

33 "Independent service coordination" means a social service
34 that enables persons with developmental disabilities and their
35 families to locate, use, and coordinate resources and
36 opportunities in their communities on the basis of individual

1 need. Independent service coordination is independent of
2 providers of services and funding sources and is designed to
3 ensure accessibility, continuity of care, and accountability
4 and to maximize the potential of persons with developmental
5 disabilities for independence, productivity, and integration
6 into the community. Independent service coordination includes,
7 at a minimum: (i) outreach to identify eligible individuals;
8 (ii) assessment and periodic reassessment to determine each
9 individual's strengths, functional limitations, and need for
10 specific services; (iii) participation in the development of a
11 comprehensive individual service or treatment plan; (iv)
12 referral to and linkage with needed services and supports; (v)
13 monitoring to ensure the delivery of appropriate services and
14 to determine individual progress in meeting goals and
15 objectives; and (vi) advocacy to assist the person in obtaining
16 all services for which he or she is eligible or entitled.

17 "Individual service or treatment plan" means a recorded
18 assessment of the needs of a person with a disability, a
19 description of the services recommended, the goals of each type
20 of element of service, an anticipated timetable for the
21 accomplishment of the goals, and a designation of the qualified
22 professionals responsible for the implementation of the plan.

23 "Least restrictive environment" means an environment that
24 represents the least departure from the normal patterns of
25 living and that effectively meets the needs of the person
26 receiving the service.

27 (Source: P.A. 93-638, eff. 12-31-03; revised 10-12-05.)

28 (20 ILCS 2407/20)

29 Sec. 20. Implementation.

30 (a) The Governor shall appoint an advisory committee to
31 assist in the development and implementation of a Disabilities
32 Services Implementation Plan that will ensure compliance by the
33 State of Illinois with the Americans with Disabilities Act and
34 the decision in *Olmstead v. L.C.*, 119 S.Ct. 2176 (1999). The
35 advisory committee shall be known as the Illinois Disabilities

1 Services Advisory Committee and shall be composed of no more
2 than 33 members, including: persons who have a physical
3 disability, a developmental disability, or a mental illness;
4 senior citizens; advocates for persons with physical
5 disabilities; advocates for persons with developmental
6 disabilities; advocates for persons with mental illness;
7 advocates for senior citizens; representatives of providers of
8 services to persons with physical disabilities, developmental
9 disabilities, and mental illness; representatives of providers
10 of services to senior citizens; and representatives of
11 organized labor.

12 In addition, the following State officials shall serve on
13 the committee as ex-officio non-voting members: the Secretary
14 of Human Services or his or her designee; the State
15 Superintendent of Education or his or her designee; the
16 Director of Aging or his or her designee; the Executive
17 Director of the Illinois Housing Development Authority or his
18 or her designee; the Director of Public Aid (now Director of
19 Healthcare and Family Services) or his or her designee; and the
20 Director of Employment Security or his or her designee.

21 The advisory committee shall select officers, including a
22 chair and a vice-chair.

23 The advisory committee shall meet at least quarterly and
24 shall keep official meeting minutes. Committee members shall
25 not be compensated but shall be paid for their expenses related
26 to attendance at meetings.

27 (b) The implementation plan must include, but need not be
28 limited to, the following:

29 (1) Establishing procedures for completing
30 comprehensive evaluations, including provisions for
31 Department review and approval of need determinations. The
32 Department may utilize independent evaluators and targeted
33 or sample reviews during this review and approval process,
34 as it deems appropriate.

35 (2) Establishing procedures for the development of an
36 individual service or treatment plan for each person with a

1 disability, including provisions for Department review and
2 authorization.

3 (3) Identifying core services to be provided by
4 agencies of the State of Illinois or other agencies.

5 (4) Establishing minimum standards for individualized
6 services.

7 (5) Establishing minimum standards for residential
8 services in the least restrictive environment.

9 (6) Establishing minimum standards for vocational
10 services.

11 (7) Establishing due process hearing procedures.

12 (8) Establishing minimum standards for family support
13 services.

14 (9) Securing financial resources necessary to fulfill
15 the purposes and requirements of this Act, including but
16 not limited to obtaining approval and implementing waivers
17 or demonstrations authorized under federal law.

18 (c) The Governor, with the assistance of the Illinois
19 Disabilities Services Advisory Committee and the Secretary of
20 Human Services, is responsible for the completion of the
21 implementation plan. The Governor must submit a report to the
22 General Assembly by November 1, 2004, which must include the
23 following:

24 (1) The implementation plan.

25 (2) A description of current and planned programs and
26 services necessary to meet the requirements of the
27 individual service or treatment plans required by this Act,
28 together with the actions to be taken by the State of
29 Illinois to ensure that those plans will be implemented.
30 This description shall include a report of related program
31 and service improvements or expansions implemented by the
32 Department since the effective date of this Act.

33 (3) The estimated costs of current and planned programs
34 and services to be provided under the implementation plan.

35 (4) A report on the number of persons with disabilities
36 who may be eligible to receive services under this Act,

1 together with a report on the number of persons who are
2 currently receiving those services.

3 (5) Any proposed changes in State policies, laws, or
4 regulations necessary to fulfill the purposes and
5 requirements of this Act.

6 (d) The Governor, with the assistance of the Secretary of
7 Human Services, shall annually update the implementation plan
8 and report changes to the General Assembly by July 1 of each
9 year. Initial implementation of the plan is required by July 1,
10 2005. The requirement of annual updates and reports expires in
11 2008, unless otherwise extended by the General Assembly.

12 (Source: P.A. 93-638, eff. 12-31-03.)

13 Section 9115. The Department of Revenue Law of the Civil
14 Administrative Code of Illinois is amended by changing Sections
15 2505-65 and 2505-650 as follows:

16 (20 ILCS 2505/2505-65) (was 20 ILCS 2505/39b12)

17 Sec. 2505-65. Exchange of information.

18 (a) The Department has the power to exchange with any
19 state, with any local subdivisions of any state, or with the
20 federal government, except when specifically prohibited by
21 law, any information that may be necessary to efficient tax
22 administration and that may be acquired as a result of the
23 administration of the laws set forth in the Sections following
24 Section 95-10 and preceding Section 2505-60.

25 (b) The Department has the power to exchange with the
26 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
27 ~~Aid~~ information that may be necessary for the enforcement of
28 child support orders entered pursuant to the Illinois Public
29 Aid Code, the Illinois Marriage and Dissolution of Marriage
30 Act, the Non-Support of Spouse and Children Act, the
31 Non-Support Punishment Act, the Revised Uniform Reciprocal
32 Enforcement of Support Act, the Uniform Interstate Family
33 Support Act, or the Illinois Parentage Act of 1984.
34 Notwithstanding any provisions in this Code to the contrary,

1 the Department of Revenue shall not be liable to any person for
2 any disclosure of information to the Department of Healthcare
3 and Family Services (formerly Illinois Department of Public
4 Aid) under this subsection (b) or for any other action taken in
5 good faith to comply with the requirements of this subsection
6 (b).

7 (Source: P.A. 91-239, eff. 1-1-00; 91-613, eff. 10-1-99; 92-16,
8 eff. 6-28-01.)

9 (20 ILCS 2505/2505-650) (was 20 ILCS 2505/39b52)

10 Sec. 2505-650. Collection of past due support. Upon
11 certification of past due child support amounts from the
12 Department of Healthcare and Family Services (formerly
13 Department of Public Aid), the Department of Revenue may
14 collect the delinquency in any manner authorized for the
15 collection of any tax administered by the Department of
16 Revenue. The Department of Revenue shall notify the Department
17 of Healthcare and Family Services ~~Public Aid~~ when the
18 delinquency or any portion of the delinquency has been
19 collected under this Section. Any child support delinquency
20 collected by the Department of Revenue, including those amounts
21 that result in overpayment of a child support delinquency,
22 shall be deposited into the Child Support Enforcement Trust
23 Fund or paid to the State Disbursement Unit established under
24 Section 10-26 of the Illinois Public Aid Code, at the direction
25 of the Department of Healthcare and Family Services ~~Public Aid~~.
26 The Department of Revenue may implement this Section through
27 the use of emergency rules in accordance with Section 5-45 of
28 the Illinois Administrative Procedure Act. For purposes of the
29 Illinois Administrative Procedure Act, the adoption of rules to
30 implement this Section shall be considered an emergency and
31 necessary for the public interest, safety, and welfare.

32 (Source: P.A. 90-491, eff. 1-1-98; 91-212, eff. 7-20-99;
33 91-239, eff. 1-1-00; 91-712, eff. 7-1-00.)

34 Section 9120. The Department of State Police Law of the

1 Civil Administrative Code of Illinois is amended by changing
2 Section 2605-377 as follows:

3 (20 ILCS 2605/2605-377) (was 20 ILCS 2605/55a in part)

4 Sec. 2605-377. Department of Healthcare and Family
5 Services ~~Public Aid~~; LEADS access.

6 (a) The ~~Illinois~~ Department of Healthcare and Family
7 Services ~~Public Aid~~ is an authorized entity under this Law for
8 the purpose of exchanging information, in the form and manner
9 required by the Department of State Police, to facilitate the
10 location of individuals for establishing paternity, and
11 establishing, modifying, and enforcing child support
12 obligations, pursuant to the Illinois Public Aid Code and Title
13 IV, Part D of the Social Security Act.

14 (b) The ~~Illinois~~ Department of Healthcare and Family
15 Services ~~Public Aid~~ is an authorized entity under this Section
16 for the purpose of obtaining access to various data
17 repositories available through LEADS, to facilitate the
18 location of individuals for establishing paternity, and
19 establishing, modifying, and enforcing child support
20 obligations, pursuant to the Illinois Public Aid Code and Title
21 IV, Part D of the Social Security Act. The Department shall
22 enter into an agreement with the ~~Illinois~~ Department of
23 Healthcare and Family Services ~~Public Aid~~ consistent with these
24 purposes.

25 (Source: P.A. 90-18, eff. 7-1-97; 90-130, eff. 1-1-98; 90-372,
26 eff. 7-1-98; 90-590, eff. 1-1-00; 90-655, eff. 7-30-98; 90-793,
27 eff. 8-14-98; 91-239, eff. 1-1-00; 91-760, eff. 1-1-01.)

28 Section 9122. The Department of Veterans Affairs Act is
29 amended by adding Section 2.08 as follows:

30 (20 ILCS 2805/2.08 new)

31 Sec. 2.08. Healthcare purchasing; Department of Healthcare
32 and Family Services. Notwithstanding any other provision of
33 this Act, the Department of Healthcare and Family Services

1 shall perform all healthcare purchasing functions in
2 connection with health care plans administered by the State on
3 behalf of residents of veterans homes operated by the
4 Department of Veterans' Affairs, as provided in the Executive
5 Order 3 (2005) Implementation Act.

6 Section 9125. The Illinois African-American Family
7 Commission Act is amended by changing Sections 15, 20, and 25
8 as follows:

9 (20 ILCS 3903/15)

10 Sec. 15. Purpose and objectives.

11 (a) The purpose of the Illinois African-American Family
12 Commission is to guide the efforts of and collaborate with the
13 Department on Aging, the Department of Children and Family
14 Services, the Department of Commerce and Economic Opportunity,
15 the Department of Corrections, the Department of Human
16 Services, the Department of Healthcare and Family Services
17 ~~Public Aid~~, the Department of Public Health, the Department of
18 Transportation, and others to improve and expand existing human
19 services and educational and community development programs
20 for African-Americans. This will be achieved by:

21 (1) Monitoring existing legislation and programs
22 designed to address the needs of African-Americans in
23 Illinois;

24 (2) Assisting State agencies in developing programs,
25 services, public policies, and research strategies that
26 will expand and enhance the social and economic well-being
27 of African-American children and families; and

28 (3) Facilitating the participation of
29 African-Americans in the development, implementation, and
30 planning of community-based services.

31 The work of the Illinois African-American Family
32 Commission shall include the use of existing reports, research
33 and planning efforts, procedures, and programs.

34 (Source: P.A. 93-867, eff. 8-5-04.)

1 (20 ILCS 3903/20)

2 Sec. 20. Appointment; terms. The Illinois African-American
3 Family Commission shall be comprised of 15 members who shall be
4 appointed by the Governor. Each member shall have a working
5 knowledge of human services, community development, and
6 economic public policies in Illinois. The Governor shall
7 appoint the chairperson or chairpersons.

8 The members shall reflect regional representation to
9 ensure that the needs of African-American families and children
10 throughout the State of Illinois are met. The members shall be
11 selected from a variety of disciplines. They shall be
12 representative of a partnership and collaborative effort
13 between public and private agencies, the business sector, and
14 community-based human services organizations.

15 Members shall serve 3-year terms, except in the case of
16 initial appointments. One-third of initially appointed
17 members, as determined by lot, shall be appointed to 1-year
18 terms; 1/3 shall be appointed to 2-year terms; and 1/3 shall be
19 appointed to 3-year terms, so that the terms are staggered.
20 Members will serve without compensation, but shall be
21 reimbursed for Commission-related expenses.

22 The Department on Aging, the Department of Children and
23 Family Services, the Department of Commerce and Economic
24 Opportunity, the Department of Corrections, the Department of
25 Human Services, the Department of Healthcare and Family
26 Services ~~Public Aid~~, the Department of Public Health, and the
27 Department of Transportation shall each appoint a liaison to
28 serve ex-officio on the Commission.

29 (Source: P.A. 93-867, eff. 8-5-04.)

30 (20 ILCS 3903/25)

31 Sec. 25. Funding. The African-American Family Commission
32 shall receive funding through appropriations available for its
33 purposes made to the Department on Aging, the Department of
34 Children and Family Services, the Department of Commerce and

1 Economic Opportunity, the Department of Corrections, the
2 Department of Human Services, the Department of Healthcare and
3 Family Services (formerly Department of Public Aid), the
4 Department of Public Health, and the Department of
5 Transportation.

6 (Source: P.A. 93-867, eff. 8-5-04.)

7 Section 9130. The Illinois Early Learning Council Act is
8 amended by changing Section 10 as follows:

9 (20 ILCS 3933/10)

10 Sec. 10. Membership. The Illinois Early Learning Council
11 shall include representation from both public and private
12 organizations, and its membership shall reflect regional,
13 racial, and cultural diversity to ensure representation of the
14 needs of all Illinois children. One member shall be appointed
15 by the President of the Senate, one member appointed by the
16 Minority Leader of the Senate, one member appointed by the
17 Speaker of the House of Representatives, one member appointed
18 by the Minority Leader of the House of Representatives, and
19 other members appointed by the Governor. The Governor's
20 appointments shall include without limitation the following:

21 (1) A leader of stature from the Governor's office, to
22 serve as co-chairperson of the Council.

23 (2) The chief administrators of the following State
24 agencies: State Board of Education; Department of Human
25 Services; Department of Children and Family Services;
26 Department of Public Health; Department of Healthcare and
27 Family Services ~~Public Aid~~; Board of Higher Education; and
28 Illinois Community College Board.

29 (3) Local government stakeholders and nongovernment
30 stakeholders with an interest in early childhood care and
31 education, including representation from the following
32 private-sector fields and constituencies: early childhood
33 education and development; child care; child advocacy;
34 parenting support; local community collaborations among

1 early care and education programs and services; maternal
2 and child health; children with special needs; business;
3 labor; and law enforcement. The Governor shall designate
4 one of the members who is a nongovernment stakeholder to
5 serve as co-chairperson.

6 In addition, the Governor shall request that the Region V
7 office of the U.S. Department of Health and Human Services'
8 Administration for Children and Families appoint a member to
9 the Council to represent federal children's programs and
10 services.

11 Members appointed by General Assembly members and members
12 appointed by the Governor who are local government or
13 nongovernment stakeholders shall serve 3-year terms, except
14 that of the initial appointments, half of these members, as
15 determined by lot, shall be appointed to 2-year terms so that
16 terms are staggered. Members shall serve on a voluntary, unpaid
17 basis.

18 (Source: P.A. 93-380, eff. 7-24-03.)

19 Section 9135. The Human Services 211 Collaboration Board
20 Act is amended by changing Section 10 as follows:

21 (20 ILCS 3956/10)

22 Sec. 10. Human Services 211 Collaboration Board.

23 (a) The Human Services 211 Collaboration Board is
24 established to implement a non-emergency telephone number that
25 will provide human services information concerning the
26 availability of governmental and non-profit services and
27 provide referrals to human services agencies, which may include
28 referral to an appropriate web site. The Board shall consist of
29 9 members appointed by the Governor. The Governor shall appoint
30 one representative of each of the following Offices and
31 Departments as a member of the Board: the Office of the
32 Governor, the Department of Human Services, the Department of
33 Healthcare and Family Services ~~Public Aid~~, the Department of
34 Public Health, the Department of Children and Family Services,

1 the Department on Aging, the Department of Employment Security,
2 the Department of Human Rights, and the Illinois Commerce
3 Commission. The Governor shall designate one of the members as
4 Chairperson. Members of the Board shall serve 3-year terms and
5 may be reappointed to serve additional terms.

6 (b) The Board shall establish standards consistent with the
7 standards established by the National 211 Collaborative and the
8 Alliance of Information and Referral Systems for providing
9 information about and referrals to human services agencies to
10 211 callers. The standards shall prescribe the technology or
11 manner of delivering 211 calls and shall not exceed any
12 requirements for 211 systems set by the Federal Communications
13 Commission. The standards shall be consistent with the
14 Americans with Disabilities Act, ensuring accessibility for
15 users of Teletypewriters for the Deaf (TTY).

16 (Source: P.A. 93-613, eff. 11-18-03; 94-427, eff. 1-1-06.)

17 Section 9140. The Illinois Health Facilities Planning Act
18 is amended by changing Section 4 as follows:

19 (20 ILCS 3960/4) (from Ch. 111 1/2, par. 1154)

20 (Section scheduled to be repealed on July 1, 2006)

21 Sec. 4. Health Facilities Planning Board; membership;
22 appointment; term; compensation; quorum. There is created the
23 Health Facilities Planning Board, which shall perform the
24 functions described in this Act.

25 The State Board shall consist of 5 voting members. Each
26 member shall have a reasonable knowledge of health planning,
27 health finance, or health care at the time of his or her
28 appointment. No person shall be appointed or continue to serve
29 as a member of the State Board who is, or whose spouse, parent,
30 or child is, a member of the Board of Directors of, has a
31 financial interest in, or has a business relationship with a
32 health care facility.

33 Notwithstanding any provision of this Section to the
34 contrary, the term of office of each member of the State Board

1 is abolished on the effective date of this amendatory Act of
2 the 93rd General Assembly and those members no longer hold
3 office.

4 The State Board shall be appointed by the Governor, with
5 the advice and consent of the Senate. Not more than 3 of the
6 appointments shall be of the same political party at the time
7 of the appointment. No person shall be appointed as a State
8 Board member if that person has served, after the effective
9 date of Public Act 93-41, 2 3-year terms as a State Board
10 member, except for ex officio non-voting members.

11 The Secretary of Human Services, the Director of Healthcare
12 and Family Services ~~Public Aid~~, and the Director of Public
13 Health, or their designated representatives, shall serve as
14 ex-officio, non-voting members of the State Board.

15 Of those members initially appointed by the Governor under
16 this amendatory Act of the 93rd General Assembly, 2 shall serve
17 for terms expiring July 1, 2005, 2 shall serve for terms
18 expiring July 1, 2006, and 1 shall serve for a term expiring
19 July 1, 2007. Thereafter, each appointed member shall hold
20 office for a term of 3 years, provided that any member
21 appointed to fill a vacancy occurring prior to the expiration
22 of the term for which his or her predecessor was appointed
23 shall be appointed for the remainder of such term and the term
24 of office of each successor shall commence on July 1 of the
25 year in which his predecessor's term expires. Each member
26 appointed after the effective date of this amendatory Act of
27 the 93rd General Assembly shall hold office until his or her
28 successor is appointed and qualified.

29 State Board members, while serving on business of the State
30 Board, shall receive actual and necessary travel and
31 subsistence expenses while so serving away from their places of
32 residence. A member of the State Board who experiences a
33 significant financial hardship due to the loss of income on
34 days of attendance at meetings or while otherwise engaged in
35 the business of the State Board may be paid a hardship
36 allowance, as determined by and subject to the approval of the

1 Governor's Travel Control Board.

2 The Governor shall designate one of the members to serve as
3 Chairman and shall name as full-time Executive Secretary of the
4 State Board, a person qualified in health care facility
5 planning and in administration. The Agency shall provide
6 administrative and staff support for the State Board. The State
7 Board shall advise the Director of its budgetary and staff
8 needs and consult with the Director on annual budget
9 preparation.

10 The State Board shall meet at least once each quarter, or
11 as often as the Chairman of the State Board deems necessary, or
12 upon the request of a majority of the members.

13 Three members of the State Board shall constitute a
14 quorum. The affirmative vote of 3 of the members of the State
15 Board shall be necessary for any action requiring a vote to be
16 taken by the State Board. A vacancy in the membership of the
17 State Board shall not impair the right of a quorum to exercise
18 all the rights and perform all the duties of the State Board as
19 provided by this Act.

20 A State Board member shall disqualify himself or herself
21 from the consideration of any application for a permit or
22 exemption in which the State Board member or the State Board
23 member's spouse, parent, or child: (i) has an economic interest
24 in the matter; or (ii) is employed by, serves as a consultant
25 for, or is a member of the governing board of the applicant or
26 a party opposing the application.

27 (Source: P.A. 93-41, eff. 6-27-03; 93-889, eff. 8-9-04.)

28 Section 9145. The Interagency Coordinating Committee on
29 Transportation Act is amended by changing Section 15 as
30 follows:

31 (20 ILCS 3968/15)

32 Sec. 15. Committee. The Illinois Coordinating Committee on
33 Transportation is created and shall consist of the following
34 members:

- 1 (1) The Governor or his or her designee.
- 2 (2) The Secretary of Transportation or his or her designee.
- 3 (3) The Secretary of Human Services or his or her designee.
- 4 (4) The Director of Aging or his or her designee.
- 5 (5) The Director of Healthcare and Family Services ~~Public~~
6 ~~Aid~~ or his or her designee.
- 7 (6) The Director of Commerce and Economic Opportunity
8 ~~Community Affairs~~ or his or her designee.
- 9 (7) A representative of the Illinois Rural Transit
10 Assistance Center.
- 11 (8) A person who is a member of a recognized statewide
12 organization representing older residents of Illinois.
- 13 (9) A representative of centers for independent living.
- 14 (10) A representative of the Illinois Public
15 Transportation Association.
- 16 (11) A representative of an existing transportation system
17 that coordinates and provides transit services in a
18 multi-county area for the Department of Transportation,
19 Department of Human Services, Department of Commerce and
20 Economic Opportunity ~~Community Affairs~~, or Department on
21 Aging.
- 22 (12) A representative of a statewide organization of
23 rehabilitation facilities or other providers of services for
24 persons with one or more disabilities.
- 25 (13) A representative of a community-based organization.
- 26 (14) A representative of the Department of Public Health.
- 27 (15) A representative of the Rural Partners.
- 28 (16) The Director of Employment Security or his or her
29 designee.
- 30 (17) A representative of a statewide business association.
- 31 (18) A representative of the Illinois Council on
32 Developmental Disabilities.

33 The Governor shall appoint the members of the Committee
34 other than those named in paragraphs (1) through (6) and
35 paragraph (16) of this Section. The Governor or his or her
36 designee shall serve as chairperson of the Committee and shall

1 convene the meetings of the Committee. The Secretary of
2 Transportation and a representative of a community-based
3 organization involved in transportation or their designees,
4 shall serve as co-vice-chairpersons and shall be responsible
5 for staff support for the committee.

6 (Source: P.A. 93-185, eff. 7-11-03; revised 12-6-03.)

7 Section 9150. The Interagency Coordinating Council Act is
8 amended by changing Section 2 as follows:

9 (20 ILCS 3970/2) (from Ch. 127, par. 3832)

10 Sec. 2. Interagency Coordinating Council. There is hereby
11 created an Interagency Coordinating Council which shall be
12 composed of the Directors, or their designees, of the Illinois
13 Department of Children and Family Services, Illinois
14 Department of Commerce and Economic Opportunity ~~Community~~
15 ~~Affairs~~, Illinois Department of Corrections, Illinois
16 Department of Employment Security, and Illinois Department of
17 Healthcare and Family Services ~~Public Aid~~; the Secretary of
18 Human Services or his or her designee; the Executive Director,
19 or a designee, of the Illinois Community College Board, the
20 Board of Higher Education, and the Illinois Planning Council on
21 Developmental Disabilities; the State Superintendent of
22 Education, or a designee; and a designee representing the
23 University of Illinois - Division of Specialized Care for
24 Children. The Secretary of Human Services (or the member who is
25 the designee for the Secretary of Human Services) and the State
26 Superintendent of Education (or the member who is the designee
27 for the State Superintendent of Education) shall be co-chairs
28 of the Council. The co-chairs shall be responsible for ensuring
29 that the functions described in Section 3 of this Act are
30 carried out.

31 (Source: P.A. 92-452, eff. 8-21-01; revised 12-6-03.)

32 Section 9155. The Illinois Council on Developmental
33 Disabilities Law is amended by changing Section 2004.5 as

1 follows:

2 (20 ILCS 4010/2004.5)

3 Sec. 2004.5. Council membership. The General Assembly
4 intends that the reduction in the membership of the Council
5 shall occur through attrition between the effective date of
6 this amendatory Act of the 91st General Assembly and January 1,
7 2001. In the event that the terms of 10 voting members have not
8 expired by January 1, 2001, members of the Council serving on
9 that date shall continue to serve until their terms expire.

10 (a) The membership of the Council must reasonably represent
11 the diversity of this State. Not less than 60% of the Council's
12 membership must be individuals with developmental
13 disabilities, parents or guardians of children with
14 developmental disabilities, or immediate relatives or
15 guardians of adults with developmental disabilities who cannot
16 advocate for themselves.

17 The Council must also include representatives of State
18 agencies that administer moneys under federal laws that relate
19 to individuals with developmental disabilities; the State
20 University Center for Excellence in Developmental Disabilities
21 Education, Research, and Service; the State protection and
22 advocacy system; and representatives of local and
23 non-governmental agencies and private non-profit groups
24 concerned with services for individuals with developmental
25 disabilities. The members described in this paragraph must have
26 sufficient authority to engage in policy-making, planning, and
27 implementation on behalf of the department, agency, or program
28 that they represent. Those members may not take part in any
29 discussion of grants or contracts for which their departments,
30 agencies, or programs are grantees, contractors, or applicants
31 and must comply with any other relevant conflict of interest
32 provisions in the Council's policies or bylaws.

33 (b) Seventeen voting members, appointed by the Governor,
34 must be persons with developmental disabilities, parents or
35 guardians of persons with developmental disabilities, or

1 immediate relatives or guardians of persons with
2 mentally-impairing developmental disabilities. None of these
3 members may be employees of a State agency that receives funds
4 or provides services under the federal Developmental
5 Disabilities Assistance and Bill of Rights Act of 1996 (42
6 U.S.C. 6000 et seq.), as now or hereafter amended, managing
7 employees of any other entity that receives moneys or provides
8 services under the federal Developmental Disabilities
9 Assistance and Bill of Rights Act of 1996 (42 U.S.C. 6000 et
10 seq.), as now or hereafter amended, or persons with an
11 ownership interest in or a controlling interest in such an
12 entity. Of the members appointed under this subsection (b):

13 (1) at least 6 must be persons with developmental
14 disabilities;

15 (2) at least 6 must be parents, immediate relatives, or
16 guardians of children and adults with developmental
17 disabilities, including individuals with
18 mentally-impairing developmental disabilities who cannot
19 advocate for themselves; and

20 (3) 5 members must be a combination of persons
21 described in paragraphs (1) and (2); at least one of whom
22 must be (i) an immediate relative or guardian of an
23 individual with a developmental disability who resides or
24 who previously resided in an institution or (ii) an
25 individual with a developmental disability who resides or
26 who previously resided in an institution.

27 (c) Two voting members, appointed by the Governor, must be
28 representatives of local and non-governmental agencies and
29 private non-profit groups concerned with services for
30 individuals with developmental disabilities.

31 (d) Nine voting members shall be the Director of Healthcare
32 and Family Services ~~Public Aid~~, or his or her designee; the
33 Director of Aging, or his or her designee; the Director of
34 Children and Family Services, or his or her designee; a
35 representative of the State Board of Education; a
36 representative of the State protection and advocacy system; a

1 representative of the State University Center for Excellence in
2 Developmental Disabilities Education, Research, and Service;
3 representatives of the Office of Developmental Disabilities
4 and the Office of Community Health and Prevention of the
5 Department of Human Services (as the State's lead agency for
6 Title V of the Social Security Act, 42 U.S.C. 701 et seq.)
7 designated by the Secretary of Human Services; and a
8 representative of the State entity that administers federal
9 moneys under the federal Rehabilitation Act.

10 (e) The Director of the Governor's Office of Management and
11 Budget ~~Bureau of the Budget~~, or his or her designee, shall be a
12 non-voting member of the Council.

13 (f) The Governor must provide for the timely rotation of
14 members.

15 Appointments to the Council shall be for terms of 3 years.
16 Appointments to fill vacancies occurring before the expiration
17 of a term shall be for the remainder of the term. Members shall
18 serve until their successors are appointed.

19 The Council, at the discretion of the Governor, may
20 coordinate and provide recommendations for new members to the
21 Governor based upon their review of the Council's composition
22 and on input received from other organizations and individuals
23 representing persons with developmental disabilities,
24 including the non-State agency members of the Council. The
25 Council must, at least once each year, advise the Governor on
26 the Council's membership requirements and vacancies, including
27 rotation requirements.

28 No member may serve for more than 2 successive terms.

29 (g) Members may not receive compensation for their
30 services, but shall be reimbursed for their reasonable expenses
31 plus up to \$50 per day for any loss of wages incurred in the
32 performance of their duties.

33 (h) The total membership of the Council consists of the
34 number of voting members, as defined in this Section, excluding
35 any vacant positions. A quorum is a simple majority of the
36 total membership and is sufficient to constitute the

1 transaction of the business of the Council unless otherwise
2 stipulated in the bylaws of the Council.

3 (i) The Council must meet at least quarterly.

4 (Source: P.A. 91-798, eff. 7-9-00; revised 8-23-03.)

5 Section 9160. The Social Security Number Protection Task
6 Force Act is amended by changing Section 10 as follows:

7 (20 ILCS 4040/10)

8 Sec. 10. Social Security Number Protection Task Force.

9 (a) The Social Security Number Protection Task Force is
10 created. The Task Force shall consist of the following members:

11 (1) One member representing the House of
12 Representatives, appointed by the Speaker of the House of
13 Representatives;

14 (2) One member representing the House of
15 Representatives, appointed by the Minority Leader of the
16 House of Representatives;

17 (3) One member representing the Senate, appointed by
18 the President of the Senate;

19 (4) One member representing the Senate, appointed by
20 the Minority Leader of the Senate;

21 (5) One member representing the Office of the Attorney
22 General, appointed by the Attorney General;

23 (6) One member representing the Office of the Secretary
24 of State, appointed by the Secretary of State;

25 (7) One member representing the Office of the Governor,
26 appointed by the Governor;

27 (8) One member representing the Department of Natural
28 Resources, appointed by the Director of Natural Resources;

29 (9) One member representing the Department of
30 Healthcare and Family Services ~~Public Aid~~, appointed by the
31 Director of Healthcare and Family Services ~~Public Aid~~;

32 (10) One member representing the Department of
33 Revenue, appointed by the Director of Revenue;

34 (11) One member representing the Department of State

1 Police, appointed by the Director of State Police;

2 (12) One member representing the Department of
3 Employment Security, appointed by the Director of
4 Employment Security;

5 (13) One member representing the Illinois Courts,
6 appointed by the Director of the Administrative Office of
7 Illinois Courts; and

8 (14) One member representing the Department on Aging,
9 appointed by the Director of the Department on Aging.

10 (b) The Task Force shall examine the procedures used by the
11 State to protect an individual against the unauthorized
12 disclosure of his or her social security number when the State
13 requires the individual to provide his or her social security
14 number to an officer or agency of the State.

15 (c) The Task Force shall report its findings and
16 recommendations to the Governor, the Attorney General, the
17 Secretary of State, and the General Assembly no later than
18 March 1, 2006.

19 (Source: P.A. 93-813, eff. 7-27-04; 94-611, eff. 8-18-05.)

20 Section 9165. The Health Care Justice Act is amended by
21 changing Section 20 as follows:

22 (20 ILCS 4045/20)

23 Sec. 20. Adequate Health Care Task Force. There is created
24 an Adequate Health Care Task Force. The Task Force shall
25 consist of 29 voting members appointed as follows: 5 shall be
26 appointed by the Governor; 6 shall be appointed by the
27 President of the Senate, 6 shall be appointed by the Minority
28 Leader of the Senate, 6 shall be appointed by the Speaker of
29 the House of Representatives, and 6 shall be appointed by the
30 Minority Leader of the House of Representatives. The Task Force
31 shall have a chairman and a vice-chairman who shall be elected
32 by the voting members at the first meeting of the Task Force.
33 The Director of Public Health or his or her designee, the
34 Director of Aging or his or her designee, the Director of

1 Healthcare and Family Services ~~Public Aid~~ or his or her
2 designee, the Director of Insurance or his or her designee, and
3 the Secretary of Human Services or his or her designee shall
4 represent their respective departments and shall be invited to
5 attend Task Force meetings, but shall not be members of the
6 Task Force. The members of the Task Force shall be appointed
7 within 30 days after the effective date of this Act. The
8 departments of State government represented on the Task Force
9 shall work cooperatively to provide administrative support for
10 the Task Force; the Department of Public Health shall be the
11 primary agency in providing that administrative support.

12 (Source: P.A. 93-973, eff. 8-20-04.)

13 Section 9170. The Illinois State Auditing Act is amended by
14 changing Section 3-1 as follows:

15 (30 ILCS 5/3-1) (from Ch. 15, par. 303-1)

16 Sec. 3-1. Jurisdiction of Auditor General. The Auditor
17 General has jurisdiction over all State agencies to make post
18 audits and investigations authorized by or under this Act or
19 the Constitution.

20 The Auditor General has jurisdiction over local government
21 agencies and private agencies only:

22 (a) to make such post audits authorized by or under
23 this Act as are necessary and incidental to a post audit of
24 a State agency or of a program administered by a State
25 agency involving public funds of the State, but this
26 jurisdiction does not include any authority to review local
27 governmental agencies in the obligation, receipt,
28 expenditure or use of public funds of the State that are
29 granted without limitation or condition imposed by law,
30 other than the general limitation that such funds be used
31 for public purposes;

32 (b) to make investigations authorized by or under this
33 Act or the Constitution; and

34 (c) to make audits of the records of local government

1 agencies to verify actual costs of state-mandated programs
2 when directed to do so by the Legislative Audit Commission
3 at the request of the State Board of Appeals under the
4 State Mandates Act.

5 In addition to the foregoing, the Auditor General may
6 conduct an audit of the Metropolitan Pier and Exposition
7 Authority, the Regional Transportation Authority, the Suburban
8 Bus Division, the Commuter Rail Division and the Chicago
9 Transit Authority and any other subsidized carrier when
10 authorized by the Legislative Audit Commission. Such audit may
11 be a financial, management or program audit, or any combination
12 thereof.

13 The audit shall determine whether they are operating in
14 accordance with all applicable laws and regulations. Subject to
15 the limitations of this Act, the Legislative Audit Commission
16 may by resolution specify additional determinations to be
17 included in the scope of the audit.

18 In addition to the foregoing, the Auditor General must also
19 conduct a financial audit of the Illinois Sports Facilities
20 Authority's expenditures of public funds in connection with the
21 reconstruction, renovation, remodeling, extension, or
22 improvement of all or substantially all of any existing
23 "facility", as that term is defined in the Illinois Sports
24 Facilities Authority Act.

25 The Auditor General may also conduct an audit, when
26 authorized by the Legislative Audit Commission, of any hospital
27 which receives 10% or more of its gross revenues from payments
28 from the State of Illinois, Department of Healthcare and Family
29 Services (formerly Department of Public Aid), Medical
30 Assistance Program.

31 The Auditor General is authorized to conduct financial and
32 compliance audits of the Illinois Distance Learning Foundation
33 and the Illinois Conservation Foundation.

34 As soon as practical after the effective date of this
35 amendatory Act of 1995, the Auditor General shall conduct a
36 compliance and management audit of the City of Chicago and any

1 other entity with regard to the operation of Chicago O'Hare
2 International Airport, Chicago Midway Airport and Merrill C.
3 Meigs Field. The audit shall include, but not be limited to, an
4 examination of revenues, expenses, and transfers of funds;
5 purchasing and contracting policies and practices; staffing
6 levels; and hiring practices and procedures. When completed,
7 the audit required by this paragraph shall be distributed in
8 accordance with Section 3-14.

9 The Auditor General shall conduct a financial and
10 compliance and program audit of distributions from the
11 Municipal Economic Development Fund during the immediately
12 preceding calendar year pursuant to Section 8-403.1 of the
13 Public Utilities Act at no cost to the city, village, or
14 incorporated town that received the distributions.

15 The Auditor General must conduct an audit of the Health
16 Facilities Planning Board pursuant to Section 19.5 of the
17 Illinois Health Facilities Planning Act.

18 The Auditor General of the State of Illinois shall annually
19 conduct or cause to be conducted a financial and compliance
20 audit of the books and records of any county water commission
21 organized pursuant to the Water Commission Act of 1985 and
22 shall file a copy of the report of that audit with the Governor
23 and the Legislative Audit Commission. The filed audit shall be
24 open to the public for inspection. The cost of the audit shall
25 be charged to the county water commission in accordance with
26 Section 6z-27 of the State Finance Act. The county water
27 commission shall make available to the Auditor General its
28 books and records and any other documentation, whether in the
29 possession of its trustees or other parties, necessary to
30 conduct the audit required. These audit requirements apply only
31 through July 1, 2007.

32 The Auditor General must conduct audits of the Rend Lake
33 Conservancy District as provided in Section 25.5 of the River
34 Conservancy Districts Act.

35 The Auditor General must conduct financial audits of the
36 Southeastern Illinois Economic Development Authority as

1 provided in Section 70 of the Southeastern Illinois Economic
2 Development Authority Act.

3 (Source: P.A. 93-226, eff. 7-22-03; 93-259, eff. 7-22-03;
4 93-275, eff. 7-22-03; 93-968, eff. 8-20-04.)

5 Section 9175. The State Finance Act is amended by changing
6 Sections 6b, 6z-24, 6z-30, 6z-40, 6z-52, 6z-53, 6z-56, 6z-58,
7 8.55, 8g, 13.2, and 25 as follows:

8 (30 ILCS 105/6b) (from Ch. 127, par. 142b)

9 Sec. 6b. The gross or total proceeds, receipts and income
10 of all the several State institutions, clinics, rehabilitation
11 centers and services, except the Illinois Veterans Home at
12 Quincy, derived from the Veterans' Administration for the care
13 and treatment of veterans of World War I or World War II or
14 those who served during the national emergency between June 25,
15 1950 and January 31, 1955, who are patients or residents in the
16 State institutions, clinics, rehabilitation centers and
17 services, shall be covered into the State treasury into the
18 Mental Health Fund. Of the money in the United States Veterans'
19 Bureau Fund on the effective date of this amendatory Act of
20 1977, \$199,800 shall be transferred to the Quincy Veterans'
21 Home Fund and the balance shall be transferred to the Mental
22 Health Fund.

23 The gross receipts of the Department of Human Services
24 relating to mental health and developmental disabilities that
25 are obtained for services, commodities, equipment and
26 personnel provided to other agencies and branches of State
27 government, to units of local government, to the government of
28 other states or to the federal government shall be deposited
29 with the State Treasurer for deposit into the Mental Health
30 Fund.

31 The gross receipts of the Department of Human Services
32 relating to mental health and developmental disabilities that
33 are obtained in connection with the retention, receipt,
34 assignment, license, sale or transfer of interests in, rights

1 to, or income from discoveries, inventions, patents, or
2 copyrightable works to governmental, public or private
3 agencies or persons including units, branches, or agencies of
4 local, State, federal and foreign governments shall be
5 deposited with the State Treasurer for deposit into the Mental
6 Health Fund.

7 Remittances from or on behalf of licensed long-term care
8 facilities through Department of Healthcare and Family
9 Services (formerly Department of Public Aid) reimbursement and
10 monies from other funds for Day Training Programs for clients
11 with a developmental disability shall be deposited with the
12 State Treasurer and placed in the Mental Health Fund.

13 (Source: P.A. 88-380; 89-507, eff. 7-1-97.)

14 (30 ILCS 105/6z-24) (from Ch. 127, par. 142z-24)

15 Sec. 6z-24. There is created in the State Treasury the
16 Special Education Medicaid Matching Fund. All monies received
17 from the federal government due to expenditures by local
18 education agencies for services authorized under Section 1903
19 of the Social Security Act, as amended, and for the
20 administrative costs related thereto shall be deposited in the
21 Special Education Medicaid Matching Fund. All monies received
22 from the federal government due to expenditures by local
23 education agencies for services authorized under Section 2105
24 of the Social Security Act, as amended, shall be deposited in
25 the Special Education Medicaid Matching Fund.

26 The monies in the Special Education Medicaid Matching Fund
27 shall be held subject to appropriation by the General Assembly
28 to the State Board of Education or the ~~Illinois~~ Department of
29 Healthcare and Family Services ~~Public Aid~~ for distribution to
30 school districts, pursuant to an interagency agreement between
31 the Department of Healthcare and Family Services (formerly
32 Illinois Department of Public Aid) and the State Board of
33 Education or intergovernmental agreements between the
34 Department of Healthcare and Family Services (formerly
35 Illinois Department of Public Aid) and individual local

1 education agencies for eligible claims under Titles XIX and XXI
2 of the Social Security Act.

3 (Source: P.A. 91-24, eff. 7-1-99; 91-266, eff. 7-23-99; 92-10,
4 eff. 6-11-01.)

5 (30 ILCS 105/6z-30)

6 Sec. 6z-30. University of Illinois Hospital Services Fund.

7 (a) The University of Illinois Hospital Services Fund is
8 created as a special fund in the State Treasury. The following
9 moneys shall be deposited into the Fund:

10 (1) As soon as possible after the beginning of each
11 fiscal year (starting in fiscal year 1995), and in no event
12 later than July 30, the State Comptroller and the State
13 Treasurer shall automatically transfer \$44,700,000 from
14 the General Revenue Fund to the University of Illinois
15 Hospital Services Fund.

16 (2) All intergovernmental transfer payments to the
17 Department of Healthcare and Family Services (formerly
18 Illinois Department of Public Aid) by the University of
19 Illinois made pursuant to an intergovernmental agreement
20 under subsection (b) or (c) of Section 5A-3 of the Illinois
21 Public Aid Code.

22 (3) All federal matching funds received by the
23 Department of Healthcare and Family Services (formerly
24 Illinois Department of Public Aid) as a result of
25 expenditures made by the ~~Illinois~~ Department that are
26 attributable to moneys that were deposited in the Fund.

27 (b) Moneys in the fund may be used by the Department of
28 Healthcare and Family Services (formerly Illinois Department
29 of Public Aid), subject to appropriation, to reimburse the
30 University of Illinois Hospital for hospital and pharmacy
31 services. The fund may also be used to make monthly transfers
32 to the General Revenue Fund as provided in subsection (c).

33 (c) The State Comptroller and State Treasurer shall
34 automatically transfer on the last day of each month except
35 June, beginning August 31, 1994, from the University of

1 Illinois Hospital Services Fund to the General Revenue Fund, an
2 amount determined and certified to the State Comptroller by the
3 Director of Healthcare and Family Services (formerly Director
4 of Public Aid), equal to the amount by which the balance in the
5 Fund exceeds the amount necessary to ensure timely payments to
6 the University of Illinois Hospital.

7 On June 30, 1995 and each June 30 thereafter, the State
8 Comptroller and State Treasurer shall automatically transfer
9 the entire balance in the University of Illinois Hospital
10 Services Fund to the General Revenue Fund.

11 (Source: P.A. 93-20, eff. 6-20-03.)

12 (30 ILCS 105/6z-52)

13 Sec. 6z-52. Drug Rebate Fund.

14 (a) There is created in the State Treasury a special fund
15 to be known as the Drug Rebate Fund.

16 (b) The Fund is created for the purpose of receiving and
17 disbursing moneys in accordance with this Section.
18 Disbursements from the Fund shall be made, subject to
19 appropriation, only as follows:

20 (1) For payments to pharmacies for reimbursement for
21 prescription drugs provided to a recipient of aid under
22 Article V of the Illinois Public Aid Code or the Children's
23 Health Insurance Program Act.

24 (2) For reimbursement of moneys collected by the
25 Department of Healthcare and Family Services (formerly
26 Illinois Department of Public Aid) through error or
27 mistake.

28 (3) For payments of any amounts that are reimbursable
29 to the federal government resulting from a payment into
30 this Fund.

31 (c) The Fund shall consist of the following:

32 (1) Upon notification from the Director of Healthcare
33 and Family Services ~~Public Aid~~, the Comptroller shall
34 direct and the Treasurer shall transfer the net State share
35 of all moneys received by the Department of Healthcare and

1 Family Services (formerly Illinois Department of Public
2 Aid) from drug rebate agreements with pharmaceutical
3 manufacturers pursuant to Title XIX of the federal Social
4 Security Act, including any portion of the balance in the
5 Public Aid Recoveries Trust Fund on July 1, 2001 that is
6 attributable to such receipts.

7 (2) All federal matching funds received by the Illinois
8 Department as a result of expenditures made by the
9 Department that are attributable to moneys deposited in the
10 Fund.

11 (3) Any premium collected by the Illinois Department
12 from participants under a waiver approved by the federal
13 government relating to provision of pharmaceutical
14 services.

15 (4) All other moneys received for the Fund from any
16 other source, including interest earned thereon.

17 (Source: P.A. 92-10, eff. 6-11-01.)

18 (30 ILCS 105/6z-53)

19 Sec. 6z-53. Downstate Emergency Response Fund.

20 (a) In this Section:

21 "Downstate county" means any county with a population of
22 less than 250,000 with a level I trauma center.

23 "Trauma center" has the same meaning as in the Emergency
24 Medical Services (EMS) Systems Act.

25 (b) The Downstate Emergency Response Fund is created as a
26 special fund in the State Treasury.

27 (c) The following moneys shall be deposited into the Fund:

28 (1) Moneys appropriated by the General Assembly.

29 (2) Fees or other amounts paid to the Department of
30 Transportation for the use of an emergency helicopter for
31 the transportation of an individual to a trauma center
32 located in a downstate county or for any other medical
33 emergency response. The Department may adopt rules
34 establishing reasonable fees and other amounts to be paid
35 for the use of such helicopters and may collect those fees

1 and other amounts.

2 (3) Gifts, grants, other appropriations, or any other
3 moneys designated for deposit into the Fund.

4 (d) Subject to appropriation, moneys in the Fund shall be
5 used for the following purposes:

6 (1) By the Department of Transportation to purchase,
7 lease, maintain, and operate helicopters, including
8 payment of any costs associated with personnel or other
9 expenses necessary for the maintenance or operation of such
10 helicopters, (A) for emergency response transportation of
11 individuals to trauma centers located in downstate
12 counties and (B) to support law enforcement, disaster
13 response, and other medical emergency response. Moneys
14 appropriated from the Fund for these purposes shall be in
15 addition to any other moneys used for these purposes.

16 (2) By the Department of Healthcare and Family Services
17 ~~Public Aid~~ for medical assistance under Article V of the
18 Illinois Public Aid Code.

19 (Source: P.A. 92-10, eff. 6-11-01.)

20 (30 ILCS 105/6z-56)

21 Sec. 6z-56. The Health Care Services Trust Fund. The Health
22 Care Services Trust Fund is hereby created as a special fund in
23 the State treasury.

24 The Fund shall consist of moneys deposited, transferred, or
25 appropriated into the Fund from units of local government other
26 than a county with a population greater than 3,000,000, from
27 the State, from federal matching funds, or from any other legal
28 source.

29 Subject to appropriation, the moneys in the Fund shall be
30 used by the Department of Healthcare and Family Services ~~Public~~
31 ~~Aid~~ to make payments to providers of services covered under the
32 Medicaid or State Children's Health Insurance programs.
33 Payments may be made out of the Fund only to providers located
34 within the geographic jurisdiction of units of local government
35 that make deposits, transfers, or appropriations into the Fund.

1 The Department of Healthcare and Family Services ~~Public Aid~~
2 shall adopt rules concerning application for and disbursement
3 of the moneys in the Fund.

4 (Source: P.A. 93-659, eff. 2-3-04.)

5 (30 ILCS 105/6z-58)

6 Sec. 6z-58. The Family Care Fund.

7 (a) There is created in the State treasury the Family Care
8 Fund. Interest earned by the Fund shall be credited to the
9 Fund.

10 (b) The Fund is created for the purposes of receiving,
11 investing, and distributing moneys in accordance with (i) an
12 approved waiver under the Social Security Act resulting from
13 the Family Care waiver request submitted by the Illinois
14 Department of Public Aid on February 15, 2002 and (ii) an
15 interagency agreement between the Department of Healthcare and
16 Family Services (formerly Department of Public Aid) and another
17 agency of State government. The Fund shall consist of:

18 (1) All federal financial participation moneys
19 received pursuant to the approved waiver, except for moneys
20 received pursuant to expenditures for medical services by
21 the Department of Healthcare and Family Services (formerly
22 Department of Public Aid) from any other fund; and

23 (2) All other moneys received by the Fund from any
24 source, including interest thereon.

25 (c) Subject to appropriation, the moneys in the Fund shall
26 be disbursed for reimbursement of medical services and other
27 costs associated with persons receiving such services:

28 (1) under programs administered by the Department of
29 Healthcare and Family Services (formerly Department of
30 Public Aid); and

31 (2) pursuant to an interagency agreement, under
32 programs administered by another agency of State
33 government.

34 (Source: P.A. 92-600, eff. 6-28-02; 93-20, eff. 6-20-03;
35 93-841, eff. 7-30-04.)

1 (30 ILCS 105/8.55)

2 Sec. 8.55. Interfund transfers. On or after July 1, 2004
3 and until June 30, 2006, in addition to any other transfers
4 that may be provided for by law, at the direction of and upon
5 notification from the Director of Healthcare and Family
6 Services (formerly Director of Public Aid), the State
7 Comptroller shall direct and the State Treasurer shall transfer
8 amounts into the General Revenue Fund from the designated funds
9 not exceeding the following totals:

10 Hospital Provider Fund \$36,000,000
11 Health and Human Services Medicaid Trust Fund \$124,000,000.

12 Transfers of moneys under this Section may not exceed a
13 total of \$80,000,000 in any State fiscal year.

14 (Source: P.A. 93-841, eff. 7-30-04.)

15 (30 ILCS 105/8g)

16 Sec. 8g. Fund transfers.

17 (a) In addition to any other transfers that may be provided
18 for by law, as soon as may be practical after the effective
19 date of this amendatory Act of the 91st General Assembly, the
20 State Comptroller shall direct and the State Treasurer shall
21 transfer the sum of \$10,000,000 from the General Revenue Fund
22 to the Motor Vehicle License Plate Fund created by Senate Bill
23 1028 of the 91st General Assembly.

24 (b) In addition to any other transfers that may be provided
25 for by law, as soon as may be practical after the effective
26 date of this amendatory Act of the 91st General Assembly, the
27 State Comptroller shall direct and the State Treasurer shall
28 transfer the sum of \$25,000,000 from the General Revenue Fund
29 to the Fund for Illinois' Future created by Senate Bill 1066 of
30 the 91st General Assembly.

31 (c) In addition to any other transfers that may be provided
32 for by law, on August 30 of each fiscal year's license period,
33 the Illinois Liquor Control Commission shall direct and the
34 State Comptroller and State Treasurer shall transfer from the

1 General Revenue Fund to the Youth Alcoholism and Substance
2 Abuse Prevention Fund an amount equal to the number of retail
3 liquor licenses issued for that fiscal year multiplied by \$50.

4 (d) The payments to programs required under subsection (d)
5 of Section 28.1 of the Horse Racing Act of 1975 shall be made,
6 pursuant to appropriation, from the special funds referred to
7 in the statutes cited in that subsection, rather than directly
8 from the General Revenue Fund.

9 Beginning January 1, 2000, on the first day of each month,
10 or as soon as may be practical thereafter, the State
11 Comptroller shall direct and the State Treasurer shall transfer
12 from the General Revenue Fund to each of the special funds from
13 which payments are to be made under Section 28.1(d) of the
14 Horse Racing Act of 1975 an amount equal to 1/12 of the annual
15 amount required for those payments from that special fund,
16 which annual amount shall not exceed the annual amount for
17 those payments from that special fund for the calendar year
18 1998. The special funds to which transfers shall be made under
19 this subsection (d) include, but are not necessarily limited
20 to, the Agricultural Premium Fund; the Metropolitan Exposition
21 Auditorium and Office Building Fund; the Fair and Exposition
22 Fund; the Standardbred Breeders Fund; the Thoroughbred
23 Breeders Fund; and the Illinois Veterans' Rehabilitation Fund.

24 (e) In addition to any other transfers that may be provided
25 for by law, as soon as may be practical after the effective
26 date of this amendatory Act of the 91st General Assembly, but
27 in no event later than June 30, 2000, the State Comptroller
28 shall direct and the State Treasurer shall transfer the sum of
29 \$15,000,000 from the General Revenue Fund to the Fund for
30 Illinois' Future.

31 (f) In addition to any other transfers that may be provided
32 for by law, as soon as may be practical after the effective
33 date of this amendatory Act of the 91st General Assembly, but
34 in no event later than June 30, 2000, the State Comptroller
35 shall direct and the State Treasurer shall transfer the sum of
36 \$70,000,000 from the General Revenue Fund to the Long-Term Care

1 Provider Fund.

2 (f-1) In fiscal year 2002, in addition to any other
3 transfers that may be provided for by law, at the direction of
4 and upon notification from the Governor, the State Comptroller
5 shall direct and the State Treasurer shall transfer amounts not
6 exceeding a total of \$160,000,000 from the General Revenue Fund
7 to the Long-Term Care Provider Fund.

8 (g) In addition to any other transfers that may be provided
9 for by law, on July 1, 2001, or as soon thereafter as may be
10 practical, the State Comptroller shall direct and the State
11 Treasurer shall transfer the sum of \$1,200,000 from the General
12 Revenue Fund to the Violence Prevention Fund.

13 (h) In each of fiscal years 2002 through 2004, but not
14 thereafter, in addition to any other transfers that may be
15 provided for by law, the State Comptroller shall direct and the
16 State Treasurer shall transfer \$5,000,000 from the General
17 Revenue Fund to the Tourism Promotion Fund.

18 (i) On or after July 1, 2001 and until May 1, 2002, in
19 addition to any other transfers that may be provided for by
20 law, at the direction of and upon notification from the
21 Governor, the State Comptroller shall direct and the State
22 Treasurer shall transfer amounts not exceeding a total of
23 \$80,000,000 from the General Revenue Fund to the Tobacco
24 Settlement Recovery Fund. Any amounts so transferred shall be
25 re-transferred by the State Comptroller and the State Treasurer
26 from the Tobacco Settlement Recovery Fund to the General
27 Revenue Fund at the direction of and upon notification from the
28 Governor, but in any event on or before June 30, 2002.

29 (i-1) On or after July 1, 2002 and until May 1, 2003, in
30 addition to any other transfers that may be provided for by
31 law, at the direction of and upon notification from the
32 Governor, the State Comptroller shall direct and the State
33 Treasurer shall transfer amounts not exceeding a total of
34 \$80,000,000 from the General Revenue Fund to the Tobacco
35 Settlement Recovery Fund. Any amounts so transferred shall be
36 re-transferred by the State Comptroller and the State Treasurer

1 from the Tobacco Settlement Recovery Fund to the General
2 Revenue Fund at the direction of and upon notification from the
3 Governor, but in any event on or before June 30, 2003.

4 (j) On or after July 1, 2001 and no later than June 30,
5 2002, in addition to any other transfers that may be provided
6 for by law, at the direction of and upon notification from the
7 Governor, the State Comptroller shall direct and the State
8 Treasurer shall transfer amounts not to exceed the following
9 sums into the Statistical Services Revolving Fund:

10	From the General Revenue Fund	\$8,450,000
11	From the Public Utility Fund	1,700,000
12	From the Transportation Regulatory Fund	2,650,000
13	From the Title III Social Security and	
14	Employment Fund	3,700,000
15	From the Professions Indirect Cost Fund	4,050,000
16	From the Underground Storage Tank Fund	550,000
17	From the Agricultural Premium Fund	750,000
18	From the State Pensions Fund	200,000
19	From the Road Fund	2,000,000
20	From the Health Facilities	
21	Planning Fund	1,000,000
22	From the Savings and Residential Finance	
23	Regulatory Fund	130,800
24	From the Appraisal Administration Fund	28,600
25	From the Pawnbroker Regulation Fund	3,600
26	From the Auction Regulation	
27	Administration Fund	35,800
28	From the Bank and Trust Company Fund.....	634,800
29	From the Real Estate License	
30	Administration Fund	313,600

31 (k) In addition to any other transfers that may be provided
32 for by law, as soon as may be practical after the effective
33 date of this amendatory Act of the 92nd General Assembly, the
34 State Comptroller shall direct and the State Treasurer shall
35 transfer the sum of \$2,000,000 from the General Revenue Fund to
36 the Teachers Health Insurance Security Fund.

1 (k-1) In addition to any other transfers that may be
 2 provided for by law, on July 1, 2002, or as soon as may be
 3 practical thereafter, the State Comptroller shall direct and
 4 the State Treasurer shall transfer the sum of \$2,000,000 from
 5 the General Revenue Fund to the Teachers Health Insurance
 6 Security Fund.

7 (k-2) In addition to any other transfers that may be
 8 provided for by law, on July 1, 2003, or as soon as may be
 9 practical thereafter, the State Comptroller shall direct and
 10 the State Treasurer shall transfer the sum of \$2,000,000 from
 11 the General Revenue Fund to the Teachers Health Insurance
 12 Security Fund.

13 (k-3) On or after July 1, 2002 and no later than June 30,
 14 2003, in addition to any other transfers that may be provided
 15 for by law, at the direction of and upon notification from the
 16 Governor, the State Comptroller shall direct and the State
 17 Treasurer shall transfer amounts not to exceed the following
 18 sums into the Statistical Services Revolving Fund:

19	Appraisal Administration Fund	\$150,000
20	General Revenue Fund	10,440,000
21	Savings and Residential Finance	
22	Regulatory Fund	200,000
23	State Pensions Fund	100,000
24	Bank and Trust Company Fund	100,000
25	Professions Indirect Cost Fund	3,400,000
26	Public Utility Fund	2,081,200
27	Real Estate License Administration Fund	150,000
28	Title III Social Security and	
29	Employment Fund	1,000,000
30	Transportation Regulatory Fund	3,052,100
31	Underground Storage Tank Fund	50,000

32 (l) In addition to any other transfers that may be provided
 33 for by law, on July 1, 2002, or as soon as may be practical
 34 thereafter, the State Comptroller shall direct and the State
 35 Treasurer shall transfer the sum of \$3,000,000 from the General
 36 Revenue Fund to the Presidential Library and Museum Operating

1 Fund.

2 (m) In addition to any other transfers that may be provided
3 for by law, on July 1, 2002 and on the effective date of this
4 amendatory Act of the 93rd General Assembly, or as soon
5 thereafter as may be practical, the State Comptroller shall
6 direct and the State Treasurer shall transfer the sum of
7 \$1,200,000 from the General Revenue Fund to the Violence
8 Prevention Fund.

9 (n) In addition to any other transfers that may be provided
10 for by law, on July 1, 2003, or as soon thereafter as may be
11 practical, the State Comptroller shall direct and the State
12 Treasurer shall transfer the sum of \$6,800,000 from the General
13 Revenue Fund to the DHS Recoveries Trust Fund.

14 (o) On or after July 1, 2003, and no later than June 30,
15 2004, in addition to any other transfers that may be provided
16 for by law, at the direction of and upon notification from the
17 Governor, the State Comptroller shall direct and the State
18 Treasurer shall transfer amounts not to exceed the following
19 sums into the Vehicle Inspection Fund:

20 From the Underground Storage Tank Fund \$35,000,000.

21 (p) On or after July 1, 2003 and until May 1, 2004, in
22 addition to any other transfers that may be provided for by
23 law, at the direction of and upon notification from the
24 Governor, the State Comptroller shall direct and the State
25 Treasurer shall transfer amounts not exceeding a total of
26 \$80,000,000 from the General Revenue Fund to the Tobacco
27 Settlement Recovery Fund. Any amounts so transferred shall be
28 re-transferred from the Tobacco Settlement Recovery Fund to the
29 General Revenue Fund at the direction of and upon notification
30 from the Governor, but in any event on or before June 30, 2004.

31 (q) In addition to any other transfers that may be provided
32 for by law, on July 1, 2003, or as soon as may be practical
33 thereafter, the State Comptroller shall direct and the State
34 Treasurer shall transfer the sum of \$5,000,000 from the General
35 Revenue Fund to the Illinois Military Family Relief Fund.

36 (r) In addition to any other transfers that may be provided

1 for by law, on July 1, 2003, or as soon as may be practical
2 thereafter, the State Comptroller shall direct and the State
3 Treasurer shall transfer the sum of \$1,922,000 from the General
4 Revenue Fund to the Presidential Library and Museum Operating
5 Fund.

6 (s) In addition to any other transfers that may be provided
7 for by law, on or after July 1, 2003, the State Comptroller
8 shall direct and the State Treasurer shall transfer the sum of
9 \$4,800,000 from the Statewide Economic Development Fund to the
10 General Revenue Fund.

11 (t) In addition to any other transfers that may be provided
12 for by law, on or after July 1, 2003, the State Comptroller
13 shall direct and the State Treasurer shall transfer the sum of
14 \$50,000,000 from the General Revenue Fund to the Budget
15 Stabilization Fund.

16 (u) On or after July 1, 2004 and until May 1, 2005, in
17 addition to any other transfers that may be provided for by
18 law, at the direction of and upon notification from the
19 Governor, the State Comptroller shall direct and the State
20 Treasurer shall transfer amounts not exceeding a total of
21 \$80,000,000 from the General Revenue Fund to the Tobacco
22 Settlement Recovery Fund. Any amounts so transferred shall be
23 retransferred by the State Comptroller and the State Treasurer
24 from the Tobacco Settlement Recovery Fund to the General
25 Revenue Fund at the direction of and upon notification from the
26 Governor, but in any event on or before June 30, 2005.

27 (v) In addition to any other transfers that may be provided
28 for by law, on July 1, 2004, or as soon thereafter as may be
29 practical, the State Comptroller shall direct and the State
30 Treasurer shall transfer the sum of \$1,200,000 from the General
31 Revenue Fund to the Violence Prevention Fund.

32 (w) In addition to any other transfers that may be provided
33 for by law, on July 1, 2004, or as soon thereafter as may be
34 practical, the State Comptroller shall direct and the State
35 Treasurer shall transfer the sum of \$6,445,000 from the General
36 Revenue Fund to the Presidential Library and Museum Operating

1 Fund.

2 (x) In addition to any other transfers that may be provided
3 for by law, on January 15, 2005, or as soon thereafter as may
4 be practical, the State Comptroller shall direct and the State
5 Treasurer shall transfer to the General Revenue Fund the
6 following sums:

7 From the State Crime Laboratory Fund, \$200,000;

8 From the State Police Wireless Service Emergency Fund,
9 \$200,000;

10 From the State Offender DNA Identification System
11 Fund, \$800,000; and

12 From the State Police Whistleblower Reward and
13 Protection Fund, \$500,000.

14 (y) Notwithstanding any other provision of law to the
15 contrary, in addition to any other transfers that may be
16 provided for by law on June 30, 2005, or as soon as may be
17 practical thereafter, the State Comptroller shall direct and
18 the State Treasurer shall transfer the remaining balance from
19 the designated funds into the General Revenue Fund and any
20 future deposits that would otherwise be made into these funds
21 must instead be made into the General Revenue Fund:

22 (1) the Keep Illinois Beautiful Fund;

23 (2) the Metropolitan Fair and Exposition Authority
24 Reconstruction Fund;

25 (3) the New Technology Recovery Fund;

26 (4) the Illinois Rural Bond Bank Trust Fund;

27 (5) the ISBE School Bus Driver Permit Fund;

28 (6) the Solid Waste Management Revolving Loan Fund;

29 (7) the State Postsecondary Review Program Fund;

30 (8) the Tourism Attraction Development Matching Grant
31 Fund;

32 (9) the Patent and Copyright Fund;

33 (10) the Credit Enhancement Development Fund;

34 (11) the Community Mental Health and Developmental
35 Disabilities Services Provider Participation Fee Trust
36 Fund;

- 1 (12) the Nursing Home Grant Assistance Fund;
- 2 (13) the By-product Material Safety Fund;
- 3 (14) the Illinois Student Assistance Commission Higher
4 EdNet Fund;
- 5 (15) the DORS State Project Fund;
- 6 (16) the School Technology Revolving Fund;
- 7 (17) the Energy Assistance Contribution Fund;
- 8 (18) the Illinois Building Commission Revolving Fund;
- 9 (19) the Illinois Aquaculture Development Fund;
- 10 (20) the Homelessness Prevention Fund;
- 11 (21) the DCFS Refugee Assistance Fund;
- 12 (22) the Illinois Century Network Special Purposes
13 Fund; and
- 14 (23) the Build Illinois Purposes Fund.

15 (z) In addition to any other transfers that may be provided
16 for by law, on July 1, 2005, or as soon as may be practical
17 thereafter, the State Comptroller shall direct and the State
18 Treasurer shall transfer the sum of \$1,200,000 from the General
19 Revenue Fund to the Violence Prevention Fund.

20 (aa) In addition to any other transfers that may be
21 provided for by law, on July 1, 2005, or as soon as may be
22 practical thereafter, the State Comptroller shall direct and
23 the State Treasurer shall transfer the sum of \$9,000,000 from
24 the General Revenue Fund to the Presidential Library and Museum
25 Operating Fund.

26 (bb) In addition to any other transfers that may be
27 provided for by law, on July 1, 2005, or as soon as may be
28 practical thereafter, the State Comptroller shall direct and
29 the State Treasurer shall transfer the sum of \$6,803,600 from
30 the General Revenue Fund to the Securities Audit and
31 Enforcement Fund.

32 (cc) In addition to any other transfers that may be
33 provided for by law, on or after July 1, 2005 and until May 1,
34 2006, at the direction of and upon notification from the
35 Governor, the State Comptroller shall direct and the State
36 Treasurer shall transfer amounts not exceeding a total of

1 \$80,000,000 from the General Revenue Fund to the Tobacco
2 Settlement Recovery Fund. Any amounts so transferred shall be
3 re-transferred by the State Comptroller and the State Treasurer
4 from the Tobacco Settlement Recovery Fund to the General
5 Revenue Fund at the direction of and upon notification from the
6 Governor, but in any event on or before June 30, 2006.

7 (dd) ~~(y)~~ In addition to any other transfers that may be
8 provided for by law, on April 1, 2005, or as soon thereafter as
9 may be practical, at the direction of the Director of Public
10 Aid (now Director of Healthcare and Family Services), the State
11 Comptroller shall direct and the State Treasurer shall transfer
12 from the Public Aid Recoveries Trust Fund amounts not to exceed
13 \$14,000,000 to the Community Mental Health Medicaid Trust Fund.
14 (Source: P.A. 93-32, eff. 6-20-03; 93-648, eff. 1-8-04; 93-839,
15 eff. 7-30-04; 93-1067, eff. 1-15-05; 94-58, eff. 6-17-05;
16 94-91, eff. 7-1-05; revised 8-9-05.)

17 (30 ILCS 105/13.2) (from Ch. 127, par. 149.2)

18 Sec. 13.2. Transfers among line item appropriations.

19 (a) Transfers among line item appropriations from the same
20 treasury fund for the objects specified in this Section may be
21 made in the manner provided in this Section when the balance
22 remaining in one or more such line item appropriations is
23 insufficient for the purpose for which the appropriation was
24 made.

25 (a-1) No transfers may be made from one agency to another
26 agency, nor may transfers be made from one institution of
27 higher education to another institution of higher education.

28 (a-2) Except as otherwise provided in this Section,
29 transfers may be made only among the objects of expenditure
30 enumerated in this Section, except that no funds may be
31 transferred from any appropriation for personal services, from
32 any appropriation for State contributions to the State
33 Employees' Retirement System, from any separate appropriation
34 for employee retirement contributions paid by the employer, nor
35 from any appropriation for State contribution for employee

1 group insurance. During State fiscal year 2005, an agency may
2 transfer amounts among its appropriations within the same
3 treasury fund for personal services, employee retirement
4 contributions paid by employer, and State Contributions to
5 retirement systems; notwithstanding and in addition to the
6 transfers authorized in subsection (c) of this Section, the
7 fiscal year 2005 transfers authorized in this sentence may be
8 made in an amount not to exceed 2% of the aggregate amount
9 appropriated to an agency within the same treasury fund.

10 (a-3) Further, if an agency receives a separate
11 appropriation for employee retirement contributions paid by
12 the employer, any transfer by that agency into an appropriation
13 for personal services must be accompanied by a corresponding
14 transfer into the appropriation for employee retirement
15 contributions paid by the employer, in an amount sufficient to
16 meet the employer share of the employee contributions required
17 to be remitted to the retirement system.

18 (b) In addition to the general transfer authority provided
19 under subsection (c), the following agencies have the specific
20 transfer authority granted in this subsection:

21 The ~~Illinois~~ Department of Healthcare and Family Services
22 ~~Public Aid~~ is authorized to make transfers representing savings
23 attributable to not increasing grants due to the births of
24 additional children from line items for payments of cash grants
25 to line items for payments for employment and social services
26 for the purposes outlined in subsection (f) of Section 4-2 of
27 the Illinois Public Aid Code.

28 The Department of Children and Family Services is
29 authorized to make transfers not exceeding 2% of the aggregate
30 amount appropriated to it within the same treasury fund for the
31 following line items among these same line items: Foster Home
32 and Specialized Foster Care and Prevention, Institutions and
33 Group Homes and Prevention, and Purchase of Adoption and
34 Guardianship Services.

35 The Department on Aging is authorized to make transfers not
36 exceeding 2% of the aggregate amount appropriated to it within

1 the same treasury fund for the following Community Care Program
2 line items among these same line items: Homemaker and Senior
3 Companion Services, Case Coordination Units, and Adult Day Care
4 Services.

5 The State Treasurer is authorized to make transfers among
6 line item appropriations from the Capital Litigation Trust
7 Fund, with respect to costs incurred in fiscal years 2002 and
8 2003 only, when the balance remaining in one or more such line
9 item appropriations is insufficient for the purpose for which
10 the appropriation was made, provided that no such transfer may
11 be made unless the amount transferred is no longer required for
12 the purpose for which that appropriation was made.

13 (c) The sum of such transfers for an agency in a fiscal
14 year shall not exceed 2% of the aggregate amount appropriated
15 to it within the same treasury fund for the following objects:
16 Personal Services; Extra Help; Student and Inmate
17 Compensation; State Contributions to Retirement Systems; State
18 Contributions to Social Security; State Contribution for
19 Employee Group Insurance; Contractual Services; Travel;
20 Commodities; Printing; Equipment; Electronic Data Processing;
21 Operation of Automotive Equipment; Telecommunications
22 Services; Travel and Allowance for Committed, Paroled and
23 Discharged Prisoners; Library Books; Federal Matching Grants
24 for Student Loans; Refunds; Workers' Compensation,
25 Occupational Disease, and Tort Claims; and, in appropriations
26 to institutions of higher education, Awards and Grants.
27 Notwithstanding the above, any amounts appropriated for
28 payment of workers' compensation claims to an agency to which
29 the authority to evaluate, administer and pay such claims has
30 been delegated by the Department of Central Management Services
31 may be transferred to any other expenditure object where such
32 amounts exceed the amount necessary for the payment of such
33 claims.

34 (c-1) Special provisions for State fiscal year 2003.
35 Notwithstanding any other provision of this Section to the
36 contrary, for State fiscal year 2003 only, transfers among line

1 item appropriations to an agency from the same treasury fund
2 may be made provided that the sum of such transfers for an
3 agency in State fiscal year 2003 shall not exceed 3% of the
4 aggregate amount appropriated to that State agency for State
5 fiscal year 2003 for the following objects: personal services,
6 except that no transfer may be approved which reduces the
7 aggregate appropriations for personal services within an
8 agency; extra help; student and inmate compensation; State
9 contributions to retirement systems; State contributions to
10 social security; State contributions for employee group
11 insurance; contractual services; travel; commodities;
12 printing; equipment; electronic data processing; operation of
13 automotive equipment; telecommunications services; travel and
14 allowance for committed, paroled, and discharged prisoners;
15 library books; federal matching grants for student loans;
16 refunds; workers' compensation, occupational disease, and tort
17 claims; and, in appropriations to institutions of higher
18 education, awards and grants.

19 (c-2) Special provisions for State fiscal year 2005.
20 Notwithstanding subsections (a), (a-2), and (c), for State
21 fiscal year 2005 only, transfers may be made among any line
22 item appropriations from the same or any other treasury fund
23 for any objects or purposes, without limitation, when the
24 balance remaining in one or more such line item appropriations
25 is insufficient for the purpose for which the appropriation was
26 made, provided that the sum of those transfers by a State
27 agency shall not exceed 4% of the aggregate amount appropriated
28 to that State agency for fiscal year 2005.

29 (d) Transfers among appropriations made to agencies of the
30 Legislative and Judicial departments and to the
31 constitutionally elected officers in the Executive branch
32 require the approval of the officer authorized in Section 10 of
33 this Act to approve and certify vouchers. Transfers among
34 appropriations made to the University of Illinois, Southern
35 Illinois University, Chicago State University, Eastern
36 Illinois University, Governors State University, Illinois

1 State University, Northeastern Illinois University, Northern
2 Illinois University, Western Illinois University, the Illinois
3 Mathematics and Science Academy and the Board of Higher
4 Education require the approval of the Board of Higher Education
5 and the Governor. Transfers among appropriations to all other
6 agencies require the approval of the Governor.

7 The officer responsible for approval shall certify that the
8 transfer is necessary to carry out the programs and purposes
9 for which the appropriations were made by the General Assembly
10 and shall transmit to the State Comptroller a certified copy of
11 the approval which shall set forth the specific amounts
12 transferred so that the Comptroller may change his records
13 accordingly. The Comptroller shall furnish the Governor with
14 information copies of all transfers approved for agencies of
15 the Legislative and Judicial departments and transfers
16 approved by the constitutionally elected officials of the
17 Executive branch other than the Governor, showing the amounts
18 transferred and indicating the dates such changes were entered
19 on the Comptroller's records.

20 (Source: P.A. 92-600, eff. 6-28-02; 92-885, eff. 1-13-03;
21 93-680, eff. 7-1-04; 93-839, eff. 7-30-04.)

22 (30 ILCS 105/25) (from Ch. 127, par. 161)

23 Sec. 25. Fiscal year limitations.

24 (a) All appropriations shall be available for expenditure
25 for the fiscal year or for a lesser period if the Act making
26 that appropriation so specifies. A deficiency or emergency
27 appropriation shall be available for expenditure only through
28 June 30 of the year when the Act making that appropriation is
29 enacted unless that Act otherwise provides.

30 (b) Outstanding liabilities as of June 30, payable from
31 appropriations which have otherwise expired, may be paid out of
32 the expiring appropriations during the 2-month period ending at
33 the close of business on August 31. Any service involving
34 professional or artistic skills or any personal services by an
35 employee whose compensation is subject to income tax

1 withholding must be performed as of June 30 of the fiscal year
2 in order to be considered an "outstanding liability as of June
3 30" that is thereby eligible for payment out of the expiring
4 appropriation.

5 However, payment of tuition reimbursement claims under
6 Section 14-7.03 or 18-3 of the School Code may be made by the
7 State Board of Education from its appropriations for those
8 respective purposes for any fiscal year, even though the claims
9 reimbursed by the payment may be claims attributable to a prior
10 fiscal year, and payments may be made at the direction of the
11 State Superintendent of Education from the fund from which the
12 appropriation is made without regard to any fiscal year
13 limitations.

14 Medical payments may be made by the Department of Veterans'
15 Affairs from its appropriations for those purposes for any
16 fiscal year, without regard to the fact that the medical
17 services being compensated for by such payment may have been
18 rendered in a prior fiscal year.

19 Medical payments may be made by the Department of
20 Healthcare and Family Services ~~Public Aid~~ and medical payments
21 and child care payments may be made by the Department of Human
22 Services (as successor to the Department of Public Aid) from
23 appropriations for those purposes for any fiscal year, without
24 regard to the fact that the medical or child care services
25 being compensated for by such payment may have been rendered in
26 a prior fiscal year; and payments may be made at the direction
27 of the Department of Central Management Services from the
28 Health Insurance Reserve Fund and the Local Government Health
29 Insurance Reserve Fund without regard to any fiscal year
30 limitations.

31 Medical payments may be made by the Department of Human
32 Services from its appropriations relating to substance abuse
33 treatment services for any fiscal year, without regard to the
34 fact that the medical services being compensated for by such
35 payment may have been rendered in a prior fiscal year, provided
36 the payments are made on a fee-for-service basis consistent

1 with requirements established for Medicaid reimbursement by
2 the Department of Healthcare and Family Services ~~Public Aid~~.

3 Additionally, payments may be made by the Department of
4 Human Services from its appropriations, or any other State
5 agency from its appropriations with the approval of the
6 Department of Human Services, from the Immigration Reform and
7 Control Fund for purposes authorized pursuant to the
8 Immigration Reform and Control Act of 1986, without regard to
9 any fiscal year limitations.

10 Further, with respect to costs incurred in fiscal years
11 2002 and 2003 only, payments may be made by the State Treasurer
12 from its appropriations from the Capital Litigation Trust Fund
13 without regard to any fiscal year limitations.

14 Lease payments may be made by the Department of Central
15 Management Services under the sale and leaseback provisions of
16 Section 7.4 of the State Property Control Act with respect to
17 the James R. Thompson Center and the Elgin Mental Health Center
18 and surrounding land from appropriations for that purpose
19 without regard to any fiscal year limitations.

20 Lease payments may be made under the sale and leaseback
21 provisions of Section 7.5 of the State Property Control Act
22 with respect to the Illinois State Toll Highway Authority
23 headquarters building and surrounding land without regard to
24 any fiscal year limitations.

25 (c) Further, payments may be made by the Department of
26 Public Health and the Department of Human Services (acting as
27 successor to the Department of Public Health under the
28 Department of Human Services Act) from their respective
29 appropriations for grants for medical care to or on behalf of
30 persons suffering from chronic renal disease, persons
31 suffering from hemophilia, rape victims, and premature and
32 high-mortality risk infants and their mothers and for grants
33 for supplemental food supplies provided under the United States
34 Department of Agriculture Women, Infants and Children
35 Nutrition Program, for any fiscal year without regard to the
36 fact that the services being compensated for by such payment

1 may have been rendered in a prior fiscal year.

2 (d) The Department of Public Health and the Department of
3 Human Services (acting as successor to the Department of Public
4 Health under the Department of Human Services Act) shall each
5 annually submit to the State Comptroller, Senate President,
6 Senate Minority Leader, Speaker of the House, House Minority
7 Leader, and the respective Chairmen and Minority Spokesmen of
8 the Appropriations Committees of the Senate and the House, on
9 or before December 31, a report of fiscal year funds used to
10 pay for services provided in any prior fiscal year. This report
11 shall document by program or service category those
12 expenditures from the most recently completed fiscal year used
13 to pay for services provided in prior fiscal years.

14 (e) The Department of Healthcare and Family Services ~~Public~~
15 ~~Aid~~, the Department of Human Services (acting as successor to
16 the Department of Public Aid), and the Department of Human
17 Services making fee-for-service payments relating to substance
18 abuse treatment services provided during a previous fiscal year
19 shall each annually submit to the State Comptroller, Senate
20 President, Senate Minority Leader, Speaker of the House, House
21 Minority Leader, the respective Chairmen and Minority
22 Spokesmen of the Appropriations Committees of the Senate and
23 the House, on or before November 30, a report that shall
24 document by program or service category those expenditures from
25 the most recently completed fiscal year used to pay for (i)
26 services provided in prior fiscal years and (ii) services for
27 which claims were received in prior fiscal years.

28 (f) The Department of Human Services (as successor to the
29 Department of Public Aid) shall annually submit to the State
30 Comptroller, Senate President, Senate Minority Leader, Speaker
31 of the House, House Minority Leader, and the respective
32 Chairmen and Minority Spokesmen of the Appropriations
33 Committees of the Senate and the House, on or before December
34 31, a report of fiscal year funds used to pay for services
35 (other than medical care) provided in any prior fiscal year.
36 This report shall document by program or service category those

1 expenditures from the most recently completed fiscal year used
2 to pay for services provided in prior fiscal years.

3 (g) In addition, each annual report required to be
4 submitted by the Department of Healthcare and Family Services
5 ~~Public Aid~~ under subsection (e) shall include the following
6 information with respect to the State's Medicaid program:

7 (1) Explanations of the exact causes of the variance
8 between the previous year's estimated and actual
9 liabilities.

10 (2) Factors affecting the Department of Healthcare and
11 Family Services' ~~Public Aid's~~ liabilities, including but
12 not limited to numbers of aid recipients, levels of medical
13 service utilization by aid recipients, and inflation in the
14 cost of medical services.

15 (3) The results of the Department's efforts to combat
16 fraud and abuse.

17 (h) As provided in Section 4 of the General Assembly
18 Compensation Act, any utility bill for service provided to a
19 General Assembly member's district office for a period
20 including portions of 2 consecutive fiscal years may be paid
21 from funds appropriated for such expenditure in either fiscal
22 year.

23 (i) An agency which administers a fund classified by the
24 Comptroller as an internal service fund may issue rules for:

25 (1) billing user agencies in advance for payments or
26 authorized inter-fund transfers based on estimated charges
27 for goods or services;

28 (2) issuing credits, refunding through inter-fund
29 transfers, or reducing future inter-fund transfers during
30 the subsequent fiscal year for all user agency payments or
31 authorized inter-fund transfers received during the prior
32 fiscal year which were in excess of the final amounts owed
33 by the user agency for that period; and

34 (3) issuing catch-up billings to user agencies during
35 the subsequent fiscal year for amounts remaining due when
36 payments or authorized inter-fund transfers received from

1 the user agency during the prior fiscal year were less than
2 the total amount owed for that period.

3 User agencies are authorized to reimburse internal service
4 funds for catch-up billings by vouchers drawn against their
5 respective appropriations for the fiscal year in which the
6 catch-up billing was issued or by increasing an authorized
7 inter-fund transfer during the current fiscal year. For the
8 purposes of this Act, "inter-fund transfers" means transfers
9 without the use of the voucher-warrant process, as authorized
10 by Section 9.01 of the State Comptroller Act.

11 (Source: P.A. 92-885, eff. 1-13-03; 93-19, eff. 6-20-03;
12 93-839, eff. 7-30-04; 93-841, eff. 7-30-04; revised 10-25-04.)

13 Section 9180. The Illinois State Collection Act of 1986 is
14 amended by changing Sections 5 and 10 as follows:

15 (30 ILCS 210/5) (from Ch. 15, par. 155)

16 Sec. 5. Rules; payment plans; offsets.

17 (a) Until July 1, 2004 for the Department of Public Aid and
18 July 1, 2005 for Universities and all other State agencies,
19 State agencies shall adopt rules establishing formal due dates
20 for amounts owing to the State and for the referral of
21 seriously past due accounts to private collection agencies,
22 unless otherwise expressly provided by law or rule, except that
23 on and after July 1, 2005, the Department of Employment
24 Security may continue to refer to private collection agencies
25 past due amounts that are exempt from subsection (g). Such
26 procedures shall be established in accord with sound business
27 practices.

28 (b) Until July 1, 2004 for the Department of Public Aid and
29 July 1, 2005 for Universities and all other State agencies,
30 agencies may enter deferred payment plans for debtors of the
31 agency and documentation of this fact retained by the agency,
32 where the deferred payment plan is likely to increase the net
33 amount collected by the State, except that, on and after July
34 1, 2005, the Department of Employment Security may continue to

1 enter deferred payment plans for debts that are exempt from
2 subsection (g).

3 (c) Until July 1, 2004 for the Department of Public Aid and
4 July 1, 2005 for Universities and all other State agencies,
5 State agencies may use the Comptroller's Offset System provided
6 in Section 10.05 of the State Comptroller Act for the
7 collection of debts owed to the agency, except that, on and
8 after July 1, 2005, the Department of Employment Security may
9 continue to use the Comptroller's offset system to collect
10 amounts that are exempt from subsection (g). All debts that
11 exceed \$1,000 and are more than 90 days past due shall be
12 placed in the Comptroller's Offset System, unless the State
13 agency shall have entered into a deferred payment plan or
14 demonstrates to the Comptroller's satisfaction that referral
15 for offset is not cost effective.

16 (d) State agencies shall develop internal procedures
17 whereby agency initiated payments to its debtors may be offset
18 without referral to the Comptroller's Offset System.

19 (e) State agencies or the Comptroller may remove claims
20 from the Comptroller's Offset System, where such claims have
21 been inactive for more than one year.

22 (f) State agencies may use the Comptroller's Offset System
23 to determine if any State agency is attempting to collect debt
24 from a contractor, bidder, or other proposed contracting party.

25 (g) Beginning July 1, 2004 for the Departments of Public
26 Aid (now Healthcare and Family Services) and Employment
27 Security and July 1, 2005 for Universities and other State
28 agencies, State agencies shall refer to the Department of
29 Revenue Debt Collection Bureau (the Bureau) all debt to the
30 State, provided that the debt satisfies the requirements for
31 referral of delinquent debt as established by rule by the
32 Department of Revenue.

33 (h) The Department of Healthcare and Family Services ~~Public~~
34 ~~Aid~~ shall be exempt from the requirements of this Section with
35 regard to child support debts, the collection of which is
36 governed by the requirements of Title IV, Part D of the federal

1 Social Security Act. The Department of Healthcare and Family
2 Services ~~Public Aid~~ may refer child support debts to the
3 Bureau, provided that the debt satisfies the requirements for
4 referral of delinquent debt as established by rule by the
5 Department of Revenue. The Bureau shall use all legal means
6 available to collect child support debt, including those
7 authorizing the Department of Revenue to collect debt and those
8 authorizing the Department of Healthcare and Family Services
9 ~~Public Aid~~ to collect debt. All such referred debt shall remain
10 an obligation under the Department of Healthcare and Family
11 Services' ~~Public Aid's~~ Child Support Enforcement Program
12 subject to the requirements of Title IV, Part D of the federal
13 Social Security Act, including the continued use of federally
14 mandated enforcement remedies and techniques by the Department
15 of Healthcare and Family Services ~~Public Aid~~.

16 (h-1) The Department of Employment Security is exempt from
17 subsection (g) with regard to debts to any federal account,
18 including but not limited to the Unemployment Trust Fund, and
19 penalties and interest assessed under the Unemployment
20 Insurance Act. The Department of Employment Security may refer
21 those debts to the Bureau, provided the debt satisfies the
22 requirements for referral of delinquent debt as established by
23 rule by the Department of Revenue. The Bureau shall use all
24 legal means available to collect the debts, including those
25 authorizing the Department of Revenue to collect debt and those
26 authorizing the Department of Employment Security to collect
27 debt. All referred debt shall remain an obligation to the
28 account to which it is owed.

29 (i) All debt referred to the Bureau for collection shall
30 remain the property of the referring agency. The Bureau shall
31 collect debt on behalf of the referring agency using all legal
32 means available, including those authorizing the Department of
33 Revenue to collect debt and those authorizing the referring
34 agency to collect debt.

35 (j) No debt secured by an interest in real property granted
36 by the debtor in exchange for the creation of the debt shall be

1 referred to the Bureau. The Bureau shall have no obligation to
2 collect debts secured by an interest in real property.

3 (k) Beginning July 1, 2003, each agency shall collect and
4 provide the Bureau information regarding the nature and details
5 of its debt in such form and manner as the Department of
6 Revenue shall require.

7 (l) For all debt accruing after July 1, 2003, each agency
8 shall collect and transmit such debtor identification
9 information as the Department of Revenue shall require.

10 (Source: P.A. 92-404, eff. 7-1-02; 93-570, eff. 8-20-03.)

11 (30 ILCS 210/10)

12 Sec. 10. Department of Revenue Debt Collection Bureau to
13 assume collection duties.

14 (a) The Department of Revenue's Debt Collection Bureau
15 shall serve as the primary debt collecting entity for the State
16 and in that role shall collect debts on behalf of agencies of
17 the State. All debts owed the State of Illinois shall be
18 referred to the Bureau, subject to such limitations as the
19 Department of Revenue shall by rule establish. The Bureau shall
20 utilize the Comptroller's offset system and private collection
21 agencies, as well as its own collections personnel. The Bureau
22 shall collect debt using all legal authority available to the
23 Department of Revenue to collect debt and all legal authority
24 available to the referring agency.

25 (b) The Bureau shall have the sole authority to let
26 contracts with persons specializing in debt collection for the
27 collection of debt referred to and accepted by the Bureau. Any
28 contract with the debt collector shall specify that the
29 collector's fee shall be on a contingency basis and that the
30 debt collector shall not be entitled to collect a contingency
31 fee for any debt collected through the efforts of any State
32 offset system.

33 (c) The Department of Revenue shall adopt rules for the
34 certification of debt from referring agencies and shall adopt
35 rules for the certification of collection specialists to be

1 employed by the Bureau.

2 (d) The Department of Revenue shall adopt rules for
3 determining when a debt referred by an agency shall be deemed
4 by the Bureau to be uncollectible.

5 (e) Once an agency's debt is deemed by the Bureau to be
6 uncollectible, the Bureau shall return the debt to the
7 referring agency which shall then write the debt off as
8 uncollectible or return the debt to the Bureau for additional
9 collection efforts. The Bureau shall refuse to accept debt that
10 has been deemed uncollectible absent factual assertions from
11 the referring agency that due to circumstances not known at the
12 time the debt was deemed uncollectible that the debt is worthy
13 of additional collection efforts.

14 (f) For each debt referred, the State agency shall retain
15 all documents and records relating to or supporting the debt.
16 In the event a debtor shall raise a reasonable doubt as to the
17 validity of the debt, the Bureau may in its discretion refer
18 the debt back to the referring agency for further review and
19 recommendation.

20 (g) The Department of Healthcare and Family Services ~~Public~~
21 ~~Aid~~ shall be exempt from the requirements of this Section with
22 regard to child support debts, the collection of which is
23 governed by the requirements of Title IV, Part D of the federal
24 Social Security Act. The Department of Healthcare and Family
25 Services ~~Public Aid~~ may refer child support debts to the
26 Bureau, provided that the debt satisfies the requirements for
27 referral of delinquent debt as established by rule by the
28 Department of Revenue. The Bureau shall use all legal means
29 available to collect child support debt, including those
30 authorizing the Department of Revenue to collect debt and those
31 authorizing the Department of Healthcare and Family Services
32 ~~Public Aid~~ to collect debt. All such referred debt shall remain
33 an obligation under the Department of Healthcare and Family
34 Services' ~~Public Aid's~~ Child Support Enforcement Program
35 subject to the requirements of Title IV, Part D of the federal
36 Social Security Act, including the continued use of federally

1 mandated enforcement remedies and techniques by the Department
2 of Healthcare and Family Services ~~Public Aid~~.

3 (g-1) The Department of Employment Security is exempt from
4 subsection (a) with regard to debts to any federal account,
5 including but not limited to the Unemployment Trust Fund, and
6 penalties and interest assessed under the Unemployment
7 Insurance Act. The Department of Employment Security may refer
8 those debts to the Bureau, provided the debt satisfies the
9 requirements for referral of delinquent debt as established by
10 rule by the Department of Revenue. The Bureau shall use all
11 legal means available to collect the debts, including those
12 authorizing the Department of Revenue to collect debt and those
13 authorizing the Department of Employment Security to collect
14 debt. All referred debt shall remain an obligation to the
15 account to which it is owed.

16 (h) The Debt Collection Fund is created as a special fund
17 in the State treasury. Debt collection contractors under this
18 Act shall receive a contingency fee as provided by the terms of
19 their contracts with the Department of Revenue. Thereafter, 20%
20 of all amounts collected by the Bureau, excluding amounts
21 collected on behalf of the Departments of Healthcare and Family
22 Services (formerly Public Aid) and Revenue, shall be deposited
23 into the Debt Collection Fund. All remaining amounts collected
24 shall be deposited into the General Revenue Fund unless the
25 funds are owed to any State fund or funds other than the
26 General Revenue Fund. Moneys in the Debt Collection Fund shall
27 be appropriated only for the administrative costs of the
28 Bureau. On the last day of each fiscal year, unappropriated
29 moneys and moneys otherwise deemed unneeded for the next fiscal
30 year remaining in the Debt Collection Fund may be transferred
31 into the General Revenue Fund at the Governor's reasonable
32 discretion. The provisions of this subsection do not apply to
33 debt that is exempt from subsection (a) pursuant to subsection
34 (g-1) or child support debt referred to the Bureau by the
35 Department of Healthcare and Family Services (formerly
36 Department of Public Aid) pursuant to this amendatory Act of

1 the 93rd General Assembly. Collections arising from referrals
2 from the Department of Healthcare and Family Services (formerly
3 Department of Public Aid) shall be deposited into such fund or
4 funds as the Department of Healthcare and Family Services
5 ~~Public Aid~~ shall direct, in accordance with the requirements of
6 Title IV, Part D of the federal Social Security Act, applicable
7 provisions of State law, and the rules of the Department of
8 Healthcare and Family Services ~~Public Aid~~. Collections arising
9 from referrals from the Department of Employment Security shall
10 be deposited into the fund or funds that the Department of
11 Employment Security shall direct, in accordance with the
12 requirements of Section 3304(a)(3) of the federal Unemployment
13 Tax Act, Section 303(a)(4) of the federal Social Security Act,
14 and the Unemployment Insurance Act.

15 (i) The Attorney General and the State Comptroller may
16 assist in the debt collection efforts of the Bureau, as
17 requested by the Department of Revenue.

18 (j) The Director of Revenue shall report annually to the
19 General Assembly and State Comptroller upon the debt collection
20 efforts of the Bureau. Each report shall include an analysis of
21 the overdue debts owed to the State.

22 (k) The Department of Revenue shall adopt rules and
23 procedures for the administration of this amendatory Act of the
24 93rd General Assembly. The rules shall be adopted under the
25 Department of Revenue's emergency rulemaking authority within
26 90 days following the effective date of this amendatory Act of
27 the 93rd General Assembly due to the budget crisis threatening
28 the public interest.

29 (l) The Department of Revenue's Debt Collection Bureau's
30 obligations under this Section 10 shall be subject to
31 appropriation by the General Assembly.

32 (Source: P.A. 93-570, eff. 8-20-03.)

33 Section 9185. The State Employee Illinois Workers'
34 Compensation Commission Awards Act is amended by changing
35 Section 5 as follows:

1 (30 ILCS 260/5) (from Ch. 127, par. 181a)

2 Sec. 5. Federal funds for compensation of certain State
3 employees. The State Treasurer, ex officio, may receive from
4 the ~~State~~ Department of Healthcare and Family Services ~~Public~~
5 ~~Aid~~ and the Department of Human Services (as successor to the
6 Department of Public Aid) any moneys which either Department
7 has received or shall receive from the federal government for
8 the payment of compensation awards for injuries or death
9 suffered by any person during the course of his or her
10 employment by the Department of Healthcare and Family Services
11 (formerly the State Department of Public Aid) or the County
12 Department of Public Aid or the Department of Human Services
13 (as successor to the Illinois Department of Public Aid) or upon
14 any project entered into between the Department of Healthcare
15 and Family Services (formerly the State Department of Public
16 Aid) or the Department of Human Services (as successor to the
17 Illinois Department of Public Aid) and any other department or
18 agency of the State. Such moneys, or any part thereof may be
19 paid over from time to time by the Department, to be held in
20 trust by the Treasurer, ex officio, and disbursed by the
21 Treasurer to the beneficiaries as directed by the Department.
22 (Source: P.A. 89-507, eff. 7-1-97.)

23 Section 9190. The Human Services Provider Bond Reserve
24 Payment Act is amended by changing Section 10 as follows:

25 (30 ILCS 435/10)

26 Sec. 10. Definitions. For the purposes of this Act:

27 (a) "Service provider" means any nongovernmental entity,
28 either for-profit or not-for-profit, that enters into a
29 contract with a State agency under which the entity is paid or
30 reimbursed by the State for providing human services to persons
31 in Illinois.

32 (b) "State agency" means the Department of Healthcare and
33 Family Services (formerly Department of Public Aid), the

1 Department of Public Health, the Department of Children and
2 Family Services, the Department of Human Services, and any
3 other department or agency of State government that enters into
4 contracts with service providers under which the provider is
5 paid or reimbursed by the State for providing human services to
6 persons in Illinois.

7 (c) "Covered bond issue" means revenue bonds (i) that are
8 issued by any agency of State or local government within this
9 State, including without limitation bonds issued by the
10 Illinois Finance Authority, (ii) that are to be directly or
11 indirectly paid, in whole or in part, from payments due to a
12 service provider under a human services contract with a State
13 agency, and (iii) for which a debt service reserve or other
14 reserve fund has been established, under the control of a named
15 trustee, that the service provider is required to replenish in
16 the event that moneys from the reserve fund are used to make
17 payments of principal or interest on the bonds.

18 (Source: P.A. 93-205, eff. 1-1-04.)

19 Section 9195. The Illinois Procurement Code is amended by
20 changing Section 50-13 as follows:

21 (30 ILCS 500/50-13)

22 Sec. 50-13. Conflicts of interest.

23 (a) Prohibition. It is unlawful for any person holding an
24 elective office in this State, holding a seat in the General
25 Assembly, or appointed to or employed in any of the offices or
26 agencies of State government and who receives compensation for
27 such employment in excess of 60% of the salary of the Governor
28 of the State of Illinois, or who is an officer or employee of
29 the Capital Development Board or the Illinois Toll Highway
30 Authority, or who is the spouse or minor child of any such
31 person to have or acquire any contract, or any direct pecuniary
32 interest in any contract therein, whether for stationery,
33 printing, paper, or any services, materials, or supplies, that
34 will be wholly or partially satisfied by the payment of funds

1 appropriated by the General Assembly of the State of Illinois
2 or in any contract of the Capital Development Board or the
3 Illinois Toll Highway Authority.

4 (b) Interests. It is unlawful for any firm, partnership,
5 association, or corporation, in which any person listed in
6 subsection (a) is entitled to receive (i) more than 7 1/2% of
7 the total distributable income or (ii) an amount in excess of
8 the salary of the Governor, to have or acquire any such
9 contract or direct pecuniary interest therein.

10 (c) Combined interests. It is unlawful for any firm,
11 partnership, association, or corporation, in which any person
12 listed in subsection (a) together with his or her spouse or
13 minor children is entitled to receive (i) more than 15%, in the
14 aggregate, of the total distributable income or (ii) an amount
15 in excess of 2 times the salary of the Governor, to have or
16 acquire any such contract or direct pecuniary interest therein.

17 (c-5) Appointees and firms. In addition to any provisions
18 of this Code, the interests of certain appointees and their
19 firms are subject to Section 3A-35 of the Illinois Governmental
20 Ethics Act.

21 (d) Securities. Nothing in this Section invalidates the
22 provisions of any bond or other security previously offered or
23 to be offered for sale or sold by or for the State of Illinois.

24 (e) Prior interests. This Section does not affect the
25 validity of any contract made between the State and an officer
26 or employee of the State or member of the General Assembly, his
27 or her spouse, minor child, or other immediate family member
28 living in his or her residence or any combination of those
29 persons if that contract was in existence before his or her
30 election or employment as an officer, member, or employee. The
31 contract is voidable, however, if it cannot be completed within
32 365 days after the officer, member, or employee takes office or
33 is employed.

34 (f) Exceptions.

35 (1) Public aid payments. This Section does not apply to
36 payments made for a public aid recipient.

1 (2) Teaching. This Section does not apply to a contract
2 for personal services as a teacher or school administrator
3 between a member of the General Assembly or his or her
4 spouse, or a State officer or employee or his or her
5 spouse, and any school district, public community college
6 district, the University of Illinois, Southern Illinois
7 University, Illinois State University, Eastern Illinois
8 University, Northern Illinois University, Western Illinois
9 University, Chicago State University, Governor State
10 University, or Northeastern Illinois University.

11 (3) Ministerial duties. This Section does not apply to
12 a contract for personal services of a wholly ministerial
13 character, including but not limited to services as a
14 laborer, clerk, typist, stenographer, page, bookkeeper,
15 receptionist, or telephone switchboard operator, made by a
16 spouse or minor child of an elective or appointive State
17 officer or employee or of a member of the General Assembly.

18 (4) Child and family services. This Section does not
19 apply to payments made to a member of the General Assembly,
20 a State officer or employee, his or her spouse or minor
21 child acting as a foster parent, homemaker, advocate, or
22 volunteer for or in behalf of a child or family served by
23 the Department of Children and Family Services.

24 (5) Licensed professionals. Contracts with licensed
25 professionals, provided they are competitively bid or part
26 of a reimbursement program for specific, customary goods
27 and services through the Department of Children and Family
28 Services, the Department of Human Services, the Department
29 of Healthcare and Family Services ~~Public Aid~~, the
30 Department of Public Health, or the Department on Aging.

31 (g) Penalty. A person convicted of a violation of this
32 Section is guilty of a business offense and shall be fined not
33 less than \$1,000 nor more than \$5,000.

34 (Source: P.A. 93-615, eff. 11-19-03.)

35 Section 9200. The Excellence in Academic Medicine Act is

1 amended by changing Sections 65 and 74 as follows:

2 (30 ILCS 775/65)

3 Sec. 65. Reporting requirements. On or before May 1 of each
4 year, the chief executive officer of each Qualified Academic
5 Medical Center Hospital shall submit a report to the
6 Comptroller regarding the effects of the programs authorized by
7 this Act. The report shall also report the total amount of
8 grants from and contracts with the National Institutes of
9 Health in the preceding calendar year. It shall assess whether
10 the programs funded are likely to be successful, require
11 further study, or no longer appear to be promising avenues of
12 research. It shall discuss the probable use of the
13 developmental program in mainstream medicine including both
14 cost impact and medical effect. The report shall address the
15 effects the programs may have on containing Title XIX and Title
16 XXI costs in Illinois. The Comptroller shall immediately
17 forward the report to the Director of Healthcare and Family
18 Services ~~Public Aid~~ and the Director of Public Health who shall
19 evaluate the contents in a letter submitted to the President of
20 the Senate and the Speaker of the House of Representatives.

21 (Source: P.A. 92-10, eff. 6-11-01.)

22 (30 ILCS 775/74)

23 Sec. 74. Reimbursement methodology. The Department of
24 Healthcare and Family Services ~~Public Aid~~ may develop a
25 reimbursement methodology consistent with this Act for
26 distribution of moneys from the funds in a manner that would
27 allow distributions from these funds to be matchable under
28 Title XIX of the Social Security Act. The Department may
29 promulgate rules necessary to make these distributions
30 matchable.

31 (Source: P.A. 89-506, eff. 7-3-96.)

32 Section 9205. The Illinois Income Tax Act is amended by
33 changing Sections 901 and 917 as follows:

1 (35 ILCS 5/901) (from Ch. 120, par. 9-901)

2 Sec. 901. Collection Authority.

3 (a) In general.

4 The Department shall collect the taxes imposed by this Act.
5 The Department shall collect certified past due child support
6 amounts under Section 2505-650 of the Department of Revenue Law
7 (20 ILCS 2505/2505-650). Except as provided in subsections (c)
8 and (e) of this Section, money collected pursuant to
9 subsections (a) and (b) of Section 201 of this Act shall be
10 paid into the General Revenue Fund in the State treasury; money
11 collected pursuant to subsections (c) and (d) of Section 201 of
12 this Act shall be paid into the Personal Property Tax
13 Replacement Fund, a special fund in the State Treasury; and
14 money collected under Section 2505-650 of the Department of
15 Revenue Law (20 ILCS 2505/2505-650) shall be paid into the
16 Child Support Enforcement Trust Fund, a special fund outside
17 the State Treasury, or to the State Disbursement Unit
18 established under Section 10-26 of the Illinois Public Aid
19 Code, as directed by the Department of Healthcare and Family
20 Services ~~Public Aid~~.

21 (b) Local Governmental Distributive Fund.

22 Beginning August 1, 1969, and continuing through June 30,
23 1994, the Treasurer shall transfer each month from the General
24 Revenue Fund to a special fund in the State treasury, to be
25 known as the "Local Government Distributive Fund", an amount
26 equal to 1/12 of the net revenue realized from the tax imposed
27 by subsections (a) and (b) of Section 201 of this Act during
28 the preceding month. Beginning July 1, 1994, and continuing
29 through June 30, 1995, the Treasurer shall transfer each month
30 from the General Revenue Fund to the Local Government
31 Distributive Fund an amount equal to 1/11 of the net revenue
32 realized from the tax imposed by subsections (a) and (b) of
33 Section 201 of this Act during the preceding month. Beginning
34 July 1, 1995, the Treasurer shall transfer each month from the
35 General Revenue Fund to the Local Government Distributive Fund

1 an amount equal to the net of (i) 1/10 of the net revenue
2 realized from the tax imposed by subsections (a) and (b) of
3 Section 201 of the Illinois Income Tax Act during the preceding
4 month (ii) minus, beginning July 1, 2003 and ending June 30,
5 2004, \$6,666,666, and beginning July 1, 2004, zero. Net revenue
6 realized for a month shall be defined as the revenue from the
7 tax imposed by subsections (a) and (b) of Section 201 of this
8 Act which is deposited in the General Revenue Fund, the
9 Educational Assistance Fund and the Income Tax Surcharge Local
10 Government Distributive Fund during the month minus the amount
11 paid out of the General Revenue Fund in State warrants during
12 that same month as refunds to taxpayers for overpayment of
13 liability under the tax imposed by subsections (a) and (b) of
14 Section 201 of this Act.

15 (c) Deposits Into Income Tax Refund Fund.

16 (1) Beginning on January 1, 1989 and thereafter, the
17 Department shall deposit a percentage of the amounts
18 collected pursuant to subsections (a) and (b)(1), (2), and
19 (3), of Section 201 of this Act into a fund in the State
20 treasury known as the Income Tax Refund Fund. The
21 Department shall deposit 6% of such amounts during the
22 period beginning January 1, 1989 and ending on June 30,
23 1989. Beginning with State fiscal year 1990 and for each
24 fiscal year thereafter, the percentage deposited into the
25 Income Tax Refund Fund during a fiscal year shall be the
26 Annual Percentage. For fiscal years 1999 through 2001, the
27 Annual Percentage shall be 7.1%. For fiscal year 2003, the
28 Annual Percentage shall be 8%. For fiscal year 2004, the
29 Annual Percentage shall be 11.7%. Upon the effective date
30 of this amendatory Act of the 93rd General Assembly, the
31 Annual Percentage shall be 10% for fiscal year 2005. For
32 fiscal year 2006, the Annual Percentage shall be 9.75%. For
33 all other fiscal years, the Annual Percentage shall be
34 calculated as a fraction, the numerator of which shall be
35 the amount of refunds approved for payment by the
36 Department during the preceding fiscal year as a result of

1 overpayment of tax liability under subsections (a) and
2 (b) (1), (2), and (3) of Section 201 of this Act plus the
3 amount of such refunds remaining approved but unpaid at the
4 end of the preceding fiscal year, minus the amounts
5 transferred into the Income Tax Refund Fund from the
6 Tobacco Settlement Recovery Fund, and the denominator of
7 which shall be the amounts which will be collected pursuant
8 to subsections (a) and (b) (1), (2), and (3) of Section 201
9 of this Act during the preceding fiscal year; except that
10 in State fiscal year 2002, the Annual Percentage shall in
11 no event exceed 7.6%. The Director of Revenue shall certify
12 the Annual Percentage to the Comptroller on the last
13 business day of the fiscal year immediately preceding the
14 fiscal year for which it is to be effective.

15 (2) Beginning on January 1, 1989 and thereafter, the
16 Department shall deposit a percentage of the amounts
17 collected pursuant to subsections (a) and (b) (6), (7), and
18 (8), (c) and (d) of Section 201 of this Act into a fund in
19 the State treasury known as the Income Tax Refund Fund. The
20 Department shall deposit 18% of such amounts during the
21 period beginning January 1, 1989 and ending on June 30,
22 1989. Beginning with State fiscal year 1990 and for each
23 fiscal year thereafter, the percentage deposited into the
24 Income Tax Refund Fund during a fiscal year shall be the
25 Annual Percentage. For fiscal years 1999, 2000, and 2001,
26 the Annual Percentage shall be 19%. For fiscal year 2003,
27 the Annual Percentage shall be 27%. For fiscal year 2004,
28 the Annual Percentage shall be 32%. Upon the effective date
29 of this amendatory Act of the 93rd General Assembly, the
30 Annual Percentage shall be 24% for fiscal year 2005. For
31 fiscal year 2006, the Annual Percentage shall be 20%. For
32 all other fiscal years, the Annual Percentage shall be
33 calculated as a fraction, the numerator of which shall be
34 the amount of refunds approved for payment by the
35 Department during the preceding fiscal year as a result of
36 overpayment of tax liability under subsections (a) and

1 (b) (6), (7), and (8), (c) and (d) of Section 201 of this
2 Act plus the amount of such refunds remaining approved but
3 unpaid at the end of the preceding fiscal year, and the
4 denominator of which shall be the amounts which will be
5 collected pursuant to subsections (a) and (b) (6), (7), and
6 (8), (c) and (d) of Section 201 of this Act during the
7 preceding fiscal year; except that in State fiscal year
8 2002, the Annual Percentage shall in no event exceed 23%.
9 The Director of Revenue shall certify the Annual Percentage
10 to the Comptroller on the last business day of the fiscal
11 year immediately preceding the fiscal year for which it is
12 to be effective.

13 (3) The Comptroller shall order transferred and the
14 Treasurer shall transfer from the Tobacco Settlement
15 Recovery Fund to the Income Tax Refund Fund (i) \$35,000,000
16 in January, 2001, (ii) \$35,000,000 in January, 2002, and
17 (iii) \$35,000,000 in January, 2003.

18 (d) Expenditures from Income Tax Refund Fund.

19 (1) Beginning January 1, 1989, money in the Income Tax
20 Refund Fund shall be expended exclusively for the purpose
21 of paying refunds resulting from overpayment of tax
22 liability under Section 201 of this Act, for paying rebates
23 under Section 208.1 in the event that the amounts in the
24 Homeowners' Tax Relief Fund are insufficient for that
25 purpose, and for making transfers pursuant to this
26 subsection (d).

27 (2) The Director shall order payment of refunds
28 resulting from overpayment of tax liability under Section
29 201 of this Act from the Income Tax Refund Fund only to the
30 extent that amounts collected pursuant to Section 201 of
31 this Act and transfers pursuant to this subsection (d) and
32 item (3) of subsection (c) have been deposited and retained
33 in the Fund.

34 (3) As soon as possible after the end of each fiscal
35 year, the Director shall order transferred and the State
36 Treasurer and State Comptroller shall transfer from the

1 Income Tax Refund Fund to the Personal Property Tax
2 Replacement Fund an amount, certified by the Director to
3 the Comptroller, equal to the excess of the amount
4 collected pursuant to subsections (c) and (d) of Section
5 201 of this Act deposited into the Income Tax Refund Fund
6 during the fiscal year over the amount of refunds resulting
7 from overpayment of tax liability under subsections (c) and
8 (d) of Section 201 of this Act paid from the Income Tax
9 Refund Fund during the fiscal year.

10 (4) As soon as possible after the end of each fiscal
11 year, the Director shall order transferred and the State
12 Treasurer and State Comptroller shall transfer from the
13 Personal Property Tax Replacement Fund to the Income Tax
14 Refund Fund an amount, certified by the Director to the
15 Comptroller, equal to the excess of the amount of refunds
16 resulting from overpayment of tax liability under
17 subsections (c) and (d) of Section 201 of this Act paid
18 from the Income Tax Refund Fund during the fiscal year over
19 the amount collected pursuant to subsections (c) and (d) of
20 Section 201 of this Act deposited into the Income Tax
21 Refund Fund during the fiscal year.

22 (4.5) As soon as possible after the end of fiscal year
23 1999 and of each fiscal year thereafter, the Director shall
24 order transferred and the State Treasurer and State
25 Comptroller shall transfer from the Income Tax Refund Fund
26 to the General Revenue Fund any surplus remaining in the
27 Income Tax Refund Fund as of the end of such fiscal year;
28 excluding for fiscal years 2000, 2001, and 2002 amounts
29 attributable to transfers under item (3) of subsection (c)
30 less refunds resulting from the earned income tax credit.

31 (5) This Act shall constitute an irrevocable and
32 continuing appropriation from the Income Tax Refund Fund
33 for the purpose of paying refunds upon the order of the
34 Director in accordance with the provisions of this Section.

35 (e) Deposits into the Education Assistance Fund and the
36 Income Tax Surcharge Local Government Distributive Fund.

1 On July 1, 1991, and thereafter, of the amounts collected
2 pursuant to subsections (a) and (b) of Section 201 of this Act,
3 minus deposits into the Income Tax Refund Fund, the Department
4 shall deposit 7.3% into the Education Assistance Fund in the
5 State Treasury. Beginning July 1, 1991, and continuing through
6 January 31, 1993, of the amounts collected pursuant to
7 subsections (a) and (b) of Section 201 of the Illinois Income
8 Tax Act, minus deposits into the Income Tax Refund Fund, the
9 Department shall deposit 3.0% into the Income Tax Surcharge
10 Local Government Distributive Fund in the State Treasury.
11 Beginning February 1, 1993 and continuing through June 30,
12 1993, of the amounts collected pursuant to subsections (a) and
13 (b) of Section 201 of the Illinois Income Tax Act, minus
14 deposits into the Income Tax Refund Fund, the Department shall
15 deposit 4.4% into the Income Tax Surcharge Local Government
16 Distributive Fund in the State Treasury. Beginning July 1,
17 1993, and continuing through June 30, 1994, of the amounts
18 collected under subsections (a) and (b) of Section 201 of this
19 Act, minus deposits into the Income Tax Refund Fund, the
20 Department shall deposit 1.475% into the Income Tax Surcharge
21 Local Government Distributive Fund in the State Treasury.

22 (Source: P.A. 93-32, eff. 6-20-03; 93-839, eff. 7-30-04; 94-91,
23 eff. 7-1-05.)

24 (35 ILCS 5/917) (from Ch. 120, par. 9-917)

25 Sec. 917. Confidentiality and information sharing.

26 (a) Confidentiality. Except as provided in this Section,
27 all information received by the Department from returns filed
28 under this Act, or from any investigation conducted under the
29 provisions of this Act, shall be confidential, except for
30 official purposes within the Department or pursuant to official
31 procedures for collection of any State tax or pursuant to an
32 investigation or audit by the Illinois State Scholarship
33 Commission of a delinquent student loan or monetary award or
34 enforcement of any civil or criminal penalty or sanction
35 imposed by this Act or by another statute imposing a State tax,

1 and any person who divulges any such information in any manner,
2 except for such purposes and pursuant to order of the Director
3 or in accordance with a proper judicial order, shall be guilty
4 of a Class A misdemeanor. However, the provisions of this
5 paragraph are not applicable to information furnished to (i)
6 the Department of Healthcare and Family Services (formerly
7 Department of Public Aid), State's Attorneys, and the Attorney
8 General for child support enforcement purposes and (ii) a
9 licensed attorney representing the taxpayer where an appeal or
10 a protest has been filed on behalf of the taxpayer. If it is
11 necessary to file information obtained pursuant to this Act in
12 a child support enforcement proceeding, the information shall
13 be filed under seal.

14 (b) Public information. Nothing contained in this Act shall
15 prevent the Director from publishing or making available to the
16 public the names and addresses of persons filing returns under
17 this Act, or from publishing or making available reasonable
18 statistics concerning the operation of the tax wherein the
19 contents of returns are grouped into aggregates in such a way
20 that the information contained in any individual return shall
21 not be disclosed.

22 (c) Governmental agencies. The Director may make available
23 to the Secretary of the Treasury of the United States or his
24 delegate, or the proper officer or his delegate of any other
25 state imposing a tax upon or measured by income, for
26 exclusively official purposes, information received by the
27 Department in the administration of this Act, but such
28 permission shall be granted only if the United States or such
29 other state, as the case may be, grants the Department
30 substantially similar privileges. The Director may exchange
31 information with the ~~Illinois~~ Department of Healthcare and
32 Family Services ~~Public Aid~~ and the Department of Human Services
33 (acting as successor to the Department of Public Aid under the
34 Department of Human Services Act) for the purpose of verifying
35 sources and amounts of income and for other purposes directly
36 connected with the administration of this Act and the Illinois

1 Public Aid Code. The Director may exchange information with the
2 Director of the Department of Employment Security for the
3 purpose of verifying sources and amounts of income and for
4 other purposes directly connected with the administration of
5 this Act and Acts administered by the Department of Employment
6 Security. The Director may make available to the Illinois
7 Workers' Compensation Commission information regarding
8 employers for the purpose of verifying the insurance coverage
9 required under the Workers' Compensation Act and Workers'
10 Occupational Diseases Act. The Director may exchange
11 information with the Illinois Department on Aging for the
12 purpose of verifying sources and amounts of income for purposes
13 directly related to confirming eligibility for participation
14 in the programs of benefits authorized by the Senior Citizens
15 and Disabled Persons Property Tax Relief and Pharmaceutical
16 Assistance Act.

17 The Director may make available to any State agency,
18 including the Illinois Supreme Court, which licenses persons to
19 engage in any occupation, information that a person licensed by
20 such agency has failed to file returns under this Act or pay
21 the tax, penalty and interest shown therein, or has failed to
22 pay any final assessment of tax, penalty or interest due under
23 this Act. The Director may make available to any State agency,
24 including the Illinois Supreme Court, information regarding
25 whether a bidder, contractor, or an affiliate of a bidder or
26 contractor has failed to file returns under this Act or pay the
27 tax, penalty, and interest shown therein, or has failed to pay
28 any final assessment of tax, penalty, or interest due under
29 this Act, for the limited purpose of enforcing bidder and
30 contractor certifications. For purposes of this Section, the
31 term "affiliate" means any entity that (1) directly,
32 indirectly, or constructively controls another entity, (2) is
33 directly, indirectly, or constructively controlled by another
34 entity, or (3) is subject to the control of a common entity.
35 For purposes of this subsection (a), an entity controls another
36 entity if it owns, directly or individually, more than 10% of

1 the voting securities of that entity. As used in this
2 subsection (a), the term "voting security" means a security
3 that (1) confers upon the holder the right to vote for the
4 election of members of the board of directors or similar
5 governing body of the business or (2) is convertible into, or
6 entitles the holder to receive upon its exercise, a security
7 that confers such a right to vote. A general partnership
8 interest is a voting security.

9 The Director may make available to any State agency,
10 including the Illinois Supreme Court, units of local
11 government, and school districts, information regarding
12 whether a bidder or contractor is an affiliate of a person who
13 is not collecting and remitting Illinois Use taxes, for the
14 limited purpose of enforcing bidder and contractor
15 certifications.

16 The Director may also make available to the Secretary of
17 State information that a corporation which has been issued a
18 certificate of incorporation by the Secretary of State has
19 failed to file returns under this Act or pay the tax, penalty
20 and interest shown therein, or has failed to pay any final
21 assessment of tax, penalty or interest due under this Act. An
22 assessment is final when all proceedings in court for review of
23 such assessment have terminated or the time for the taking
24 thereof has expired without such proceedings being instituted.
25 For taxable years ending on or after December 31, 1987, the
26 Director may make available to the Director or principal
27 officer of any Department of the State of Illinois, information
28 that a person employed by such Department has failed to file
29 returns under this Act or pay the tax, penalty and interest
30 shown therein. For purposes of this paragraph, the word
31 "Department" shall have the same meaning as provided in Section
32 3 of the State Employees Group Insurance Act of 1971.

33 (d) The Director shall make available for public inspection
34 in the Department's principal office and for publication, at
35 cost, administrative decisions issued on or after January 1,
36 1995. These decisions are to be made available in a manner so

1 that the following taxpayer information is not disclosed:

2 (1) The names, addresses, and identification numbers
3 of the taxpayer, related entities, and employees.

4 (2) At the sole discretion of the Director, trade
5 secrets or other confidential information identified as
6 such by the taxpayer, no later than 30 days after receipt
7 of an administrative decision, by such means as the
8 Department shall provide by rule.

9 The Director shall determine the appropriate extent of the
10 deletions allowed in paragraph (2). In the event the taxpayer
11 does not submit deletions, the Director shall make only the
12 deletions specified in paragraph (1).

13 The Director shall make available for public inspection and
14 publication an administrative decision within 180 days after
15 the issuance of the administrative decision. The term
16 "administrative decision" has the same meaning as defined in
17 Section 3-101 of Article III of the Code of Civil Procedure.
18 Costs collected under this Section shall be paid into the Tax
19 Compliance and Administration Fund.

20 (e) Nothing contained in this Act shall prevent the
21 Director from divulging information to any person pursuant to a
22 request or authorization made by the taxpayer, by an authorized
23 representative of the taxpayer, or, in the case of information
24 related to a joint return, by the spouse filing the joint
25 return with the taxpayer.

26 (Source: P.A. 93-25, eff. 6-20-03; 93-721, eff. 1-1-05; 93-835;
27 eff. 7-29-04; 93-841, eff. 7-30-04; revised 10-25-04.)

28 Section 9210. The Interstate Compact on Adoption Act is
29 amended by changing Sections 5-35 and 5-40 as follows:

30 (45 ILCS 17/5-35)

31 Sec. 5-35. Medical assistance.

32 (a) A child with special needs who resides in this State
33 and who is the subject of an adoption assistance agreement with
34 another state shall be eligible for medical assistance from

1 this State under Article V of the Illinois Public Aid Code upon
2 the filing of agreed documentation obtained from the assistance
3 state and filed with the ~~Illinois~~ Department of Healthcare and
4 Family Services ~~Public Aid~~. The Department of Children and
5 Family Services shall be required at least annually to
6 establish that the agreement is still in force or has been
7 renewed.

8 (b) If a child (i) is in another state, (ii) is covered by
9 an adoption assistance agreement made by the Illinois
10 Department of Children and Family Services, and (iii) was
11 eligible for medical assistance under Article V of the Illinois
12 Public Aid Code at the time he or she resided in this State and
13 would continue to be eligible for that assistance if he or she
14 was currently residing in this State, then that child is
15 eligible for medical assistance under Article V of the Illinois
16 Public Aid Code, but only for those medical assistance benefits
17 under Article V that are not provided by the other state. There
18 shall be no payment or reimbursement by this State for services
19 or benefits covered under any insurance or other third party
20 medical contract or arrangement held by the child or the
21 adoptive parents.

22 (c) The submission of any claim for payment or
23 reimbursement for services or benefits pursuant to this Section
24 or the making of any statement in connection therewith, which
25 claim or statement the maker knows or should know to be false,
26 misleading, or fraudulent, shall be punishable as perjury and
27 shall also be subject to a fine not to exceed \$10,000 or
28 imprisonment for not to exceed 2 years, or both.

29 (d) The provisions of this Section shall apply only to
30 medical assistance for children under adoption assistance
31 agreements from states that have entered into a compact with
32 this State under which the other state provided medical
33 assistance to children with special needs under adoption
34 assistance agreements made by this State.

35 (e) The Illinois Department of Children and Family Services
36 and the Department of Healthcare and Family Services ~~Illinois~~

1 ~~Department of Public Aid~~ may adopt all rules necessary to
2 implement this Section.

3 (Source: P.A. 90-28, eff. 1-1-98.)

4 (45 ILCS 17/5-40)

5 Sec. 5-40. Federal participation. Consistent with federal
6 law, the Illinois Department of Children and Family Services
7 and the Department of Healthcare and Family Services ~~Illinois~~
8 ~~Department of Public Aid~~ or the Illinois Department of Human
9 Services, as the successor agency of the Illinois Department of
10 Public Aid, in connection with the administration of this Act
11 and any compact entered into pursuant to this Act, shall
12 include in any state plan made pursuant to the Adoption
13 Assistance and Child Welfare Act of 1980 (P.L. 96-272), Titles
14 IV (e) and XIX of the Social Security Act, and any other
15 applicable federal laws the provision of adoption assistance
16 and medical assistance for which the federal government pays
17 some or all of the cost. The Department of Children and Family
18 Services and the Department of Healthcare and Family Services
19 ~~Illinois Department of Public Aid~~ or the Department of Human
20 Services, as the successor agency of the Illinois Department of
21 Public Aid, shall apply for and administer all relevant federal
22 aid in accordance with law.

23 (Source: P.A. 90-28, eff. 1-1-98.)

24 Section 9215. The Counties Code is amended by changing
25 Sections 3-5036.5, 4-2002, 4-2002.1, 5-21009, and 5-37006 as
26 follows:

27 (55 ILCS 5/3-5036.5)

28 Sec. 3-5036.5. Exchange of information for child support
29 enforcement.

30 (a) The Recorder shall exchange with the ~~Illinois~~
31 Department of Healthcare and Family Services ~~Public Aid~~
32 information that may be necessary for the enforcement of child
33 support orders entered pursuant to the Illinois Public Aid

1 Code, the Illinois Marriage and Dissolution of Marriage Act,
2 the Non-Support of Spouse and Children Act, the Non-Support
3 Punishment Act, the Revised Uniform Reciprocal Enforcement of
4 Support Act, the Uniform Interstate Family Support Act, or the
5 Illinois Parentage Act of 1984.

6 (b) Notwithstanding any provisions in this Code to the
7 contrary, the Recorder shall not be liable to any person for
8 any disclosure of information to the Department of Healthcare
9 and Family Services (formerly Illinois Department of Public
10 Aid) under subsection (a) or for any other action taken in good
11 faith to comply with the requirements of subsection (a).

12 (Source: P.A. 90-18, eff. 7-1-97; 91-613, eff. 10-1-99.)

13 (55 ILCS 5/4-2002) (from Ch. 34, par. 4-2002)

14 Sec. 4-2002. State's attorney fees in counties under
15 3,000,000 population. This Section applies only to counties
16 with fewer than 3,000,000 inhabitants.

17 (a) State's attorneys shall be entitled to the following
18 fees, however, the fee requirement of this subsection does not
19 apply to county boards:

20 For each conviction in prosecutions on indictments for
21 first degree murder, second degree murder, involuntary
22 manslaughter, criminal sexual assault, aggravated criminal
23 sexual assault, aggravated criminal sexual abuse, kidnapping,
24 arson and forgery, \$30. All other cases punishable by
25 imprisonment in the penitentiary, \$30.

26 For each conviction in other cases tried before judges of
27 the circuit court, \$15; except that if the conviction is in a
28 case which may be assigned to an associate judge, whether or
29 not it is in fact assigned to an associate judge, the fee shall
30 be \$10.

31 For preliminary examinations for each defendant held to
32 bail or recognizance, \$10.

33 For each examination of a party bound over to keep the
34 peace, \$10.

35 For each defendant held to answer in a circuit court on a

1 charge of paternity, \$10.

2 For each trial on a charge of paternity, \$30.

3 For each case of appeal taken from his county or from the
4 county to which a change of venue is taken to his county to the
5 Supreme or Appellate Court when prosecuted or defended by him,
6 \$50.

7 For each day actually employed in the trial of a case, \$25;
8 in which case the court before whom the case is tried shall
9 make an order specifying the number of days for which a per
10 diem shall be allowed.

11 For each day actually employed in the trial of cases of
12 felony arising in their respective counties and taken by change
13 of venue to another county, \$25; and the court before whom the
14 case is tried shall make an order specifying the number of days
15 for which said per diem shall be allowed; and it is hereby made
16 the duty of each State's attorney to prepare and try each case
17 of felony arising when so taken by change of venue.

18 For assisting in a trial of each case on an indictment for
19 felony brought by change of venue to their respective counties,
20 the same fees they would be entitled to if such indictment had
21 been found for an offense committed in his county, and it shall
22 be the duty of the State's attorney of the county to which such
23 cause is taken by change of venue to assist in the trial
24 thereof.

25 For each case of forfeited recognizance where the
26 forfeiture is set aside at the instance of the defense, in
27 addition to the ordinary costs, \$10 for each defendant.

28 For each proceeding in a circuit court to inquire into the
29 alleged mental illness of any person, \$10 for each defendant.

30 For each proceeding in a circuit court to inquire into the
31 alleged dependency or delinquency of any child, \$10.

32 For each day actually employed in the hearing of a case of
33 habeas corpus in which the people are interested, \$25.

34 All the foregoing fees shall be taxed as costs to be
35 collected from the defendant, if possible, upon conviction. But
36 in cases of inquiry into the mental illness of any person

1 alleged to be mentally ill, in cases on a charge of paternity
2 and in cases of appeal in the Supreme or Appellate Court, where
3 judgment is in favor of the accused, the fees allowed the
4 State's attorney therein shall be retained out of the fines and
5 forfeitures collected by them in other cases.

6 Ten per cent of all moneys except revenue, collected by
7 them and paid over to the authorities entitled thereto, which
8 per cent together with the fees provided for herein that are
9 not collected from the parties tried or examined, shall be paid
10 out of any fines and forfeited recognizances collected by them,
11 provided however, that in proceedings to foreclose the lien of
12 delinquent real estate taxes State's attorneys shall receive a
13 fee, to be credited to the earnings of their office, of 10% of
14 the total amount realized from the sale of real estate sold in
15 such proceedings. Such fees shall be paid from the total amount
16 realized from the sale of the real estate sold in such
17 proceedings.

18 State's attorneys shall have a lien for their fees on all
19 judgments for fines or forfeitures procured by them and on
20 moneys except revenue received by them until such fees and
21 earnings are fully paid.

22 No fees shall be charged on more than 10 counts in any one
23 indictment or information on trial and conviction; nor on more
24 than 10 counts against any one defendant on pleas of guilty.

25 The Circuit Court may direct that of all monies received,
26 by restitution or otherwise, which monies are ordered paid to
27 the Department of Healthcare and Family Services (formerly
28 Department of Public Aid) or the Department of Human Services
29 (acting as successor to the Department of Public Aid under the
30 Department of Human Services Act) as a direct result of the
31 efforts of the State's attorney and which payments arise from
32 Civil or Criminal prosecutions involving the Illinois Public
33 Aid Code or the Criminal Code, the following amounts shall be
34 paid quarterly by the Department of Healthcare and Family
35 Services ~~Public Aid~~ or the Department of Human Services to the
36 General Corporate Fund of the County in which the prosecution

1 or cause of action took place:

2 (1) where the monies result from child support
3 obligations, not more than 25% of the federal share of the
4 monies received,

5 (2) where the monies result from other than child
6 support obligations, not more than 25% of the State's share
7 of the monies received.

8 (b) A municipality shall be entitled to a \$10 prosecution
9 fee for each conviction for a violation of The Illinois Vehicle
10 Code prosecuted by the municipal attorney pursuant to Section
11 16-102 of that Code which is tried before a circuit or
12 associate judge and shall be entitled to a \$10 prosecution fee
13 for each conviction for a violation of a municipal vehicle
14 ordinance or nontraffic ordinance prosecuted by the municipal
15 attorney which is tried before a circuit or associate judge.
16 Such fee shall be taxed as costs to be collected from the
17 defendant, if possible, upon conviction. A municipality shall
18 have a lien for such prosecution fees on all judgments or fines
19 procured by the municipal attorney from prosecutions for
20 violations of The Illinois Vehicle Code and municipal vehicle
21 ordinances or nontraffic ordinances.

22 For the purposes of this subsection (b), "municipal vehicle
23 ordinance" means any ordinance enacted pursuant to Sections
24 11-40-1, 11-40-2, 11-40-2a and 11-40-3 of the Illinois
25 Municipal Code or any ordinance enacted by a municipality which
26 is similar to a provision of Chapter 11 of The Illinois Vehicle
27 Code.

28 (Source: P.A. 88-572, eff. 8-11-94; 89-507, eff. 7-1-97.)

29 (55 ILCS 5/4-2002.1) (from Ch. 34, par. 4-2002.1)

30 Sec. 4-2002.1. State's attorney fees in counties of
31 3,000,000 or more population. This Section applies only to
32 counties with 3,000,000 or more inhabitants.

33 (a) State's attorneys shall be entitled to the following
34 fees:

35 For each conviction in prosecutions on indictments for

1 first degree murder, second degree murder, involuntary
2 manslaughter, criminal sexual assault, aggravated criminal
3 sexual assault, aggravated criminal sexual abuse, kidnapping,
4 arson and forgery, \$60. All other cases punishable by
5 imprisonment in the penitentiary, \$60.

6 For each conviction in other cases tried before judges of
7 the circuit court, \$30; except that if the conviction is in a
8 case which may be assigned to an associate judge, whether or
9 not it is in fact assigned to an associate judge, the fee shall
10 be \$20.

11 For preliminary examinations for each defendant held to
12 bail or recognizance, \$20.

13 For each examination of a party bound over to keep the
14 peace, \$20.

15 For each defendant held to answer in a circuit court on a
16 charge of paternity, \$20.

17 For each trial on a charge of paternity, \$60.

18 For each case of appeal taken from his county or from the
19 county to which a change of venue is taken to his county to the
20 Supreme or Appellate Court when prosecuted or defended by him,
21 \$100.

22 For each day actually employed in the trial of a case, \$50;
23 in which case the court before whom the case is tried shall
24 make an order specifying the number of days for which a per
25 diem shall be allowed.

26 For each day actually employed in the trial of cases of
27 felony arising in their respective counties and taken by change
28 of venue to another county, \$50; and the court before whom the
29 case is tried shall make an order specifying the number of days
30 for which said per diem shall be allowed; and it is hereby made
31 the duty of each State's attorney to prepare and try each case
32 of felony arising when so taken by change of venue.

33 For assisting in a trial of each case on an indictment for
34 felony brought by change of venue to their respective counties,
35 the same fees they would be entitled to if such indictment had
36 been found for an offense committed in his county, and it shall

1 be the duty of the State's attorney of the county to which such
2 cause is taken by change of venue to assist in the trial
3 thereof.

4 For each case of forfeited recognizance where the
5 forfeiture is set aside at the instance of the defense, in
6 addition to the ordinary costs, \$20 for each defendant.

7 For each proceeding in a circuit court to inquire into the
8 alleged mental illness of any person, \$20 for each defendant.

9 For each proceeding in a circuit court to inquire into the
10 alleged dependency or delinquency of any child, \$20.

11 For each day actually employed in the hearing of a case of
12 habeas corpus in which the people are interested, \$50.

13 All the foregoing fees shall be taxed as costs to be
14 collected from the defendant, if possible, upon conviction. But
15 in cases of inquiry into the mental illness of any person
16 alleged to be mentally ill, in cases on a charge of paternity
17 and in cases of appeal in the Supreme or Appellate Court, where
18 judgment is in favor of the accused, the fees allowed the
19 State's attorney therein shall be retained out of the fines and
20 forfeitures collected by them in other cases.

21 Ten per cent of all moneys except revenue, collected by
22 them and paid over to the authorities entitled thereto, which
23 per cent together with the fees provided for herein that are
24 not collected from the parties tried or examined, shall be paid
25 out of any fines and forfeited recognizances collected by them,
26 provided however, that in proceedings to foreclose the lien of
27 delinquent real estate taxes State's attorneys shall receive a
28 fee, to be credited to the earnings of their office, of 10% of
29 the total amount realized from the sale of real estate sold in
30 such proceedings. Such fees shall be paid from the total amount
31 realized from the sale of the real estate sold in such
32 proceedings.

33 State's attorneys shall have a lien for their fees on all
34 judgments for fines or forfeitures procured by them and on
35 moneys except revenue received by them until such fees and
36 earnings are fully paid.

1 No fees shall be charged on more than 10 counts in any one
2 indictment or information on trial and conviction; nor on more
3 than 10 counts against any one defendant on pleas of guilty.

4 The Circuit Court may direct that of all monies received,
5 by restitution or otherwise, which monies are ordered paid to
6 the Department of Healthcare and Family Services (formerly
7 Department of Public Aid) or the Department of Human Services
8 (acting as successor to the Department of Public Aid under the
9 Department of Human Services Act) as a direct result of the
10 efforts of the State's attorney and which payments arise from
11 Civil or Criminal prosecutions involving the Illinois Public
12 Aid Code or the Criminal Code, the following amounts shall be
13 paid quarterly by the Department of Healthcare and Family
14 Services ~~Public Aid~~ or the Department of Human Services to the
15 General Corporate Fund of the County in which the prosecution
16 or cause of action took place:

17 (1) where the monies result from child support
18 obligations, not less than 25% of the federal share of the
19 monies received,

20 (2) where the monies result from other than child
21 support obligations, not less than 25% of the State's share
22 of the monies received.

23 (b) A municipality shall be entitled to a \$10 prosecution
24 fee for each conviction for a violation of the Illinois Vehicle
25 Code prosecuted by the municipal attorney pursuant to Section
26 16-102 of that Code which is tried before a circuit or
27 associate judge and shall be entitled to a \$10 prosecution fee
28 for each conviction for a violation of a municipal vehicle
29 ordinance prosecuted by the municipal attorney which is tried
30 before a circuit or associate judge. Such fee shall be taxed as
31 costs to be collected from the defendant, if possible, upon
32 conviction. A municipality shall have a lien for such
33 prosecution fees on all judgments or fines procured by the
34 municipal attorney from prosecutions for violations of the
35 Illinois Vehicle Code and municipal vehicle ordinances.

36 For the purposes of this subsection (b), "municipal vehicle

1 ordinance" means any ordinance enacted pursuant to Sections
2 11-40-1, 11-40-2, 11-40-2a and 11-40-3 of the Illinois
3 Municipal Code or any ordinance enacted by a municipality which
4 is similar to a provision of Chapter 11 of the Illinois Vehicle
5 Code.

6 (Source: P.A. 89-507, eff. 7-1-97.)

7 (55 ILCS 5/5-21009) (from Ch. 34, par. 5-21009)

8 Sec. 5-21009. Purchase of care. Any infirm or chronically
9 ill resident of the county, or resident of participating
10 counties in the case of a joint home, who desires to purchase
11 care and maintenance in the county home with his own funds or
12 with a public aid grant awarded to him under "The Illinois
13 Public Aid Code" may be received and cared for in the home.

14 Upon authorization of the County Board, or the County
15 Boards in the case of a joint home, infirm or chronically ill
16 residents of other counties who desire to purchase care and
17 maintenance in the home from their own funds or from public aid
18 grants may also be admitted to the home.

19 The ~~Illinois~~ Department of Healthcare and Family Services
20 ~~Public Aid~~, any local Supervisor of General Assistance, and any
21 other State or local agency may also purchase care in the home
22 for persons under their charge by paying the rates established
23 by the County Board.

24 (Source: P.A. 86-962.)

25 (55 ILCS 5/5-37006) (from Ch. 34, par. 5-37006)

26 Sec. 5-37006. Reimbursement for cost of services. In
27 relation to inpatient hospital services provided at any health
28 care facility maintained by the Commission to any person under
29 the legal custody of the Sheriff of Cook County pending trial
30 the Commission may obtain reimbursement from the confined
31 person to whom the services were provided for the cost of such
32 services to the extent that such person is reasonably able to
33 pay for such care, including reimbursement from any insurance
34 program or from other medical benefit programs available to

1 such person. If such person has already been determined
2 eligible for medical assistance under the Illinois Public Aid
3 Code at the time the person is initially detained pending
4 trial, the cost of such services, to the extent such cost
5 exceeds \$2,500, shall be reimbursed by the Department of
6 Healthcare and Family Services ~~Public Aid~~ under that Act. A
7 reimbursement under any public or private program authorized by
8 this Section shall be paid to the Commission to the same extent
9 as would obtain had the services been rendered in a
10 non-custodial environment.

11 This Section does not apply to services provided to any
12 person who has been convicted of or has pleaded guilty to an
13 offense and is held in custody pending sentencing or under
14 sentence of the court.

15 (Source: P.A. 86-962.)

16 Section 9220. The School Code is amended by changing
17 Sections 2-3.132, 3-14.29, 10-28, 14-7.04, 14-15.01, 22-35,
18 and 34-18.26 as follows:

19 (105 ILCS 5/2-3.132)

20 Sec. 2-3.132 ~~2-3.131~~. Sharing information on school lunch
21 applicants. The State Board of Education shall, whenever
22 requested by the Department of Healthcare and Family Services
23 (formerly Department of Public Aid), agree in writing with the
24 Department of Healthcare and Family Services ~~Public Aid~~ (as the
25 State agency that administers the State Medical Assistance
26 Program as provided in Title XIX of the federal Social Security
27 Act and the State Children's Health Insurance Program as
28 provided in Title XXI of the federal Social Security Act) to
29 share with the Department of Healthcare and Family Services
30 ~~Public Aid~~ information on applicants for free or reduced-price
31 lunches. This sharing of information shall be for the sole
32 purpose of helping the Department of Healthcare and Family
33 Services ~~Public Aid~~ identify and enroll children in the State
34 Medical Assistance Program or the State Children's Health

1 Insurance Program or both as allowed under 42 U.S.C. Sec.
2 1758(b)(2)(C)(iii)(IV) and under the restrictions set forth in
3 42 U.S.C. Sec. 1758(b)(2)(C)(vi) and (vii). The State Board of
4 Education may not adopt any rule that would prohibit a child
5 from receiving any form of subsidy or benefit due to his or her
6 parent or guardian withholding consent under Section 22-35 of
7 this Code.

8 (Source: P.A. 93-404, eff. 8-1-03; revised 9-24-03.)

9 (105 ILCS 5/3-14.29)

10 Sec. 3-14.29. Sharing information on school lunch
11 applicants. Whenever requested by the Department of Healthcare
12 and Family Services (formerly Department of Public Aid), to
13 agree in writing with the Department of Healthcare and Family
14 Services ~~Public Aid~~ (as the State agency that administers the
15 State Medical Assistance Program as provided in Title XIX of
16 the federal Social Security Act and the State Children's Health
17 Insurance Program as provided in Title XXI of the federal
18 Social Security Act) to share with the Department of Healthcare
19 and Family Services ~~Public Aid~~ information on applicants for
20 free or reduced-price lunches. This sharing of information
21 shall be for the sole purpose of helping the Department of
22 Healthcare and Family Services ~~Public Aid~~ identify and enroll
23 children in the State Medical Assistance Program or the State
24 Children's Health Insurance Program or both as allowed under 42
25 U.S.C. Sec. 1758(b)(2)(C)(iii)(IV) and under the restrictions
26 set forth in 42 U.S.C. Sec. 1758(b)(2)(C)(vi) and (vii).

27 (Source: P.A. 93-404, eff. 8-1-03.)

28 (105 ILCS 5/10-28)

29 Sec. 10-28. Sharing information on school lunch
30 applicants. A school board shall, whenever requested by the
31 Department of Healthcare and Family Services (formerly
32 Department of Public Aid), agree in writing with the Department
33 of Healthcare and Family Services ~~Public Aid~~ (as the State
34 agency that administers the State Medical Assistance Program as

1 provided in Title XIX of the federal Social Security Act and
2 the State Children's Health Insurance Program as provided in
3 Title XXI of the federal Social Security Act) to share with the
4 Department of Healthcare and Family Services ~~Public Aid~~
5 information on applicants for free or reduced-price lunches. A
6 school board shall, whenever requested by the Department of
7 Healthcare and Family Services (formerly Department of Public
8 Aid), require each of its schools to agree in writing with the
9 Department of Healthcare and Family Services ~~Public Aid~~ to
10 share with the Department of Healthcare and Family Services
11 ~~Public Aid~~ information on applicants for free or reduced-price
12 lunches. This sharing of information shall be for the sole
13 purpose of helping the Department of Healthcare and Family
14 Services ~~Public Aid~~ identify and enroll children in the State
15 Medical Assistance Program or the State Children's Health
16 Insurance Program or both as allowed under 42 U.S.C. Sec.
17 1758(b)(2)(C)(iii)(IV) and under the restrictions set forth in
18 42 U.S.C. Sec. 1758(b)(2)(C)(vi) and (vii).

19 (Source: P.A. 93-404, eff. 8-1-03.)

20 (105 ILCS 5/14-7.04) (from Ch. 122, par. 14-7.04)

21 Sec. 14-7.04. Health care reimbursement.

22 (a) Local educational agencies may utilize federally
23 funded health care programs to share in the costs of services
24 which are provided to children requiring special education and
25 related services and which are either listed on an
26 individualized education program established pursuant to the
27 federal Education for All Handicapped Children Act of 1975,
28 Public Law No. 94-142 or are provided under an individualized
29 family service plan established pursuant to the federal
30 Education of the Handicapped Act Amendments of 1986, Public Law
31 No. 99-457. Those federally funded health care programs shall
32 also share in the cost of all screenings and diagnostic
33 evaluations for children suspected of having or known to have a
34 disability. However, all such services shall continue to be
35 initially funded by the local educational agency and shall be

1 provided regardless of subsequent cost sharing with other
2 funding sources. Federally funded health care reimbursement
3 funds are supplemental and shall not be used to reduce any
4 other Federal payments, private payments or State Board of
5 Education funds for special education as provided in Article 14
6 of the School Code for which the local education agency is
7 eligible.

8 Local educational agencies providing early periodic
9 screening and diagnostic testing services on or after August 1,
10 1991, including screening and diagnostic services, health care
11 and treatment, preventive health care, and any other measure to
12 correct or improve health impairments of Medicaid-eligible
13 children, may also access federally funded health care
14 resources.

15 The State Board of Education and the Department of
16 Healthcare and Family Services ~~Public Aid~~ may enter into an
17 intergovernmental agreement whereby school districts or their
18 agents may claim medicaid matching funds for medicaid eligible
19 special education children as authorized by Section 1903 of the
20 Social Security Act. Under that intergovernmental agreement,
21 school districts or their agents may also claim federal funds
22 for the services provided to special education students
23 enrolled in the Children's Health Insurance Program.

24 (b) No employee or officer of a school district, special
25 education joint agreement, office of a regional superintendent
26 of schools or the State Board of Education may have a direct or
27 indirect financial interest in any agreement between the entity
28 of which the person is an employee or officer and any
29 corporation, organization or other entity that collects or
30 participates in the collection of payments from private health
31 care benefit plans or federally funded health care programs
32 authorized under this Section.

33 (Source: P.A. 91-24, eff. 7-1-99.)

34 (105 ILCS 5/14-15.01) (from Ch. 122, par. 14-15.01)

35 Sec. 14-15.01. Community and Residential Services

1 Authority.

2 (a) (1) The Community and Residential Services Authority is
3 hereby created and shall consist of the following members:

4 A representative of the State Board of Education;

5 Four representatives of the Department of Human Services,
6 with one member from the Division of Community Health and
7 Prevention, one member from the Office of Developmental
8 Disabilities of the Division of Disability and Behavioral
9 Health Services, one member from the Office of Mental Health of
10 the Division of Disability and Behavioral Health Services, and
11 one member of the Office of Rehabilitation Services of the
12 Division of Disability and Behavioral Health Services;

13 A representative of the Department of Children and Family
14 Services;

15 A representative of the Department of Corrections;

16 A representative of the Department of Healthcare and Family
17 Services ~~Public Aid~~;

18 A representative of the Attorney General's Disability
19 Rights Advocacy Division;

20 The Chairperson and Minority Spokesperson of the House and
21 Senate Committees on Elementary and Secondary Education or
22 their designees; and

23 Six persons appointed by the Governor. Five of such
24 appointees shall be experienced or knowledgeable relative to
25 provision of services for individuals with a behavior disorder
26 or a severe emotional disturbance and shall include
27 representatives of both the private and public sectors, except
28 that no more than 2 of those 5 appointees may be from the
29 public sector and at least 2 must be or have been directly
30 involved in provision of services to such individuals. The
31 remaining member appointed by the Governor shall be or shall
32 have been a parent of an individual with a behavior disorder or
33 a severe emotional disturbance, and that appointee may be from
34 either the private or the public sector.

35 (2) Members appointed by the Governor shall be appointed
36 for terms of 4 years and shall continue to serve until their

1 respective successors are appointed; provided that the terms of
2 the original appointees shall expire on August 1, 1990, and the
3 term of the additional member appointed under this amendatory
4 Act of 1992 shall commence upon the appointment and expire
5 August 1, 1994. Any vacancy in the office of a member appointed
6 by the Governor shall be filled by appointment of the Governor
7 for the remainder of the term.

8 A vacancy in the office of a member appointed by the
9 Governor exists when one or more of the following events occur:

10 (i) An appointee dies;

11 (ii) An appointee files a written resignation with the
12 Governor;

13 (iii) An appointee ceases to be a legal resident of the
14 State of Illinois; or

15 (iv) An appointee fails to attend a majority of
16 regularly scheduled Authority meetings in a fiscal year.

17 Members who are representatives of an agency shall serve at
18 the will of the agency head. Membership on the Authority shall
19 cease immediately upon cessation of their affiliation with the
20 agency. If such a vacancy occurs, the appropriate agency head
21 shall appoint another person to represent the agency.

22 If a legislative member of the Authority ceases to be
23 Chairperson or Minority Spokesperson of the designated
24 Committees, they shall automatically be replaced on the
25 Authority by the person who assumes the position of Chairperson
26 or Minority Spokesperson.

27 (b) The Community and Residential Services Authority shall
28 have the following powers and duties:

29 (1) To conduct surveys to determine the extent of need,
30 the degree to which documented need is currently being met
31 and feasible alternatives for matching need with
32 resources.

33 (2) To develop policy statements for interagency
34 cooperation to cover all aspects of service delivery,
35 including laws, regulations and procedures, and clear
36 guidelines for determining responsibility at all times.

1 (3) To recommend policy statements and provide
2 information regarding effective programs for delivery of
3 services to all individuals under 22 years of age with a
4 behavior disorder or a severe emotional disturbance in
5 public or private situations.

6 (4) To review the criteria for service eligibility,
7 provision and availability established by the governmental
8 agencies represented on this Authority, and to recommend
9 changes, additions or deletions to such criteria.

10 (5) To develop and submit to the Governor, the General
11 Assembly, the Directors of the agencies represented on the
12 Authority, and the State Board of Education a master plan
13 for individuals under 22 years of age with a behavior
14 disorder or a severe emotional disturbance, including
15 detailed plans of service ranging from the least to the
16 most restrictive options; and to assist local communities,
17 upon request, in developing or strengthening collaborative
18 interagency networks.

19 (6) To develop a process for making determinations in
20 situations where there is a dispute relative to a plan of
21 service for individuals or funding for a plan of service.

22 (7) To provide technical assistance to parents,
23 service consumers, providers, and member agency personnel
24 regarding statutory responsibilities of human service and
25 educational agencies, and to provide such assistance as
26 deemed necessary to appropriately access needed services.

27 (c) (1) The members of the Authority shall receive no
28 compensation for their services but shall be entitled to
29 reimbursement of reasonable expenses incurred while performing
30 their duties.

31 (2) The Authority may appoint special study groups to
32 operate under the direction of the Authority and persons
33 appointed to such groups shall receive only reimbursement of
34 reasonable expenses incurred in the performance of their
35 duties.

36 (3) The Authority shall elect from its membership a

1 chairperson, vice-chairperson and secretary.

2 (4) The Authority may employ and fix the compensation of
3 such employees and technical assistants as it deems necessary
4 to carry out its powers and duties under this Act. Staff
5 assistance for the Authority shall be provided by the State
6 Board of Education.

7 (5) Funds for the ordinary and contingent expenses of the
8 Authority shall be appropriated to the State Board of Education
9 in a separate line item.

10 (d) (1) The Authority shall have power to promulgate rules
11 and regulations to carry out its powers and duties under this
12 Act.

13 (2) The Authority may accept monetary gifts or grants from
14 the federal government or any agency thereof, from any
15 charitable foundation or professional association or from any
16 other reputable source for implementation of any program
17 necessary or desirable to the carrying out of the general
18 purposes of the Authority. Such gifts and grants may be held in
19 trust by the Authority and expended in the exercise of its
20 powers and performance of its duties as prescribed by law.

21 (3) The Authority shall submit an annual report of its
22 activities and expenditures to the Governor, the General
23 Assembly, the directors of agencies represented on the
24 Authority, and the State Superintendent of Education.

25 (Source: P.A. 92-632, eff. 1-1-03.)

26 (105 ILCS 5/22-35)

27 Sec. 22-35. Sharing information on school lunch
28 applicants; consent. Before an entity shares with the
29 Department of Healthcare and Family Services ~~Public Aid~~
30 information on an applicant for free or reduced-price lunches
31 under Section 2-3.131, 3-14.29, 10-28, or 34-18.26 of this Code
32 or Section 10 of the School Breakfast and Lunch Program Act,
33 that entity must obtain, in writing, the consent of the
34 applicant's parent or legal guardian. The Department of
35 Healthcare and Family Services ~~Public Aid~~ may not seek any

1 punitive action against or withhold any benefit or subsidy from
2 an applicant for a free or reduced-price lunch due to the
3 applicant's parent or legal guardian withholding consent.

4 (Source: P.A. 93-404, eff. 8-1-03.)

5 (105 ILCS 5/34-18.26)

6 Sec. 34-18.26. Sharing information on school lunch
7 applicants. The board shall, whenever requested by the
8 Department of Healthcare and Family Services (formerly
9 Department of Public Aid), agree in writing with the Department
10 of Healthcare and Family Services ~~Public Aid~~ (as the State
11 agency that administers the State Medical Assistance Program as
12 provided in Title XIX of the federal Social Security Act and
13 the State Children's Health Insurance Program as provided in
14 Title XXI of the federal Social Security Act) to share with the
15 Department of Healthcare and Family Services ~~Public Aid~~
16 information on applicants for free or reduced-price lunches.
17 The board shall, whenever requested by the Department of
18 Healthcare and Family Services (formerly Department of Public
19 Aid), require each of its schools to agree in writing with the
20 Department of Healthcare and Family Services ~~Public Aid~~ to
21 share with the Department of Healthcare and Family Services
22 ~~Public Aid~~ information on applicants for free or reduced-price
23 lunches. This sharing of information shall be for the sole
24 purpose of helping the Department of Healthcare and Family
25 Services ~~Public Aid~~ identify and enroll children in the State
26 Medical Assistance Program or the State Children's Health
27 Insurance Program or both as allowed under 42 U.S.C. Sec.
28 1758(b)(2)(C)(iii)(IV) and under the restrictions set forth in
29 42 U.S.C. Sec. 1758(b)(2)(C)(vi) and (vii).

30 (Source: P.A. 93-404, eff. 8-1-03.)

31 Section 9225. The Illinois School Student Records Act is
32 amended by changing Section 6 as follows:

33 (105 ILCS 10/6) (from Ch. 122, par. 50-6)

1 Sec. 6. (a) No school student records or information
2 contained therein may be released, transferred, disclosed or
3 otherwise disseminated, except as follows:

4 (1) To a parent or student or person specifically
5 designated as a representative by a parent, as provided in
6 paragraph (a) of Section 5;

7 (2) To an employee or official of the school or school
8 district or State Board with current demonstrable
9 educational or administrative interest in the student, in
10 furtherance of such interest;

11 (3) To the official records custodian of another school
12 within Illinois or an official with similar
13 responsibilities of a school outside Illinois, in which the
14 student has enrolled, or intends to enroll, upon the
15 request of such official or student;

16 (4) To any person for the purpose of research,
17 statistical reporting or planning, provided that no
18 student or parent can be identified from the information
19 released and the person to whom the information is released
20 signs an affidavit agreeing to comply with all applicable
21 statutes and rules pertaining to school student records;

22 (5) Pursuant to a court order, provided that the parent
23 shall be given prompt written notice upon receipt of such
24 order of the terms of the order, the nature and substance
25 of the information proposed to be released in compliance
26 with such order and an opportunity to inspect and copy the
27 school student records and to challenge their contents
28 pursuant to Section 7;

29 (6) To any person as specifically required by State or
30 federal law;

31 (6.5) To juvenile authorities when necessary for the
32 discharge of their official duties who request information
33 prior to adjudication of the student and who certify in
34 writing that the information will not be disclosed to any
35 other party except as provided under law or order of court.
36 For purposes of this Section "juvenile authorities" means:

1 (i) a judge of the circuit court and members of the staff
2 of the court designated by the judge; (ii) parties to the
3 proceedings under the Juvenile Court Act of 1987 and their
4 attorneys; (iii) probation officers and court appointed
5 advocates for the juvenile authorized by the judge hearing
6 the case; (iv) any individual, public or private agency
7 having custody of the child pursuant to court order; (v)
8 any individual, public or private agency providing
9 education, medical or mental health service to the child
10 when the requested information is needed to determine the
11 appropriate service or treatment for the minor; (vi) any
12 potential placement provider when such release is
13 authorized by the court for the limited purpose of
14 determining the appropriateness of the potential
15 placement; (vii) law enforcement officers and prosecutors;
16 (viii) adult and juvenile prisoner review boards; (ix)
17 authorized military personnel; (x) individuals authorized
18 by court;

19 (7) Subject to regulations of the State Board, in
20 connection with an emergency, to appropriate persons if the
21 knowledge of such information is necessary to protect the
22 health or safety of the student or other persons;

23 (8) To any person, with the prior specific dated
24 written consent of the parent designating the person to
25 whom the records may be released, provided that at the time
26 any such consent is requested or obtained, the parent shall
27 be advised in writing that he has the right to inspect and
28 copy such records in accordance with Section 5, to
29 challenge their contents in accordance with Section 7 and
30 to limit any such consent to designated records or
31 designated portions of the information contained therein;

32 (9) To a governmental agency, or social service agency
33 contracted by a governmental agency, in furtherance of an
34 investigation of a student's school attendance pursuant to
35 the compulsory student attendance laws of this State,
36 provided that the records are released to the employee or

1 agent designated by the agency;

2 (10) To those SHOCAP committee members who fall within
3 the meaning of "state and local officials and authorities",
4 as those terms are used within the meaning of the federal
5 Family Educational Rights and Privacy Act, for the purposes
6 of identifying serious habitual juvenile offenders and
7 matching those offenders with community resources pursuant
8 to Section 5-145 of the Juvenile Court Act of 1987, but
9 only to the extent that the release, transfer, disclosure,
10 or dissemination is consistent with the Family Educational
11 Rights and Privacy Act; or

12 (11) To the Department of Healthcare and Family
13 Services ~~Public Aid~~ in furtherance of the requirements of
14 Section 2-3.131, 3-14.29, 10-28, or 34-18.26 of the School
15 Code or Section 10 of the School Breakfast and Lunch
16 Program Act.

17 (b) No information may be released pursuant to
18 subparagraphs (3) or (6) of paragraph (a) of this Section 6
19 unless the parent receives prior written notice of the nature
20 and substance of the information proposed to be released, and
21 an opportunity to inspect and copy such records in accordance
22 with Section 5 and to challenge their contents in accordance
23 with Section 7. Provided, however, that such notice shall be
24 sufficient if published in a local newspaper of general
25 circulation or other publication directed generally to the
26 parents involved where the proposed release of information is
27 pursuant to subparagraph 6 of paragraph (a) in this Section 6
28 and relates to more than 25 students.

29 (c) A record of any release of information pursuant to this
30 Section must be made and kept as a part of the school student
31 record and subject to the access granted by Section 5. Such
32 record of release shall be maintained for the life of the
33 school student records and shall be available only to the
34 parent and the official records custodian. Each record of
35 release shall also include:

36 (1) The nature and substance of the information

1 released;

2 (2) The name and signature of the official records
3 custodian releasing such information;

4 (3) The name of the person requesting such information,
5 the capacity in which such a request has been made, and the
6 purpose of such request;

7 (4) The date of the release; and

8 (5) A copy of any consent to such release.

9 (d) Except for the student and his parents, no person to
10 whom information is released pursuant to this Section and no
11 person specifically designated as a representative by a parent
12 may permit any other person to have access to such information
13 without a prior consent of the parent obtained in accordance
14 with the requirements of subparagraph (8) of paragraph (a) of
15 this Section.

16 (e) Nothing contained in this Act shall prohibit the
17 publication of student directories which list student names,
18 addresses and other identifying information and similar
19 publications which comply with regulations issued by the State
20 Board.

21 (Source: P.A. 93-404, eff. 8-1-03.)

22 Section 9230. The School Employee Benefit Act is amended by
23 changing Sections 5 and 10 and by adding Section 7 as follows:

24 (105 ILCS 55/5)

25 Sec. 5. Purpose. The purpose of this Act is to require the
26 Department of Healthcare and Family Services and the Department
27 of Central Management Services to establish and administer a
28 prescription drug benefit program that will enable eligible
29 school employees access to affordable prescription drugs.

30 (Source: P.A. 93-1036, eff. 9-14-04.)

31 (105 ILCS 55/7 new)

32 Sec. 7. State healthcare purchasing; administration and
33 management of employee benefits. On and after the effective

1 date of this amendatory Act of the 94th General Assembly, as
2 provided in the Executive Order 3 (2005) Implementation Act:

3 (1) The Department of Healthcare and Family Services
4 shall perform all State healthcare purchasing functions
5 under this Act.

6 (2) The Department of Central Management Services
7 shall perform all functions under this Act with respect to
8 the administration and management of employee benefits.

9 (105 ILCS 55/10)

10 Sec. 10. Definitions.

11 "Annuitant" means a retired school district employee
12 entitled to receive retirement benefits, as defined by the
13 school district.

14 "Department" means:

15 (1) the Department of Healthcare and Family Services,
16 in the case of State healthcare purchasing functions
17 performed under this Act as provided in the Executive Order
18 3 (2005) Implementation Act; or

19 (2) the Department of Central Management Services, in
20 the case of all functions performed under this Act with
21 respect to the administration and management of employee
22 benefits as provided in the Executive Order 3 (2005)
23 Implementation Act.

24 "Dependent" means a school district employee's dependent
25 as defined by the school district.

26 "Director" means:

27 (1) the Director of Healthcare and Family Services, in
28 the case of State healthcare purchasing functions
29 performed under this Act as provided in the Executive Order
30 3 (2005) Implementation Act; or

31 (2) the Director of Central Management Services, in the
32 case of all functions performed under this Act with respect
33 to the administration and management of employee benefits
34 as provided in the Executive Order 3 (2005) Implementation
35 Act.

1 "Employee" means a school district employee who is entitled
2 to benefits as defined by the school district.

3 "Rules" includes rules adopted and forms prescribed by the
4 Department.

5 "School district" means a public school district in this
6 State, including a vocational education district, a special
7 education district, a program operated by an educational
8 service region, and a joint agreement.

9 (Source: P.A. 93-1036, eff. 9-14-04; 94-227, eff. 1-1-06.)

10 Section 9235. The School Breakfast and Lunch Program Act is
11 amended by changing Section 10 as follows:

12 (105 ILCS 125/10)

13 Sec. 10. Sharing information on school lunch applicants.
14 Each private school that receives funds for free or
15 reduced-price lunches under this Act shall, whenever requested
16 by the Department of Healthcare and Family Services (formerly
17 Public Aid), agree in writing with the Department of Healthcare
18 and Family Services ~~Public Aid~~ (as the State agency that
19 administers the State Medical Assistance Program as provided in
20 Title XIX of the federal Social Security Act and the State
21 Children's Health Insurance Program as provided in Title XXI of
22 the federal Social Security Act) to share with the Department
23 of Healthcare and Family Services ~~Public Aid~~ information on
24 applicants for free or reduced-price lunches. This sharing of
25 information shall be for the sole purpose of helping the
26 Department of Healthcare and Family Services ~~Public Aid~~
27 identify and enroll children in the State Medical Assistance
28 Program or the State Children's Health Insurance Program or
29 both as allowed under 42 U.S.C. Sec. 1758(b)(2)(C)(iii)(IV) and
30 under the restrictions set forth in 42 U.S.C. Sec.
31 1758(b)(2)(C)(vi) and (vii).

32 (Source: P.A. 93-404, eff. 8-1-03.)

33 Section 9240. The Illinois Banking Act is amended by

1 changing Section 48.4 as follows:

2 (205 ILCS 5/48.4)

3 Sec. 48.4. Enforcement of child support.

4 (a) Any bank governed by this Act shall encumber or
5 surrender accounts or assets held by the bank on behalf of any
6 responsible relative who is subject to a child support lien,
7 upon notice of the lien or levy of the Department of Healthcare
8 and Family Services (formerly Illinois Department of Public
9 Aid) or its successor agency pursuant to Section 10-25.5 of the
10 Illinois Public Aid Code, or upon notice of interstate lien or
11 levy from any other state's agency responsible for implementing
12 the child support enforcement program set forth in Title IV,
13 Part D of the Social Security Act.

14 (b) Within 90 days after receiving notice from the
15 Department of Healthcare and Family Services (formerly
16 Department of Public Aid) that the Department has adopted a
17 child support enforcement debit authorization form as required
18 under the Illinois Public Aid Code, each bank governed by this
19 Act shall take all appropriate steps to implement the use of
20 the form in relation to accounts held by the bank. Upon
21 receiving from the Department of Healthcare and Family Services
22 (formerly Department of Public Aid) a copy of a child support
23 enforcement debit authorization form signed by an obligor, a
24 bank holding an account on behalf of the obligor shall debit
25 the account and transfer the debited amounts to the State
26 Disbursement Unit according to the instructions in the child
27 support enforcement debit authorization form.

28 (Source: P.A. 92-811, eff. 8-21-02; 93-736, eff. 7-14-04.)

29 Section 9245. The Illinois Savings and Loan Act of 1985 is
30 amended by changing Section 1-6d as follows:

31 (205 ILCS 105/1-6d)

32 Sec. 1-6d. Enforcement of child support.

33 (a) Any association governed by this Act shall encumber or

1 surrender accounts or assets held by the association on behalf
2 of any responsible relative who is subject to a child support
3 lien, upon notice of the lien or levy of the Department of
4 Healthcare and Family Services (formerly Illinois Department
5 of Public Aid) or its successor agency pursuant to Section
6 10-25.5 of the Illinois Public Aid Code, or upon notice of
7 interstate lien or levy from any other state's agency
8 responsible for implementing the child support enforcement
9 program set forth in Title IV, Part D of the Social Security
10 Act.

11 (b) Within 90 days after receiving notice from the
12 Department of Healthcare and Family Services (formerly
13 Department of Public Aid) that the Department has adopted a
14 child support enforcement debit authorization form as required
15 under the Illinois Public Aid Code, each association governed
16 by this Act shall take all appropriate steps to implement the
17 use of the form in relation to accounts held by the
18 association. Upon receiving from the Department of Healthcare
19 and Family Services (formerly Department of Public Aid) a copy
20 of a child support enforcement debit authorization form signed
21 by an obligor, an association holding an account on behalf of
22 the obligor shall debit the account and transfer the debited
23 amounts to the State Disbursement Unit according to the
24 instructions in the child support enforcement debit
25 authorization form.

26 (Source: P.A. 92-811, eff. 8-21-02; 93-736, eff. 7-14-04.)

27 Section 9250. The Savings Bank Act is amended by changing
28 Section 7007 as follows:

29 (205 ILCS 205/7007)

30 Sec. 7007. Enforcement of child support.

31 (a) Any savings bank governed by this Act shall encumber or
32 surrender accounts or assets held by the savings bank on behalf
33 of any responsible relative who is subject to a child support
34 lien, upon notice of the lien or levy of the Department of

1 Healthcare and Family Services (formerly Illinois Department
2 of Public Aid) or its successor agency pursuant to Section
3 10-25.5 of the Illinois Public Aid Code, or upon notice of
4 interstate lien or levy from any other state's agency
5 responsible for implementing the child support enforcement
6 program set forth in Title IV, Part D of the Social Security
7 Act.

8 (b) Within 90 days after receiving notice from the
9 Department of Healthcare and Family Services (formerly
10 Department of Public Aid) that the Department has adopted a
11 child support enforcement debit authorization form as required
12 under the Illinois Public Aid Code, each savings bank governed
13 by this Act shall take all appropriate steps to implement the
14 use of the form in relation to accounts held by the savings
15 bank. Upon receiving from the Department of Healthcare and
16 Family Services (formerly Department of Public Aid) a copy of a
17 child support enforcement debit authorization form signed by an
18 obligor, a savings bank holding an account on behalf of the
19 obligor shall debit the account and transfer the debited
20 amounts to the State Disbursement Unit according to the
21 instructions in the child support enforcement debit
22 authorization form.

23 (Source: P.A. 92-811, eff. 8-21-02; 93-736, eff. 7-14-04.)

24 Section 9255. The Illinois Credit Union Act is amended by
25 changing Section 43.1 as follows:

26 (205 ILCS 305/43.1)

27 Sec. 43.1. Enforcement of child support.

28 (a) Any credit union governed by this Act shall encumber or
29 surrender accounts or assets held by the credit union on behalf
30 of any responsible relative who is subject to a child support
31 lien, upon notice of the lien or levy of the Department of
32 Healthcare and Family Services (formerly Illinois Department
33 of Public Aid) or its successor agency pursuant to Section
34 10-25.5 of the Illinois Public Aid Code, or upon notice of

1 interstate lien from any other state's agency responsible for
2 implementing the child support enforcement program set forth in
3 Title IV, Part D of the Social Security Act.

4 (b) Within 90 days after receiving notice from the
5 Department of Healthcare and Family Services (formerly
6 Department of Public Aid) that the Department has adopted a
7 child support enforcement debit authorization form as required
8 under the Illinois Public Aid Code, each credit union governed
9 by this Act shall take all appropriate steps to implement the
10 use of the form in relation to accounts held by the credit
11 union. Upon receiving from the Department of Healthcare and
12 Family Services (formerly Department of Public Aid) a copy of a
13 child support enforcement debit authorization form signed by an
14 obligor, a credit union holding an account on behalf of the
15 obligor shall debit the account and transfer the debited
16 amounts to the State Disbursement Unit according to the
17 instructions in the child support enforcement debit
18 authorization form.

19 (Source: P.A. 93-736, eff. 7-14-04.)

20 Section 9260. The Foreign Banking Office Act is amended by
21 changing Section 20 as follows:

22 (205 ILCS 645/20)

23 Sec. 20. Enforcement of child support.

24 (a) Any foreign banking corporation governed by this Act
25 shall encumber or surrender accounts or assets held by the
26 foreign banking corporation on behalf of any responsible
27 relative who is subject to a child support lien, upon notice of
28 the lien or levy of the Department of Healthcare and Family
29 Services (formerly Illinois Department of Public Aid) or its
30 successor agency pursuant to Section 10-25.5 of the Illinois
31 Public Aid Code, or upon notice of interstate lien from any
32 other state's agency responsible for implementing the child
33 support enforcement program set forth in Title IV, Part D of
34 the Social Security Act.

1 (b) Within 90 days after receiving notice from the
2 Department of Healthcare and Family Services (formerly
3 Department of Public Aid) that the Department has adopted a
4 child support enforcement debit authorization form as required
5 under the Illinois Public Aid Code, each foreign banking
6 corporation governed by this Act shall take all appropriate
7 steps to implement the use of the form in relation to accounts
8 held by the corporation. Upon receiving from the Department of
9 Healthcare and Family Services (formerly Department of Public
10 Aid) a copy of a child support enforcement debit authorization
11 form signed by an obligor, a foreign banking corporation
12 holding an account on behalf of the obligor shall debit the
13 account and transfer the debited amounts to the State
14 Disbursement Unit according to the instructions in the child
15 support enforcement debit authorization form.

16 (Source: P.A. 93-736, eff. 7-14-04.)

17 Section 9265. The Alternative Health Care Delivery Act is
18 amended by changing Sections 30 and 35 as follows:

19 (210 ILCS 3/30)

20 Sec. 30. Demonstration program requirements. The
21 requirements set forth in this Section shall apply to
22 demonstration programs.

23 (a) There shall be no more than:

24 (i) 3 subacute care hospital alternative health care
25 models in the City of Chicago (one of which shall be
26 located on a designated site and shall have been licensed
27 as a hospital under the Illinois Hospital Licensing Act
28 within the 10 years immediately before the application for
29 a license);

30 (ii) 2 subacute care hospital alternative health care
31 models in the demonstration program for each of the
32 following areas:

33 (1) Cook County outside the City of Chicago.

34 (2) DuPage, Kane, Lake, McHenry, and Will

1 Counties.

2 (3) Municipalities with a population greater than
3 50,000 not located in the areas described in item (i)
4 of subsection (a) and paragraphs (1) and (2) of item
5 (ii) of subsection (a); and
6 (iii) 4 subacute care hospital alternative health care
7 models in the demonstration program for rural areas.

8 In selecting among applicants for these licenses in rural
9 areas, the Health Facilities Planning Board and the Department
10 shall give preference to hospitals that may be unable for
11 economic reasons to provide continued service to the community
12 in which they are located unless the hospital were to receive
13 an alternative health care model license.

14 (a-5) There shall be no more than a total of 12
15 postsurgical recovery care center alternative health care
16 models in the demonstration program, located as follows:

17 (1) Two in the City of Chicago.

18 (2) Two in Cook County outside the City of Chicago. At
19 least one of these shall be owned or operated by a hospital
20 devoted exclusively to caring for children.

21 (3) Two in Kane, Lake, and McHenry Counties.

22 (4) Four in municipalities with a population of 50,000
23 or more not located in the areas described in paragraphs
24 (1), (2), and (3), 3 of which shall be owned or operated by
25 hospitals, at least 2 of which shall be located in counties
26 with a population of less than 175,000, according to the
27 most recent decennial census for which data are available,
28 and one of which shall be owned or operated by an
29 ambulatory surgical treatment center.

30 (5) Two in rural areas, both of which shall be owned or
31 operated by hospitals.

32 There shall be no postsurgical recovery care center
33 alternative health care models located in counties with
34 populations greater than 600,000 but less than 1,000,000. A
35 proposed postsurgical recovery care center must be owned or
36 operated by a hospital if it is to be located within, or will

1 primarily serve the residents of, a health service area in
2 which more than 60% of the gross patient revenue of the
3 hospitals within that health service area are derived from
4 Medicaid and Medicare, according to the most recently available
5 calendar year data from the Illinois Health Care Cost
6 Containment Council. Nothing in this paragraph shall preclude a
7 hospital and an ambulatory surgical treatment center from
8 forming a joint venture or developing a collaborative agreement
9 to own or operate a postsurgical recovery care center.

10 (a-10) There shall be no more than a total of 8 children's
11 respite care center alternative health care models in the
12 demonstration program, which shall be located as follows:

13 (1) One in the City of Chicago.

14 (2) One in Cook County outside the City of Chicago.

15 (3) A total of 2 in the area comprised of DuPage, Kane,
16 Lake, McHenry, and Will counties.

17 (4) A total of 2 in municipalities with a population of
18 50,000 or more and not located in the areas described in
19 paragraphs (1), (2), or (3).

20 (5) A total of 2 in rural areas, as defined by the
21 Health Facilities Planning Board.

22 No more than one children's respite care model owned and
23 operated by a licensed skilled pediatric facility shall be
24 located in each of the areas designated in this subsection
25 (a-10).

26 (a-15) There shall be an authorized community-based
27 residential rehabilitation center alternative health care
28 model in the demonstration program. The community-based
29 residential rehabilitation center shall be located in the area
30 of Illinois south of Interstate Highway 70.

31 (a-20) There shall be an authorized Alzheimer's disease
32 management center alternative health care model in the
33 demonstration program. The Alzheimer's disease management
34 center shall be located in Will County, owned by a
35 not-for-profit entity, and endorsed by a resolution approved by
36 the county board before the effective date of this amendatory

1 Act of the 91st General Assembly.

2 (b) Alternative health care models, other than a model
3 authorized under subsection (a-20), shall obtain a certificate
4 of need from the Illinois Health Facilities Planning Board
5 under the Illinois Health Facilities Planning Act before
6 receiving a license by the Department. If, after obtaining its
7 initial certificate of need, an alternative health care
8 delivery model that is a community based residential
9 rehabilitation center seeks to increase the bed capacity of
10 that center, it must obtain a certificate of need from the
11 Illinois Health Facilities Planning Board before increasing
12 the bed capacity. Alternative health care models in medically
13 underserved areas shall receive priority in obtaining a
14 certificate of need.

15 (c) An alternative health care model license shall be
16 issued for a period of one year and shall be annually renewed
17 if the facility or program is in substantial compliance with
18 the Department's rules adopted under this Act. A licensed
19 alternative health care model that continues to be in
20 substantial compliance after the conclusion of the
21 demonstration program shall be eligible for annual renewals
22 unless and until a different licensure program for that type of
23 health care model is established by legislation. The Department
24 may issue a provisional license to any alternative health care
25 model that does not substantially comply with the provisions of
26 this Act and the rules adopted under this Act if (i) the
27 Department finds that the alternative health care model has
28 undertaken changes and corrections which upon completion will
29 render the alternative health care model in substantial
30 compliance with this Act and rules and (ii) the health and
31 safety of the patients of the alternative health care model
32 will be protected during the period for which the provisional
33 license is issued. The Department shall advise the licensee of
34 the conditions under which the provisional license is issued,
35 including the manner in which the alternative health care model
36 fails to comply with the provisions of this Act and rules, and

1 the time within which the changes and corrections necessary for
2 the alternative health care model to substantially comply with
3 this Act and rules shall be completed.

4 (d) Alternative health care models shall seek
5 certification under Titles XVIII and XIX of the federal Social
6 Security Act. In addition, alternative health care models shall
7 provide charitable care consistent with that provided by
8 comparable health care providers in the geographic area.

9 (d-5) The Department of Healthcare and Family Services
10 (formerly Illinois Department of Public Aid), in cooperation
11 with the Illinois Department of Public Health, shall develop
12 and implement a reimbursement methodology for all facilities
13 participating in the demonstration program. The Department of
14 Healthcare and Family Services ~~Illinois Department of Public~~
15 ~~Aid~~ shall keep a record of services provided under the
16 demonstration program to recipients of medical assistance
17 under the Illinois Public Aid Code and shall submit an annual
18 report of that information to the Illinois Department of Public
19 Health.

20 (e) Alternative health care models shall, to the extent
21 possible, link and integrate their services with nearby health
22 care facilities.

23 (f) Each alternative health care model shall implement a
24 quality assurance program with measurable benefits and at
25 reasonable cost.

26 (Source: P.A. 91-65, eff. 7-9-99; 91-838, eff. 6-16-00.)

27 (210 ILCS 3/35)

28 Sec. 35. Alternative health care models authorized.
29 Notwithstanding any other law to the contrary, alternative
30 health care models described in this Section may be established
31 on a demonstration basis.

32 (1) Alternative health care model; subacute care
33 hospital. A subacute care hospital is a designated site
34 which provides medical specialty care for patients who need
35 a greater intensity or complexity of care than generally

1 provided in a skilled nursing facility but who no longer
2 require acute hospital care. The average length of stay for
3 patients treated in subacute care hospitals shall not be
4 less than 20 days, and for individual patients, the
5 expected length of stay at the time of admission shall not
6 be less than 10 days. Variations from minimum lengths of
7 stay shall be reported to the Department. There shall be no
8 more than 13 subacute care hospitals authorized to operate
9 by the Department. Subacute care includes physician
10 supervision, registered nursing, and physiological
11 monitoring on a continual basis. A subacute care hospital
12 is either a freestanding building or a distinct physical
13 and operational entity within a hospital or nursing home
14 building. A subacute care hospital shall only consist of
15 beds currently existing in licensed hospitals or skilled
16 nursing facilities, except, in the City of Chicago, on a
17 designated site that was licensed as a hospital under the
18 Illinois Hospital Licensing Act within the 10 years
19 immediately before the application for an alternative
20 health care model license. During the period of operation
21 of the demonstration project, the existing licensed beds
22 shall remain licensed as hospital or skilled nursing
23 facility beds as well as being licensed under this Act. In
24 order to handle cases of complications, emergencies, or
25 exigent circumstances, a subacute care hospital shall
26 maintain a contractual relationship, including a transfer
27 agreement, with a general acute care hospital. If a
28 subacute care model is located in a general acute care
29 hospital, it shall utilize all or a portion of the bed
30 capacity of that existing hospital. In no event shall a
31 subacute care hospital use the word "hospital" in its
32 advertising or marketing activities or represent or hold
33 itself out to the public as a general acute care hospital.

34 (2) Alternative health care delivery model;
35 postsurgical recovery care center. A postsurgical recovery
36 care center is a designated site which provides

1 postsurgical recovery care for generally healthy patients
2 undergoing surgical procedures that require overnight
3 nursing care, pain control, or observation that would
4 otherwise be provided in an inpatient setting. A
5 postsurgical recovery care center is either freestanding
6 or a defined unit of an ambulatory surgical treatment
7 center or hospital. No facility, or portion of a facility,
8 may participate in a demonstration program as a
9 postsurgical recovery care center unless the facility has
10 been licensed as an ambulatory surgical treatment center or
11 hospital for at least 2 years before August 20, 1993 (the
12 effective date of Public Act 88-441). The maximum length of
13 stay for patients in a postsurgical recovery care center is
14 not to exceed 48 hours unless the treating physician
15 requests an extension of time from the recovery center's
16 medical director on the basis of medical or clinical
17 documentation that an additional care period is required
18 for the recovery of a patient and the medical director
19 approves the extension of time. In no case, however, shall
20 a patient's length of stay in a postsurgical recovery care
21 center be longer than 72 hours. If a patient requires an
22 additional care period after the expiration of the 72-hour
23 limit, the patient shall be transferred to an appropriate
24 facility. Reports on variances from the 48-hour limit shall
25 be sent to the Department for its evaluation. The reports
26 shall, before submission to the Department, have removed
27 from them all patient and physician identifiers. In order
28 to handle cases of complications, emergencies, or exigent
29 circumstances, every postsurgical recovery care center as
30 defined in this paragraph shall maintain a contractual
31 relationship, including a transfer agreement, with a
32 general acute care hospital. A postsurgical recovery care
33 center shall be no larger than 20 beds. A postsurgical
34 recovery care center shall be located within 15 minutes
35 travel time from the general acute care hospital with which
36 the center maintains a contractual relationship, including

1 a transfer agreement, as required under this paragraph.

2 No postsurgical recovery care center shall
3 discriminate against any patient requiring treatment
4 because of the source of payment for services, including
5 Medicare and Medicaid recipients.

6 The Department shall adopt rules to implement the
7 provisions of Public Act 88-441 concerning postsurgical
8 recovery care centers within 9 months after August 20,
9 1993.

10 (3) Alternative health care delivery model; children's
11 community-based health care center. A children's
12 community-based health care center model is a designated
13 site that provides nursing care, clinical support
14 services, and therapies for a period of one to 14 days for
15 short-term stays and 120 days to facilitate transitions to
16 home or other appropriate settings for medically fragile
17 children, technology dependent children, and children with
18 special health care needs who are deemed clinically stable
19 by a physician and are younger than 22 years of age. This
20 care is to be provided in a home-like environment that
21 serves no more than 12 children at a time. Children's
22 community-based health care center services must be
23 available through the model to all families, including
24 those whose care is paid for through the Department of
25 Healthcare and Family Services ~~Public Aid~~, the Department
26 of Children and Family Services, the Department of Human
27 Services, and insurance companies who cover home health
28 care services or private duty nursing care in the home.

29 Each children's community-based health care center
30 model location shall be physically separate and apart from
31 any other facility licensed by the Department of Public
32 Health under this or any other Act and shall provide the
33 following services: respite care, registered nursing or
34 licensed practical nursing care, transitional care to
35 facilitate home placement or other appropriate settings
36 and reunite families, medical day care, weekend camps, and

1 diagnostic studies typically done in the home setting.

2 Coverage for the services provided by the ~~Illinois~~
3 Department of Healthcare and Family Services ~~Public Aid~~
4 under this paragraph (3) is contingent upon federal waiver
5 approval and is provided only to Medicaid eligible clients
6 participating in the home and community based services
7 waiver designated in Section 1915(c) of the Social Security
8 Act for medically frail and technologically dependent
9 children or children in Department of Children and Family
10 Services foster care who receive home health benefits.

11 (4) Alternative health care delivery model; community
12 based residential rehabilitation center. A community-based
13 residential rehabilitation center model is a designated
14 site that provides rehabilitation or support, or both, for
15 persons who have experienced severe brain injury, who are
16 medically stable, and who no longer require acute
17 rehabilitative care or intense medical or nursing
18 services. The average length of stay in a community-based
19 residential rehabilitation center shall not exceed 4
20 months. As an integral part of the services provided,
21 individuals are housed in a supervised living setting while
22 having immediate access to the community. The residential
23 rehabilitation center authorized by the Department may
24 have more than one residence included under the license. A
25 residence may be no larger than 12 beds and shall be
26 located as an integral part of the community. Day treatment
27 or individualized outpatient services shall be provided
28 for persons who reside in their own home. Functional
29 outcome goals shall be established for each individual.
30 Services shall include, but are not limited to, case
31 management, training and assistance with activities of
32 daily living, nursing consultation, traditional therapies
33 (physical, occupational, speech), functional interventions
34 in the residence and community (job placement, shopping,
35 banking, recreation), counseling, self-management
36 strategies, productive activities, and multiple

1 opportunities for skill acquisition and practice
2 throughout the day. The design of individualized program
3 plans shall be consistent with the outcome goals that are
4 established for each resident. The programs provided in
5 this setting shall be accredited by the Commission on
6 Accreditation of Rehabilitation Facilities (CARF). The
7 program shall have been accredited by CARF as a Brain
8 Injury Community-Integrative Program for at least 3 years.

9 (5) Alternative health care delivery model;
10 Alzheimer's disease management center. An Alzheimer's
11 disease management center model is a designated site that
12 provides a safe and secure setting for care of persons
13 diagnosed with Alzheimer's disease. An Alzheimer's disease
14 management center model shall be a facility separate from
15 any other facility licensed by the Department of Public
16 Health under this or any other Act. An Alzheimer's disease
17 management center shall conduct and document an assessment
18 of each resident every 6 months. The assessment shall
19 include an evaluation of daily functioning, cognitive
20 status, other medical conditions, and behavioral problems.
21 An Alzheimer's disease management center shall develop and
22 implement an ongoing treatment plan for each resident. The
23 treatment plan shall have defined goals. The Alzheimer's
24 disease management center shall treat behavioral problems
25 and mood disorders using nonpharmacologic approaches such
26 as environmental modification, task simplification, and
27 other appropriate activities. All staff must have
28 necessary training to care for all stages of Alzheimer's
29 Disease. An Alzheimer's disease management center shall
30 provide education and support for residents and
31 caregivers. The education and support shall include
32 referrals to support organizations for educational
33 materials on community resources, support groups, legal
34 and financial issues, respite care, and future care needs
35 and options. The education and support shall also include a
36 discussion of the resident's need to make advance

1 directives and to identify surrogates for medical and legal
2 decision-making. The provisions of this paragraph
3 establish the minimum level of services that must be
4 provided by an Alzheimer's disease management center. An
5 Alzheimer's disease management center model shall have no
6 more than 100 residents. Nothing in this paragraph (5)
7 shall be construed as prohibiting a person or facility from
8 providing services and care to persons with Alzheimer's
9 disease as otherwise authorized under State law.

10 (Source: P.A. 93-402, eff. 1-1-04.)

11 Section 9270. The Assisted Living and Shared Housing Act is
12 amended by changing Section 125 as follows:

13 (210 ILCS 9/125)

14 Sec. 125. Assisted Living and Shared Housing Standards and
15 Quality of Life Advisory Board.

16 (a) The Governor shall appoint the Assisted Living and
17 Shared Housing Standards and Quality of Life Advisory Board
18 which shall be responsible for advising the Director in all
19 aspects of the administration of the Act. The Board shall give
20 advice to the Department concerning activities of the assisted
21 living ombudsman and all other matters deemed relevant by the
22 Director and to the Director concerning the delivery of
23 personal care services, the unique needs and concerns of
24 seniors residing in housing projects, and all other issues
25 affecting the quality of life of residents.

26 (b) The Board shall be comprised of the following persons:

27 (1) the Director who shall serve as chair, ex officio
28 and nonvoting;

29 (2) the Director of Aging who shall serve as
30 vice-chair, ex officio and nonvoting;

31 (3) one representative each of the Departments of
32 Public Health, Healthcare and Family Services ~~Public Aid~~,
33 and Human Services, the Office of the State Fire Marshal,
34 and the Illinois Housing Development Authority, and 2

1 representatives of the Department on Aging, all nonvoting
2 members;

3 (4) the State Ombudsman or his or her designee;

4 (5) one representative of the Association of Area
5 Agencies on Aging;

6 (6) four members selected from the recommendations by
7 provider organizations whose membership consist of nursing
8 care or assisted living establishments;

9 (7) one member selected from the recommendations of
10 provider organizations whose membership consists of home
11 health agencies;

12 (8) two residents of assisted living or shared housing
13 establishments;

14 (9) three members selected from the recommendations of
15 consumer organizations which engage solely in advocacy or
16 legal representation on behalf of the senior population;

17 (10) one member who shall be a physician;

18 (11) one member who shall be a registered professional
19 nurse selected from the recommendations of professional
20 nursing associations;

21 (12) two citizen members with expertise in the area of
22 gerontology research or legal research regarding
23 implementation of assisted living statutes;

24 (13) two members representing providers of community
25 care services; and

26 (14) one member representing agencies providing case
27 coordination services.

28 (c) Members of the Board appointed under paragraphs (5)
29 through (14) of subsection (b) shall be appointed to serve for
30 terms of 3 years except as otherwise provided in this Section.
31 All members shall be appointed by January 1, 2001, except that
32 the 2 members representing the Department on Aging appointed
33 under paragraph (3) of subsection (b) and the members appointed
34 under paragraphs (13) and (14) of subsection (b) shall be
35 appointed by January 1, 2005. One third of the Board members'
36 initial terms shall expire in one year; one third in 2 years,

1 and one third in 3 years. Of the 3 members appointed under
2 paragraphs (13) and (14) of subsection (b), one shall serve for
3 an initial term of one year, one shall serve for an initial
4 term of 2 years, and one shall serve for an initial term of 3
5 years. A member's term does not expire until a successor is
6 appointed by the Governor. Any member appointed to fill a
7 vacancy occurring prior to the expiration of the term for which
8 his or her predecessor was appointed shall be appointed for the
9 remainder of that term. The Board shall meet at the call of the
10 Director. The affirmative vote of 10 members of the Board shall
11 be necessary for Board action. Members of this Board shall
12 receive no compensation for their services, however, resident
13 members shall be reimbursed for their actual expenses.

14 (d) The Board shall be provided copies of all
15 administrative rules and changes to administrative rules for
16 review and comment prior to notice being given to the public.
17 If the Board, having been asked for its review, fails to advise
18 the Department within 90 days, the rules shall be considered
19 acted upon.

20 (Source: P.A. 93-1003, eff. 8-23-04.)

21 Section 9275. The Abused and Neglected Long Term Care
22 Facility Residents Reporting Act is amended by changing Section
23 4 as follows:

24 (210 ILCS 30/4) (from Ch. 111 1/2, par. 4164)

25 Sec. 4. Any long term care facility administrator, agent or
26 employee or any physician, hospital, surgeon, dentist,
27 osteopath, chiropractor, podiatrist, Christian Science
28 practitioner, coroner, social worker, social services
29 administrator, registered nurse, law enforcement officer,
30 field personnel of the ~~Illinois~~ Department of Healthcare and
31 Family Services ~~Public Aid~~, field personnel of the Illinois
32 Department of Public Health and County or Municipal Health
33 Departments, personnel of the Department of Human Services
34 (acting as the successor to the Department of Mental Health and

1 Developmental Disabilities or the Department of Public Aid),
2 personnel of the Guardianship and Advocacy Commission,
3 personnel of the State Fire Marshal, local fire department
4 inspectors or other personnel, or personnel of the Illinois
5 Department on Aging, or its subsidiary Agencies on Aging, or
6 employee of a facility licensed under the Assisted Living and
7 Shared Housing Act, having reasonable cause to believe any
8 resident with whom they have direct contact has been subjected
9 to abuse or neglect shall immediately report or cause a report
10 to be made to the Department. Persons required to make reports
11 or cause reports to be made under this Section include all
12 employees of the State of Illinois who are involved in
13 providing services to residents, including professionals
14 providing medical or rehabilitation services and all other
15 persons having direct contact with residents; and further
16 include all employees of community service agencies who provide
17 services to a resident of a public or private long term care
18 facility outside of that facility. Any long term care surveyor
19 of the Illinois Department of Public Health who has reasonable
20 cause to believe in the course of a survey that a resident has
21 been abused or neglected and initiates an investigation while
22 on site at the facility shall be exempt from making a report
23 under this Section but the results of any such investigation
24 shall be forwarded to the central register in a manner and form
25 described by the Department.

26 The requirement of this Act shall not relieve any long term
27 care facility administrator, agent or employee of
28 responsibility to report the abuse or neglect of a resident
29 under Section 3-610 of the Nursing Home Care Act.

30 In addition to the above persons required to report
31 suspected resident abuse and neglect, any other person may make
32 a report to the Department, or to any law enforcement officer,
33 if such person has reasonable cause to suspect a resident has
34 been abused or neglected.

35 This Section also applies to residents whose death occurs
36 from suspected abuse or neglect before being found or brought

1 to a hospital.

2 A person required to make reports or cause reports to be
3 made under this Section who fails to comply with the
4 requirements of this Section is guilty of a Class A
5 misdemeanor.

6 (Source: P.A. 91-656, eff. 1-1-01.)

7 Section 9280. The Nursing Home Care Act is amended by
8 changing Sections 2-202, 2-204, 2-205, 3-108, 3-208, 3-304,
9 3-401.1, 3-405, 3-406, 3-411, 3-414, 3-805, and 3A-101 as
10 follows:

11 (210 ILCS 45/2-202) (from Ch. 111 1/2, par. 4152-202)

12 Sec. 2-202. (a) Before a person is admitted to a facility,
13 or at the expiration of the period of previous contract, or
14 when the source of payment for the resident's care changes from
15 private to public funds or from public to private funds, a
16 written contract shall be executed between a licensee and the
17 following in order of priority:

18 (1) the person, or if the person is a minor, his parent
19 or guardian; or

20 (2) the person's guardian, if any, or agent, if any, as
21 defined in Section 2-3 of the Illinois Power of Attorney
22 Act; or

23 (3) a member of the person's immediate family.

24 An adult person shall be presumed to have the capacity to
25 contract for admission to a long term care facility unless he
26 has been adjudicated a "disabled person" within the meaning of
27 Section 11a-2 of the Probate Act of 1975, or unless a petition
28 for such an adjudication is pending in a circuit court of
29 Illinois.

30 If there is no guardian, agent or member of the person's
31 immediate family available, able or willing to execute the
32 contract required by this Section and a physician determines
33 that a person is so disabled as to be unable to consent to
34 placement in a facility, or if a person has already been found

1 to be a "disabled person", but no order has been entered
2 allowing residential placement of the person, that person may
3 be admitted to a facility before the execution of a contract
4 required by this Section; provided that a petition for
5 guardianship or for modification of guardianship is filed
6 within 15 days of the person's admission to a facility, and
7 provided further that such a contract is executed within 10
8 days of the disposition of the petition.

9 No adult shall be admitted to a facility if he objects,
10 orally or in writing, to such admission, except as otherwise
11 provided in Chapters III and IV of the Mental Health and
12 Developmental Disabilities Code or Section 11a-14.1 of the
13 Probate Act of 1975.

14 If a person has not executed a contract as required by this
15 Section, then such a contract shall be executed on or before
16 July 1, 1981, or within 10 days after the disposition of a
17 petition for guardianship or modification of guardianship that
18 was filed prior to July 1, 1981, whichever is later.

19 Before a licensee enters a contract under this Section, it
20 shall provide the prospective resident and his guardian, if
21 any, with written notice of the licensee's policy regarding
22 discharge of a resident whose private funds for payment of care
23 are exhausted.

24 (b) A resident shall not be discharged or transferred at
25 the expiration of the term of a contract, except as provided in
26 Sections 3-401 through 3-423.

27 (c) At the time of the resident's admission to the
28 facility, a copy of the contract shall be given to the
29 resident, his guardian, if any, and any other person who
30 executed the contract.

31 (d) A copy of the contract for a resident who is supported
32 by nonpublic funds other than the resident's own funds shall be
33 made available to the person providing the funds for the
34 resident's support.

35 (e) The original or a copy of the contract shall be
36 maintained in the facility and be made available upon request

1 to representatives of the Department and the Department of
2 Healthcare and Family Services ~~Public Aid~~.

3 (f) The contract shall be written in clear and unambiguous
4 language and shall be printed in not less than 12-point type.
5 The general form of the contract shall be prescribed by the
6 Department.

7 (g) The contract shall specify:

8 (1) the term of the contract;

9 (2) the services to be provided under the contract and
10 the charges for the services;

11 (3) the services that may be provided to supplement the
12 contract and the charges for the services;

13 (4) the sources liable for payments due under the
14 contract;

15 (5) the amount of deposit paid; and

16 (6) the rights, duties and obligations of the resident,
17 except that the specification of a resident's rights may be
18 furnished on a separate document which complies with the
19 requirements of Section 2-211.

20 (h) The contract shall designate the name of the resident's
21 representative, if any. The resident shall provide the facility
22 with a copy of the written agreement between the resident and
23 the resident's representative which authorizes the resident's
24 representative to inspect and copy the resident's records and
25 authorizes the resident's representative to execute the
26 contract on behalf of the resident required by this Section.

27 (i) The contract shall provide that if the resident is
28 compelled by a change in physical or mental health to leave the
29 facility, the contract and all obligations under it shall
30 terminate on 7 days notice. No prior notice of termination of
31 the contract shall be required, however, in the case of a
32 resident's death. The contract shall also provide that in all
33 other situations, a resident may terminate the contract and all
34 obligations under it with 30 days notice. All charges shall be
35 prorated as of the date on which the contract terminates, and,
36 if any payments have been made in advance, the excess shall be

1 refunded to the resident. This provision shall not apply to
2 life-care contracts through which a facility agrees to provide
3 maintenance and care for a resident throughout the remainder of
4 his life nor to continuing-care contracts through which a
5 facility agrees to supplement all available forms of financial
6 support in providing maintenance and care for a resident
7 throughout the remainder of his life.

8 (j) In addition to all other contract specifications
9 contained in this Section admission contracts shall also
10 specify:

11 (1) whether the facility accepts Medicaid clients;

12 (2) whether the facility requires a deposit of the
13 resident or his family prior to the establishment of
14 Medicaid eligibility;

15 (3) in the event that a deposit is required, a clear
16 and concise statement of the procedure to be followed for
17 the return of such deposit to the resident or the
18 appropriate family member or guardian of the person;

19 (4) that all deposits made to a facility by a resident,
20 or on behalf of a resident, shall be returned by the
21 facility within 30 days of the establishment of Medicaid
22 eligibility, unless such deposits must be drawn upon or
23 encumbered in accordance with Medicaid eligibility
24 requirements established by the ~~Illinois~~ Department of
25 Healthcare and Family Services ~~Public Aid~~.

26 (k) It shall be a business offense for a facility to
27 knowingly and intentionally both retain a resident's deposit
28 and accept Medicaid payments on behalf of that resident.

29 (Source: P.A. 87-225; 87-895; 88-154.)

30 (210 ILCS 45/2-204) (from Ch. 111 1/2, par. 4152-204)

31 Sec. 2-204. The Director shall appoint a Long-Term Care
32 Facility Advisory Board to consult with the Department and the
33 residents' advisory councils created under Section 2-203.

34 (a) The Board shall be comprised of the following persons:

35 (1) The Director who shall serve as chairman, ex

1 officio and nonvoting; and

2 (2) One representative each of the Department of
3 Healthcare and Family Services ~~Public Aid~~, the Department
4 of Human Services, the Department on Aging, and the Office
5 of the State Fire Marshal, all nonvoting members;

6 (3) One member who shall be a physician licensed to
7 practice medicine in all its branches;

8 (4) One member who shall be a registered nurse selected
9 from the recommendations of professional nursing
10 associations;

11 (5) Four members who shall be selected from the
12 recommendations by organizations whose membership consists
13 of facilities;

14 (6) Two members who shall represent the general public
15 who are not members of a residents' advisory council
16 established under Section 2-203 and who have no
17 responsibility for management or formation of policy or
18 financial interest in a facility;

19 (7) One member who is a member of a residents' advisory
20 council established under Section 2-203 and is capable of
21 actively participating on the Board; and

22 (8) One member who shall be selected from the
23 recommendations of consumer organizations which engage
24 solely in advocacy or legal representation on behalf of
25 residents and their immediate families.

26 (b) The terms of those members of the Board appointed prior
27 to the effective date of this amendatory Act of 1988 shall
28 expire on December 31, 1988. Members of the Board created by
29 this amendatory Act of 1988 shall be appointed to serve for
30 terms as follows: 3 for 2 years, 3 for 3 years and 3 for 4
31 years. The member of the Board added by this amendatory Act of
32 1989 shall be appointed to serve for a term of 4 years. Each
33 successor member shall be appointed for a term of 4 years. Any
34 member appointed to fill a vacancy occurring prior to the
35 expiration of the term for which his predecessor was appointed
36 shall be appointed for the remainder of such term. The Board

1 shall meet as frequently as the chairman deems necessary, but
2 not less than 4 times each year. Upon request by 4 or more
3 members the chairman shall call a meeting of the Board. The
4 affirmative vote of 6 members of the Board shall be necessary
5 for Board action. A member of the Board can designate a
6 replacement to serve at the Board meeting and vote in place of
7 the member by submitting a letter of designation to the
8 chairman prior to or at the Board meeting. The Board members
9 shall be reimbursed for their actual expenses incurred in the
10 performance of their duties.

11 (c) The Advisory Board shall advise the Department of
12 Public Health on all aspects of its responsibilities under this
13 Act, including the format and content of any rules promulgated
14 by the Department of Public Health. Any such rules, except
15 emergency rules promulgated pursuant to Section 5-45 of the
16 Illinois Administrative Procedure Act, promulgated without
17 obtaining the advice of the Advisory Board are null and void.
18 In the event that the Department fails to follow the advice of
19 the Board, the Department shall, prior to the promulgation of
20 such rules, transmit a written explanation of the reason
21 thereof to the Board. During its review of rules, the Board
22 shall analyze the economic and regulatory impact of those
23 rules. If the Advisory Board, having been asked for its advice,
24 fails to advise the Department within 90 days, the rules shall
25 be considered acted upon.

26 (Source: P.A. 88-45; 89-507, eff. 7-1-97.)

27 (210 ILCS 45/2-205) (from Ch. 111 1/2, par. 4152-205)

28 Sec. 2-205. The following information is subject to
29 disclosure to the public from the Department or the Department
30 of Healthcare and Family Services ~~Public Aid~~:

31 (1) Information submitted under Sections 3-103 and 3-207
32 except information concerning the remuneration of personnel
33 licensed, registered, or certified by the Department of
34 Professional Regulation and monthly charges for an individual
35 private resident;

1 (2) Records of license and certification inspections,
2 surveys, and evaluations of facilities, other reports of
3 inspections, surveys, and evaluations of resident care, and
4 reports concerning a facility prepared pursuant to Titles XVIII
5 and XIX of the Social Security Act, subject to the provisions
6 of the Social Security Act;

7 (3) Cost and reimbursement reports submitted by a facility
8 under Section 3-208, reports of audits of facilities, and other
9 public records concerning costs incurred by, revenues received
10 by, and reimbursement of facilities; and

11 (4) Complaints filed against a facility and complaint
12 investigation reports, except that a complaint or complaint
13 investigation report shall not be disclosed to a person other
14 than the complainant or complainant's representative before it
15 is disclosed to a facility under Section 3-702, and, further,
16 except that a complainant or resident's name shall not be
17 disclosed except under Section 3-702.

18 The Department shall disclose information under this
19 Section in accordance with provisions for inspection and
20 copying of public records required by The Freedom of
21 Information Act.

22 However, the disclosure of information described in
23 subsection (1) shall not be restricted by any provision of The
24 Freedom of Information Act.

25 (Source: P.A. 85-1209; 85-1378.)

26 (210 ILCS 45/3-108) (from Ch. 111 1/2, par. 4153-108)

27 Sec. 3-108. The Department shall coordinate the functions
28 within State government affecting facilities licensed under
29 this Act and shall cooperate with other State agencies which
30 establish standards or requirements for facilities to assure
31 necessary, equitable, and consistent State supervision of
32 licensees without unnecessary duplication of survey,
33 evaluation, and consultation services or complaint
34 investigations. The Department shall cooperate with the
35 Department of Human Services in regard to facilities containing

1 more than 20% of residents for whom the Department of Human
2 Services has mandated follow-up responsibilities under the
3 Mental Health and Developmental Disabilities Administrative
4 Act.

5 The Department shall cooperate with the Department of
6 Healthcare and Family Services ~~Public Aid~~ in regard to
7 facilities where recipients of public aid are residents.

8 The Department shall immediately refer to the Department of
9 Professional Regulation for investigation any credible
10 evidence of which it has knowledge that an individual licensed
11 by that Department has violated this Act or any rule issued
12 under this Act.

13 The Department shall enter into agreements with other State
14 Departments, agencies or commissions to effectuate the purpose
15 of this Section.

16 (Source: P.A. 89-197, eff. 7-21-95; 89-507, eff. 7-1-97.)

17 (210 ILCS 45/3-208) (from Ch. 111 1/2, par. 4153-208)

18 Sec. 3-208. (a) Each licensee shall file annually, or more
19 often as the Director shall by rule prescribe, an attested
20 financial statement. The Director may order an audited
21 financial statement of a particular facility by an auditor of
22 the Director's choice, provided the cost of such audit is paid
23 by the Department.

24 (b) No public funds shall be expended for the maintenance
25 of any resident in a facility which has failed to file the
26 financial statement required under this Section and no public
27 funds shall be paid to or on behalf of a facility which has
28 failed to file a statement.

29 (c) The Director of Public Health and the Director of
30 Healthcare and Family Services ~~Public Aid~~ shall promulgate
31 under Sections 3-801 and 3-802, one set of regulations for the
32 filing of these financial statements, and shall provide in
33 these regulations for forms, required information, intervals
34 and dates of filing and such other provisions as they may deem
35 necessary.

1 (d) The Director of Public Health and the Director of
2 Healthcare and Family Services ~~Public Aid~~ shall seek the advice
3 and comments of other State and federal agencies which require
4 the submission of financial data from facilities licensed under
5 this Act and shall incorporate the information requirements of
6 these agencies so as to impose the least possible burden on
7 licensees. No other State agency may require submission of
8 financial data except as expressly authorized by law or as
9 necessary to meet requirements of federal statutes or
10 regulations. Information obtained under this Section shall be
11 made available, upon request, by the Department to any other
12 State agency or legislative commission to which such
13 information is necessary for investigations or required for the
14 purposes of State or federal law or regulation.

15 (Source: P.A. 81-1349.)

16 (210 ILCS 45/3-304) (from Ch. 111 1/2, par. 4153-304)

17 Sec. 3-304. (a) The Department shall prepare on a quarterly
18 basis a list containing the names and addresses of all
19 facilities against which the Department during the previous
20 quarter has:

21 (1) sent a notice under Section 3-307 regarding a
22 penalty assessment under subsection (1) of Section 3-305;

23 (2) sent a notice of license revocation under Section
24 3-119;

25 (3) sent a notice refusing renewal of a license under
26 Section 3-119;

27 (4) sent a notice to suspend a license under Section
28 3-119;

29 (5) issued a conditional license for violations that
30 have not been corrected under Section 3-303 or penalties or
31 fines described under Section 3-305 have been assessed
32 under Section 3-307 or 3-308;

33 (6) placed a monitor under subsections (a), (b) and (c)
34 of Section 3-501 and under subsection (d) of such Section
35 where license revocation or nonrenewal notices have also

1 been issued;

2 (7) initiated an action to appoint a receiver;

3 (8) recommended to the Director of Healthcare and
4 Family Services (formerly Director of the Department of
5 Public Aid), or the Secretary of the United States
6 Department of Health and Human Services, the
7 decertification for violations in relation to patient care
8 of a facility pursuant to Titles XVIII and XIX of the
9 federal Social Security Act.

10 (b) In addition to the name and address of the facility,
11 the list shall include the name and address of the person or
12 licensee against whom the action has been initiated, a
13 self-explanatory summary of the facts which warranted the
14 initiation of each action, the type of action initiated, the
15 date of the initiation of the action, the amount of the penalty
16 sought to be assessed, if any, and the final disposition of the
17 action, if completed.

18 (c) The list shall be available to any member of the public
19 upon oral or written request without charge.

20 (Source: P.A. 85-1378.)

21 (210 ILCS 45/3-401.1) (from Ch. 111 1/2, par. 4153-401.1)

22 Sec. 3-401.1. (a) A facility participating in the Medical
23 Assistance Program is prohibited from failing or refusing to
24 retain as a resident any person because he or she is a
25 recipient of or an applicant for the Medical Assistance
26 Program.

27 (a-5) After the effective date of this amendatory Act of
28 1997, a facility of which only a distinct part is certified to
29 participate in the Medical Assistance Program may refuse to
30 retain as a resident any person who resides in a part of the
31 facility that does not participate in the Medical Assistance
32 Program and who is unable to pay for his or her care in the
33 facility without Medical Assistance only if:

34 (1) the facility, no later than at the time of
35 admission and at the time of the resident's contract

1 renewal, explains to the resident (unless he or she is
2 incompetent), and to the resident's representative, and to
3 the person making payment on behalf of the resident for the
4 resident's stay, in writing, that the facility may
5 discharge the resident if the resident is no longer able to
6 pay for his or her care in the facility without Medical
7 Assistance;

8 (2) the resident (unless he or she is incompetent), the
9 resident's representative, and the person making payment
10 on behalf of the resident for the resident's stay,
11 acknowledge in writing that they have received the written
12 explanation.

13 (a-10) For the purposes of this Section, a recipient or
14 applicant shall be considered a resident in the facility during
15 any hospital stay totaling 10 days or less following a hospital
16 admission. The ~~Illinois~~ Department of Healthcare and Family
17 Services ~~Public Aid~~ shall recoup funds from a facility when, as
18 a result of the facility's refusal to readmit a recipient after
19 hospitalization for 10 days or less, the recipient incurs
20 hospital bills in an amount greater than the amount that would
21 have been paid by that Department (formerly the Illinois
22 Department of Public Aid) for care of the recipient in the
23 facility. The amount of the recoupment shall be the difference
24 between the Department of Healthcare and Family Services'
25 (formerly the Illinois Department of Public Aid's) payment for
26 hospital care and the amount that Department would have paid
27 for care in the facility.

28 (b) A facility which violates this Section shall be guilty
29 of a business offense and fined not less than \$500 nor more
30 than \$1,000 for the first offense and not less than \$1,000 nor
31 more than \$5,000 for each subsequent offense.

32 (Source: P.A. 90-310, eff. 8-1-97.)

33 (210 ILCS 45/3-405) (from Ch. 111 1/2, par. 4153-405)

34 Sec. 3-405. A copy of the notice required by Section 3-402
35 shall be placed in the resident's clinical record and a copy

1 shall be transmitted to the Department, the resident, the
2 resident's representative, and, if the resident's care is paid
3 for in whole or part through Title XIX, ~~to~~ the Department of
4 Healthcare and Family Services ~~Public Aid~~.

5 (Source: P.A. 81-223.)

6 (210 ILCS 45/3-406) (from Ch. 111 1/2, par. 4153-406)

7 Sec. 3-406. When the basis for an involuntary transfer or
8 discharge is the result of an action by the Department of
9 Healthcare and Family Services (formerly Department of Public
10 Aid) with respect to a recipient of Title XIX and a hearing
11 request is filed with the Department of Healthcare and Family
12 Services (formerly Department of Public Aid), the 21-day
13 written notice period shall not begin until a final decision in
14 the matter is rendered by the Department of Healthcare and
15 Family Services (formerly Department of Public Aid) or a court
16 of competent jurisdiction and notice of that final decision is
17 received by the resident and the facility.

18 (Source: P.A. 81-223.)

19 (210 ILCS 45/3-411) (from Ch. 111 1/2, par. 4153-411)

20 Sec. 3-411. The Department of Public Health, when the basis
21 for involuntary transfer or discharge is other than action by
22 the Department of Healthcare and Family Services (formerly
23 Department of Public Aid) with respect to the Title XIX
24 Medicaid recipient, shall hold a hearing at the resident's
25 facility not later than 10 days after a hearing request is
26 filed, and render a decision within 14 days after the filing of
27 the hearing request.

28 (Source: P.A. 81-1349.)

29 (210 ILCS 45/3-414) (from Ch. 111 1/2, par. 4153-414)

30 Sec. 3-414. The Department of Healthcare and Family
31 Services ~~Public Aid~~ shall continue Title XIX Medicaid funding
32 during the appeal, transfer, or discharge period for those
33 residents who are Title XIX recipients affected by Section

1 3-401.

2 (Source: P.A. 81-223.)

3 (210 ILCS 45/3-805) (from Ch. 111 1/2, par. 4153-805)

4 Sec. 3-805. (a) The Department shall conduct a pilot
5 project to examine, study and contrast the Joint Commission on
6 the Accreditation of Health Care Organizations ("Commission")
7 accreditation review process with the current regulations and
8 licensure surveys process conducted by the Department for
9 long-term care facilities. This pilot project will enable
10 qualified facilities to apply for participation in the project,
11 in which surveys completed by the Commission are accepted by
12 the Department in lieu of inspections required by this Act, as
13 provided in subsection (b) of this Section. It is intended that
14 this pilot project shall commence on January 1, 1990, and shall
15 conclude on December 31, 2000, with a final report to be
16 submitted to the Governor and the General Assembly by June 30,
17 2001.

18 (b) (1) In lieu of conducting an inspection for license
19 renewal under this Act, the Department may accept from a
20 facility that is accredited by the Commission under the
21 Commission's long-term care standards the facility's most
22 recent annual accreditation review by the Commission. In
23 addition to such review, the facility shall submit any fee or
24 other license renewal report or information required by law.
25 The Department may accept such review for so long as the
26 Commission maintains an annual inspection or review program. If
27 the Commission does not conduct an on-site annual inspection or
28 review, the Department shall conduct an inspection as otherwise
29 required by this Act. If the Department determines that an
30 annual on-site inspection or review conducted by the Commission
31 does not meet minimum standards set by the Department, the
32 Department shall not accept the Commission's accreditation
33 review and shall conduct an inspection as otherwise required by
34 this Act.

35 The Department shall establish procedures applicable to

1 the pilot project conducted pursuant to this Section. The
2 procedures shall provide for a review of the Commission's
3 survey findings that may be Type "A" or Type "B" violations
4 under this Act requiring immediate correction, the taking of
5 necessary and appropriate action to determine whether such
6 violations exist, and steps to effect corrective action in
7 cooperation with the Commission, or otherwise under this Act,
8 as may be necessary. The Department shall also establish
9 procedures to require the Commission to immediately report to
10 the Department any survey finding that constitutes a condition
11 or occurrence relating to the operation and maintenance of a
12 facility which presents a substantial probability that death or
13 serious mental or physical harm to a resident will result
14 therefrom, so as to enable the Department to take necessary and
15 appropriate action under this Act.

16 (2) This subsection (b) does not limit the Department in
17 performing any inspections or other duties authorized by this
18 Act, or under any contract relating to the medical assistance
19 program administered by the ~~Illinois~~ Department of Healthcare
20 and Family Services ~~Public Aid~~, or under Title XVIII or Title
21 XIX of the Social Security Act.

22 (3) No facility shall be required to obtain accreditation
23 from the Commission.

24 (c) Participation in the pilot project shall be limited to
25 facilities selected at random by the Director, provided that:

26 (1) facilities shall apply to the Director for
27 selection to participate;

28 (2) facilities which are currently accredited by the
29 Commission may apply to participate;

30 (3) any facility not accredited by the Commission at
31 the time of application to participate in the pilot project
32 shall apply for such accreditation;

33 (4) the number of facilities so selected shall be no
34 greater than 15% of the total number of long-term care
35 facilities licensed under this Act;

36 (5) the number of facilities so selected shall be

1 divided equally between facilities having fewer than 100
2 beds and facilities having 100 or more beds;

3 (6) facilities so selected shall have been licensed for
4 more than 2 years and shall not have been issued a
5 conditional license within 2 years before applying for
6 participation in the pilot project; and

7 (7) no facilities so selected shall have been issued a
8 notice of a Type "A" violation within one year before
9 applying for participation in the pilot project.

10 (d) Inspections and surveys conducted by the Commission
11 under the pilot project for initial or continued accreditation
12 shall not be announced in advance to the facility being
13 inspected or surveyed, and shall provide for participation in
14 the inspection or survey process by residents of the facility
15 and the public.

16 (e) With respect to any facility accredited by the
17 Commission, the Commission shall submit to the Department
18 copies of:

19 (1) the accreditation award letter;

20 (2) the accreditation report, including
21 recommendations and comments by the Commission; and

22 (3) any correspondence directly related to the
23 accreditation.

24 (f) No facility which is denied initial or continued
25 accreditation by the Commission shall participate in the pilot
26 project.

27 (g) The Director shall meet at least once every 6 months
28 with the director of the Commission's long-term care facility
29 accreditation program to review, coordinate and modify as
30 necessary the services performed by the Commission under the
31 pilot project. On or before June 30, 1993, the Director shall
32 submit to the Governor and to the General Assembly a report
33 evaluating the pilot project and making any recommendations
34 deemed necessary.

35 (h) This Section does not limit the Department in
36 performing any inspections or other duties authorized by this

1 Act, or under any contract relating to the medical assistance
2 program administered by the ~~Illinois~~ Department of Healthcare
3 and Family Services ~~Public Aid~~, or under Title XVIII or Title
4 XIX of the Social Security Act.

5 (Source: P.A. 89-171, eff. 7-19-95; 89-381, eff. 8-18-95;
6 89-626, eff. 8-9-96; 90-353, eff. 8-8-97.)

7 (210 ILCS 45/3A-101)

8 Sec. 3A-101. Cooperative arrangements. Not later than June
9 30, 1996, the Department shall enter into one or more
10 cooperative arrangements with the Illinois Department of
11 Public Aid, the Department on Aging, the Office of the State
12 Fire Marshal, and any other appropriate entity for the purpose
13 of developing a single survey for nursing facilities, including
14 but not limited to facilities funded under Title XVIII or Title
15 XIX of the federal Social Security Act, or both, which shall be
16 administered and conducted solely by the Department. The
17 Departments shall test the single survey process on a pilot
18 basis, with both the Departments of Public Aid and Public
19 Health represented on the consolidated survey team. The pilot
20 will sunset June 30, 1997. After June 30, 1997, unless
21 otherwise determined by the Governor, a single survey shall be
22 implemented by the Department of Public Health which would not
23 preclude staff from the Department of Healthcare and Family
24 Services (formerly Department of Public Aid) from going on-site
25 to nursing facilities to perform necessary audits and reviews
26 which shall not replicate the single State agency survey
27 required by this Act. This Article shall not apply to community
28 or intermediate care facilities for the developmentally
29 disabled.

30 (Source: P.A. 89-415, eff. 1-1-96.)

31 Section 9285. The Home Health, Home Services, and Home
32 Nursing Agency Licensing Act is amended by changing Section 11
33 as follows:

1 (210 ILCS 55/11) (from Ch. 111 1/2, par. 2811)

2 Sec. 11. (a) Each licensee shall file annually, or more
3 often as the Director shall by rule prescribe, an attested
4 financial statement. An audited financial statement may be
5 required of a particular facility, if the Director determines
6 that additional information is needed.

7 (b) No public funds shall be expended for the services of a
8 home health agency which has failed to file the financial
9 statement required by this Section.

10 (c) The Director of the Illinois Department of Public
11 Health and the Director of the ~~Illinois~~ Department of
12 Healthcare and Family Services ~~Public Aid~~ shall promulgate one
13 set of regulations for the filing of financial statements, and
14 shall provide in these regulations for forms, information
15 required, intervals and dates of filing, and such other
16 provisions as he may deem necessary. Regulations shall be
17 published in sufficient time to permit those licensees who must
18 first file financial statements time in which to do so.

19 (d) The Director shall seek the advice and comments of
20 other State and Federal agencies which require the submission
21 of financial data from home health agencies licensed under this
22 Act and shall incorporate the information requirements of these
23 agencies into the forms it adopts or issues under this Act and
24 shall otherwise coordinate its regulations with the
25 requirements of these agencies so as to impose the least
26 possible burden on licensees. No other State agency may require
27 submission of financial data except as expressly authorized by
28 law or as necessary to meet requirements of federal law or
29 regulation. Information obtained under this Section shall be
30 made available, upon request, by the Department to any other
31 State agency or legislative commission to which such
32 information is necessary for investigations or to execute the
33 intent of State or Federal law or regulation.

34 (Source: P.A. 80-804.)

35 Section 9290. The Illinois Insurance Code is amended by

1 changing Sections 238, 238.1, 299.1a, 299.1b, 337.1, 352, 356b,
2 356r, 367b, and 512-3 as follows:

3 (215 ILCS 5/238) (from Ch. 73, par. 850)

4 Sec. 238. Exemption.

5 (a) All proceeds payable because of the death of the
6 insured and the aggregate net cash value of any or all life and
7 endowment policies and annuity contracts payable to a wife or
8 husband of the insured, or to a child, parent or other person
9 dependent upon the insured, whether the power to change the
10 beneficiary is reserved to the insured or not, and whether the
11 insured or his estate is a contingent beneficiary or not, shall
12 be exempt from execution, attachment, garnishment or other
13 process, for the debts or liabilities of the insured incurred
14 subsequent to the effective date of this Code, except as to
15 premiums paid in fraud of creditors within the period limited
16 by law for the recovery thereof.

17 (b) Any insurance company doing business in this State and
18 governed by this Code shall encumber or surrender accounts as
19 defined in Section 10-24 of the Illinois Public Aid Code held
20 by the insurance company owned by any responsible relative who
21 is subject to a child support lien, upon notice of the lien or
22 levy by the Department of Healthcare and Family Services
23 (formerly Illinois Department of Public Aid) or its successor
24 agency pursuant to Section 10-25.5 of the Illinois Public Aid
25 Code, or upon notice of interstate lien from any other state's
26 agency responsible for implementing the child support
27 enforcement program set forth in Title IV, Part D of the Social
28 Security Act.

29 This Section does not prohibit the furnishing of
30 information in accordance with the federal Personal
31 Responsibility and Work Opportunity Reconciliation Act of
32 1996. Any insurance company governed by this Code shall enter
33 into an agreement for data exchanges with the Department of
34 Healthcare and Family Services ~~Public Aid~~ provided the
35 Department of Healthcare and Family Services ~~Public Aid~~ pays to

1 the insurance company a reasonable fee not to exceed its actual
2 cost incurred. An insurance company providing information in
3 accordance with this item shall not be liable to any owner of
4 an account as defined in Section 10-24 of the Illinois Public
5 Aid Code or other person for any disclosure of information to
6 the Department of Healthcare and Family Services (formerly
7 Department of Public Aid), for encumbering or surrendering any
8 accounts as defined in Section 10-24 of the Illinois Public Aid
9 Code held by the insurance company in response to a lien or
10 order to withhold and deliver issued by a State agency, or for
11 any other action taken pursuant to this item, including
12 individual or mechanical errors, provided the action does not
13 constitute gross negligence or willful misconduct. An
14 insurance company shall have no obligation to hold, encumber,
15 or surrender any accounts as defined in Section 10-24 of the
16 Illinois Public Aid Code until it has been served with a
17 subpoena, summons, warrant, court or administrative order,
18 lien, or levy requiring that action.

19 (Source: P.A. 90-18, eff. 7-1-97.)

20 (215 ILCS 5/238.1)

21 Sec. 238.1. Data exchanges; administrative liens.

22 (a) Any insurance company doing business in the State and
23 governed by this Code shall enter into an agreement for data
24 exchanges with the ~~Illinois~~ Department of Healthcare and Family
25 Services ~~Public Aid~~ for the purpose of locating accounts as
26 defined in Section 10-24 of the Illinois Public Aid Code of
27 responsible relatives to satisfy past-due child support owed by
28 responsible relatives under an order for support entered by a
29 court or administrative body of this or any other State on
30 behalf of resident or non-resident persons.

31 (b) Notwithstanding any provisions in this Code to the
32 contrary, an insurance company shall not be liable to any
33 person:

34 (1) for any disclosure of information to the Department
35 of Healthcare and Family Services (formerly Illinois

1 Department of Public Aid) under subsection (a);

2 (2) for encumbering or surrendering any accounts as
3 defined in Section 10-24 of the Illinois Public Aid Code
4 held by such insurance company in response to a notice of
5 lien or levy issued by the Department of Healthcare and
6 Family Services (formerly Illinois Department of Public
7 Aid), or by any other state's child support enforcement
8 agency, as provided for in Section 238 of this Code; or

9 (3) for any other action taken in good faith to comply
10 with the requirements of subsection (a).

11 (Source: P.A. 90-18, eff. 7-1-97.)

12 (215 ILCS 5/299.1a) (from Ch. 73, par. 911.1a)

13 Sec. 299.1a. Benefits not Attachable.

14 (a) No money or other charity, relief or aid to be paid,
15 provided or rendered by any society shall be liable to
16 attachment, garnishment or other process or to be seized,
17 taken, appropriated or applied by any legal or equitable
18 process or operation of law to pay any debt or liability of a
19 member or beneficiary, or any other person who may have a right
20 thereunder, either before or after payment by the society.

21 (b) Any benefit association doing business in this State
22 and governed by this Article XVII shall encumber or surrender
23 accounts as defined in Section 10-24 of the Illinois Public Aid
24 Code held by the benefit association owned by any responsible
25 relative who is subject to a child support lien, upon notice of
26 the lien or levy by the Department of Healthcare and Family
27 Services (formerly Illinois Department of Public Aid) or its
28 successor agency pursuant to Section 10-25.5 of the Illinois
29 Public Aid Code, or upon notice of interstate lien from any
30 other state's agency responsible for implementing the child
31 support enforcement program set forth in Title IV, Part D of
32 the Social Security Act.

33 This Section shall not prohibit the furnishing of
34 information in accordance with the federal Personal
35 Responsibility and Work Opportunity Reconciliation Act of

1 1996. Any benefit association governed by this Article XVII
2 shall enter into an agreement for data exchanges with the
3 Department of Healthcare and Family Services ~~Public Aid~~
4 provided the Department of Healthcare and Family Services
5 ~~Public Aid~~ pays to the benefit association a reasonable fee not
6 to exceed its actual cost incurred. A benefit association
7 providing information in accordance with this item shall not be
8 liable to any account holder or other person for any disclosure
9 of information to a State agency, for encumbering or
10 surrendering any accounts as defined in Section 10-24 of the
11 Illinois Public Aid Code held by the benefit association in
12 response to a lien or order to withhold and deliver issued by a
13 State agency, or for any other action taken pursuant to this
14 item, including individual or mechanical errors, provided the
15 action does not constitute gross negligence or willful
16 misconduct. A benefit association shall have no obligation to
17 hold, encumber, or surrender accounts until it has been served
18 with a subpoena, summons, warrant, court or administrative
19 order, lien, or levy requiring that action.

20 (Source: P.A. 90-18, eff. 7-1-97.)

21 (215 ILCS 5/299.1b)

22 Sec. 299.1b. Data exchanges; administrative liens.

23 (a) Any benefit association doing business in the State and
24 governed by this Code shall enter into an agreement for data
25 exchanges with the ~~Illinois~~ Department of Healthcare and Family
26 Services ~~Public Aid~~ for the purpose of locating accounts as
27 defined in Section 10-24 of the Illinois Public Aid Code of
28 responsible relatives to satisfy past-due child support owed by
29 responsible relatives under an order for support entered by a
30 court or administrative body of this or any other State on
31 behalf of resident or non-resident persons.

32 (b) Notwithstanding any provisions in this Code to the
33 contrary, a benefit association shall not be liable to any
34 person:

35 (1) for any disclosure of information to the Department

1 of Healthcare and Family Services (formerly Illinois
2 Department of Public Aid) under subsection (a);

3 (2) for encumbering or surrendering any accounts as
4 defined in Section 10-24 of the Illinois Public Aid Code
5 held by such benefit association in response to a notice of
6 lien or levy issued by the Department of Healthcare and
7 Family Services (formerly Illinois Department of Public
8 Aid), or by any other state's child support enforcement
9 agency, as provided for in Section 299.1a of this Code; or

10 (3) for any other action taken in good faith to comply
11 with the requirements of subsection (a).

12 (Source: P.A. 90-18, eff. 7-1-97.)

13 (215 ILCS 5/337.1)

14 Sec. 337.1. Data exchanges; administrative liens.

15 (a) Any benefit association governed by this Article XVIII
16 shall encumber or surrender accounts as defined in Section
17 10-24 of the Illinois Public Aid Code held by the benefit
18 association on behalf of any responsible relative who is
19 subject to a child support lien, upon notice of the lien or
20 levy by the Department of Healthcare and Family Services
21 (formerly Illinois Department of Public Aid) or its successor
22 agency pursuant to Section 10-25.5 of the Illinois Public Aid
23 Code, or upon notice of interstate lien from any other state's
24 agency responsible for implementing the child support
25 enforcement program set forth in Title IV, Part D of the Social
26 Security Act.

27 (b) This Section shall not prohibit the furnishing of
28 information in accordance with the federal Personal
29 Responsibility and Work Opportunity Reconciliation Act of
30 1996. Any benefit association governed by this Article XVIII
31 shall enter into an agreement for data exchanges with the
32 Department of Healthcare and Family Services ~~Public Aid~~
33 provided the Department of Healthcare and Family Services
34 ~~Public Aid~~ pays to the benefit association a reasonable fee not
35 to exceed its actual cost incurred. A benefit association

1 providing information in accordance with this item shall not be
2 liable to any owner of an account as defined in Section 10-24
3 of the Illinois Public Aid Code or other person for any
4 disclosure of information to the Department of Healthcare and
5 Family Services (formerly Department of Public Aid), for
6 encumbering or surrendering any accounts held by the benefit
7 association in response to a lien or order to withhold and
8 deliver issued by the Department of Healthcare and Family
9 Services (formerly Department of Public Aid), or for any other
10 action taken pursuant to this item, including individual or
11 mechanical errors, provided the action does not constitute
12 gross negligence or willful misconduct. A benefit association
13 shall have no obligation to hold, encumber, or surrender the
14 accounts or portions thereof as defined in Section 10-24 of the
15 Illinois Public Aid Code until it has been served with a
16 subpoena, summons, warrant, court or administrative order,
17 lien, or levy.

18 (Source: P.A. 90-18, eff. 7-1-97.)

19 (215 ILCS 5/352) (from Ch. 73, par. 964)

20 Sec. 352. Scope of Article.

21 (a) Except as provided in subsections (b), (c), (d), and
22 (e), this Article shall apply to all companies transacting in
23 this State the kinds of business enumerated in clause (b) of
24 Class 1 and clause (a) of Class 2 of section 4. Nothing in this
25 Article shall apply to, or in any way affect policies or
26 contracts described in clause (a) of Class 1 of Section 4;
27 however, this Article shall apply to policies and contracts
28 which contain benefits providing reimbursement for the
29 expenses of long term health care which are certified or
30 ordered by a physician including but not limited to
31 professional nursing care, custodial nursing care, and
32 non-nursing custodial care provided in a nursing home or at a
33 residence of the insured.

34 (b) This Article does not apply to policies of accident and
35 health insurance issued in compliance with Article XIXB of this

1 Code.

2 (c) A policy issued and delivered in this State that
3 provides coverage under that policy for certificate holders who
4 are neither residents of nor employed in this State does not
5 need to provide to those nonresident certificate holders who
6 are not employed in this State the coverages or services
7 mandated by this Article.

8 (d) Stop-loss insurance is exempt from all Sections of this
9 Article, except this Section and Sections 353a, 354, 357.30,
10 and 370. For purposes of this exemption, stop-loss insurance is
11 further defined as follows:

12 (1) The policy must be issued to and insure an
13 employer, trustee, or other sponsor of the plan, or the
14 plan itself, but not employees, members, or participants.

15 (2) Payments by the insurer must be made to the
16 employer, trustee, or other sponsors of the plan, or the
17 plan itself, but not to the employees, members,
18 participants, or health care providers.

19 (e) A policy issued or delivered in this State to the
20 Department of Healthcare and Family Services (formerly
21 Illinois Department of Public Aid) and providing coverage,
22 under clause (b) of Class 1 or clause (a) of Class 2 as
23 described in Section 4, to persons who are enrolled under
24 Article V of the Illinois Public Aid Code or under the
25 Children's Health Insurance Program Act is exempt from all
26 restrictions, limitations, standards, rules, or regulations
27 respecting benefits imposed by or under authority of this Code,
28 except those specified by subsection (1) of Section 143.
29 Nothing in this subsection, however, affects the total medical
30 services available to persons eligible for medical assistance
31 under the Illinois Public Aid Code.

32 (Source: P.A. 92-370, eff. 8-15-01.)

33 (215 ILCS 5/356b) (from Ch. 73, par. 968b)

34 Sec. 356b. (a) This Section applies to the hospital and
35 medical expense provisions of an accident or health insurance

1 policy.

2 (b) If a policy provides that coverage of a dependent
3 person terminates upon attainment of the limiting age for
4 dependent persons specified in the policy, the attainment of
5 such limiting age does not operate to terminate the hospital
6 and medical coverage of a person who, because of a handicapped
7 condition that occurred before attainment of the limiting age,
8 is incapable of self-sustaining employment and is dependent on
9 his or her parents or other care providers for lifetime care
10 and supervision.

11 (c) For purposes of subsection (b), "dependent on other
12 care providers" is defined as requiring a Community Integrated
13 Living Arrangement, group home, supervised apartment, or other
14 residential services licensed or certified by the Department of
15 Human Services (as successor to the Department of Mental Health
16 and Developmental Disabilities), the Department of Public
17 Health, or the Department of Healthcare and Family Services
18 (formerly Department of Public Aid).

19 (d) The insurer may inquire of the policyholder 2 months
20 prior to attainment by a dependent of the limiting age set
21 forth in the policy, or at any reasonable time thereafter,
22 whether such dependent is in fact a disabled and dependent
23 person and, in the absence of proof submitted within 60 days of
24 such inquiry that such dependent is a disabled and dependent
25 person may terminate coverage of such person at or after
26 attainment of the limiting age. In the absence of such inquiry,
27 coverage of any disabled and dependent person shall continue
28 through the term of such policy or any extension or renewal
29 thereof.

30 (e) This amendatory Act of 1969 is applicable to policies
31 issued or renewed more than 60 days after the effective date of
32 this amendatory Act of 1969.

33 (Source: P.A. 88-309; 89-507, eff. 7-1-97.)

34 (215 ILCS 5/356r)

35 Sec. 356r. Woman's principal health care provider.

1 (a) An individual or group policy of accident and health
2 insurance or a managed care plan amended, delivered, issued, or
3 renewed in this State after November 14, 1996 that requires an
4 insured or enrollee to designate an individual to coordinate
5 care or to control access to health care services shall also
6 permit a female insured or enrollee to designate a
7 participating woman's principal health care provider, and the
8 insurer or managed care plan shall provide the following
9 written notice to all female insureds or enrollees no later
10 than 120 days after the effective date of this amendatory Act
11 of 1998; to all new enrollees at the time of enrollment; and
12 thereafter to all existing enrollees at least annually, as a
13 part of a regular publication or informational mailing:

14 "NOTICE TO ALL FEMALE PLAN MEMBERS:

15 YOUR RIGHT TO SELECT A WOMAN'S PRINCIPAL
16 HEALTH CARE PROVIDER.

17 Illinois law allows you to select "a woman's principal
18 health care provider" in addition to your selection of a
19 primary care physician. A woman's principal health care
20 provider is a physician licensed to practice medicine in
21 all its branches specializing in obstetrics or gynecology
22 or specializing in family practice. A woman's principal
23 health care provider may be seen for care without referrals
24 from your primary care physician. If you have not already
25 selected a woman's principal health care provider, you may
26 do so now or at any other time. You are not required to
27 have or to select a woman's principal health care provider.

28 Your woman's principal health care provider must be a
29 part of your plan. You may get the list of participating
30 obstetricians, gynecologists, and family practice
31 specialists from your employer's employee benefits
32 coordinator, or for your own copy of the current list, you
33 may call [insert plan's toll free number]. The list will be
34 sent to you within 10 days after your call. To designate a
35 woman's principal health care provider from the list, call
36 [insert plan's toll free number] and tell our staff the

1 name of the physician you have selected.".

2 If the insurer or managed care plan exercises the option set
3 forth in subsection (a-5), the notice shall also state:

4 "Your plan requires that your primary care physician
5 and your woman's principal health care provider have a
6 referral arrangement with one another. If the woman's
7 principal health care provider that you select does not
8 have a referral arrangement with your primary care
9 physician, you will have to select a new primary care
10 physician who has a referral arrangement with your woman's
11 principal health care provider or you may select a woman's
12 principal health care provider who has a referral
13 arrangement with your primary care physician. The list of
14 woman's principal health care providers will also have the
15 names of the primary care physicians and their referral
16 arrangements.".

17 No later than 120 days after the effective date of this
18 amendatory Act of 1998, the insurer or managed care plan shall
19 provide each employer who has a policy of insurance or a
20 managed care plan with the insurer or managed care plan with a
21 list of physicians licensed to practice medicine in all its
22 branches specializing in obstetrics or gynecology or
23 specializing in family practice who have contracted with the
24 plan. At the time of enrollment and thereafter within 10 days
25 after a request by an insured or enrollee, the insurer or
26 managed care plan also shall provide this list directly to the
27 insured or enrollee. The list shall include each physician's
28 address, telephone number, and specialty. No insurer or plan
29 formal or informal policy may restrict a female insured's or
30 enrollee's right to designate a woman's principal health care
31 provider, except as set forth in subsection (a-5). If the
32 female enrollee is an enrollee of a managed care plan under
33 contract with the Department of Healthcare and Family Services
34 ~~Public Aid~~, the physician chosen by the enrollee as her woman's
35 principal health care provider must be a Medicaid-enrolled
36 provider. This requirement does not require a female insured or

1 enrollee to make a selection of a woman's principal health care
2 provider. The female insured or enrollee may designate a
3 physician licensed to practice medicine in all its branches
4 specializing in family practice as her woman's principal health
5 care provider.

6 (a-5) The insured or enrollee may be required by the
7 insurer or managed care plan to select a woman's principal
8 health care provider who has a referral arrangement with the
9 insured's or enrollee's individual who coordinates care or
10 controls access to health care services if such referral
11 arrangement exists or to select a new individual to coordinate
12 care or to control access to health care services who has a
13 referral arrangement with the woman's principal health care
14 provider chosen by the insured or enrollee, if such referral
15 arrangement exists. If an insurer or a managed care plan
16 requires an insured or enrollee to select a new physician under
17 this subsection (a-5), the insurer or managed care plan must
18 provide the insured or enrollee with both options to select a
19 new physician provided in this subsection (a-5).

20 Notwithstanding a plan's restrictions of the frequency or
21 timing of making designations of primary care providers, a
22 female enrollee or insured who is subject to the selection
23 requirements of this subsection, may, at any time, effect a
24 change in primary care physicians in order to make a selection
25 of a woman's principal health care provider.

26 (a-6) If an insurer or managed care plan exercises the
27 option in subsection (a-5), the list to be provided under
28 subsection (a) shall identify the referral arrangements that
29 exist between the individual who coordinates care or controls
30 access to health care services and the woman's principal health
31 care provider in order to assist the female insured or enrollee
32 to make a selection within the insurer's or managed care plan's
33 requirement.

34 (b) If a female insured or enrollee has designated a
35 woman's principal health care provider, then the insured or
36 enrollee must be given direct access to the woman's principal

1 health care provider for services covered by the policy or plan
2 without the need for a referral or prior approval. Nothing
3 shall prohibit the insurer or managed care plan from requiring
4 prior authorization or approval from either a primary care
5 provider or the woman's principal health care provider for
6 referrals for additional care or services.

7 (c) For the purposes of this Section the following terms
8 are defined:

9 (1) "Woman's principal health care provider" means a
10 physician licensed to practice medicine in all of its
11 branches specializing in obstetrics or gynecology or
12 specializing in family practice.

13 (2) "Managed care entity" means any entity including a
14 licensed insurance company, hospital or medical service
15 plan, health maintenance organization, limited health
16 service organization, preferred provider organization,
17 third party administrator, an employer or employee
18 organization, or any person or entity that establishes,
19 operates, or maintains a network of participating
20 providers.

21 (3) "Managed care plan" means a plan operated by a
22 managed care entity that provides for the financing of
23 health care services to persons enrolled in the plan
24 through:

25 (A) organizational arrangements for ongoing
26 quality assurance, utilization review programs, or
27 dispute resolution; or

28 (B) financial incentives for persons enrolled in
29 the plan to use the participating providers and
30 procedures covered by the plan.

31 (4) "Participating provider" means a physician who has
32 contracted with an insurer or managed care plan to provide
33 services to insureds or enrollees as defined by the
34 contract.

35 (d) The original provisions of this Section became law on
36 July 17, 1996 and took effect November 14, 1996, which is 120

1 days after becoming law.

2 (Source: P.A. 89-514; 90-14, eff. 7-1-97; 90-741, eff.
3 8-13-98.)

4 (215 ILCS 5/367b) (from Ch. 73, par. 979b)

5 Sec. 367b. (a) This Section applies to the hospital and
6 medical expense provisions of a group accident or health
7 insurance policy.

8 (b) If a policy provides that coverage of a dependent of an
9 employee or other member of the covered group terminates upon
10 attainment of the limiting age for dependent persons specified
11 in the policy, the attainment of such limiting age does not
12 operate to terminate the hospital and medical coverage of a
13 person who, because of a handicapped condition that occurred
14 before attainment of the limiting age, is incapable of
15 self-sustaining employment and is dependent on his or her
16 parents or other care providers for lifetime care and
17 supervision.

18 (c) For purposes of subsection (b), "dependent on other
19 care providers" is defined as requiring a Community Integrated
20 Living Arrangement, group home, supervised apartment, or other
21 residential services licensed or certified by the Department of
22 Human Services (as successor to the Department of Mental Health
23 and Developmental Disabilities), the Department of Public
24 Health, or the Department of Healthcare and Family Services
25 (formerly Department of Public Aid).

26 (d) The insurer may inquire of the person insured 2 months
27 prior to attainment by a dependent of the limiting age set
28 forth in the policy, or at any reasonable time thereafter,
29 whether such dependent is in fact a disabled and dependent
30 person and, in the absence of proof submitted within 31 days of
31 such inquiry that such dependent is a disabled and dependent
32 person may terminate coverage of such person at or after
33 attainment of the limiting age. In the absence of such inquiry,
34 coverage of any disabled and dependent person shall continue
35 through the term of such policy or any extension or renewal.

1 (e) This amendatory Act of 1969 is applicable to policies
2 issued or renewed more than 60 days after the effective date of
3 this amendatory Act of 1969.

4 (Source: P.A. 88-309; 89-507, eff. 7-1-97.)

5 (215 ILCS 5/512-3) (from Ch. 73, par. 1065.59-3)

6 Sec. 512-3. Definitions. For the purposes of this Article,
7 unless the context otherwise requires, the terms defined in
8 this Article have the meanings ascribed to them herein:

9 (a) "Third party prescription program" or "program" means
10 any system of providing for the reimbursement of pharmaceutical
11 services and prescription drug products offered or operated in
12 this State under a contractual arrangement or agreement between
13 a provider of such services and another party who is not the
14 consumer of those services and products. Such programs may
15 include, but need not be limited to, employee benefit plans
16 whereby a consumer receives prescription drugs or other
17 pharmaceutical services and those services are paid for by an
18 agent of the employer or others.

19 (b) "Third party program administrator" or "administrator"
20 means any person, partnership or corporation who issues or
21 causes to be issued any payment or reimbursement to a provider
22 for services rendered pursuant to a third party prescription
23 program, but does not include the Director of Healthcare and
24 Family Services ~~Public Aid~~ or any agent authorized by the
25 Director to reimburse a provider of services rendered pursuant
26 to a program of which the Department of Healthcare and Family
27 Services ~~Public Aid~~ is the third party.

28 (Source: P.A. 90-372, eff. 7-1-98.)

29 Section 9295. The Comprehensive Health Insurance Plan Act
30 is amended by changing Section 8 as follows:

31 (215 ILCS 105/8) (from Ch. 73, par. 1308)

32 Sec. 8. Minimum benefits.

33 a. Availability. The Plan shall offer in an annually

1 renewable policy major medical expense coverage to every
2 eligible person who is not eligible for Medicare. Major medical
3 expense coverage offered by the Plan shall pay an eligible
4 person's covered expenses, subject to limit on the deductible
5 and coinsurance payments authorized under paragraph (4) of
6 subsection d of this Section, up to a lifetime benefit limit of
7 \$1,000,000 per covered individual. The maximum limit under this
8 subsection shall not be altered by the Board, and no actuarial
9 equivalent benefit may be substituted by the Board. Any person
10 who otherwise would qualify for coverage under the Plan, but is
11 excluded because he or she is eligible for Medicare, shall be
12 eligible for any separate Medicare supplement policy or
13 policies which the Board may offer.

14 b. Outline of benefits. Covered expenses shall be limited
15 to the usual and customary charge, including negotiated fees,
16 in the locality for the following services and articles when
17 prescribed by a physician and determined by the Plan to be
18 medically necessary for the following areas of services,
19 subject to such separate deductibles, co-payments, exclusions,
20 and other limitations on benefits as the Board shall establish
21 and approve, and the other provisions of this Section:

22 (1) Hospital services, except that any services
23 provided by a hospital that is located more than 75 miles
24 outside the State of Illinois shall be covered only for a
25 maximum of 45 days in any calendar year. With respect to
26 covered expenses incurred during any calendar year ending
27 on or after December 31, 1999, inpatient hospitalization of
28 an eligible person for the treatment of mental illness at a
29 hospital located within the State of Illinois shall be
30 subject to the same terms and conditions as for any other
31 illness.

32 (2) Professional services for the diagnosis or
33 treatment of injuries, illnesses or conditions, other than
34 dental and mental and nervous disorders as described in
35 paragraph (17), which are rendered by a physician, or by
36 other licensed professionals at the physician's direction.

1 This includes reconstruction of the breast on which a
2 mastectomy was performed; surgery and reconstruction of
3 the other breast to produce a symmetrical appearance; and
4 prostheses and treatment of physical complications at all
5 stages of the mastectomy, including lymphedemas.

6 (2.5) Professional services provided by a physician to
7 children under the age of 16 years for physical
8 examinations and age appropriate immunizations ordered by
9 a physician licensed to practice medicine in all its
10 branches.

11 (3) (Blank).

12 (4) Outpatient prescription drugs that by law require a
13 prescription written by a physician licensed to practice
14 medicine in all its branches subject to such separate
15 deductible, copayment, and other limitations or
16 restrictions as the Board shall approve, including the use
17 of a prescription drug card or any other program, or both.

18 (5) Skilled nursing services of a licensed skilled
19 nursing facility for not more than 120 days during a policy
20 year.

21 (6) Services of a home health agency in accord with a
22 home health care plan, up to a maximum of 270 visits per
23 year.

24 (7) Services of a licensed hospice for not more than
25 180 days during a policy year.

26 (8) Use of radium or other radioactive materials.

27 (9) Oxygen.

28 (10) Anesthetics.

29 (11) Orthoses and prostheses other than dental.

30 (12) Rental or purchase in accordance with Board
31 policies or procedures of durable medical equipment, other
32 than eyeglasses or hearing aids, for which there is no
33 personal use in the absence of the condition for which it
34 is prescribed.

35 (13) Diagnostic x-rays and laboratory tests.

36 (14) Oral surgery (i) for excision of partially or

1 completely unerupted impacted teeth when not performed in
2 connection with the routine extraction or repair of teeth;
3 (ii) for excision of tumors or cysts of the jaws, cheeks,
4 lips, tongue, and roof and floor of the mouth; (iii)
5 required for correction of cleft lip and palate and other
6 craniofacial and maxillofacial birth defects; or (iv) for
7 treatment of injuries to natural teeth or a fractured jaw
8 due to an accident.

9 (15) Physical, speech, and functional occupational
10 therapy as medically necessary and provided by appropriate
11 licensed professionals.

12 (16) Emergency and other medically necessary
13 transportation provided by a licensed ambulance service to
14 the nearest health care facility qualified to treat a
15 covered illness, injury, or condition, subject to the
16 provisions of the Emergency Medical Systems (EMS) Act.

17 (17) Outpatient services for diagnosis and treatment
18 of mental and nervous disorders provided that a covered
19 person shall be required to make a copayment not to exceed
20 50% and that the Plan's payment shall not exceed such
21 amounts as are established by the Board.

22 (18) Human organ or tissue transplants specified by the
23 Board that are performed at a hospital designated by the
24 Board as a participating transplant center for that
25 specific organ or tissue transplant.

26 (19) Naprapathic services, as appropriate, provided by
27 a licensed naprapathic practitioner.

28 c. Exclusions. Covered expenses of the Plan shall not
29 include the following:

30 (1) Any charge for treatment for cosmetic purposes
31 other than for reconstructive surgery when the service is
32 incidental to or follows surgery resulting from injury,
33 sickness or other diseases of the involved part or surgery
34 for the repair or treatment of a congenital bodily defect
35 to restore normal bodily functions.

36 (2) Any charge for care that is primarily for rest,

1 custodial, educational, or domiciliary purposes.

2 (3) Any charge for services in a private room to the
3 extent it is in excess of the institution's charge for its
4 most common semiprivate room, unless a private room is
5 prescribed as medically necessary by a physician.

6 (4) That part of any charge for room and board or for
7 services rendered or articles prescribed by a physician,
8 dentist, or other health care personnel that exceeds the
9 reasonable and customary charge in the locality or for any
10 services or supplies not medically necessary for the
11 diagnosed injury or illness.

12 (5) Any charge for services or articles the provision
13 of which is not within the scope of licensure of the
14 institution or individual providing the services or
15 articles.

16 (6) Any expense incurred prior to the effective date of
17 coverage by the Plan for the person on whose behalf the
18 expense is incurred.

19 (7) Dental care, dental surgery, dental treatment, any
20 other dental procedure involving the teeth or
21 periodontium, or any dental appliances, including crowns,
22 bridges, implants, or partial or complete dentures, except
23 as specifically provided in paragraph (14) of subsection b
24 of this Section.

25 (8) Eyeglasses, contact lenses, hearing aids or their
26 fitting.

27 (9) Illness or injury due to acts of war.

28 (10) Services of blood donors and any fee for failure
29 to replace the first 3 pints of blood provided to a covered
30 person each policy year.

31 (11) Personal supplies or services provided by a
32 hospital or nursing home, or any other nonmedical or
33 nonprescribed supply or service.

34 (12) Routine maternity charges for a pregnancy, except
35 where added as optional coverage with payment of an
36 additional premium for pregnancy resulting from conception

1 occurring after the effective date of the optional
2 coverage.

3 (13) (Blank).

4 (14) Any expense or charge for services, drugs, or
5 supplies that are: (i) not provided in accord with
6 generally accepted standards of current medical practice;
7 (ii) for procedures, treatments, equipment, transplants,
8 or implants, any of which are investigational,
9 experimental, or for research purposes; (iii)
10 investigative and not proven safe and effective; or (iv)
11 for, or resulting from, a gender transformation operation.

12 (15) Any expense or charge for routine physical
13 examinations or tests except as provided in item (2.5) of
14 subsection b of this Section.

15 (16) Any expense for which a charge is not made in the
16 absence of insurance or for which there is no legal
17 obligation on the part of the patient to pay.

18 (17) Any expense incurred for benefits provided under
19 the laws of the United States and this State, including
20 Medicare, Medicaid, and other medical assistance, maternal
21 and child health services and any other program that is
22 administered or funded by the Department of Human Services,
23 Department of Healthcare and Family Services ~~Public Aid~~, or
24 Department of Public Health, military service-connected
25 disability payments, medical services provided for members
26 of the armed forces and their dependents or employees of
27 the armed forces of the United States, and medical services
28 financed on behalf of all citizens by the United States.

29 (18) Any expense or charge for in vitro fertilization,
30 artificial insemination, or any other artificial means
31 used to cause pregnancy.

32 (19) Any expense or charge for oral contraceptives used
33 for birth control or any other temporary birth control
34 measures.

35 (20) Any expense or charge for sterilization or
36 sterilization reversals.

1 (21) Any expense or charge for weight loss programs,
2 exercise equipment, or treatment of obesity, except when
3 certified by a physician as morbid obesity (at least 2
4 times normal body weight).

5 (22) Any expense or charge for acupuncture treatment
6 unless used as an anesthetic agent for a covered surgery.

7 (23) Any expense or charge for or related to organ or
8 tissue transplants other than those performed at a hospital
9 with a Board approved organ transplant program that has
10 been designated by the Board as a preferred or exclusive
11 provider organization for that specific organ or tissue
12 transplant.

13 (24) Any expense or charge for procedures, treatments,
14 equipment, or services that are provided in special
15 settings for research purposes or in a controlled
16 environment, are being studied for safety, efficiency, and
17 effectiveness, and are awaiting endorsement by the
18 appropriate national medical speciality college for
19 general use within the medical community.

20 d. Deductibles and coinsurance.

21 The Plan coverage defined in Section 6 shall provide for a
22 choice of deductibles per individual as authorized by the
23 Board. If 2 individual members of the same family household,
24 who are both covered persons under the Plan, satisfy the same
25 applicable deductibles, no other member of that family who is
26 also a covered person under the Plan shall be required to meet
27 any deductibles for the balance of that calendar year. The
28 deductibles must be applied first to the authorized amount of
29 covered expenses incurred by the covered person. A mandatory
30 coinsurance requirement shall be imposed at the rate authorized
31 by the Board in excess of the mandatory deductible, the
32 coinsurance in the aggregate not to exceed such amounts as are
33 authorized by the Board per annum. At its discretion the Board
34 may, however, offer catastrophic coverages or other policies
35 that provide for larger deductibles with or without coinsurance
36 requirements. The deductibles and coinsurance factors may be

1 adjusted annually according to the Medical Component of the
2 Consumer Price Index.

3 e. Scope of coverage.

4 (1) In approving any of the benefit plans to be offered
5 by the Plan, the Board shall establish such benefit levels,
6 deductibles, coinsurance factors, exclusions, and
7 limitations as it may deem appropriate and that it believes
8 to be generally reflective of and commensurate with health
9 insurance coverage that is provided in the individual
10 market in this State.

11 (2) The benefit plans approved by the Board may also
12 provide for and employ various cost containment measures
13 and other requirements including, but not limited to,
14 preadmission certification, prior approval, second
15 surgical opinions, concurrent utilization review programs,
16 individual case management, preferred provider
17 organizations, health maintenance organizations, and other
18 cost effective arrangements for paying for covered
19 expenses.

20 f. Preexisting conditions.

21 (1) Except for federally eligible individuals
22 qualifying for Plan coverage under Section 15 of this Act
23 or eligible persons who qualify for the waiver authorized
24 in paragraph (3) of this subsection, plan coverage shall
25 exclude charges or expenses incurred during the first 6
26 months following the effective date of coverage as to any
27 condition for which medical advice, care or treatment was
28 recommended or received during the 6 month period
29 immediately preceding the effective date of coverage.

30 (2) (Blank).

31 (3) Waiver: The preexisting condition exclusions as
32 set forth in paragraph (1) of this subsection shall be
33 waived to the extent to which the eligible person (a) has
34 satisfied similar exclusions under any prior individual
35 health insurance policy that was involuntarily terminated
36 because of the insolvency of the issuer of the policy and

1 (b) has applied for Plan coverage within 90 days following
2 the involuntary termination of that individual health
3 insurance coverage.

4 g. Other sources primary; nonduplication of benefits.

5 (1) The Plan shall be the last payor of benefits
6 whenever any other benefit or source of third party payment
7 is available. Subject to the provisions of subsection e of
8 Section 7, benefits otherwise payable under Plan coverage
9 shall be reduced by all amounts paid or payable by Medicare
10 or any other government program or through any health
11 insurance coverage or group health plan, whether by
12 insurance, reimbursement, or otherwise, or through any
13 third party liability, settlement, judgment, or award,
14 regardless of the date of the settlement, judgment, or
15 award, whether the settlement, judgment, or award is in the
16 form of a contract, agreement, or trust on behalf of a
17 minor or otherwise and whether the settlement, judgment, or
18 award is payable to the covered person, his or her
19 dependent, estate, personal representative, or guardian in
20 a lump sum or over time, and by all hospital or medical
21 expense benefits paid or payable under any worker's
22 compensation coverage, automobile medical payment, or
23 liability insurance, whether provided on the basis of fault
24 or nonfault, and by any hospital or medical benefits paid
25 or payable under or provided pursuant to any State or
26 federal law or program.

27 (2) The Plan shall have a cause of action against any
28 covered person or any other person or entity for the
29 recovery of any amount paid to the extent the amount was
30 for treatment, services, or supplies not covered in this
31 Section or in excess of benefits as set forth in this
32 Section.

33 (3) Whenever benefits are due from the Plan because of
34 sickness or an injury to a covered person resulting from a
35 third party's wrongful act or negligence and the covered
36 person has recovered or may recover damages from a third

1 party or its insurer, the Plan shall have the right to
2 reduce benefits or to refuse to pay benefits that otherwise
3 may be payable by the amount of damages that the covered
4 person has recovered or may recover regardless of the date
5 of the sickness or injury or the date of any settlement,
6 judgment, or award resulting from that sickness or injury.

7 During the pendency of any action or claim that is
8 brought by or on behalf of a covered person against a third
9 party or its insurer, any benefits that would otherwise be
10 payable except for the provisions of this paragraph (3)
11 shall be paid if payment by or for the third party has not
12 yet been made and the covered person or, if incapable, that
13 person's legal representative agrees in writing to pay back
14 promptly the benefits paid as a result of the sickness or
15 injury to the extent of any future payments made by or for
16 the third party for the sickness or injury. This agreement
17 is to apply whether or not liability for the payments is
18 established or admitted by the third party or whether those
19 payments are itemized.

20 Any amounts due the plan to repay benefits may be
21 deducted from other benefits payable by the Plan after
22 payments by or for the third party are made.

23 (4) Benefits due from the Plan may be reduced or
24 refused as an offset against any amount otherwise
25 recoverable under this Section.

26 h. Right of subrogation; recoveries.

27 (1) Whenever the Plan has paid benefits because of
28 sickness or an injury to any covered person resulting from
29 a third party's wrongful act or negligence, or for which an
30 insurer is liable in accordance with the provisions of any
31 policy of insurance, and the covered person has recovered
32 or may recover damages from a third party that is liable
33 for the damages, the Plan shall have the right to recover
34 the benefits it paid from any amounts that the covered
35 person has received or may receive regardless of the date
36 of the sickness or injury or the date of any settlement,

1 judgment, or award resulting from that sickness or injury.
2 The Plan shall be subrogated to any right of recovery the
3 covered person may have under the terms of any private or
4 public health care coverage or liability coverage,
5 including coverage under the Workers' Compensation Act or
6 the Workers' Occupational Diseases Act, without the
7 necessity of assignment of claim or other authorization to
8 secure the right of recovery. To enforce its subrogation
9 right, the Plan may (i) intervene or join in an action or
10 proceeding brought by the covered person or his personal
11 representative, including his guardian, conservator,
12 estate, dependents, or survivors, against any third party
13 or the third party's insurer that may be liable or (ii)
14 institute and prosecute legal proceedings against any
15 third party or the third party's insurer that may be liable
16 for the sickness or injury in an appropriate court either
17 in the name of the Plan or in the name of the covered
18 person or his personal representative, including his
19 guardian, conservator, estate, dependents, or survivors.

20 (2) If any action or claim is brought by or on behalf
21 of a covered person against a third party or the third
22 party's insurer, the covered person or his personal
23 representative, including his guardian, conservator,
24 estate, dependents, or survivors, shall notify the Plan by
25 personal service or registered mail of the action or claim
26 and of the name of the court in which the action or claim
27 is brought, filing proof thereof in the action or claim.
28 The Plan may, at any time thereafter, join in the action or
29 claim upon its motion so that all orders of court after
30 hearing and judgment shall be made for its protection. No
31 release or settlement of a claim for damages and no
32 satisfaction of judgment in the action shall be valid
33 without the written consent of the Plan to the extent of
34 its interest in the settlement or judgment and of the
35 covered person or his personal representative.

36 (3) In the event that the covered person or his

1 personal representative fails to institute a proceeding
2 against any appropriate third party before the fifth month
3 before the action would be barred, the Plan may, in its own
4 name or in the name of the covered person or personal
5 representative, commence a proceeding against any
6 appropriate third party for the recovery of damages on
7 account of any sickness, injury, or death to the covered
8 person. The covered person shall cooperate in doing what is
9 reasonably necessary to assist the Plan in any recovery and
10 shall not take any action that would prejudice the Plan's
11 right to recovery. The Plan shall pay to the covered person
12 or his personal representative all sums collected from any
13 third party by judgment or otherwise in excess of amounts
14 paid in benefits under the Plan and amounts paid or to be
15 paid as costs, attorneys fees, and reasonable expenses
16 incurred by the Plan in making the collection or enforcing
17 the judgment.

18 (4) In the event that a covered person or his personal
19 representative, including his guardian, conservator,
20 estate, dependents, or survivors, recovers damages from a
21 third party for sickness or injury caused to the covered
22 person, the covered person or the personal representative
23 shall pay to the Plan from the damages recovered the amount
24 of benefits paid or to be paid on behalf of the covered
25 person.

26 (5) When the action or claim is brought by the covered
27 person alone and the covered person incurs a personal
28 liability to pay attorney's fees and costs of litigation,
29 the Plan's claim for reimbursement of the benefits provided
30 to the covered person shall be the full amount of benefits
31 paid to or on behalf of the covered person under this Act
32 less a pro rata share that represents the Plan's reasonable
33 share of attorney's fees paid by the covered person and
34 that portion of the cost of litigation expenses determined
35 by multiplying by the ratio of the full amount of the
36 expenditures to the full amount of the judgement, award, or

1 settlement.

2 (6) In the event of judgment or award in a suit or
3 claim against a third party or insurer, the court shall
4 first order paid from any judgement or award the reasonable
5 litigation expenses incurred in preparation and
6 prosecution of the action or claim, together with
7 reasonable attorney's fees. After payment of those
8 expenses and attorney's fees, the court shall apply out of
9 the balance of the judgment or award an amount sufficient
10 to reimburse the Plan the full amount of benefits paid on
11 behalf of the covered person under this Act, provided the
12 court may reduce and apportion the Plan's portion of the
13 judgement proportionate to the recovery of the covered
14 person. The burden of producing evidence sufficient to
15 support the exercise by the court of its discretion to
16 reduce the amount of a proven charge sought to be enforced
17 against the recovery shall rest with the party seeking the
18 reduction. The court may consider the nature and extent of
19 the injury, economic and non-economic loss, settlement
20 offers, comparative negligence as it applies to the case at
21 hand, hospital costs, physician costs, and all other
22 appropriate costs. The Plan shall pay its pro rata share of
23 the attorney fees based on the Plan's recovery as it
24 compares to the total judgment. Any reimbursement rights of
25 the Plan shall take priority over all other liens and
26 charges existing under the laws of this State with the
27 exception of any attorney liens filed under the Attorneys
28 Lien Act.

29 (7) The Plan may compromise or settle and release any
30 claim for benefits provided under this Act or waive any
31 claims for benefits, in whole or in part, for the
32 convenience of the Plan or if the Plan determines that
33 collection would result in undue hardship upon the covered
34 person.

35 (Source: P.A. 91-639, eff. 8-20-99; 91-735, eff. 6-2-00; 92-2,
36 eff. 5-1-01; 92-630, eff. 7-11-02.)

1 Section 9300. The Children's Health Insurance Program Act
2 is amended by changing Sections 10 and 15 as follows:

3 (215 ILCS 106/10)

4 Sec. 10. Definitions. As used in this Act:

5 "Benchmarking" means health benefits coverage as defined
6 in Section 2103 of the Social Security Act.

7 "Child" means a person under the age of 19.

8 "Department" means the Department of Healthcare and Family
9 Services ~~Public Aid~~.

10 "Medical assistance" means health care benefits provided
11 under Article V of the Illinois Public Aid Code.

12 "Medical visit" means a hospital, dental, physician,
13 optical, or other health care visit where services are provided
14 pursuant to this Act.

15 "Program" means the Children's Health Insurance Program,
16 which includes subsidizing the cost of privately sponsored
17 health insurance and purchasing or providing health care
18 benefits for eligible children.

19 "Resident" means a person who meets the residency
20 requirements as defined in Section 5-3 of the Illinois Public
21 Aid Code.

22 (Source: P.A. 90-736, eff. 8-12-98.)

23 (215 ILCS 106/15)

24 Sec. 15. Operation of the Program. There is hereby created
25 a Children's Health Insurance Program. The Program shall
26 operate subject to appropriation and shall be administered by
27 the Department of Healthcare and Family Services ~~Public Aid~~.

28 The Department shall have the powers and authority granted to
29 the Department under the Illinois Public Aid Code. The
30 Department may contract with a Third Party Administrator or
31 other entities to administer and oversee any portion of this
32 Program.

33 (Source: P.A. 90-736, eff. 8-12-98.)

1 Section 9305. The Health Maintenance Organization Act is
2 amended by changing Sections 2-1, 4-9.1, 4-17, and 6-8 as
3 follows:

4 (215 ILCS 125/2-1) (from Ch. 111 1/2, par. 1403)

5 Sec. 2-1. Certificate of authority - Exception for
6 corporate employee programs - Applications - Material
7 modification of operation.

8 (a) No organization shall establish or operate a Health
9 Maintenance Organization in this State without obtaining a
10 certificate of authority under this Act. No person other than
11 an organization may lawfully establish or operate a Health
12 Maintenance Organization in this State. This Act shall not
13 apply to the establishment and operation of a Health
14 Maintenance Organization exclusively providing or arranging
15 for health care services to employees of a corporate affiliate
16 of such Health Maintenance Organization. This exclusion shall
17 be available only to those Health Maintenance Organizations
18 which require employee contributions which equal less than 50%
19 of the total cost of the health care plan, with the remainder
20 of the cost being paid by the corporate affiliate which is the
21 employer of the participants in the plan. This Act shall not
22 apply to the establishment and operation of a Health
23 Maintenance Organization exclusively providing or arranging
24 health care services under contract with the State to persons
25 committed to the custody of the Illinois Department of
26 Corrections.

27 This Act does not apply to the establishment and operation
28 of managed care community networks that are certified as
29 risk-bearing entities under Section 5-11 of the Illinois Public
30 Aid Code and that contract with the Department of Healthcare
31 and Family Services (formerly Illinois Department of Public
32 Aid) pursuant to that Section.

33 (b) Any organization may apply to the Director for and
34 obtain a certificate of authority to establish and operate a

1 Health Maintenance Organization in compliance with this Act. A
2 foreign corporation may qualify under this Act, subject to its
3 registration to do business in this State as a foreign
4 corporation.

5 (c) Each application for a certificate of authority shall
6 be filed in triplicate and verified by an officer or authorized
7 representative of the applicant, shall be in a form prescribed
8 by the Director, and shall set forth, without limiting what may
9 be required by the Director, the following:

10 (1) A copy of the organizational document;

11 (2) A copy of the bylaws, rules and regulations, or
12 similar document regulating the conduct of the internal
13 affairs of the applicant, which shall include a mechanism
14 to afford the enrollees an opportunity to participate in an
15 advisory capacity in matters of policy and operations;

16 (3) A list of the names, addresses, and official
17 positions of the persons who are to be responsible for the
18 conduct of the affairs of the applicant; including, but not
19 limited to, all members of the board of directors,
20 executive committee, the principal officers, and any
21 person or entity owning or having the right to acquire 10%
22 or more of the voting securities or subordinated debt of
23 the applicant;

24 (4) A statement generally describing the applicant,
25 geographic area to be served, its facilities, personnel and
26 the health care services to be offered;

27 (5) A copy of the form of any contract made or to be
28 made between the applicant and any providers regarding the
29 provision of health care services to enrollees;

30 (6) A copy of the form of any contract made or to be
31 made between the applicant and any person listed in
32 paragraph (3) of this subsection;

33 (7) A copy of the form of any contract made or to be
34 made between the applicant and any person, corporation,
35 partnership or other entity for the performance on the
36 applicant's behalf of any functions including, but not

1 limited to, marketing, administration, enrollment,
2 investment management and subcontracting for the provision
3 of health services to enrollees;

4 (8) A copy of the form of any group contract which is
5 to be issued to employers, unions, trustees, or other
6 organizations and a copy of any form of evidence of
7 coverage to be issued to any enrollee or subscriber and any
8 advertising material;

9 (9) Descriptions of the applicant's procedures for
10 resolving enrollee grievances which must include
11 procedures providing for enrollees participation in the
12 resolution of grievances;

13 (10) A copy of the applicant's most recent financial
14 statements audited by an independent certified public
15 accountant. If the financial affairs of the applicant's
16 parent company are audited by an independent certified
17 public accountant but those of the applicant are not, then
18 a copy of the most recent audited financial statement of
19 the applicant's parent, attached to which shall be
20 consolidating financial statements of the parent including
21 separate unaudited financial statements of the applicant,
22 unless the Director determines that additional or more
23 recent financial information is required for the proper
24 administration of this Act;

25 (11) A copy of the applicant's financial plan,
26 including a three-year projection of anticipated operating
27 results, a statement of the sources of working capital, and
28 any other sources of funding and provisions for
29 contingencies;

30 (12) A description of rate methodology;

31 (13) A description of the proposed method of marketing;

32 (14) A copy of every filing made with the Illinois
33 Secretary of State which relates to the applicant's
34 registered agent or registered office;

35 (15) A description of the complaint procedures to be
36 established and maintained as required under Section 4-6 of

1 this Act;

2 (16) A description, in accordance with regulations
3 promulgated by the Illinois Department of Public Health, of
4 the quality assessment and utilization review procedures
5 to be utilized by the applicant;

6 (17) The fee for filing an application for issuance of
7 a certificate of authority provided in Section 408 of the
8 Illinois Insurance Code, as now or hereafter amended; and

9 (18) Such other information as the Director may
10 reasonably require to make the determinations required by
11 this Act.

12 (Source: P.A. 92-370, eff. 8-15-01.)

13 (215 ILCS 125/4-9.1) (from Ch. 111 1/2, par. 1409.2-1)

14 Sec. 4-9.1. Dependent Coverage Termination.

15 (a) The attainment of a limiting age under a group contract
16 or evidence of coverage which provides that coverage of a
17 dependent person of an enrollee shall terminate upon attainment
18 of the limiting age for dependent persons does not operate to
19 terminate the coverage of a person who, because of a
20 handicapped condition that occurred before attainment of the
21 limiting age, is incapable of self-sustaining employment and is
22 dependent on his or her parents or other care providers for
23 lifetime care and supervision.

24 (b) For purposes of subsection (a), "dependent on other
25 care providers" is defined as requiring a Community Integrated
26 Living Arrangement, group home, supervised apartment, or other
27 residential services licensed or certified by the Department of
28 Human Services (as successor to the Department of Mental Health
29 and Developmental Disabilities), the Department of Public
30 Health, or the Department of Healthcare and Family Services
31 (formerly Department of Public Aid).

32 (c) Proof of such incapacity and dependency shall be
33 furnished to the health maintenance organization by the
34 enrollee within 31 days of a request for the information by the
35 health maintenance organization and subsequently as may be

1 required by the health maintenance organization, but not more
2 frequently than annually. In the absence of proof submitted
3 within 31 days of such inquiry that such dependent is a
4 disabled and dependent person, the health maintenance
5 organization may terminate coverage of such person at or after
6 attainment of the limiting age. In the absence of such inquiry,
7 coverage of any disabled and dependent person shall continue
8 through the term of the group contract or evidence of coverage
9 or any extension or renewal thereof.

10 (Source: P.A. 88-309; 89-507, eff. 7-1-97.)

11 (215 ILCS 125/4-17)

12 Sec. 4-17. Basic outpatient preventive and primary health
13 care services for children. In order to attempt to address the
14 needs of children in Illinois (i) without health care coverage,
15 either through a parent's employment, through medical
16 assistance under the Illinois Public Aid Code, or any other
17 health plan or (ii) who lose medical assistance if and when
18 their parents move from welfare to work and do not find
19 employment that offers health care coverage, a health
20 maintenance organization may undertake to provide or arrange
21 for and to pay for or reimburse the cost of basic outpatient
22 preventive and primary health care services. The Department
23 shall promulgate rules to establish minimum coverage and
24 disclosure requirements. These requirements at a minimum shall
25 include routine physical examinations and immunizations, sick
26 visits, diagnostic x-rays and laboratory services, and
27 emergency outpatient services. Coverage may also include
28 preventive dental services, vision screening and one pair of
29 eyeglasses, prescription drugs, and mental health services.
30 The coverage may include any reasonable co-payments,
31 deductibles, and benefit maximums subject to limitations
32 established by the Director by rule. Coverage shall be limited
33 to children who are 18 years of age or under, who have resided
34 in the State of Illinois for at least 30 days, and who do not
35 qualify for medical assistance under the Illinois Public Aid

1 Code. Any such coverage shall be made available to an adult on
2 behalf of such children and shall not be funded through State
3 appropriations. In counties with populations in excess of
4 3,000,000, the Director shall not approve any arrangement under
5 this Section unless and until an arrangement for at least one
6 health maintenance organization under contract with the
7 Department of Healthcare and Family Services (formerly
8 Illinois Department of Public Aid) for furnishing health
9 services pursuant to Section 5-11 of the Illinois Public Aid
10 Code and for which the requirements of 42 CFR 434.26(a) have
11 been waived is approved.

12 (Source: P.A. 90-376, eff. 8-14-97; 90-655, eff. 7-30-98.)

13 (215 ILCS 125/6-8) (from Ch. 111 1/2, par. 1418.8)

14 Sec. 6-8. Powers and duties of the Association. In addition
15 to the powers and duties enumerated in other Sections of this
16 Article, the Association shall have the powers set forth in
17 this Section.

18 (1) If a domestic organization is an impaired organization,
19 the Association may, subject to any conditions imposed by the
20 Association other than those which impair the contractual
21 obligations of the impaired organization, and approved by the
22 impaired organization and the Director:

23 (a) guarantee or reinsure, or cause to be guaranteed,
24 assumed or reinsured, any or all of the covered health care
25 plan certificates of covered persons of the impaired
26 organization;

27 (b) provide such monies, pledges, notes, guarantees,
28 or other means as are proper to effectuate paragraph (a),
29 and assure payment of the contractual obligations of the
30 impaired organization pending action under paragraph (a);
31 and

32 (c) loan money to the impaired organization.

33 (2) If a domestic, foreign, or alien organization is an
34 insolvent organization, the Association shall, subject to the
35 approval of the Director:

1 (a) guarantee, assume, indemnify or reinsure or cause
2 to be guaranteed, assumed, indemnified or reinsured the
3 covered health care plan benefits of covered persons of the
4 insolvent organization; however, in the event that the
5 Director of Healthcare and Family Services (formerly
6 Director of the Department of Public Aid) assigns
7 individuals that are recipients of public aid from an
8 insolvent organization to another organization, the
9 Director of Healthcare and Family Services ~~the Department~~
10 ~~of Public Aid~~ shall, before fixing the rates to be paid by
11 the Department of Healthcare and Family Services ~~Public Aid~~
12 to the transferee organization on account of such
13 individuals, consult with the Director of the Department of
14 Insurance as to the reasonableness of such rates in light
15 of the health care needs of such individuals and the costs
16 of providing health care services to such individuals;

17 (b) assure payment of the contractual obligations of
18 the insolvent organization to covered persons;

19 (c) make payments to providers of health care, or
20 indemnity payments to covered persons, so as to assure the
21 continued payment of benefits substantially similar to
22 those provided for under covered health care plan
23 certificate issued by the insolvent organization to
24 covered persons; and

25 (d) provide such monies, pledges, notes, guaranties,
26 or other means as are reasonably necessary to discharge
27 such duties.

28 This subsection (2) shall not apply when the Director has
29 determined that the foreign or alien organization's
30 domiciliary jurisdiction or state of entry provides, by
31 statute, protection substantially similar to that provided by
32 this Article for residents of this State and such protection
33 will be provided in a timely manner.

34 (3) There shall be no liability on the part of and no cause
35 of action shall arise against the Association or against any
36 transferee from the Association in connection with the transfer

1 by reinsurance or otherwise of all or any part of an impaired
2 or insolvent organization's business by reason of any action
3 taken or any failure to take any action by the impaired or
4 insolvent organization at any time.

5 (4) If the Association fails to act within a reasonable
6 period of time as provided in subsection (2) of this Section
7 with respect to an insolvent organization, the Director shall
8 have the powers and duties of the Association under this
9 Article with regard to such insolvent organization.

10 (5) The Association or its designated representatives may
11 render assistance and advice to the Director, upon his request,
12 concerning rehabilitation, payment of claims, continuations of
13 coverage, or the performance of other contractual obligations
14 of any impaired or insolvent organization.

15 (6) The Association has standing to appear before any court
16 concerning all matters germane to the powers and duties of the
17 Association, including, but not limited to, proposals for
18 reinsuring or guaranteeing the covered health care plan
19 certificates of the impaired or insolvent organization and the
20 determination of the covered health care plan certificates and
21 contractual obligations.

22 (7) (a) Any person receiving benefits under this Article is
23 deemed to have assigned the rights under the covered health
24 care plan certificates to the Association to the extent of the
25 benefits received because of this Article whether the benefits
26 are payments of contractual obligations or continuation of
27 coverage. The Association may require an assignment to it of
28 such rights by any payee, enrollee or beneficiary as a
29 condition precedent to the receipt of any rights or benefits
30 conferred by this Article upon such person. The Association is
31 subrogated to these rights against the assets of any insolvent
32 organization and against any other party who may be liable to
33 such payee, enrollee or beneficiary.

34 (b) The subrogation rights of the Association under this
35 subsection have the same priority against the assets of the
36 insolvent organization as that possessed by the person entitled

1 to receive benefits under this Article.

2 (8) (a) The contractual obligations of the insolvent
3 organization for which the Association becomes or may become
4 liable are as great as but no greater than the contractual
5 obligations of the insolvent organization would have been in
6 the absence of an insolvency unless such obligations are
7 reduced as permitted by subsection (3), but the aggregate
8 liability of the Association shall not exceed \$300,000 with
9 respect to any one natural person.

10 (b) Furthermore, the Association shall not be required to
11 pay, and shall have no liability to, any provider of health
12 care services to an enrollee:

13 (i) if such provider, or his or its affiliates or
14 members of his immediate family, at any time within the one
15 year prior to the date of the issuance of the first order,
16 by a court of competent jurisdiction, of conservation,
17 rehabilitation or liquidation pertaining to the health
18 maintenance organization:

19 (A) was a securityholder of such organization (but
20 excluding any securityholder holding an equity
21 interest of 5% or less);

22 (B) exercised control over the organization by
23 means such as serving as an officer or director,
24 through a management agreement or as a principal member
25 of a not-for-profit organization;

26 (C) had a representative serving by virtue of his
27 or her official position as a representative of such
28 provider on the board of any entity which exercised
29 control over the organization;

30 (D) received provider payments made by such
31 organization pursuant to a contract which was not a
32 product of arms-length bargaining; or

33 (E) received distributions other than for
34 physician services from a not-for-profit organization
35 on account of such provider's status as a member of
36 such organization.

1 For purposes of this subparagraph (i), the terms
2 "affiliate," "person," "control" and "securityholder"
3 shall have the meanings ascribed to such terms in Section
4 131.1 of the Illinois Insurance Code; or

5 (ii) if and to the extent such a provider has agreed by
6 contract not to seek payment from the enrollee for services
7 provided to such enrollee or if, and to the extent, as a
8 matter of law such provider may not seek payment from the
9 enrollee for services provided to such enrollee.

10 (c) In no event shall the Association be required to pay
11 any provider participating in the insolvent organization any
12 amount for in-plan services rendered by such provider prior to
13 the insolvency of the organization in excess of (1) the amount
14 provided by a capitation contract between a physician provider
15 and the insolvent organization for such services; or (2) the
16 amounts provided by contract between a hospital provider and
17 the Department of Healthcare and Family Services (formerly
18 Department of Public Aid) for similar services to recipients of
19 public aid; or (3) in the event neither (1) nor (2) above is
20 applicable, then the amounts paid under the Medicare area
21 prevailing rate for the area where the services were provided,
22 or if no such rate exists with respect to such services, then
23 80% of the usual and customary rates established by the Health
24 Insurance Association of America. The payments required to be
25 made by the Association under this Section shall constitute
26 full and complete payment for such provider services to the
27 enrollee.

28 (d) The Association shall not be required to pay more than
29 an aggregate of \$300,000 for any organization which is declared
30 to be insolvent prior to July 1, 1987, and such funds shall be
31 distributed first to enrollees who are not public aid
32 recipients pursuant to a plan recommended by the Association
33 and approved by the Director and the court having jurisdiction
34 over the liquidation.

35 (9) The Association may:

36 (a) Enter into such contracts as are necessary or

1 proper to carry out the provisions and purposes of this
2 Article.

3 (b) Sue or be sued, including taking any legal actions
4 necessary or proper for recovery of any unpaid assessments
5 under Section 6-9. The Association shall not be liable for
6 punitive or exemplary damages.

7 (c) Borrow money to effect the purposes of this
8 Article. Any notes or other evidence of indebtedness of the
9 Association not in default are legal investments for
10 domestic organizations and may be carried as admitted
11 assets.

12 (d) Employ or retain such persons as are necessary to
13 handle the financial transactions of the Association, and
14 to perform such other functions as become necessary or
15 proper under this Article.

16 (e) Negotiate and contract with any liquidator,
17 rehabilitator, conservator, or ancillary receiver to carry
18 out the powers and duties of the Association.

19 (f) Take such legal action as may be necessary to avoid
20 payment of improper claims.

21 (g) Exercise, for the purposes of this Article and to
22 the extent approved by the Director, the powers of a
23 domestic organization, but in no case may the Association
24 issue evidence of coverage other than that issued to
25 perform the contractual obligations of the impaired or
26 insolvent organization.

27 (h) Exercise all the rights of the Director under
28 Section 193(4) of the Illinois Insurance Code with respect
29 to covered health care plan certificates after the
30 association becomes obligated by statute.

31 (10) The obligations of the Association under this Article
32 shall not relieve any reinsurer, insurer or other person of its
33 obligations to the insolvent organization (or its conservator,
34 rehabilitator, liquidator or similar official) or its
35 enrollees, including without limitation any reinsurer, insurer
36 or other person liable to the insolvent insurer (or its

1 conservator, rehabilitator, liquidator or similar official) or
2 its enrollees under any contract of reinsurance, any contract
3 providing stop loss coverage or similar coverage or any health
4 care contract. With respect to covered health care plan
5 certificates for which the Association becomes obligated after
6 an entry of an order of liquidation or rehabilitation, the
7 Association may elect to succeed to the rights of the insolvent
8 organization arising after the date of the order of liquidation
9 or rehabilitation under any contract of reinsurance, any
10 contract providing stop loss coverage or similar coverages or
11 any health care service contract to which the insolvent
12 organization was a party, on the terms set forth under such
13 contract, to the extent that such contract provides coverage
14 for health care services provided after the date of the order
15 of liquidation or rehabilitation. As a condition to making this
16 election, the Association must pay premiums for coverage
17 relating to periods after the date of the order of liquidation
18 or rehabilitation.

19 (11) The Association shall be entitled to collect premiums
20 due under or with respect to covered health care certificates
21 for a period from the date on which the domestic, foreign, or
22 alien organization became an insolvent organization until the
23 Association no longer has obligations under subsection (2) of
24 this Section with respect to such certificates. The
25 Association's obligations under subsection (2) of this Section
26 with respect to any covered health care plan certificates shall
27 terminate in the event that all such premiums due under or with
28 respect to such covered health care plan certificates are not
29 paid to the Association (i) within 30 days of the Association's
30 demand therefor, or (ii) in the event that such certificates
31 provide for a longer grace period for payment of premiums after
32 notice of non-payment or demand therefor, within the lesser of
33 (A) the period provided for in such certificates or (B) 60
34 days.

35 (Source: P.A. 90-655, eff. 7-30-98.)

1 Section 9310. The Voluntary Health Services Plans Act is
2 amended by changing Sections 2, 15a, and 25 as follows:

3 (215 ILCS 165/2) (from Ch. 32, par. 596)

4 Sec. 2. For the purposes of this Act, the following terms
5 have the respective meanings set forth in this section, unless
6 different meanings are plainly indicated by the context:

7 (a) "Health Services Plan Corporation" means a corporation
8 organized under the terms of this Act for the purpose of
9 establishing and operating a voluntary health services plan and
10 providing other medically related services.

11 (b) "Voluntary health services plan" means either a plan or
12 system under which medical, hospital, nursing and relating
13 health services may be rendered to a subscriber or beneficiary
14 at the expense of a health services plan corporation, or any
15 contractual arrangement to provide, either directly or through
16 arrangements with others, dental care services to subscribers
17 and beneficiaries.

18 (c) "Subscriber" means a natural person to whom a
19 subscription certificate has been issued by a health services
20 plan corporation. Persons eligible under Section 5-2 of the
21 Illinois Public Aid Code may be subscribers if a written
22 agreement exists, as specified in Section 25 of this Act,
23 between the Health Services Plan Corporation and the Department
24 of Healthcare and Family Services ~~Public Aid~~. A subscription
25 certificate may be issued to such persons at no cost.

26 (d) "Beneficiary" means a person designated in a
27 subscription certificate as one entitled to receive health
28 services.

29 (e) "Health services" means those services ordinarily
30 rendered by physicians licensed in Illinois to practice
31 medicine in all of its branches, by podiatrists licensed in
32 Illinois to practice podiatric medicine, by dentists and dental
33 surgeons licensed to practice in Illinois, by nurses registered
34 in Illinois, by dental hygienists licensed to practice in
35 Illinois, and by assistants and technicians acting under

1 professional supervision; it likewise means hospital services
2 as usually and customarily rendered in Illinois, and the
3 compounding and dispensing of drugs and medicines by
4 pharmacists and assistant pharmacists registered in Illinois.

5 (f) "Subscription certificate" means a certificate issued
6 to a subscriber by a health services plan corporation, setting
7 forth the terms and conditions upon which health services shall
8 be rendered to a subscriber or a beneficiary.

9 (g) "Physician rendering service for a plan" means a
10 physician licensed in Illinois to practice medicine in all of
11 its branches who has undertaken or agreed, upon terms and
12 conditions acceptable both to himself and to the health
13 services plan corporation involved, to furnish medical service
14 to the plan's subscribers and beneficiaries.

15 (h) "Dentist or dental surgeon rendering service for a
16 plan" means a dentist or dental surgeon licensed in Illinois to
17 practice dentistry or dental surgery who has undertaken or
18 agreed, upon terms and conditions acceptable both to himself
19 and to the health services plan corporation involved, to
20 furnish dental or dental surgical services to the plan's
21 subscribers and beneficiaries.

22 (i) "Director" means the Director of Insurance of the State
23 of Illinois.

24 (j) "Person" means any of the following: a natural person,
25 corporation, partnership or unincorporated association.

26 (k) "Podiatrist or podiatric surgeon rendering service for
27 a plan" means any podiatrist or podiatric surgeon licensed in
28 Illinois to practice podiatry, who has undertaken or agreed,
29 upon terms and conditions acceptable both to himself and to the
30 health services plan corporation involved, to furnish
31 podiatric or podiatric surgical services to the plan's
32 subscribers and beneficiaries.

33 (Source: P.A. 83-254.)

34 (215 ILCS 165/15a) (from Ch. 32, par. 609a)

35 Sec. 15a. Dependent Coverage Termination.

1 (a) The attainment of a limiting age under a voluntary
2 health services plan which provides that coverage of a
3 dependent of a subscriber terminates upon attainment of the
4 limiting age for dependent persons specified in the
5 subscription certificate does not operate to terminate the
6 coverage of a person who, because of a handicapped condition
7 that occurred before attainment of the limiting age, is
8 incapable of self-sustaining employment and is dependent on his
9 or her parents or other care providers for lifetime care and
10 supervision.

11 (b) For purposes of subsection (a), "dependent on other
12 care providers" is defined as requiring a Community Integrated
13 Living Arrangement, group home, supervised apartment, or other
14 residential services licensed or certified by the Department of
15 Human Services (as successor to the Department of Mental Health
16 and Developmental Disabilities), the Department of Public
17 Health, or the Department of Healthcare and Family Services
18 (formerly Department of Public Aid).

19 (c) The corporation may require, at reasonable intervals
20 from the date of the first claim filed on behalf of the
21 disabled and dependent person or from the date the corporation
22 receives notice of a covered person's disability and
23 dependency, proof of the person's disability and dependency.

24 (d) This amendatory Act of 1969 is applicable to
25 subscription certificates issued or renewed after October 27,
26 1969.

27 (Source: P.A. 88-309; 89-507, eff. 7-1-97.)

28 (215 ILCS 165/25) (from Ch. 32, par. 619)

29 Sec. 25. A health services plan corporation may receive and
30 accept from governmental or private agencies or from other
31 persons as defined in this Act, payments covering all or part
32 of the cost of subscriptions to provide health services for
33 needy and other individuals. However, all contracts for health
34 services concerning persons other than recipients of public aid
35 shall be between the corporation and the person to receive such

1 services. No payments shall be made by the Department of
2 Healthcare and Family Services ~~Public Aid~~ to any Health
3 Services Plan Corporation except where the payment is made for
4 a covered service included in the Medical Assistance Program at
5 the rate established by the Department of Healthcare and Family
6 Services ~~Public Aid~~, and where the service was rendered to a
7 public aid recipient, and where there was in full force and
8 effect, at the time the service was rendered, a written
9 agreement governing such provision of services between such
10 Health Services Plan Corporation and the Department.

11 (Source: P.A. 81-1203.)

12 Section 9315. The Public Utilities Act is amended by
13 changing Section 13-301.1 as follows:

14 (220 ILCS 5/13-301.1) (from Ch. 111 2/3, par. 13-301.1)

15 (Section scheduled to be repealed on July 1, 2007)

16 Sec. 13-301.1. Universal Telephone Service Assistance
17 Program.

18 (a) The Commission shall by rule or regulation establish a
19 Universal Telephone Service Assistance Program for low income
20 residential customers. The program shall provide for a
21 reduction of access line charges, a reduction of connection
22 charges, or any other alternative to increase accessibility to
23 telephone service that the Commission deems advisable subject
24 to the availability of funds for the program as provided in
25 subsection (d). The Commission shall establish eligibility
26 requirements for benefits under the program.

27 (b) The Commission shall adopt rules providing for enhanced
28 enrollment for eligible consumers to receive lifeline service.
29 Enhanced enrollment may include, but is not limited to, joint
30 marketing, joint application, or joint processing with the
31 Low-Income Home Energy Assistance Program, the Medicaid
32 Program, and the Food Stamp Program. The Department of Human
33 Services, the Department of Healthcare and Family Services
34 ~~Public Aid~~, and the Department of Commerce and Economic

1 Opportunity ~~Community Affairs~~, upon request of the Commission,
2 shall assist in the adoption and implementation of those rules.
3 The Commission and the Department of Human Services, the
4 Department of Healthcare and Family Services ~~Public Aid~~, and
5 the Department of Commerce and Economic Opportunity ~~Community~~
6 ~~Affairs~~ may enter into memoranda of understanding establishing
7 the respective duties of the Commission and the Departments in
8 relation to enhanced enrollment.

9 (c) In this Section, "lifeline service" means a retail
10 local service offering described by 47 C.F.R. Section
11 54.401(a), as amended.

12 (d) The Commission shall require by rule or regulation that
13 each telecommunications carrier providing local exchange
14 telecommunications services notify its customers that if the
15 customer wishes to participate in the funding of the Universal
16 Telephone Service Assistance Program he may do so by electing
17 to contribute, on a monthly basis, a fixed amount that will be
18 included in the customer's monthly bill. The customer may cease
19 contributing at any time upon providing notice to the
20 telecommunications carrier providing local exchange
21 telecommunications services. The notice shall state that any
22 contribution made will not reduce the customer's bill for
23 telecommunications services. Failure to remit the amount of
24 increased payment will reduce the contribution accordingly.
25 The Commission shall specify the monthly fixed amount or
26 amounts that customers wishing to contribute to the funding of
27 the Universal Telephone Service Assistance Program may choose
28 from in making their contributions. Every telecommunications
29 carrier providing local exchange telecommunications services
30 shall remit the amounts contributed in accordance with the
31 terms of the Universal Telephone Service Assistance Program.

32 (Source: P.A. 92-22, eff. 6-30-01; revised 9-28-05.)

33 Section 9320. The Illinois Dental Practice Act is amended
34 by changing Sections 23 and 23a as follows:

1 (225 ILCS 25/23) (from Ch. 111, par. 2323)

2 (Section scheduled to be repealed on January 1, 2016)

3 Sec. 23. Refusal, revocation or suspension of dental
4 licenses. The Department may refuse to issue or renew, or may
5 revoke, suspend, place on probation, reprimand or take other
6 disciplinary action as the Department may deem proper,
7 including fines not to exceed \$10,000 per violation, with
8 regard to any license for any one or any combination of the
9 following causes:

10 1. Fraud in procuring the license.

11 2. Habitual intoxication or addiction to the use of drugs.

12 3. Wilful or repeated violations of the rules of the
13 Department of Public Health or Department of Nuclear Safety.

14 4. Acceptance of a fee for service as a witness, without
15 the knowledge of the court, in addition to the fee allowed by
16 the court.

17 5. Division of fees or agreeing to split or divide the fees
18 received for dental services with any person for bringing or
19 referring a patient, except in regard to referral services as
20 provided for under Section 45, or assisting in the care or
21 treatment of a patient, without the knowledge of the patient or
22 his legal representative.

23 6. Employing, procuring, inducing, aiding or abetting a
24 person not licensed or registered as a dentist to engage in the
25 practice of dentistry. The person practiced upon is not an
26 accomplice, employer, procurer, inducer, aider, or abetter
27 within the meaning of this Act.

28 7. Making any misrepresentations or false promises,
29 directly or indirectly, to influence, persuade or induce dental
30 patronage.

31 8. Professional connection or association with or lending
32 his name to another for the illegal practice of dentistry by
33 another, or professional connection or association with any
34 person, firm or corporation holding himself, herself,
35 themselves, or itself out in any manner contrary to this Act.

36 9. Obtaining or seeking to obtain practice, money, or any

1 other things of value by false or fraudulent representations,
2 but not limited to, engaging in such fraudulent practice to
3 defraud the medical assistance program of the Department of
4 Healthcare and Family Services (formerly Department of Public
5 Aid).

6 10. Practicing under a name other than his or her own.

7 11. Engaging in dishonorable, unethical, or unprofessional
8 conduct of a character likely to deceive, defraud, or harm the
9 public.

10 12. Conviction in this or another State of any crime which
11 is a felony under the laws of this State or conviction of a
12 felony in a federal court, conviction of a misdemeanor, an
13 essential element of which is dishonesty, or conviction of any
14 crime which is directly related to the practice of dentistry or
15 dental hygiene.

16 13. Permitting a dental hygienist, dental assistant or
17 other person under his or her supervision to perform any
18 operation not authorized by this Act.

19 14. Permitting more than 4 dental hygienists to be employed
20 under his supervision at any one time.

21 15. A violation of any provision of this Act or any rules
22 promulgated under this Act.

23 16. Taking impressions for or using the services of any
24 person, firm or corporation violating this Act.

25 17. Violating any provision of Section 45 relating to
26 advertising.

27 18. Discipline by another U.S. jurisdiction or foreign
28 nation, if at least one of the grounds for the discipline is
29 the same or substantially equivalent to those set forth within
30 this Act.

31 19. Willfully failing to report an instance of suspected
32 child abuse or neglect as required by the Abused and Neglected
33 Child Reporting Act.

34 20. Gross or repeated malpractice resulting in injury or
35 death of a patient.

36 21. The use or prescription for use of narcotics or

1 controlled substances or designated products as listed in the
2 Illinois Controlled Substances Act, in any way other than for
3 therapeutic purposes.

4 22. Willfully making or filing false records or reports in
5 his practice as a dentist, including, but not limited to, false
6 records to support claims against the dental assistance program
7 of the Department of Healthcare and Family Services (formerly
8 Illinois Department of Public Aid).

9 23. Professional incompetence as manifested by poor
10 standards of care.

11 24. Physical or mental illness, including, but not limited
12 to, deterioration through the aging process, or loss of motor
13 skills which results in a dentist's inability to practice
14 dentistry with reasonable judgment, skill or safety. In
15 enforcing this paragraph, the Department may compel a person
16 licensed to practice under this Act to submit to a mental or
17 physical examination pursuant to the terms and conditions of
18 Section 23b.

19 25. Repeated irregularities in billing a third party for
20 services rendered to a patient. For purposes of this paragraph
21 25, "irregularities in billing" shall include:

22 (a) Reporting excessive charges for the purpose of
23 obtaining a total payment in excess of that usually
24 received by the dentist for the services rendered.

25 (b) Reporting charges for services not rendered.

26 (c) Incorrectly reporting services rendered for the
27 purpose of obtaining payment not earned.

28 26. Continuing the active practice of dentistry while
29 knowingly having any infectious, communicable, or contagious
30 disease proscribed by rule or regulation of the Department.

31 27. Being named as a perpetrator in an indicated report by
32 the Department of Children and Family Services pursuant to the
33 Abused and Neglected Child Reporting Act, and upon proof by
34 clear and convincing evidence that the licensee has caused a
35 child to be an abused child or neglected child as defined in
36 the Abused and Neglected Child Reporting Act.

1 28. Violating the Health Care Worker Self-Referral Act.

2 29. Abandonment of a patient.

3 30. Mental incompetency as declared by a court of competent
4 jurisdiction.

5 All proceedings to suspend, revoke, place on probationary
6 status, or take any other disciplinary action as the Department
7 may deem proper, with regard to a license on any of the
8 foregoing grounds, must be commenced within 3 years after
9 receipt by the Department of a complaint alleging the
10 commission of or notice of the conviction order for any of the
11 acts described herein. Except for fraud in procuring a license,
12 no action shall be commenced more than 5 years after the date
13 of the incident or act alleged to have violated this Section.
14 The time during which the holder of the license was outside the
15 State of Illinois shall not be included within any period of
16 time limiting the commencement of disciplinary action by the
17 Department.

18 The Department may refuse to issue or may suspend the
19 license of any person who fails to file a return, or to pay the
20 tax, penalty or interest shown in a filed return, or to pay any
21 final assessment of tax, penalty or interest, as required by
22 any tax Act administered by the Illinois Department of Revenue,
23 until such time as the requirements of any such tax Act are
24 satisfied.

25 (Source: P.A. 91-357, eff. 7-29-99; 91-689, eff. 1-1-01.)

26 (225 ILCS 25/23a) (from Ch. 111, par. 2323a)

27 (Section scheduled to be repealed on January 1, 2016)

28 Sec. 23a. The Director of the Department may, upon receipt
29 of a written communication from the Secretary of Human Services
30 or the Director of the Department of Healthcare and Family
31 Services (formerly Department of Public Aid) or Department of
32 Public Health, that continuation of practice of a person
33 licensed under this Act constitutes an immediate danger to the
34 public, immediately suspend the license of such person without
35 a hearing. In instances in which the Director immediately

1 suspends a license under this Section, a hearing upon such
2 person's license must be convened by the Board within 15 days
3 after such suspension and completed without appreciable delay,
4 such hearing held to determine whether to recommend to the
5 Director that the person's license be revoked, suspended,
6 placed on probationary status or reinstated, or such person be
7 subject to other disciplinary action. In such hearing, the
8 written communication and any other evidence submitted
9 therewith may be introduced as evidence against such person;
10 provided however, the person, or his counsel, shall have the
11 opportunity to discredit or impeach such evidence and submit
12 evidence rebutting same.

13 (Source: P.A. 89-507, eff. 7-1-97.)

14 Section 9325. The Illinois Funeral or Burial Funds Act is
15 amended by changing Section 4 as follows:

16 (225 ILCS 45/4) (from Ch. 111 1/2, par. 73.104)

17 Sec. 4. Withdrawal of funds; revocability of contract.

18 (a) The amount or amounts so deposited into trust, with
19 interest thereon, if any, shall not be withdrawn until the
20 death of the person or persons for whose funeral or burial such
21 funds were paid, unless sooner withdrawn and repaid to the
22 person who originally paid the money under or in connection
23 with the pre-need contract or to his or her legal
24 representative. The life insurance policies or tax-deferred
25 annuities shall not be surrendered until the death of the
26 person or persons for whose funeral or burial the policies or
27 annuities were purchased, unless sooner surrendered and repaid
28 to the owner of the policy purchased under or in connection
29 with the pre-need contract or to his or her legal
30 representative. If, however, the agreement or series of
31 agreements provides for forfeiture and retention of any or all
32 payments as and for liquidated damages as provided in Section
33 6, then the trustee may withdraw the deposits. In addition,
34 nothing in this Section (i) prohibits the change of depositary

1 by the trustee and the transfer of trust funds from one
2 depository to another or (ii) prohibits a contract purchaser
3 who is or may become eligible for public assistance under any
4 applicable federal or State law or local ordinance including,
5 but not limited to, eligibility under 24 C.F.R., Part 913
6 relating to family insurance under federal Housing and Urban
7 Development Policy from irrevocably waiving, in writing, and
8 renouncing the right to cancel a pre-need contract for funeral
9 services in an amount prescribed by rule of the ~~Illinois~~
10 Department of Healthcare and Family Services ~~Public Aid~~. No
11 guaranteed price pre-need funeral contract may prohibit a
12 purchaser from making a contract irrevocable to the extent that
13 federal law or regulations require that such a contract be
14 irrevocable for purposes of the purchaser's eligibility for
15 Supplemental Security Income benefits, Medicaid, or another
16 public assistance program, as permitted under federal law.

17 (b) If for any reason a seller or provider who has engaged
18 in pre-need sales has refused, cannot, or does not comply with
19 the terms of the pre-need contract within a reasonable time
20 after he or she is required to do so, the purchaser or his or
21 her heirs or assigns or duly authorized representative shall
22 have the right to a refund of an amount equal to the sales
23 price paid for undelivered merchandise or services plus
24 otherwise earned undistributed interest amounts held in trust
25 attributable to the contract, within 30 days of the filing of a
26 sworn affidavit with the trustee setting forth the existence of
27 the contract and the fact of breach. A copy of this affidavit
28 shall be filed with the Comptroller and the seller. In the
29 event a seller is prevented from performing by strike, shortage
30 of materials, civil disorder, natural disaster, or any like
31 occurrence beyond the control of the seller or provider, the
32 seller or provider's time for performance shall be extended by
33 the length of the delay. Nothing in this Section shall relieve
34 the seller or provider from any liability for non-performance
35 of his or her obligations under the pre-need contract.

36 (c) After final payment on a pre-need contract, any

1 purchaser may, upon written demand to a seller, demand that the
2 pre-need contract with the seller be terminated. The seller
3 shall, within 30 days, initiate a refund to the purchaser of
4 the entire amount held in trust attributable to undelivered
5 merchandise and unperformed services, including otherwise
6 earned undistributed interest earned thereon or the cash
7 surrender value of a life insurance policy or tax-deferred
8 annuity.

9 (c-5) If no funeral merchandise or services are provided or
10 if the funeral is conducted by another person, the seller may
11 keep no more than 10% of the payments made under the pre-need
12 contract or \$300, whichever sum is less. The remainder of the
13 trust funds or insurance or annuity proceeds shall be forwarded
14 to the legal heirs of the deceased or as determined by probate
15 action.

16 (d) The placement and retention of all or a portion of a
17 casket, combination casket-vault, urn, or outer burial
18 container comprised of materials which are designed to
19 withstand prolonged storage in the manner set forth in this
20 paragraph without adversely affecting the structural integrity
21 or aesthetic characteristics of such merchandise in a specific
22 burial space in which the person or persons for whose funeral
23 or burial the merchandise was intended has a right of
24 interment, or the placement of the merchandise in a specific
25 mausoleum crypt or lawn crypt in which such person has a right
26 of entombment, or the placement of the merchandise in a
27 specific niche in which such person has a right of inurnment,
28 or delivery to such person and retention by such person until
29 the time of need shall constitute actual delivery to the person
30 who originally paid the money under or in connection with said
31 agreement or series of agreements. Actual delivery shall
32 eliminate, from and after the date of actual delivery, any
33 requirement under this Act to place or retain in trust any
34 funds received for the sale of such merchandise. The delivery,
35 prior to the time of need, of any funeral or burial merchandise
36 in any manner other than authorized by this Section shall not

1 constitute actual delivery and shall not eliminate any
2 requirement under this Act to place or retain in trust any
3 funds received for the sale of such merchandise.

4 (Source: P.A. 92-419, eff. 1-1-02.)

5 Section 9330. The Health Care Worker Background Check Act
6 is amended by changing Section 65 as follows:

7 (225 ILCS 46/65)

8 Sec. 65. Health Care Worker Task Force. A Health Care
9 Worker Task Force shall be appointed to study and make
10 recommendations on statutory changes to this Act.

11 (a) The Task Force shall monitor the status of the
12 implementation of this Act and monitor complaint
13 investigations relating to this Act by the Department on Aging,
14 Department of Public Health, Department of Professional
15 Regulation, and the Department of Human Services to determine
16 the criminal background, if any, of health care workers who
17 have had findings of abuse, theft, or exploitation.

18 (b) The Task Force shall make recommendations concerning
19 modifications to the list of offenses enumerated in Section 25,
20 including time limits on all or some of the disqualifying
21 offenses, and any other necessary or desirable changes to the
22 Act.

23 (c) The Task Force shall issue an interim report to the
24 Governor and General Assembly no later than January 1, 2004.
25 The final report shall be issued no later than September 30,
26 2005, and shall include specific statutory changes
27 recommended, if any.

28 (d) The Task Force shall be composed of the following
29 members, who shall serve without pay:

30 (1) a chairman knowledgeable about health care issues,
31 who shall be appointed by the Governor;

32 (2) the Director of Public Health or his or her
33 designee;

34 (3) the Director of State Police or his or her

1 designee;

2 (3.5) the Director of Healthcare and Family Services
3 ~~Public Aid~~ or his or her designee;

4 (3.6) the Secretary of Human Services or his or her
5 designee;

6 (3.7) the Director of Aging or his or her designee;

7 (4) 2 representatives of health care providers, who
8 shall be appointed by the Governor;

9 (5) 2 representatives of health care employees, who
10 shall be appointed by the Governor;

11 (5.5) a representative of a Community Care homemaker
12 program, who shall be appointed by the Governor;

13 (6) a representative of the general public who has an
14 interest in health care, who shall be appointed by the
15 Governor; and

16 (7) 4 members of the General Assembly, one appointed by
17 the Speaker of the House, one appointed by the House
18 Minority Leader, one appointed by the President of the
19 Senate, and one appointed by the Senate Minority Leader.

20 (Source: P.A. 93-224, eff. 7-18-03.)

21 Section 9335. The Medical Practice Act of 1987 is amended
22 by changing Sections 22 and 25 as follows:

23 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)

24 (Section scheduled to be repealed on January 1, 2007)

25 Sec. 22. Disciplinary action.

26 (A) The Department may revoke, suspend, place on
27 probationary status, refuse to renew, or take any other
28 disciplinary action as the Department may deem proper with
29 regard to the license or visiting professor permit of any
30 person issued under this Act to practice medicine, or to treat
31 human ailments without the use of drugs and without operative
32 surgery upon any of the following grounds:

33 (1) Performance of an elective abortion in any place,
34 locale, facility, or institution other than:

1 (a) a facility licensed pursuant to the Ambulatory
2 Surgical Treatment Center Act;

3 (b) an institution licensed under the Hospital
4 Licensing Act; or

5 (c) an ambulatory surgical treatment center or
6 hospitalization or care facility maintained by the
7 State or any agency thereof, where such department or
8 agency has authority under law to establish and enforce
9 standards for the ambulatory surgical treatment
10 centers, hospitalization, or care facilities under its
11 management and control; or

12 (d) ambulatory surgical treatment centers,
13 hospitalization or care facilities maintained by the
14 Federal Government; or

15 (e) ambulatory surgical treatment centers,
16 hospitalization or care facilities maintained by any
17 university or college established under the laws of
18 this State and supported principally by public funds
19 raised by taxation.

20 (2) Performance of an abortion procedure in a wilful
21 and wanton manner on a woman who was not pregnant at the
22 time the abortion procedure was performed.

23 (3) The conviction of a felony in this or any other
24 jurisdiction, except as otherwise provided in subsection B
25 of this Section, whether or not related to practice under
26 this Act, or the entry of a guilty or nolo contendere plea
27 to a felony charge.

28 (4) Gross negligence in practice under this Act.

29 (5) Engaging in dishonorable, unethical or
30 unprofessional conduct of a character likely to deceive,
31 defraud or harm the public.

32 (6) Obtaining any fee by fraud, deceit, or
33 misrepresentation.

34 (7) Habitual or excessive use or abuse of drugs defined
35 in law as controlled substances, of alcohol, or of any
36 other substances which results in the inability to practice

1 with reasonable judgment, skill or safety.

2 (8) Practicing under a false or, except as provided by
3 law, an assumed name.

4 (9) Fraud or misrepresentation in applying for, or
5 procuring, a license under this Act or in connection with
6 applying for renewal of a license under this Act.

7 (10) Making a false or misleading statement regarding
8 their skill or the efficacy or value of the medicine,
9 treatment, or remedy prescribed by them at their direction
10 in the treatment of any disease or other condition of the
11 body or mind.

12 (11) Allowing another person or organization to use
13 their license, procured under this Act, to practice.

14 (12) Disciplinary action of another state or
15 jurisdiction against a license or other authorization to
16 practice as a medical doctor, doctor of osteopathy, doctor
17 of osteopathic medicine or doctor of chiropractic, a
18 certified copy of the record of the action taken by the
19 other state or jurisdiction being prima facie evidence
20 thereof.

21 (13) Violation of any provision of this Act or of the
22 Medical Practice Act prior to the repeal of that Act, or
23 violation of the rules, or a final administrative action of
24 the Secretary, after consideration of the recommendation
25 of the Disciplinary Board.

26 (14) Dividing with anyone other than physicians with
27 whom the licensee practices in a partnership, Professional
28 Association, limited liability company, or Medical or
29 Professional Corporation any fee, commission, rebate or
30 other form of compensation for any professional services
31 not actually and personally rendered. Nothing contained in
32 this subsection prohibits persons holding valid and
33 current licenses under this Act from practicing medicine in
34 partnership under a partnership agreement, including a
35 limited liability partnership, in a limited liability
36 company under the Limited Liability Company Act, in a

1 corporation authorized by the Medical Corporation Act, as
2 an association authorized by the Professional Association
3 Act, or in a corporation under the Professional Corporation
4 Act or from pooling, sharing, dividing or apportioning the
5 fees and monies received by them or by the partnership,
6 corporation or association in accordance with the
7 partnership agreement or the policies of the Board of
8 Directors of the corporation or association. Nothing
9 contained in this subsection prohibits 2 or more
10 corporations authorized by the Medical Corporation Act,
11 from forming a partnership or joint venture of such
12 corporations, and providing medical, surgical and
13 scientific research and knowledge by employees of these
14 corporations if such employees are licensed under this Act,
15 or from pooling, sharing, dividing, or apportioning the
16 fees and monies received by the partnership or joint
17 venture in accordance with the partnership or joint venture
18 agreement. Nothing contained in this subsection shall
19 abrogate the right of 2 or more persons, holding valid and
20 current licenses under this Act, to each receive adequate
21 compensation for concurrently rendering professional
22 services to a patient and divide a fee; provided, the
23 patient has full knowledge of the division, and, provided,
24 that the division is made in proportion to the services
25 performed and responsibility assumed by each.

26 (15) A finding by the Medical Disciplinary Board that
27 the registrant after having his or her license placed on
28 probationary status or subjected to conditions or
29 restrictions violated the terms of the probation or failed
30 to comply with such terms or conditions.

31 (16) Abandonment of a patient.

32 (17) Prescribing, selling, administering,
33 distributing, giving or self-administering any drug
34 classified as a controlled substance (designated product)
35 or narcotic for other than medically accepted therapeutic
36 purposes.

1 (18) Promotion of the sale of drugs, devices,
2 appliances or goods provided for a patient in such manner
3 as to exploit the patient for financial gain of the
4 physician.

5 (19) Offering, undertaking or agreeing to cure or treat
6 disease by a secret method, procedure, treatment or
7 medicine, or the treating, operating or prescribing for any
8 human condition by a method, means or procedure which the
9 licensee refuses to divulge upon demand of the Department.

10 (20) Immoral conduct in the commission of any act
11 including, but not limited to, commission of an act of
12 sexual misconduct related to the licensee's practice.

13 (21) Wilfully making or filing false records or reports
14 in his or her practice as a physician, including, but not
15 limited to, false records to support claims against the
16 medical assistance program of the Department of Healthcare
17 and Family Services (formerly Department of Public Aid)
18 under the Illinois Public Aid Code.

19 (22) Wilful omission to file or record, or wilfully
20 impeding the filing or recording, or inducing another
21 person to omit to file or record, medical reports as
22 required by law, or wilfully failing to report an instance
23 of suspected abuse or neglect as required by law.

24 (23) Being named as a perpetrator in an indicated
25 report by the Department of Children and Family Services
26 under the Abused and Neglected Child Reporting Act, and
27 upon proof by clear and convincing evidence that the
28 licensee has caused a child to be an abused child or
29 neglected child as defined in the Abused and Neglected
30 Child Reporting Act.

31 (24) Solicitation of professional patronage by any
32 corporation, agents or persons, or profiting from those
33 representing themselves to be agents of the licensee.

34 (25) Gross and wilful and continued overcharging for
35 professional services, including filing false statements
36 for collection of fees for which services are not rendered,

1 including, but not limited to, filing such false statements
2 for collection of monies for services not rendered from the
3 medical assistance program of the Department of Healthcare
4 and Family Services (formerly Department of Public Aid)
5 under the Illinois Public Aid Code.

6 (26) A pattern of practice or other behavior which
7 demonstrates incapacity or incompetence to practice under
8 this Act.

9 (27) Mental illness or disability which results in the
10 inability to practice under this Act with reasonable
11 judgment, skill or safety.

12 (28) Physical illness, including, but not limited to,
13 deterioration through the aging process, or loss of motor
14 skill which results in a physician's inability to practice
15 under this Act with reasonable judgment, skill or safety.

16 (29) Cheating on or attempt to subvert the licensing
17 examinations administered under this Act.

18 (30) Wilfully or negligently violating the
19 confidentiality between physician and patient except as
20 required by law.

21 (31) The use of any false, fraudulent, or deceptive
22 statement in any document connected with practice under
23 this Act.

24 (32) Aiding and abetting an individual not licensed
25 under this Act in the practice of a profession licensed
26 under this Act.

27 (33) Violating state or federal laws or regulations
28 relating to controlled substances, legend drugs, or
29 ephedra, as defined in the Ephedra Prohibition Act.

30 (34) Failure to report to the Department any adverse
31 final action taken against them by another licensing
32 jurisdiction (any other state or any territory of the
33 United States or any foreign state or country), by any peer
34 review body, by any health care institution, by any
35 professional society or association related to practice
36 under this Act, by any governmental agency, by any law

1 enforcement agency, or by any court for acts or conduct
2 similar to acts or conduct which would constitute grounds
3 for action as defined in this Section.

4 (35) Failure to report to the Department surrender of a
5 license or authorization to practice as a medical doctor, a
6 doctor of osteopathy, a doctor of osteopathic medicine, or
7 doctor of chiropractic in another state or jurisdiction, or
8 surrender of membership on any medical staff or in any
9 medical or professional association or society, while
10 under disciplinary investigation by any of those
11 authorities or bodies, for acts or conduct similar to acts
12 or conduct which would constitute grounds for action as
13 defined in this Section.

14 (36) Failure to report to the Department any adverse
15 judgment, settlement, or award arising from a liability
16 claim related to acts or conduct similar to acts or conduct
17 which would constitute grounds for action as defined in
18 this Section.

19 (37) Failure to transfer copies of medical records as
20 required by law.

21 (38) Failure to furnish the Department, its
22 investigators or representatives, relevant information,
23 legally requested by the Department after consultation
24 with the Chief Medical Coordinator or the Deputy Medical
25 Coordinator.

26 (39) Violating the Health Care Worker Self-Referral
27 Act.

28 (40) Willful failure to provide notice when notice is
29 required under the Parental Notice of Abortion Act of 1995.

30 (41) Failure to establish and maintain records of
31 patient care and treatment as required by this law.

32 (42) Entering into an excessive number of written
33 collaborative agreements with licensed advanced practice
34 nurses resulting in an inability to adequately collaborate
35 and provide medical direction.

36 (43) Repeated failure to adequately collaborate with

1 or provide medical direction to a licensed advanced
2 practice nurse.

3 Except for actions involving the ground numbered (26), all
4 proceedings to suspend, revoke, place on probationary status,
5 or take any other disciplinary action as the Department may
6 deem proper, with regard to a license on any of the foregoing
7 grounds, must be commenced within 5 years next after receipt by
8 the Department of a complaint alleging the commission of or
9 notice of the conviction order for any of the acts described
10 herein. Except for the grounds numbered (8), (9), (26), and
11 (29), no action shall be commenced more than 10 years after the
12 date of the incident or act alleged to have violated this
13 Section. For actions involving the ground numbered (26), a
14 pattern of practice or other behavior includes all incidents
15 alleged to be part of the pattern of practice or other behavior
16 that occurred or a report pursuant to Section 23 of this Act
17 received within the 10-year period preceding the filing of the
18 complaint. In the event of the settlement of any claim or cause
19 of action in favor of the claimant or the reduction to final
20 judgment of any civil action in favor of the plaintiff, such
21 claim, cause of action or civil action being grounded on the
22 allegation that a person licensed under this Act was negligent
23 in providing care, the Department shall have an additional
24 period of 2 years from the date of notification to the
25 Department under Section 23 of this Act of such settlement or
26 final judgment in which to investigate and commence formal
27 disciplinary proceedings under Section 36 of this Act, except
28 as otherwise provided by law. The time during which the holder
29 of the license was outside the State of Illinois shall not be
30 included within any period of time limiting the commencement of
31 disciplinary action by the Department.

32 The entry of an order or judgment by any circuit court
33 establishing that any person holding a license under this Act
34 is a person in need of mental treatment operates as a
35 suspension of that license. That person may resume their
36 practice only upon the entry of a Departmental order based upon

1 a finding by the Medical Disciplinary Board that they have been
2 determined to be recovered from mental illness by the court and
3 upon the Disciplinary Board's recommendation that they be
4 permitted to resume their practice.

5 The Department may refuse to issue or take disciplinary
6 action concerning the license of any person who fails to file a
7 return, or to pay the tax, penalty or interest shown in a filed
8 return, or to pay any final assessment of tax, penalty or
9 interest, as required by any tax Act administered by the
10 Illinois Department of Revenue, until such time as the
11 requirements of any such tax Act are satisfied as determined by
12 the Illinois Department of Revenue.

13 The Department, upon the recommendation of the
14 Disciplinary Board, shall adopt rules which set forth standards
15 to be used in determining:

16 (a) when a person will be deemed sufficiently
17 rehabilitated to warrant the public trust;

18 (b) what constitutes dishonorable, unethical or
19 unprofessional conduct of a character likely to deceive,
20 defraud, or harm the public;

21 (c) what constitutes immoral conduct in the commission
22 of any act, including, but not limited to, commission of an
23 act of sexual misconduct related to the licensee's
24 practice; and

25 (d) what constitutes gross negligence in the practice
26 of medicine.

27 However, no such rule shall be admissible into evidence in
28 any civil action except for review of a licensing or other
29 disciplinary action under this Act.

30 In enforcing this Section, the Medical Disciplinary Board,
31 upon a showing of a possible violation, may compel any
32 individual licensed to practice under this Act, or who has
33 applied for licensure or a permit pursuant to this Act, to
34 submit to a mental or physical examination, or both, as
35 required by and at the expense of the Department. The examining
36 physician or physicians shall be those specifically designated

1 by the Disciplinary Board. The Medical Disciplinary Board or
2 the Department may order the examining physician to present
3 testimony concerning this mental or physical examination of the
4 licensee or applicant. No information shall be excluded by
5 reason of any common law or statutory privilege relating to
6 communication between the licensee or applicant and the
7 examining physician. The individual to be examined may have, at
8 his or her own expense, another physician of his or her choice
9 present during all aspects of the examination. Failure of any
10 individual to submit to mental or physical examination, when
11 directed, shall be grounds for suspension of his or her license
12 until such time as the individual submits to the examination if
13 the Disciplinary Board finds, after notice and hearing, that
14 the refusal to submit to the examination was without reasonable
15 cause. If the Disciplinary Board finds a physician unable to
16 practice because of the reasons set forth in this Section, the
17 Disciplinary Board shall require such physician to submit to
18 care, counseling, or treatment by physicians approved or
19 designated by the Disciplinary Board, as a condition for
20 continued, reinstated, or renewed licensure to practice. Any
21 physician, whose license was granted pursuant to Sections 9,
22 17, or 19 of this Act, or, continued, reinstated, renewed,
23 disciplined or supervised, subject to such terms, conditions or
24 restrictions who shall fail to comply with such terms,
25 conditions or restrictions, or to complete a required program
26 of care, counseling, or treatment, as determined by the Chief
27 Medical Coordinator or Deputy Medical Coordinators, shall be
28 referred to the Secretary for a determination as to whether the
29 licensee shall have their license suspended immediately,
30 pending a hearing by the Disciplinary Board. In instances in
31 which the Secretary immediately suspends a license under this
32 Section, a hearing upon such person's license must be convened
33 by the Disciplinary Board within 15 days after such suspension
34 and completed without appreciable delay. The Disciplinary
35 Board shall have the authority to review the subject
36 physician's record of treatment and counseling regarding the

1 impairment, to the extent permitted by applicable federal
2 statutes and regulations safeguarding the confidentiality of
3 medical records.

4 An individual licensed under this Act, affected under this
5 Section, shall be afforded an opportunity to demonstrate to the
6 Disciplinary Board that they can resume practice in compliance
7 with acceptable and prevailing standards under the provisions
8 of their license.

9 The Department may promulgate rules for the imposition of
10 fines in disciplinary cases, not to exceed \$10,000 for each
11 violation of this Act. Fines may be imposed in conjunction with
12 other forms of disciplinary action, but shall not be the
13 exclusive disposition of any disciplinary action arising out of
14 conduct resulting in death or injury to a patient. Any funds
15 collected from such fines shall be deposited in the Medical
16 Disciplinary Fund.

17 (B) The Department shall revoke the license or visiting
18 permit of any person issued under this Act to practice medicine
19 or to treat human ailments without the use of drugs and without
20 operative surgery, who has been convicted a second time of
21 committing any felony under the Illinois Controlled Substances
22 Act or the Methamphetamine Control and Community Protection
23 Act, or who has been convicted a second time of committing a
24 Class 1 felony under Sections 8A-3 and 8A-6 of the Illinois
25 Public Aid Code. A person whose license or visiting permit is
26 revoked under this subsection B of Section 22 of this Act shall
27 be prohibited from practicing medicine or treating human
28 ailments without the use of drugs and without operative
29 surgery.

30 (C) The Medical Disciplinary Board shall recommend to the
31 Department civil penalties and any other appropriate
32 discipline in disciplinary cases when the Board finds that a
33 physician willfully performed an abortion with actual
34 knowledge that the person upon whom the abortion has been
35 performed is a minor or an incompetent person without notice as
36 required under the Parental Notice of Abortion Act of 1995.

1 Upon the Board's recommendation, the Department shall impose,
2 for the first violation, a civil penalty of \$1,000 and for a
3 second or subsequent violation, a civil penalty of \$5,000.

4 (Source: P.A. 94-556, eff. 9-11-05; 94-677, eff. 8-25-05;
5 revised 8-29-05.)

6 (225 ILCS 60/25) (from Ch. 111, par. 4400-25)

7 (Section scheduled to be repealed on January 1, 2007)

8 Sec. 25. The Director of the Department may, upon receipt
9 of a written communication from the Secretary of Human
10 Services, the Director of Healthcare and Family Services
11 (formerly Director of Public Aid), or the Director of Public
12 Health that continuation of practice of a person licensed under
13 this Act constitutes an immediate danger to the public, and
14 after consultation with the Chief Medical Coordinator or Deputy
15 Medical Coordinator, immediately suspend the license of such
16 person without a hearing. In instances in which the Director
17 immediately suspends a license under this Section, a hearing
18 upon such person's license must be convened by the Disciplinary
19 Board within 15 days after such suspension and completed
20 without appreciable delay. Such hearing is to be held to
21 determine whether to recommend to the Director that the
22 person's license be revoked, suspended, placed on probationary
23 status or reinstated, or whether such person should be subject
24 to other disciplinary action. In the hearing, the written
25 communication and any other evidence submitted therewith may be
26 introduced as evidence against such person; provided however,
27 the person, or their counsel, shall have the opportunity to
28 discredit, impeach and submit evidence rebutting such
29 evidence.

30 (Source: P.A. 89-507, eff. 7-1-97.)

31 Section 9340. The Naprapathic Practice Act is amended by
32 changing Section 110 as follows:

33 (225 ILCS 63/110)

1 (Section scheduled to be repealed on January 1, 2013)

2 Sec. 110. Grounds for disciplinary action; refusal,
3 revocation, suspension.

4 (a) The Department may refuse to issue or to renew, or may
5 revoke, suspend, place on probation, reprimand or take other
6 disciplinary action as the Department may deem proper,
7 including fines not to exceed \$5,000 for each violation, with
8 regard to any licensee or license for any one or combination of
9 the following causes:

10 (1) Violations of this Act or its rules.

11 (2) Material misstatement in furnishing information to
12 the Department.

13 (3) Conviction of any crime under the laws of any U.S.
14 jurisdiction that is (i) a felony, (ii) a misdemeanor, an
15 essential element of which is dishonesty, or (iii) directly
16 related to the practice of the profession.

17 (4) Making any misrepresentation for the purpose of
18 obtaining a license.

19 (5) Professional incompetence or gross negligence.

20 (6) Gross malpractice.

21 (7) Aiding or assisting another person in violating any
22 provision of this Act or its rules.

23 (8) Failing to provide information within 60 days in
24 response to a written request made by the Department.

25 (9) Engaging in dishonorable, unethical, or
26 unprofessional conduct of a character likely to deceive,
27 defraud, or harm the public.

28 (10) Habitual or excessive use or addiction to alcohol,
29 narcotics, stimulants, or any other chemical agent or drug
30 that results in the inability to practice with reasonable
31 judgment, skill, or safety.

32 (11) Discipline by another U.S. jurisdiction or
33 foreign nation if at least one of the grounds for the
34 discipline is the same or substantially equivalent to those
35 set forth in this Act.

36 (12) Directly or indirectly giving to or receiving from

1 any person, firm, corporation, partnership, or association
2 any fee, commission, rebate, or other form of compensation
3 for any professional services not actually or personally
4 rendered. This shall not be deemed to include rent or other
5 remunerations paid to an individual, partnership, or
6 corporation by a naprapath for the lease, rental, or use of
7 space, owned or controlled by the individual, partnership,
8 corporation or association.

9 (13) Using the title "Doctor" or its abbreviation
10 without further clarifying that title or abbreviation with
11 the word "naprapath" or "naprapathy" or the designation
12 "D.N.".

13 (14) A finding by the Department that the licensee,
14 after having his or her license placed on probationary
15 status, has violated the terms of probation.

16 (15) Abandonment of a patient without cause.

17 (16) Willfully making or filing false records or
18 reports relating to a licensee's practice, including but
19 not limited to, false records filed with State agencies or
20 departments.

21 (17) Willfully failing to report an instance of
22 suspected child abuse or neglect as required by the Abused
23 and Neglected Child Reporting Act.

24 (18) Physical illness, including but not limited to,
25 deterioration through the aging process or loss of motor
26 skill that results in the inability to practice the
27 profession with reasonable judgment, skill, or safety.

28 (19) Solicitation of professional services by means
29 other than permitted advertising.

30 (20) Failure to provide a patient with a copy of his or
31 her record upon the written request of the patient.

32 (21) Conviction by any court of competent
33 jurisdiction, either within or without this State, of any
34 violation of any law governing the practice of naprapathy,
35 conviction in this or another state of any crime which is a
36 felony under the laws of this State or conviction of a

1 felony in a federal court, if the Department determines,
2 after investigation, that the person has not been
3 sufficiently rehabilitated to warrant the public trust.

4 (22) A finding that licensure has been applied for or
5 obtained by fraudulent means.

6 (23) Continued practice by a person knowingly having an
7 infectious or contagious disease.

8 (24) Being named as a perpetrator in an indicated
9 report by the Department of Children and Family Services
10 under the Abused and Neglected Child Reporting Act and upon
11 proof by clear and convincing evidence that the licensee
12 has caused a child to be an abused child or a neglected
13 child as defined in the Abused and Neglected Child
14 Reporting Act.

15 (25) Practicing or attempting to practice under a name
16 other than the full name shown on the license.

17 (26) Immoral conduct in the commission of any act, such
18 as sexual abuse, sexual misconduct, or sexual
19 exploitation, related to the licensee's practice.

20 (27) Maintaining a professional relationship with any
21 person, firm, or corporation when the naprapath knows, or
22 should know, that the person, firm, or corporation is
23 violating this Act.

24 (28) Promotion of the sale of food supplements,
25 devices, appliances, or goods provided for a client or
26 patient in such manner as to exploit the patient or client
27 for financial gain of the licensee.

28 (29) Having treated ailments of human beings other than
29 by the practice of naprapathy as defined in this Act, or
30 having treated ailments of human beings as a licensed
31 naprapath independent of a documented referral or
32 documented current and relevant diagnosis from a
33 physician, dentist, or podiatrist, or having failed to
34 notify the physician, dentist, or podiatrist who
35 established a documented current and relevant diagnosis
36 that the patient is receiving naprapathic treatment

1 pursuant to that diagnosis.

2 (30) Use by a registered naprapath of the word
3 "infirmity", "hospital", "school", "university", in
4 English or any other language, in connection with the place
5 where naprapathy may be practiced or demonstrated.

6 (31) Continuance of a naprapath in the employ of any
7 person, firm, or corporation, or as an assistant to any
8 naprapath or naprapaths, directly or indirectly, after his
9 or her employer or superior has been found guilty of
10 violating or has been enjoined from violating the laws of
11 the State of Illinois relating to the practice of
12 naprapathy when the employer or superior persists in that
13 violation.

14 (32) The performance of naprapathic service in
15 conjunction with a scheme or plan with another person,
16 firm, or corporation known to be advertising in a manner
17 contrary to this Act or otherwise violating the laws of the
18 State of Illinois concerning the practice of naprapathy.

19 (33) Failure to provide satisfactory proof of having
20 participated in approved continuing education programs as
21 determined by the Committee and approved by the Director.
22 Exceptions for extreme hardships are to be defined by the
23 rules of the Department.

24 (34) Willfully making or filing false records or
25 reports in the practice of naprapathy, including, but not
26 limited to, false records to support claims against the
27 medical assistance program of the Department of Healthcare
28 and Family Services (formerly Department of Public Aid)
29 under the Illinois Public Aid Code.

30 (35) Gross or willful overcharging for professional
31 services including filing false statements for collection
32 of fees for which services are not rendered, including, but
33 not limited to, filing false statements for collection of
34 monies for services not rendered from the medical
35 assistance program of the Department of Healthcare and
36 Family Services (formerly Department of Public Aid) under

1 the Illinois Public Aid Code.

2 (36) Mental illness, including, but not limited to,
3 deterioration through the aging process or loss of motor
4 skill that results in the inability to practice the
5 profession with reasonable judgment, skill, or safety.

6 The Department may refuse to issue or may suspend the
7 license of any person who fails to (i) file a return or to pay
8 the tax, penalty or interest shown in a filed return or (ii)
9 pay any final assessment of the tax, penalty, or interest as
10 required by any tax Act administered by the Illinois Department
11 of Revenue, until the time that the requirements of that tax
12 Act are satisfied.

13 (b) The determination by a circuit court that a licensee is
14 subject to involuntary admission or judicial admission as
15 provided in the Mental Health and Developmental Disabilities
16 Code operates as an automatic suspension. The suspension will
17 end only upon a finding by a court that the patient is no
18 longer subject to involuntary admission or judicial admission,
19 the issuance of an order so finding and discharging the
20 patient, and the recommendation of the Committee to the
21 Director that the licensee be allowed to resume his or her
22 practice.

23 (c) In enforcing this Section, the Department, upon a
24 showing of a possible violation, may compel any person licensed
25 to practice under this Act or who has applied for licensure or
26 certification pursuant to this Act to submit to a mental or
27 physical examination, or both, as required by and at the
28 expense of the Department. The examining physicians shall be
29 those specifically designated by the Department. The
30 Department may order the examining physician to present
31 testimony concerning this mental or physical examination of the
32 licensee or applicant. No information shall be excluded by
33 reason of any common law or statutory privilege relating to
34 communications between the licensee or applicant and the
35 examining physician. The person to be examined may have, at his
36 or her own expense, another physician of his or her choice

1 present during all aspects of the examination. Failure of any
2 person to submit to a mental or physical examination, when
3 directed, shall be grounds for suspension of a license until
4 the person submits to the examination if the Department finds,
5 after notice and hearing, that the refusal to submit to the
6 examination was without reasonable cause.

7 If the Department finds an individual unable to practice
8 because of the reasons set forth in this Section, the
9 Department may require that individual to submit to care,
10 counseling, or treatment by physicians approved or designated
11 by the Department, as a condition, term, or restriction for
12 continued, reinstated, or renewed licensure to practice or, in
13 lieu of care, counseling, or treatment, the Department may file
14 a complaint to immediately suspend, revoke, or otherwise
15 discipline the license of the individual.

16 Any person whose license was granted, continued,
17 reinstated, renewed, disciplined, or supervised subject to
18 such terms, conditions, or restrictions and who fails to comply
19 with such terms, conditions, or restrictions shall be referred
20 to the Director for a determination as to whether the person
21 shall have his or her license suspended immediately, pending a
22 hearing by the Department.

23 In instances in which the Director immediately suspends a
24 person's license under this Section, a hearing on that person's
25 license must be convened by the Department within 15 days after
26 the suspension and completed without appreciable delay. The
27 Department shall have the authority to review the subject
28 person's record of treatment and counseling regarding the
29 impairment, to the extent permitted by applicable federal
30 statutes and regulations safeguarding the confidentiality of
31 medical records.

32 A person licensed under this Act and affected under this
33 Section shall be afforded an opportunity to demonstrate to the
34 Department that he or she can resume practice in compliance
35 with acceptable and prevailing standards under the provisions
36 of his or her license.

1 (Source: P.A. 92-655, eff. 7-16-02.)

2 Section 9345. The Nursing and Advanced Practice Nursing Act
3 is amended by changing Sections 10-45 and 20-55 as follows:

4 (225 ILCS 65/10-45)

5 (Section scheduled to be repealed on January 1, 2008)

6 Sec. 10-45. Grounds for disciplinary action.

7 (a) The Department may, upon recommendation of the Board,
8 refuse to issue or to renew, or may revoke, suspend, place on
9 probation, reprimand, or take other disciplinary action as the
10 Department may deem appropriate with regard to a license for
11 any one or combination of the causes set forth in subsection
12 (b) below. Fines up to \$2,500 may be imposed in conjunction
13 with other forms of disciplinary action for those violations
14 that result in monetary gain for the licensee. Fines shall not
15 be the exclusive disposition of any disciplinary action arising
16 out of conduct resulting in death or injury to a patient. Fines
17 shall not be assessed in disciplinary actions involving mental
18 or physical illness or impairment. All fines collected under
19 this Section shall be deposited in the Nursing Dedicated and
20 Professional Fund.

21 (b) Grounds for disciplinary action include the following:

22 (1) Material deception in furnishing information to
23 the Department.

24 (2) Material violations of any provision of this Act or
25 violation of the rules of or final administrative action of
26 the Director, after consideration of the recommendation of
27 the Board.

28 (3) Conviction of any crime under the laws of any
29 jurisdiction of the United States: (i) which is a felony;
30 or (ii) which is a misdemeanor, an essential element of
31 which is dishonesty, or (iii) of any crime which is
32 directly related to the practice of the profession.

33 (4) A pattern of practice or other behavior which
34 demonstrates incapacity or incompetency to practice under

1 this Act.

2 (5) Knowingly aiding or assisting another person in
3 violating any provision of this Act or rules.

4 (6) Failing, within 90 days, to provide a response to a
5 request for information in response to a written request
6 made by the Department by certified mail.

7 (7) Engaging in dishonorable, unethical or
8 unprofessional conduct of a character likely to deceive,
9 defraud or harm the public, as defined by rule.

10 (8) Unlawful sale or distribution of any drug,
11 narcotic, or prescription device, or unlawful conversion
12 of any drug, narcotic or prescription device.

13 (9) Habitual or excessive use or addiction to alcohol,
14 narcotics, stimulants, or any other chemical agent or drug
15 which results in a licensee's inability to practice with
16 reasonable judgment, skill or safety.

17 (10) Discipline by another U.S. jurisdiction or
18 foreign nation, if at least one of the grounds for the
19 discipline is the same or substantially equivalent to those
20 set forth in this Section.

21 (11) A finding that the licensee, after having her or
22 his license placed on probationary status, has violated the
23 terms of probation.

24 (12) Being named as a perpetrator in an indicated
25 report by the Department of Children and Family Services
26 and under the Abused and Neglected Child Reporting Act, and
27 upon proof by clear and convincing evidence that the
28 licensee has caused a child to be an abused child or
29 neglected child as defined in the Abused and Neglected
30 Child Reporting Act.

31 (13) Willful omission to file or record, or willfully
32 impeding the filing or recording or inducing another person
33 to omit to file or record medical reports as required by
34 law or willfully failing to report an instance of suspected
35 child abuse or neglect as required by the Abused and
36 Neglected Child Reporting Act.

- 1 (14) Gross negligence in the practice of nursing.
- 2 (15) Holding oneself out to be practicing nursing under
3 any name other than one's own.
- 4 (16) Fraud, deceit or misrepresentation in applying
5 for or procuring a license under this Act or in connection
6 with applying for renewal of a license under this Act.
- 7 (17) Allowing another person or organization to use the
8 licensee's license to deceive the public.
- 9 (18) Willfully making or filing false records or
10 reports in the licensee's practice, including but not
11 limited to false records to support claims against the
12 medical assistance program of the Department of Healthcare
13 and Family Services (formerly Department of Public Aid)
14 under the Illinois Public Aid Code.
- 15 (19) Attempting to subvert or cheat on a nurse
16 licensing examination administered under this Act.
- 17 (20) Immoral conduct in the commission of an act, such
18 as sexual abuse, sexual misconduct, or sexual
19 exploitation, related to the licensee's practice.
- 20 (21) Willfully or negligently violating the
21 confidentiality between nurse and patient except as
22 required by law.
- 23 (22) Practicing under a false or assumed name, except
24 as provided by law.
- 25 (23) The use of any false, fraudulent, or deceptive
26 statement in any document connected with the licensee's
27 practice.
- 28 (24) Directly or indirectly giving to or receiving from
29 a person, firm, corporation, partnership, or association a
30 fee, commission, rebate, or other form of compensation for
31 professional services not actually or personally rendered.
- 32 (25) Failure of a licensee to report to the Department
33 any adverse final action taken against such licensee by
34 another licensing jurisdiction (any other jurisdiction of
35 the United States or any foreign state or country), by any
36 peer review body, by any health care institution, by any

1 professional or nursing society or association, by any
2 governmental agency, by any law enforcement agency, or by
3 any court or a nursing liability claim related to acts or
4 conduct similar to acts or conduct that would constitute
5 grounds for action as defined in this Section.

6 (26) Failure of a licensee to report to the Department
7 surrender by the licensee of a license or authorization to
8 practice nursing in another state or jurisdiction, or
9 current surrender by the licensee of membership on any
10 nursing staff or in any nursing or professional association
11 or society while under disciplinary investigation by any of
12 those authorities or bodies for acts or conduct similar to
13 acts or conduct that would constitute grounds for action as
14 defined by this Section.

15 (27) A violation of the Health Care Worker
16 Self-Referral Act.

17 (28) Physical illness, including but not limited to
18 deterioration through the aging process or loss of motor
19 skill, mental illness, or disability that results in the
20 inability to practice the profession with reasonable
21 judgment, skill, or safety.

22 (c) The determination by a circuit court that a licensee is
23 subject to involuntary admission or judicial admission as
24 provided in the Mental Health and Developmental Disabilities
25 Code, as amended, operates as an automatic suspension. The
26 suspension will end only upon a finding by a court that the
27 patient is no longer subject to involuntary admission or
28 judicial admission and issues an order so finding and
29 discharging the patient; and upon the recommendation of the
30 Board to the Director that the licensee be allowed to resume
31 his or her practice.

32 (d) The Department may refuse to issue or may suspend the
33 license of any person who fails to file a return, or to pay the
34 tax, penalty or interest shown in a filed return, or to pay any
35 final assessment of the tax, penalty, or interest as required
36 by any tax Act administered by the Illinois Department of

1 Revenue, until such time as the requirements of any such tax
2 Act are satisfied.

3 (e) In enforcing this Section, the Department or Board upon
4 a showing of a possible violation may compel an individual
5 licensed to practice under this Act, or who has applied for
6 licensure under this Act, to submit to a mental or physical
7 examination, or both, as required by and at the expense of the
8 Department. The Department or Board may order the examining
9 physician to present testimony concerning the mental or
10 physical examination of the licensee or applicant. No
11 information shall be excluded by reason of any common law or
12 statutory privilege relating to communications between the
13 licensee or applicant and the examining physician. The
14 examining physicians shall be specifically designated by the
15 Board or Department. The individual to be examined may have, at
16 his or her own expense, another physician of his or her choice
17 present during all aspects of this examination. Failure of an
18 individual to submit to a mental or physical examination, when
19 directed, shall be grounds for suspension of his or her license
20 until the individual submits to the examination if the
21 Department finds, after notice and hearing, that the refusal to
22 submit to the examination was without reasonable cause.

23 If the Department or Board finds an individual unable to
24 practice because of the reasons set forth in this Section, the
25 Department or Board may require that individual to submit to
26 care, counseling, or treatment by physicians approved or
27 designated by the Department or Board, as a condition, term, or
28 restriction for continued, reinstated, or renewed licensure to
29 practice; or, in lieu of care, counseling, or treatment, the
30 Department may file, or the Board may recommend to the
31 Department to file, a complaint to immediately suspend, revoke,
32 or otherwise discipline the license of the individual. An
33 individual whose license was granted, continued, reinstated,
34 renewed, disciplined or supervised subject to such terms,
35 conditions, or restrictions, and who fails to comply with such
36 terms, conditions, or restrictions, shall be referred to the

1 Director for a determination as to whether the individual shall
2 have his or her license suspended immediately, pending a
3 hearing by the Department.

4 In instances in which the Director immediately suspends a
5 person's license under this Section, a hearing on that person's
6 license must be convened by the Department within 15 days after
7 the suspension and completed without appreciable delay. The
8 Department and Board shall have the authority to review the
9 subject individual's record of treatment and counseling
10 regarding the impairment to the extent permitted by applicable
11 federal statutes and regulations safeguarding the
12 confidentiality of medical records.

13 An individual licensed under this Act and affected under
14 this Section shall be afforded an opportunity to demonstrate to
15 the Department or Board that he or she can resume practice in
16 compliance with acceptable and prevailing standards under the
17 provisions of his or her license.

18 (Source: P.A. 90-742, eff. 8-13-98.)

19 (225 ILCS 65/20-55)

20 (Section scheduled to be repealed on January 1, 2008)

21 Sec. 20-55. Suspension for imminent danger. The Director of
22 the Department may, upon receipt of a written communication
23 from the Secretary of Human Services, the Director of
24 Healthcare and Family Services (formerly Director of Public
25 Aid), or the Director of Public Health that continuation of
26 practice of a person licensed under this Act constitutes an
27 immediate danger to the public, immediately suspend the license
28 of such person without a hearing. In instances in which the
29 Director immediately suspends a license under this Section, a
30 hearing upon such person's license must be convened by the
31 Department within 30 days after such suspension and completed
32 without appreciable delay, such hearing held to determine
33 whether to recommend to the Director that the person's license
34 be revoked, suspended, placed on probationary status or
35 reinstated, or such person be subject to other disciplinary

1 action. In such hearing, the written communication and any
2 other evidence submitted therewith may be introduced as
3 evidence against such person; provided, however, the person, or
4 his or her counsel, shall have the opportunity to discredit or
5 impeach and submit evidence rebutting such evidence.

6 (Source: P.A. 89-507, eff. 7-1-97; 90-61, eff. 12-30-97;
7 90-742, eff. 8-13-98.)

8 Section 9350. The Illinois Optometric Practice Act of 1987
9 is amended by changing Section 24 as follows:

10 (225 ILCS 80/24) (from Ch. 111, par. 3924)

11 (Section scheduled to be repealed on January 1, 2007)

12 Sec. 24. Grounds for disciplinary action.

13 (a) The Department may refuse to issue or to renew, or may
14 revoke, suspend, place on probation, reprimand or take other
15 disciplinary action as the Department may deem proper,
16 including fines not to exceed \$5,000 for each violation, with
17 regard to any license or certificate for any one or combination
18 of the following causes:

19 (1) Violations of this Act, or of the rules promulgated
20 hereunder.

21 (2) Conviction of any crime under the laws of any U.S.
22 jurisdiction thereof that is a felony or that is a
23 misdemeanor of which an essential element is dishonesty, or
24 of any crime that is directly related to the practice of
25 the profession.

26 (3) Making any misrepresentation for the purpose of
27 obtaining a license or certificate.

28 (4) Professional incompetence or gross negligence in
29 the practice of optometry.

30 (5) Gross malpractice, prima facie evidence of which
31 may be a conviction or judgment of malpractice in any court
32 of competent jurisdiction.

33 (6) Aiding or assisting another person in violating any
34 provision of this Act or rules.

1 (7) Failing, within 60 days, to provide information in
2 response to a written request made by the Department that
3 has been sent by certified or registered mail to the
4 licensee's last known address.

5 (8) Engaging in dishonorable, unethical, or
6 unprofessional conduct of a character likely to deceive,
7 defraud, or harm the public.

8 (9) Habitual or excessive use or addiction to alcohol,
9 narcotics, stimulants or any other chemical agent or drug
10 that results in the inability to practice with reasonable
11 judgment, skill, or safety.

12 (10) Discipline by another U.S. jurisdiction or
13 foreign nation, if at least one of the grounds for the
14 discipline is the same or substantially equivalent to those
15 set forth herein.

16 (11) Directly or indirectly giving to or receiving from
17 any person, firm, corporation, partnership, or association
18 any fee, commission, rebate, or other form of compensation
19 for any professional services not actually or personally
20 rendered. This shall not be deemed to include (i) rent or
21 other remunerations paid to an individual, partnership, or
22 corporation by an optometrist for the lease, rental, or use
23 of space, owned or controlled, by the individual,
24 partnership, corporation or association, and (ii) the
25 division of fees between an optometrist and related
26 professional service providers with whom the optometrist
27 practices in a professional corporation organized under
28 Section 3.6 of the Professional Service Corporation Act.

29 (12) A finding by the Department that the licensee,
30 after having his or her license placed on probationary
31 status has violated the terms of probation.

32 (13) Abandonment of a patient.

33 (14) Willfully making or filing false records or
34 reports in his or her practice, including but not limited
35 to false records filed with State agencies or departments.

36 (15) Willfully failing to report an instance of

1 suspected child abuse or neglect as required by the Abused
2 and Neglected Child Reporting Act.

3 (16) Physical illness, including but not limited to,
4 deterioration through the aging process, or loss of motor
5 skill, mental illness, or disability that results in the
6 inability to practice the profession with reasonable
7 judgment, skill, or safety.

8 (17) Solicitation of professional services other than
9 permitted advertising.

10 (18) Failure to provide a patient with a copy of his or
11 her record or prescription upon the written request of the
12 patient.

13 (19) Conviction by any court of competent
14 jurisdiction, either within or without this State, of any
15 violation of any law governing the practice of optometry,
16 conviction in this or another State of any crime that is a
17 felony under the laws of this State or conviction of a
18 felony in a federal court, if the Department determines,
19 after investigation, that such person has not been
20 sufficiently rehabilitated to warrant the public trust.

21 (20) A finding that licensure has been applied for or
22 obtained by fraudulent means.

23 (21) Continued practice by a person knowingly having an
24 infectious or contagious disease.

25 (22) Being named as a perpetrator in an indicated
26 report by the Department of Children and Family Services
27 under the Abused and Neglected Child Reporting Act, and
28 upon proof by clear and convincing evidence that the
29 licensee has caused a child to be an abused child or a
30 neglected child as defined in the Abused and Neglected
31 Child Reporting Act.

32 (23) Practicing or attempting to practice under a name
33 other than the full name as shown on his or her license.

34 (24) Immoral conduct in the commission of any act, such
35 as sexual abuse, sexual misconduct or sexual exploitation,
36 related to the licensee's practice.

1 (25) Maintaining a professional relationship with any
2 person, firm, or corporation when the optometrist knows, or
3 should know, that such person, firm, or corporation is
4 violating this Act.

5 (26) Promotion of the sale of drugs, devices,
6 appliances or goods provided for a client or patient in
7 such manner as to exploit the patient or client for
8 financial gain of the licensee.

9 (27) Using the title "Doctor" or its abbreviation
10 without further qualifying that title or abbreviation with
11 the word "optometry" or "optometrist".

12 (28) Use by a licensed optometrist of the word
13 "infirmary", "hospital", "school", "university", in
14 English or any other language, in connection with the place
15 where optometry may be practiced or demonstrated.

16 (29) Continuance of an optometrist in the employ of any
17 person, firm or corporation, or as an assistant to any
18 optometrist or optometrists, directly or indirectly, after
19 his or her employer or superior has been found guilty of
20 violating or has been enjoined from violating the laws of
21 the State of Illinois relating to the practice of
22 optometry, when the employer or superior persists in that
23 violation.

24 (30) The performance of optometric service in
25 conjunction with a scheme or plan with another person, firm
26 or corporation known to be advertising in a manner contrary
27 to this Act or otherwise violating the laws of the State of
28 Illinois concerning the practice of optometry.

29 (31) Failure to provide satisfactory proof of having
30 participated in approved continuing education programs as
31 determined by the Board and approved by the Director.
32 Exceptions for extreme hardships are to be defined by the
33 rules of the Department.

34 (32) Willfully making or filing false records or
35 reports in the practice of optometry, including, but not
36 limited to false records to support claims against the

1 medical assistance program of the Department of Healthcare
2 and Family Services (formerly Department of Public Aid)
3 under the Illinois Public Aid Code.

4 (33) Gross and willful overcharging for professional
5 services including filing false statements for collection
6 of fees for which services are not rendered, including, but
7 not limited to filing false statements for collection of
8 monies for services not rendered from the medical
9 assistance program of the Department of Healthcare and
10 Family Services (formerly Department of Public Aid) under
11 the Illinois Public Aid Code.

12 (34) In the absence of good reasons to the contrary,
13 failure to perform a minimum eye examination as required by
14 the rules of the Department.

15 (35) Violation of the Health Care Worker Self-Referral
16 Act.

17 The Department may refuse to issue or may suspend the
18 license or certificate of any person who fails to file a
19 return, or to pay the tax, penalty or interest shown in a filed
20 return, or to pay any final assessment of the tax, penalty or
21 interest, as required by any tax Act administered by the
22 Illinois Department of Revenue, until such time as the
23 requirements of any such tax Act are satisfied.

24 (a-5) In enforcing this Section, the Board upon a showing
25 of a possible violation, may compel any individual licensed to
26 practice under this Act, or who has applied for licensure or
27 certification pursuant to this Act, to submit to a mental or
28 physical examination, or both, as required by and at the
29 expense of the Department. The examining physicians or clinical
30 psychologists shall be those specifically designated by the
31 Board. The Board or the Department may order the examining
32 physician or clinical psychologist to present testimony
33 concerning this mental or physical examination of the licensee
34 or applicant. No information shall be excluded by reason of any
35 common law or statutory privilege relating to communications
36 between the licensee or applicant and the examining physician

1 or clinical psychologist. Eye examinations may be provided by a
2 licensed and certified therapeutic optometrist. The individual
3 to be examined may have, at his or her own expense, another
4 physician of his or her choice present during all aspects of
5 the examination. Failure of any individual to submit to a
6 mental or physical examination, when directed, shall be grounds
7 for suspension of a license until such time as the individual
8 submits to the examination if the Board finds, after notice and
9 hearing, that the refusal to submit to the examination was
10 without reasonable cause.

11 If the Board finds an individual unable to practice because
12 of the reasons set forth in this Section, the Board shall
13 require such individual to submit to care, counseling, or
14 treatment by physicians or clinical psychologists approved or
15 designated by the Board, as a condition, term, or restriction
16 for continued, reinstated, or renewed licensure to practice, or
17 in lieu of care, counseling, or treatment, the Board may
18 recommend to the Department to file a complaint to immediately
19 suspend, revoke, or otherwise discipline the license of the
20 individual, or the Board may recommend to the Department to
21 file a complaint to suspend, revoke, or otherwise discipline
22 the license of the individual. Any individual whose license was
23 granted pursuant to this Act, or continued, reinstated,
24 renewed, disciplined, or supervised, subject to such
25 conditions, terms, or restrictions, who shall fail to comply
26 with such conditions, terms, or restrictions, shall be referred
27 to the Director for a determination as to whether the
28 individual shall have his or her license suspended immediately,
29 pending a hearing by the Board.

30 (b) The determination by a circuit court that a licensee is
31 subject to involuntary admission or judicial admission as
32 provided in the Mental Health and Developmental Disabilities
33 Code operates as an automatic suspension. The suspension will
34 end only upon a finding by a court that the patient is no
35 longer subject to involuntary admission or judicial admission
36 and issues an order so finding and discharging the patient; and

1 upon the recommendation of the Board to the Director that the
2 licensee be allowed to resume his or her practice.

3 (Source: P.A. 89-702, eff. 7-1-97; 90-230, eff. 1-1-98; 90-655,
4 eff. 7-30-98.)

5 Section 9355. The Pharmacy Practice Act of 1987 is amended
6 by changing Sections 30 and 33 as follows:

7 (225 ILCS 85/30) (from Ch. 111, par. 4150)

8 (Section scheduled to be repealed on January 1, 2008)

9 Sec. 30. (a) In accordance with Section 11 of this Act, the
10 Department may refuse to issue, restore, or renew, or may
11 revoke, suspend, place on probation, reprimand or take other
12 disciplinary action as the Department may deem proper with
13 regard to any license or certificate of registration for any
14 one or combination of the following causes:

15 1. Material misstatement in furnishing information to
16 the Department.

17 2. Violations of this Act, or the rules promulgated
18 hereunder.

19 3. Making any misrepresentation for the purpose of
20 obtaining licenses.

21 4. A pattern of conduct which demonstrates
22 incompetence or unfitness to practice.

23 5. Aiding or assisting another person in violating any
24 provision of this Act or rules.

25 6. Failing, within 60 days, to respond to a written
26 request made by the Department for information.

27 7. Engaging in dishonorable, unethical or
28 unprofessional conduct of a character likely to deceive,
29 defraud or harm the public.

30 8. Discipline by another U.S. jurisdiction or foreign
31 nation, if at least one of the grounds for the discipline
32 is the same or substantially equivalent to those set forth
33 herein.

34 9. Directly or indirectly giving to or receiving from

1 any person, firm, corporation, partnership or association
2 any fee, commission, rebate or other form of compensation
3 for any professional services not actually or personally
4 rendered.

5 10. A finding by the Department that the licensee,
6 after having his license placed on probationary status has
7 violated the terms of probation.

8 11. Selling or engaging in the sale of drug samples
9 provided at no cost by drug manufacturers.

10 12. Physical illness, including but not limited to,
11 deterioration through the aging process, or loss of motor
12 skill which results in the inability to practice the
13 profession with reasonable judgment, skill or safety.

14 13. A finding that licensure or registration has been
15 applied for or obtained by fraudulent means.

16 14. The applicant, or licensee has been convicted in
17 state or federal court of any crime which is a felony or
18 any misdemeanor related to the practice of pharmacy, of
19 which an essential element is dishonesty.

20 15. Habitual or excessive use or addiction to alcohol,
21 narcotics, stimulants or any other chemical agent or drug
22 which results in the inability to practice with reasonable
23 judgment, skill or safety.

24 16. Willfully making or filing false records or reports
25 in the practice of pharmacy, including, but not limited to
26 false records to support claims against the medical
27 assistance program of the Department of Healthcare and
28 Family Services (formerly Department of Public Aid) under
29 the Public Aid Code.

30 17. Gross and willful overcharging for professional
31 services including filing false statements for collection
32 of fees for which services are not rendered, including, but
33 not limited to, filing false statements for collection of
34 monies for services not rendered from the medical
35 assistance program of the Department of Healthcare and
36 Family Services (formerly Department of Public Aid) under

1 the Public Aid Code.

2 18. Repetitiously dispensing prescription drugs
3 without receiving a written or oral prescription.

4 19. Upon a finding of a substantial discrepancy in a
5 Department audit of a prescription drug, including
6 controlled substances, as that term is defined in this Act
7 or in the Illinois Controlled Substances Act.

8 20. Physical illness which results in the inability to
9 practice with reasonable judgment, skill or safety, or
10 mental incompetency as declared by a court of competent
11 jurisdiction.

12 21. Violation of the Health Care Worker Self-Referral
13 Act.

14 22. Failing to sell or dispense any drug, medicine, or
15 poison in good faith. "Good faith", for the purposes of
16 this Section, has the meaning ascribed to it in subsection
17 (u) of Section 102 of the Illinois Controlled Substances
18 Act.

19 23. Interfering with the professional judgment of a
20 pharmacist by any registrant under this Act, or his or her
21 agents or employees.

22 (b) The Department may refuse to issue or may suspend the
23 license or registration of any person who fails to file a
24 return, or to pay the tax, penalty or interest shown in a filed
25 return, or to pay any final assessment of tax, penalty or
26 interest, as required by any tax Act administered by the
27 Illinois Department of Revenue, until such time as the
28 requirements of any such tax Act are satisfied.

29 (c) The Department shall revoke the license or certificate
30 of registration issued under the provisions of this Act or any
31 prior Act of this State of any person who has been convicted a
32 second time of committing any felony under the Illinois
33 Controlled Substances Act, or who has been convicted a second
34 time of committing a Class 1 felony under Sections 8A-3 and
35 8A-6 of the Illinois Public Aid Code. A person whose license or
36 certificate of registration issued under the provisions of this

1 Act or any prior Act of this State is revoked under this
2 subsection (c) shall be prohibited from engaging in the
3 practice of pharmacy in this State.

4 (d) In any order issued in resolution of a disciplinary
5 proceeding, the Board may request any licensee found guilty of
6 a charge involving a significant violation of subsection (a) of
7 Section 5, or paragraph 19 of Section 30 as it pertains to
8 controlled substances, to pay to the Department a fine not to
9 exceed \$2,000.

10 (e) In any order issued in resolution of a disciplinary
11 proceeding, in addition to any other disciplinary action, the
12 Board may request any licensee found guilty of noncompliance
13 with the continuing education requirements of Section 12 to pay
14 the Department a fine not to exceed \$1000.

15 (f) The Department shall issue quarterly to the Board a
16 status of all complaints related to the profession received by
17 the Department.

18 (Source: P.A. 92-880, eff. 1-1-04.)

19 (225 ILCS 85/33) (from Ch. 111, par. 4153)

20 (Section scheduled to be repealed on January 1, 2008)

21 Sec. 33. The Director of the Department may, upon receipt
22 of a written communication from the Secretary of Human
23 Services, the Director of Healthcare and Family Services
24 (formerly Director of Public Aid), or the Director of Public
25 Health that continuation of practice of a person licensed or
26 registered under this Act constitutes an immediate danger to
27 the public, immediately suspend the license or registration of
28 such person without a hearing. In instances in which the
29 Director immediately suspends a license or registration under
30 this Act, a hearing upon such person's license must be convened
31 by the Board within 15 days after such suspension and completed
32 without appreciable delay, such hearing held to determine
33 whether to recommend to the Director that the person's license
34 be revoked, suspended, placed on probationary status or
35 reinstated, or such person be subject to other disciplinary

1 action. In such hearing, the written communication and any
2 other evidence submitted therewith may be introduced as
3 evidence against such person; provided however, the person, or
4 his counsel, shall have the opportunity to discredit or impeach
5 such evidence and submit evidence rebutting same.

6 (Source: P.A. 89-507, eff. 7-1-97; 90-655, eff. 7-30-98.)

7 Section 9360. The Podiatric Medical Practice Act of 1987 is
8 amended by changing Section 24 as follows:

9 (225 ILCS 100/24) (from Ch. 111, par. 4824)

10 (Section scheduled to be repealed on January 1, 2008)

11 Sec. 24. Refusal to issue or suspension or revocation of
12 license; grounds. The Department may refuse to issue, may
13 refuse to renew, may refuse to restore, may suspend, or may
14 revoke any license, or may place on probation, reprimand or
15 take other disciplinary action as the Department may deem
16 proper, including fines not to exceed \$5,000 for each violation
17 upon anyone licensed under this Act for any of the following
18 reasons:

19 (1) Making a material misstatement in furnishing
20 information to the Department.

21 (2) Violations of this Act, or of the rules or regulations
22 promulgated hereunder.

23 (3) Conviction of any crime under the laws of any United
24 States jurisdiction that is a felony or a misdemeanor, of which
25 an essential element is dishonesty, or of any crime that is
26 directly related to the practice of the profession.

27 (4) Making any misrepresentation for the purpose of
28 obtaining licenses, or violating any provision of this Act or
29 the rules promulgated thereunder pertaining to advertising.

30 (5) Professional incompetence.

31 (6) Gross or repeated malpractice or negligence.

32 (7) Aiding or assisting another person in violating any
33 provision of this Act or rules.

34 (8) Failing, within 60 days, to provide information in

1 response to a written request made by the Department.

2 (9) Engaging in dishonorable, unethical or unprofessional
3 conduct of a character likely to deceive, defraud or harm the
4 public.

5 (10) Habitual or excessive use of alcohol, narcotics,
6 stimulants or other chemical agent or drug that results in the
7 inability to practice podiatric medicine with reasonable
8 judgment, skill or safety.

9 (11) Discipline by another United States jurisdiction if at
10 least one of the grounds for the discipline is the same or
11 substantially equivalent to those set forth in this Section.

12 (12) Directly or indirectly giving to or receiving from any
13 person, firm, corporation, partnership or association any fee,
14 commission, rebate or other form of compensation for any
15 professional services not actually or personally rendered.
16 This shall not be deemed to include rent or other remunerations
17 paid to an individual, partnership, or corporation, by a
18 licensee, for the lease, rental or use of space, owned or
19 controlled, by the individual, partnership or corporation.

20 (13) A finding by the Podiatric Medical Licensing Board
21 that the licensee, after having his or her license placed on
22 probationary status, has violated the terms of probation.

23 (14) Abandonment of a patient.

24 (15) Willfully making or filing false records or reports in
25 his or her practice, including but not limited to false records
26 filed with state agencies or departments.

27 (16) Willfully failing to report an instance of suspected
28 child abuse or neglect as required by the Abused and Neglected
29 Child Report Act.

30 (17) Physical illness, including but not limited to,
31 deterioration through the aging process, or loss of motor skill
32 that results in the inability to practice the profession with
33 reasonable judgment, skill or safety.

34 (18) Solicitation of professional services other than
35 permitted advertising.

36 (19) The determination by a circuit court that a licensed

1 podiatric physician is subject to involuntary admission or
2 judicial admission as provided in the Mental Health and
3 Developmental Disabilities Code operates as an automatic
4 suspension. Such suspension will end only upon a finding by a
5 court that the patient is no longer subject to involuntary
6 admission or judicial admission and issues an order so finding
7 and discharging the patient; and upon the recommendation of the
8 Podiatric Medical Licensing Board to the Director that the
9 licensee be allowed to resume his or her practice.

10 (20) Holding oneself out to treat human ailments under any
11 name other than his or her own, or the impersonation of any
12 other physician.

13 (21) Revocation or suspension or other action taken with
14 respect to a podiatric medical license in another jurisdiction
15 that would constitute disciplinary action under this Act.

16 (22) Promotion of the sale of drugs, devices, appliances or
17 goods provided for a patient in such manner as to exploit the
18 patient for financial gain of the podiatric physician.

19 (23) Gross, willful, and continued overcharging for
20 professional services including filing false statements for
21 collection of fees for those services, including, but not
22 limited to, filing false statement for collection of monies for
23 services not rendered from the medical assistance program of
24 the Department of Healthcare and Family Services (formerly
25 Department of Public Aid) under the Illinois Public Aid Code or
26 other private or public third party payor.

27 (24) Being named as a perpetrator in an indicated report by
28 the Department of Children and Family Services under the Abused
29 and Neglected Child Reporting Act, and upon proof by clear and
30 convincing evidence that the licensee has caused a child to be
31 an abused child or neglected child as defined in the Abused and
32 Neglected Child Reporting Act.

33 (25) Willfully making or filing false records or reports in
34 the practice of podiatric medicine, including, but not limited
35 to, false records to support claims against the medical
36 assistance program of the Department of Healthcare and Family

1 Services (formerly Department of Public Aid) under the Illinois
2 Public Aid Code.

3 (26) Mental illness or disability that results in the
4 inability to practice with reasonable judgment, skill or
5 safety.

6 (27) Immoral conduct in the commission of any act
7 including, sexual abuse, sexual misconduct, or sexual
8 exploitation, related to the licensee's practice.

9 (28) Violation of the Health Care Worker Self-Referral Act.

10 (29) Failure to report to the Department any adverse final
11 action taken against him or her by another licensing
12 jurisdiction (another state or a territory of the United States
13 or a foreign state or country) by a peer review body, by any
14 health care institution, by a professional society or
15 association related to practice under this Act, by a
16 governmental agency, by a law enforcement agency, or by a court
17 for acts or conduct similar to acts or conduct that would
18 constitute grounds for action as defined in this Section.

19 The Department may refuse to issue or may suspend the
20 license of any person who fails to file a return, or to pay the
21 tax, penalty or interest shown in a filed return, or to pay any
22 final assessment of tax, penalty or interest, as required by
23 any tax Act administered by the Illinois Department of Revenue,
24 until such time as the requirements of any such tax Act are
25 satisfied.

26 Upon receipt of a written communication from the Secretary
27 of Human Services, the Director of Healthcare and Family
28 Services (formerly Director of Public Aid), or the Director of
29 Public Health that continuation of practice of a person
30 licensed under this Act constitutes an immediate danger to the
31 public, the Director may immediately suspend the license of
32 such person without a hearing. In instances in which the
33 Director immediately suspends a license under this Section, a
34 hearing upon such person's license must be convened by the
35 Board within 15 days after such suspension and completed
36 without appreciable delay, such hearing held to determine

1 whether to recommend to the Director that the person's license
2 be revoked, suspended, placed on probationary status or
3 reinstated, or such person be subject to other disciplinary
4 action. In such hearing, the written communication and any
5 other evidence submitted therewith may be introduced as
6 evidence against such person; provided, however, the person or
7 his counsel shall have the opportunity to discredit or impeach
8 such evidence and submit evidence rebutting the same.

9 All proceedings to suspend, revoke, place on probationary
10 status, or take any other disciplinary action as the Department
11 may deem proper, with regard to a license on any of the
12 foregoing grounds, must be commenced within 3 years after
13 receipt by the Department of a complaint alleging the
14 commission of or notice of the conviction order for any of the
15 acts described in this Section. Except for fraud in procuring a
16 license, no action shall be commenced more than 5 years after
17 the date of the incident or act alleged to have been a
18 violation of this Section. In the event of the settlement of
19 any claim or cause of action in favor of the claimant or the
20 reduction to final judgment of any civil action in favor of the
21 plaintiff, such claim, cause of action, or civil action being
22 grounded on the allegation that a person licensed under this
23 Act was negligent in providing care, the Department shall have
24 an additional period of one year from the date of notification
25 to the Department under Section 26 of this Act of such
26 settlement or final judgment in which to investigate and
27 commence formal disciplinary proceedings under Section 24 of
28 this Act, except as otherwise provided by law. The time during
29 which the holder of the license was outside the State of
30 Illinois shall not be included within any period of time
31 limiting the commencement of disciplinary action by the
32 Department.

33 In enforcing this Section, the Department or Board upon a
34 showing of a possible violation may compel an individual
35 licensed to practice under this Act, or who has applied for
36 licensure under this Act, to submit to a mental or physical

1 examination, or both, as required by and at the expense of the
2 Department. The Department or Board may order the examining
3 physician to present testimony concerning the mental or
4 physical examination of the licensee or applicant. No
5 information shall be excluded by reason of any common law or
6 statutory privilege relating to communications between the
7 licensee or applicant and the examining physician. The
8 examining physicians shall be specifically designated by the
9 Board or Department. The individual to be examined may have, at
10 his or her own expense, another physician of his or her choice
11 present during all aspects of this examination. Failure of an
12 individual to submit to a mental or physical examination, when
13 directed, shall be grounds for suspension of his or her license
14 until the individual submits to the examination if the
15 Department finds, after notice and hearing, that the refusal to
16 submit to the examination was without reasonable cause.

17 If the Department or Board finds an individual unable to
18 practice because of the reasons set forth in this Section, the
19 Department or Board may require that individual to submit to
20 care, counseling, or treatment by physicians approved or
21 designated by the Department or Board, as a condition, term, or
22 restriction for continued, reinstated, or renewed licensure to
23 practice; or, in lieu of care, counseling, or treatment, the
24 Department may file, or the Board may recommend to the
25 Department to file, a complaint to immediately suspend, revoke,
26 or otherwise discipline the license of the individual. An
27 individual whose license was granted, continued, reinstated,
28 renewed, disciplined or supervised subject to such terms,
29 conditions, or restrictions, and who fails to comply with such
30 terms, conditions, or restrictions, shall be referred to the
31 Director for a determination as to whether the individual shall
32 have his or her license suspended immediately, pending a
33 hearing by the Department.

34 In instances in which the Director immediately suspends a
35 person's license under this Section, a hearing on that person's
36 license must be convened by the Department within 15 days after

1 the suspension and completed without appreciable delay. The
2 Department and Board shall have the authority to review the
3 subject individual's record of treatment and counseling
4 regarding the impairment to the extent permitted by applicable
5 federal statutes and regulations safeguarding the
6 confidentiality of medical records.

7 An individual licensed under this Act and affected under
8 this Section shall be afforded an opportunity to demonstrate to
9 the Department or Board that he or she can resume practice in
10 compliance with acceptable and prevailing standards under the
11 provisions of his or her license.

12 (Source: P.A. 89-507, eff. 7-1-97; 90-76, eff. 12-30-97.)

13 Section 9365. The Illinois Speech-Language Pathology and
14 Audiology Practice Act is amended by changing Section 16 as
15 follows:

16 (225 ILCS 110/16) (from Ch. 111, par. 7916)

17 (Section scheduled to be repealed on January 1, 2008)

18 Sec. 16. Refusal, revocation or suspension of licenses.

19 (1) The Department may refuse to issue or renew, or may
20 revoke, suspend, place on probation, censure, reprimand or take
21 other disciplinary action as the Department may deem proper,
22 including fines not to exceed \$5,000 for each violation, with
23 regard to any license for any one or combination of the
24 following causes:

25 (a) Fraud in procuring the license.

26 (b) Habitual intoxication or addiction to the use of
27 drugs.

28 (c) Willful or repeated violations of the rules of the
29 Department of Public Health.

30 (d) Division of fees or agreeing to split or divide the
31 fees received for speech-language pathology or audiology
32 services with any person for referring an individual, or
33 assisting in the care or treatment of an individual,
34 without the knowledge of the individual or his or her legal

1 representative.

2 (e) Employing, procuring, inducing, aiding or abetting
3 a person not licensed as a speech-language pathologist or
4 audiologist to engage in the unauthorized practice of
5 speech-language pathology or audiology.

6 (e-5) Employing, procuring, inducing, aiding, or
7 abetting a person not licensed as a speech-language
8 pathology assistant to perform the functions and duties of
9 a speech-language pathology assistant.

10 (f) Making any misrepresentations or false promises,
11 directly or indirectly, to influence, persuade or induce
12 patronage.

13 (g) Professional connection or association with, or
14 lending his or her name to another for the illegal practice
15 of speech-language pathology or audiology by another, or
16 professional connection or association with any person,
17 firm or corporation holding itself out in any manner
18 contrary to this Act.

19 (h) Obtaining or seeking to obtain checks, money, or
20 any other things of value by false or fraudulent
21 representations, including but not limited to, engaging in
22 such fraudulent practice to defraud the medical assistance
23 program of the Department of Healthcare and Family Services
24 (formerly Department of Public Aid).

25 (i) Practicing under a name other than his or her own.

26 (j) Improper, unprofessional or dishonorable conduct
27 of a character likely to deceive, defraud or harm the
28 public.

29 (k) Conviction in this or another state of any crime
30 which is a felony under the laws of this State or
31 conviction of a felony in a federal court, if the
32 Department determines, after investigation, that such
33 person has not been sufficiently rehabilitated to warrant
34 the public trust.

35 (l) Permitting a person under his or her supervision to
36 perform any function not authorized by this Act.

1 (m) A violation of any provision of this Act or rules
2 promulgated thereunder.

3 (n) Revocation by another state, the District of
4 Columbia, territory, or foreign nation of a license to
5 practice speech-language pathology or audiology or a
6 license to practice as a speech-language pathology
7 assistant in its jurisdiction if at least one of the
8 grounds for that revocation is the same as or the
9 equivalent of one of the grounds for revocation set forth
10 herein.

11 (o) Willfully failing to report an instance of
12 suspected child abuse or neglect as required by the Abused
13 and Neglected Child Reporting Act.

14 (p) Gross or repeated malpractice resulting in injury
15 or death of an individual.

16 (q) Willfully making or filing false records or reports
17 in his or her practice as a speech-language pathologist,
18 speech-language pathology assistant, or audiologist,
19 including, but not limited to, false records to support
20 claims against the public assistance program of the
21 Department of Healthcare and Family Services (formerly
22 Illinois Department of Public Aid).

23 (r) Professional incompetence as manifested by poor
24 standards of care or mental incompetence as declared by a
25 court of competent jurisdiction.

26 (s) Repeated irregularities in billing a third party
27 for services rendered to an individual. For purposes of
28 this Section, "irregularities in billing" shall include:

29 (i) reporting excessive charges for the purpose of
30 obtaining a total payment in excess of that usually
31 received by the speech-language pathologist,
32 speech-language pathology assistant, or audiologist
33 for the services rendered;

34 (ii) reporting charges for services not rendered;

35 or

36 (iii) incorrectly reporting services rendered for

1 the purpose of obtaining payment not earned.

2 (t) (Blank).

3 (u) Violation of the Health Care Worker Self-Referral
4 Act.

5 (v) Physical illness, including but not limited to
6 deterioration through the aging process or loss of motor
7 skill, mental illness, or disability that results in the
8 inability to practice the profession with reasonable
9 judgment, skill, or safety.

10 (w) Violation of the Hearing Instrument Consumer
11 Protection Act.

12 (x) Failure by a speech-language pathology assistant
13 and supervising speech-language pathologist to comply with
14 the supervision requirements set forth in Section 8.8.

15 (y) Wilfully exceeding the scope of duties customarily
16 undertaken by speech-language pathology assistants set
17 forth in Section 8.7 that results in, or may result in,
18 harm to the public.

19 (2) The Department shall deny a license or renewal
20 authorized by this Act to any person who has defaulted on an
21 educational loan guaranteed by the Illinois State Scholarship
22 Commission; however, the Department may issue a license or
23 renewal if the aforementioned persons have established a
24 satisfactory repayment record as determined by the Illinois
25 State Scholarship Commission.

26 (3) The entry of an order by a circuit court establishing
27 that any person holding a license under this Act is subject to
28 involuntary admission or judicial admission as provided for in
29 the Mental Health and Developmental Disabilities Code,
30 operates as an automatic suspension of that license. That
31 person may have his or her license restored only upon the
32 determination by a circuit court that the patient is no longer
33 subject to involuntary admission or judicial admission and the
34 issuance of an order so finding and discharging the patient,
35 and upon the Board's recommendation to the Department that the
36 license be restored. Where the circumstances so indicate, the

1 Board may recommend to the Department that it require an
2 examination prior to restoring any license automatically
3 suspended under this subsection.

4 (4) The Department may refuse to issue or may suspend the
5 license of any person who fails to file a return, or to pay the
6 tax, penalty, or interest shown in a filed return, or to pay
7 any final assessment of the tax penalty or interest, as
8 required by any tax Act administered by the Department of
9 Revenue, until such time as the requirements of any such tax
10 Act are satisfied.

11 (5) In enforcing this Section, the Board upon a showing of
12 a possible violation may compel an individual licensed to
13 practice under this Act, or who has applied for licensure
14 pursuant to this Act, to submit to a mental or physical
15 examination, or both, as required by and at the expense of the
16 Department. The examining physicians or clinical psychologists
17 shall be those specifically designated by the Board. The
18 individual to be examined may have, at his or her own expense,
19 another physician or clinical psychologist of his or her choice
20 present during all aspects of this examination. Failure of any
21 individual to submit to a mental or physical examination, when
22 directed, shall be grounds for suspension of his or her license
23 until the individual submits to the examination if the Board
24 finds, after notice and hearing, that the refusal to submit to
25 the examination was without reasonable cause.

26 If the Board finds an individual unable to practice because
27 of the reasons set forth in this Section, the Board may require
28 that individual to submit to care, counseling, or treatment by
29 physicians or clinical psychologists approved or designated by
30 the Board, as a condition, term, or restriction for continued,
31 reinstated, or renewed licensure to practice; or, in lieu of
32 care, counseling, or treatment, the Board may recommend to the
33 Department to file a complaint to immediately suspend, revoke,
34 or otherwise discipline the license of the individual. Any
35 individual whose license was granted, continued, reinstated,
36 renewed, disciplined or supervised subject to such terms,

1 conditions, or restrictions, and who fails to comply with such
2 terms, conditions, or restrictions, shall be referred to the
3 Director for a determination as to whether the individual shall
4 have his or her license suspended immediately, pending a
5 hearing by the Board.

6 In instances in which the Director immediately suspends a
7 person's license under this Section, a hearing on that person's
8 license must be convened by the Board within 15 days after the
9 suspension and completed without appreciable delay. The Board
10 shall have the authority to review the subject individual's
11 record of treatment and counseling regarding the impairment to
12 the extent permitted by applicable federal statutes and
13 regulations safeguarding the confidentiality of medical
14 records.

15 An individual licensed under this Act and affected under
16 this Section shall be afforded an opportunity to demonstrate to
17 the Board that he or she can resume practice in compliance with
18 acceptable and prevailing standards under the provisions of his
19 or her license.

20 (Source: P.A. 91-949, eff. 2-9-01; 92-510, eff. 6-1-02.)

21 Section 9370. The Auction License Act is amended by
22 changing Section 20-20 as follows:

23 (225 ILCS 407/20-20)

24 (Section scheduled to be repealed on January 1, 2010)

25 Sec. 20-20. Termination without hearing for failure to pay
26 taxes, child support, or a student loan. OBRE may terminate or
27 otherwise discipline any license issued under this Act without
28 hearing if the appropriate administering agency provides
29 adequate information and proof that the licensee has:

30 (1) failed to file a return, to pay the tax, penalty,
31 or interest shown in a filed return, or to pay any final
32 assessment of tax, penalty, or interest, as required by any
33 tax act administered by the Illinois Department of Revenue
34 until the requirements of the tax act are satisfied;

1 (2) failed to pay any court ordered child support as
2 determined by a court order or by referral from the
3 Department of Healthcare and Family Services (formerly
4 Illinois Department of Public Aid); or

5 (3) failed to repay any student loan or assistance as
6 determined by the Illinois Student Assistance
7 Commission. If a license is terminated or otherwise
8 disciplined pursuant to this Section, the licensee may
9 request a hearing as provided by this Act within 30 days of
10 notice of termination or discipline.

11 (Source: P.A. 91-603, eff. 1-1-00.)

12 Section 9375. The Home Inspector License Act is amended by
13 changing Section 15-50 as follows:

14 (225 ILCS 441/15-50)

15 (Section scheduled to be repealed on January 1, 2012)

16 Sec. 15-50. Nonpayment of child support. In cases where the
17 Department of Healthcare and Family Services (formerly
18 Department of Public Aid) has previously determined that a
19 licensee or a potential licensee is more than 30 days
20 delinquent in the payment of child support and has subsequently
21 certified the delinquency to OBRE, OBRE may refuse to issue or
22 renew or may revoke or suspend that person's license or may
23 take other disciplinary action against that person based solely
24 upon the certification of delinquency made by the Department of
25 Healthcare and Family Services (formerly Department of Public
26 Aid). Redetermination of the delinquency by OBRE shall not be
27 required. In cases regarding the renewal of a license, OBRE
28 shall not renew any license if the Department of Healthcare and
29 Family Services (formerly Department of Public Aid) has
30 certified the licensee to be more than 30 days delinquent in
31 the payment of child support unless the licensee has arranged
32 for payment of past and current child support obligations in a
33 manner satisfactory to the Department of Healthcare and Family
34 Services (formerly Department of Public Aid). OBRE may impose

1 conditions, restrictions, or disciplinary action upon that
2 renewal.

3 (Source: P.A. 92-239, eff. 8-3-01.)

4 Section 9380. The Private Detective, Private Alarm,
5 Private Security, and Locksmith Act of 2004 is amended by
6 changing Section 40-40 as follows:

7 (225 ILCS 447/40-40)

8 (Section scheduled to be repealed on January 1, 2014)

9 Sec. 40-40. Nonpayment of child support. In cases where the
10 Department of Healthcare and Family Services (formerly
11 Department of Public Aid) or any circuit court has previously
12 determined that a licensee or a potential licensee is more than
13 30 days delinquent in the payment of child support and has
14 subsequently certified the delinquency to the Department, the
15 Department may refuse to issue or renew or may revoke or
16 suspend that person's license or may take other disciplinary
17 action against that person based solely upon the certification
18 of delinquency made by the Department of Healthcare and Family
19 Services (formerly Department of Public Aid) or a circuit
20 court. Redetermination of the delinquency by the Department
21 shall not be required. In cases regarding the renewal of a
22 license, the Department shall not renew any license if the
23 Department of Healthcare and Family Services (formerly
24 Department of Public Aid) or a circuit court has certified the
25 licensee to be more than 30 days delinquent in the payment of
26 child support, unless the licensee has arranged for payment of
27 past and current child support obligations in a manner
28 satisfactory to the Department of Healthcare and Family
29 Services (formerly Department of Public Aid) or circuit court.
30 The Department may impose conditions, restrictions or
31 disciplinary action upon that renewal in accordance with
32 Section 40-10 of this Act.

33 (Source: P.A. 93-438, eff. 8-5-03.)

1 Section 9385. The Real Estate License Act of 2000 is
2 amended by changing Section 20-45 as follows:

3 (225 ILCS 454/20-45)

4 (Section scheduled to be repealed on January 1, 2010)

5 Sec. 20-45. Nonpayment of child support. In cases in which
6 the Department of Healthcare and Family Services (formerly
7 Department of Public Aid) has previously determined that a
8 licensee or a potential licensee is more than 30 days
9 delinquent in the payment of child support and has subsequently
10 certified the delinquency to OBRE, OBRE may refuse to issue or
11 renew or may revoke or suspend that person's license or may
12 take other disciplinary action against that person based solely
13 upon the certification of delinquency made by the Department of
14 Healthcare and Family Services (formerly Department of Public
15 Aid). Redetermination of the delinquency by OBRE shall not be
16 required. In cases regarding the renewal of a license, OBRE
17 shall not renew any license if the Department of Healthcare and
18 Family Services (formerly Department of Public Aid) has
19 certified the licensee to be more than 30 days delinquent in
20 the payment of child support unless the licensee has arranged
21 for payment of past and current child support obligations in a
22 manner satisfactory to the Department of Healthcare and Family
23 Services (formerly Department of Public Aid). OBRE may impose
24 conditions, restrictions, or disciplinary action upon that
25 renewal.

26 (Source: P.A. 91-245, eff. 12-31-99.)

27 Section 9390. The Real Estate Appraiser Licensing Act of
28 2002 is amended by changing Section 15-50 as follows:

29 (225 ILCS 458/15-50)

30 (Section scheduled to be repealed on January 1, 2012)

31 Sec. 15-50. Nonpayment of child support. In cases where the
32 Department of Healthcare and Family Services (formerly
33 Department of Public Aid) has previously determined that a

1 licensee or a potential licensee is more than 30 days
2 delinquent in the payment of child support and has subsequently
3 certified the delinquency to OBRE, OBRE may refuse to issue or
4 renew or may revoke or suspend that person's license or may
5 take other disciplinary action against that person based solely
6 upon the certification of delinquency made by the Department of
7 Healthcare and Family Services (formerly Department of Public
8 Aid). Redetermination of the delinquency by OBRE shall not be
9 required. In cases regarding the renewal of a license, OBRE
10 shall not renew any license if the Department of Healthcare and
11 Family Services (formerly Department of Public Aid) has
12 certified the licensee to be more than 30 days delinquent in
13 the payment of child support, unless the licensee has arranged
14 for payment of past and current child support obligations in a
15 manner satisfactory to the Department of Healthcare and Family
16 Services (formerly Department of Public Aid). OBRE may impose
17 conditions, restrictions, or disciplinary action upon that
18 renewal.

19 (Source: P.A. 92-180, eff. 7-1-02.)

20 Section 9395. The Illinois Public Aid Code is amended by
21 changing Sections 2-12, 2-12.5, 2-14, 4-1.7, 4-4.1, 5-1.1,
22 5-2.05, 5-4, 5-5, 5-5.01, 5-5.1, 5-5.3, 5-5.4, 5-5.4c, 5-5.5,
23 5-5.5a, 5-5.7, 5-5.8a, 5-5.8b, 5-5.22, 5-5.23, 5-5.24, 5-5d,
24 5-9, 5-11, 5-11.1, 5-16.1, 5-16.4, 5-21, 5-24, 5A-2, 5A-4,
25 5A-5, 5A-10, 5A-13, 6-11, 9-1, 9-13, 9A-9.5, 10-1, 10-10.4,
26 10-15, 10-16.7, 10-17.9, 10-24.35, 10-24.40, 10-24.50, 11-9,
27 11-16, 12-1, 12-4.7c, 12-4.25, 12-4.35, 12-4.201, 12-9,
28 12-10.2a, 12-10.4, 12-10.5, 12-13.1, and 12-16 as follows:

29 (305 ILCS 5/2-12) (from Ch. 23, par. 2-12)

30 Sec. 2-12. "Illinois Department"; "Department". In this
31 Code, "Illinois Department" or "Department", when a particular
32 entity is not specified, means the following:

33 (1) In the case of a function performed before July 1, 1997
34 (the effective date of the Department of Human Services Act),

1 the term means the Department of Public Aid.

2 (2) In the case of a function to be performed on or after
3 July 1, 1997 under Article III, IV, VI, IX, or IXA, the term
4 means the Department of Human Services as successor to the
5 Illinois Department of Public Aid.

6 (3) In the case of a function to be performed on or after
7 July 1, 1997 under Article V, V-A, V-B, V-C, V-D, V-E, X, XIV,
8 or XV, the term means the Department of Healthcare and Family
9 Services (formerly Illinois Department of Public Aid).

10 (4) In the case of a function to be performed on or after
11 July 1, 1997 under Article I, II, VIIIA, XI, XII, or XIII, the
12 term means the Department of Human Services (acting as
13 successor to the Illinois Department of Public Aid) or the
14 Department of Healthcare and Family Services (formerly
15 Illinois Department of Public Aid) or both, according to
16 whether that function, in the specific context, has been
17 allocated to the Department of Human Services or the Department
18 of Healthcare and Family Services (formerly Department of
19 Public Aid) or both of those departments.

20 (Source: P.A. 89-507, eff. 7-1-97.)

21 (305 ILCS 5/2-12.5)

22 Sec. 2-12.5. "Director of the Illinois Department";
23 "Director of the Department"; "Director". In this Code,
24 "Director of the Illinois Department", "Director of the
25 Department", or "Director", when a particular official is not
26 specified, means the following:

27 (1) In the case of a function performed before July 1, 1997
28 (the effective date of the Department of Human Services Act),
29 the term means the Director of Public Aid.

30 (2) In the case of a function to be performed on or after
31 July 1, 1997 under Article III, IV, VI, IX, or IXA, the term
32 means the Secretary of Human Services.

33 (3) In the case of a function to be performed on or after
34 July 1, 1997 under Article V, V-A, V-B, V-C, V-D, V-E, X, XIV,
35 or XV, the term means the Director of Healthcare and Family

1 Services (formerly Director of Public Aid).

2 (4) In the case of a function to be performed on or after
3 July 1, 1997 under Article I, II, VIIIA, XI, XII, or XIII, the
4 term means the Secretary of Human Services or the Director of
5 Healthcare and Family Services (formerly Director of Public
6 Aid) or both, according to whether that function, in the
7 specific context, has been allocated to the Department of Human
8 Services or the Department of Healthcare and Family Services
9 (formerly Department of Public Aid) or both of those
10 departments.

11 (Source: P.A. 89-507, eff. 7-1-97.)

12 (305 ILCS 5/2-14) (from Ch. 23, par. 2-14)

13 Sec. 2-14. "Local governmental unit". Every county, city,
14 village, incorporated town or township charged with the duty of
15 providing public aid under Article VI; and County Veterans
16 Assistance Commissions providing general assistance to
17 indigent war veterans and their families under Section 12-21.13
18 of Article XII.

19 However, should any Section of this Code impose the
20 obligation of providing medical assistance to persons who are
21 non-residents of the State of Illinois upon a local
22 governmental unit, the term "local governmental unit" shall not
23 include townships. In such case the obligation for providing
24 medical assistance to non-residents which would otherwise be
25 the duty of a township shall become the obligation of the
26 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
27 ~~Aid~~.

28 (Source: P.A. 81-519; 81-1085; 81-1509.)

29 (305 ILCS 5/4-1.7) (from Ch. 23, par. 4-1.7)

30 Sec. 4-1.7. Enforcement of Parental Child Support
31 Obligation. If the parent or parents of the child are failing
32 to meet or are delinquent in their legal obligation to support
33 the child, the parent or other person having custody of the
34 child or the ~~Illinois~~ Department of Healthcare and Family

1 Services ~~Public Aid~~ may request the law enforcement officer
2 authorized or directed by law to so act to file action for the
3 enforcement of such remedies as the law provides for the
4 fulfillment of the child support obligation.

5 If a parent has a judicial remedy against the other parent
6 to compel child support, or if, as the result of an action
7 initiated by or in behalf of one parent against the other, a
8 child support order has been entered in respect to which there
9 is noncompliance or delinquency, or where the order so entered
10 may be changed upon petition to the court to provide additional
11 support, the parent or other person having custody of the child
12 or the ~~Illinois~~ Department of Healthcare and Family Services
13 ~~Public Aid~~ may request the appropriate law enforcement officer
14 to seek enforcement of the remedy, or of the support order, or
15 a change therein to provide additional support. If the law
16 enforcement officer is not authorized by law to so act in these
17 instances, the parent, or if so authorized by law the other
18 person having custody of the child, or the ~~Illinois~~ Department
19 of Healthcare and Family Services ~~Public Aid~~ may initiate an
20 action to enforce these remedies.

21 A parent or other person having custody of the child must
22 comply with the requirements of Title IV of the federal Social
23 Security Act, and the regulations duly promulgated thereunder,
24 and any rules promulgated by the Illinois Department regarding
25 enforcement of the child support obligation. The ~~Illinois~~
26 Department of Healthcare and Family Services ~~Public Aid~~ and the
27 Department of Human Services may provide by rule for the grant
28 or continuation of aid to the person for a temporary period if
29 he or she accepts counseling or other services designed to
30 increase his or her motivation to seek enforcement of the child
31 support obligation.

32 In addition to any other definition of failure or refusal
33 to comply with the requirements of Title IV of the federal
34 Social Security Act, or Illinois Department rule, in the case
35 of failure to attend court hearings, the parent or other person
36 can show cooperation by attending a court hearing or, if a

1 court hearing cannot be scheduled within 14 days following the
2 court hearing that was missed, by signing a statement that the
3 parent or other person is now willing to cooperate in the child
4 support enforcement process and will appear at any later
5 scheduled court date. The parent or other person can show
6 cooperation by signing such a statement only once. If failure
7 to attend the court hearing or other failure to cooperate
8 results in the case being dismissed, such a statement may be
9 signed after 2 months.

10 No denial or termination of medical assistance pursuant to
11 this Section shall commence during pregnancy of the parent or
12 other person having custody of the child or for 30 days after
13 the termination of such pregnancy. The termination of medical
14 assistance may commence thereafter if the ~~Illinois~~ Department
15 of Healthcare and Family Services ~~Public Aid~~ determines that
16 the failure or refusal to comply with this Section persists.
17 Postponement of denial or termination of medical assistance
18 during pregnancy under this paragraph shall be effective only
19 to the extent it does not conflict with federal law or
20 regulation.

21 Any evidence a parent or other person having custody of the
22 child gives in order to comply with the requirements of this
23 Section shall not render him or her liable to prosecution under
24 Sections 11-7 or 11-8 of the "Criminal Code of 1961", approved
25 July 28, 1961, as amended.

26 When so requested, the ~~Illinois~~ Department of Healthcare
27 and Family Services ~~Public Aid~~ and the Department of Human
28 Services shall provide such services and assistance as the law
29 enforcement officer may require in connection with the filing
30 of any action hereunder.

31 The ~~Illinois~~ Department of Healthcare and Family Services
32 ~~Public Aid~~ and the Department of Human Services, as an expense
33 of administration, may also provide applicants for and
34 recipients of aid with such services and assistance, including
35 assumption of the reasonable costs of prosecuting any action or
36 proceeding, as may be necessary to enable them to enforce the

1 child support liability required hereunder.

2 Nothing in this Section shall be construed as a requirement
3 that an applicant or recipient file an action for dissolution
4 of marriage against his or her spouse.

5 (Source: P.A. 92-651, eff. 7-11-02.)

6 (305 ILCS 5/4-4.1)

7 Sec. 4-4.1. Immunizations.

8 (a) The Department of Healthcare and Family Services
9 (formerly Illinois Department of Public Aid) shall develop and
10 implement and that Department and the Department of Human
11 Services shall jointly continue by rule a program to ensure
12 that children under 5 years of age living in assistance units
13 that receive benefits under this Code are immunized. The
14 Illinois Department of Public Aid shall report to the Governor
15 and the General Assembly on the progress of the program on
16 April 1, 1994 and 1995.

17 (b) Nothing in this Section shall be construed to require
18 immunization of any child in contravention of the stated
19 objections of a parent, guardian, or relative with custody of a
20 child that the administration of immunizing agents conflicts
21 with his or her religious tenets and practices.

22 (Source: P.A. 88-342; 89-507, eff. 7-1-97.)

23 (305 ILCS 5/5-1.1) (from Ch. 23, par. 5-1.1)

24 Sec. 5-1.1. Definitions. The terms defined in this Section
25 shall have the meanings ascribed to them, except when the
26 context otherwise requires.

27 (a) "Skilled nursing facility" means a nursing home
28 eligible to participate as a skilled nursing facility under
29 Title XIX of the federal Social Security Act.

30 (b) "Intermediate care facility" means a nursing home
31 eligible to participate as an intermediate care facility under
32 Title XIX of the federal Social Security Act.

33 (c) "Standard services" means those services required for
34 the care of all patients in the facility and shall as a minimum

1 include the following: (1) administration; (2) dietary
2 (standard); (3) housekeeping; (4) laundry and linen; (5)
3 maintenance of property and equipment, including utilities;
4 (6) medical records; (7) training of employees; (8) utilization
5 review; (9) activities services; (10) social services; (11)
6 disability services; and all other similar services required by
7 either the laws of the State of Illinois or one of its
8 political subdivisions or municipalities or by Title XIX of the
9 Social Security Act.

10 (d) "Patient services" means those which vary with the
11 number of personnel; professional and para-professional skills
12 of the personnel; specialized equipment, and reflect the
13 intensity of the medical and psycho-social needs of the
14 patients. Patient services shall as a minimum include: (1)
15 physical services; (2) nursing services, including restorative
16 nursing; (3) medical direction and patient care planning; (4)
17 health related supportive and habilitative services and all
18 similar services required by either the laws of the State of
19 Illinois or one of its political subdivisions or municipalities
20 or by Title XIX of the Social Security Act.

21 (e) "Ancillary services" means those services which
22 require a specific physician's order and defined as under the
23 medical assistance program as not being routine in nature for
24 skilled nursing and intermediate care facilities. Such
25 services generally must be authorized prior to delivery and
26 payment as provided for under the rules of the Department of
27 Healthcare and Family Services ~~Public Aid~~.

28 (f) "Capital" means the investment in a facility's assets
29 for both debt and non-debt funds. Non-debt capital is the
30 difference between an adjusted replacement value of the assets
31 and the actual amount of debt capital.

32 (g) "Profit" means the amount which shall accrue to a
33 facility as a result of its revenues exceeding its expenses as
34 determined in accordance with generally accepted accounting
35 principles.

36 (h) "Non-institutional services" means those services

1 provided under paragraph (f) of Section 3 of the Disabled
2 Persons Rehabilitation Act and those services provided under
3 Section 4.02 of the Illinois Act on the Aging.

4 (i) "Exceptional medical care" means the level of medical
5 care required by persons who are medically stable for discharge
6 from a hospital but who require acute intensity hospital level
7 care for physician, nurse and ancillary specialist services,
8 including persons with acquired immunodeficiency syndrome
9 (AIDS) or a related condition. Such care shall consist of those
10 services which the Department shall determine by rule.

11 (j) "Institutionalized person" means an individual who is
12 an inpatient in an intermediate care or skilled nursing
13 facility, or who is an inpatient in a medical institution
14 receiving a level of care equivalent to that of an intermediate
15 care or skilled nursing facility, or who is receiving services
16 under Section 1915(c) of the Social Security Act.

17 (k) "Institutionalized spouse" means an institutionalized
18 person who is expected to receive services at the same level of
19 care for at least 30 days and is married to a spouse who is not
20 an institutionalized person.

21 (l) "Community spouse" is the spouse of an
22 institutionalized spouse.

23 (Source: P.A. 89-626, eff. 8-9-96.)

24 (305 ILCS 5/5-2.05)

25 Sec. 5-2.05. Disabled children.

26 (a) The Department of Healthcare and Family Services ~~Public~~
27 ~~Aid~~ may offer, to children with developmental disabilities and
28 severely mentally ill or emotionally disturbed children who
29 otherwise would not qualify for medical assistance under this
30 Article due to family income, home-based and community-based
31 services instead of institutional placement, as allowed under
32 paragraph 7 of Section 5-2.

33 (b) The Department of Public Aid, in conjunction with the
34 Department of Human Services and the Division of Specialized
35 Care for Children, University of Illinois-Chicago, shall ~~also~~

1 report to the Governor and the General Assembly no later than
2 January 1, 2004 regarding the status of existing services
3 offered under paragraph 7 of Section 5-2. This report shall
4 include, but not be limited to, the following information:

5 (1) The number of persons eligible for these services.

6 (2) The number of persons who applied for these
7 services.

8 (3) The number of persons who currently receive these
9 services.

10 (4) The nature, scope, and cost of services provided
11 under paragraph 7 of Section 5-2.

12 (5) The comparative cost of providing those services in
13 a hospital, skilled nursing facility, or intermediate care
14 facility.

15 (6) The funding sources for the provision of services,
16 including federal financial participation.

17 (7) The qualifications, skills, and availability of
18 caregivers for children receiving services.

19 The report shall also include information regarding the
20 extent to which the existing programs could provide coverage
21 for mentally disabled children who are currently being provided
22 services in an institution who could otherwise be served in a
23 less-restrictive, community-based setting for the same or a
24 lower cost.

25 (Source: P.A. 93-599, eff. 8-26-03.)

26 (305 ILCS 5/5-4) (from Ch. 23, par. 5-4)

27 Sec. 5-4. Amount and nature of medical assistance. The
28 amount and nature of medical assistance shall be determined by
29 the County Departments in accordance with the standards, rules,
30 and regulations of the ~~Illinois~~ Department of Healthcare and
31 Family Services ~~Public Aid~~, with due regard to the requirements
32 and conditions in each case, including contributions available
33 from legally responsible relatives. However, the amount and
34 nature of such medical assistance shall not be affected by the
35 payment of any grant under the Senior Citizens and Disabled

1 Persons Property Tax Relief and Pharmaceutical Assistance Act
2 or any distributions or items of income described under
3 subparagraph (X) of paragraph (2) of subsection (a) of Section
4 203 of the Illinois Income Tax Act. The amount and nature of
5 medical assistance shall not be affected by the receipt of
6 donations or benefits from fundraisers in cases of serious
7 illness, as long as neither the person nor members of the
8 person's family have actual control over the donations or
9 benefits or the disbursement of the donations or benefits.

10 In determining the income and assets available to the
11 institutionalized spouse and to the community spouse, the
12 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
13 ~~Aid~~ shall follow the procedures established by federal law. The
14 community spouse resource allowance shall be established and
15 maintained at the maximum level permitted pursuant to Section
16 1924(f)(2) of the Social Security Act, as now or hereafter
17 amended, or an amount set after a fair hearing, whichever is
18 greater. The monthly maintenance allowance for the community
19 spouse shall be established and maintained at the maximum level
20 permitted pursuant to Section 1924(d)(3)(C) of the Social
21 Security Act, as now or hereafter amended. Subject to the
22 approval of the Secretary of the United States Department of
23 Health and Human Services, the provisions of this Section shall
24 be extended to persons who but for the provision of home or
25 community-based services under Section 4.02 of the Illinois Act
26 on the Aging, would require the level of care provided in an
27 institution, as is provided for in federal law.

28 The Department of Human Services shall notify in writing
29 each institutionalized spouse who is a recipient of medical
30 assistance under this Article, and each such person's community
31 spouse, of the changes in treatment of income and resources,
32 including provisions for protecting income for a community
33 spouse and permitting the transfer of resources to a community
34 spouse, required by enactment of the federal Medicare
35 Catastrophic Coverage Act of 1988 (Public Law 100-360). The
36 notification shall be in language likely to be easily

1 understood by those persons. The Department of Human Services
2 also shall reassess the amount of medical assistance for which
3 each such recipient is eligible as a result of the enactment of
4 that federal Act, whether or not a recipient requests such a
5 reassessment.

6 (Source: P.A. 90-655, eff. 7-30-98; 91-676, eff. 12-23-99.)

7 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

8 Sec. 5-5. Medical services. The Illinois Department, by
9 rule, shall determine the quantity and quality of and the rate
10 of reimbursement for the medical assistance for which payment
11 will be authorized, and the medical services to be provided,
12 which may include all or part of the following: (1) inpatient
13 hospital services; (2) outpatient hospital services; (3) other
14 laboratory and X-ray services; (4) skilled nursing home
15 services; (5) physicians' services whether furnished in the
16 office, the patient's home, a hospital, a skilled nursing home,
17 or elsewhere; (6) medical care, or any other type of remedial
18 care furnished by licensed practitioners; (7) home health care
19 services; (8) private duty nursing service; (9) clinic
20 services; (10) dental services, including prevention and
21 treatment of periodontal disease and dental caries disease for
22 pregnant women; (11) physical therapy and related services;
23 (12) prescribed drugs, dentures, and prosthetic devices; and
24 eyeglasses prescribed by a physician skilled in the diseases of
25 the eye, or by an optometrist, whichever the person may select;
26 (13) other diagnostic, screening, preventive, and
27 rehabilitative services; (14) transportation and such other
28 expenses as may be necessary; (15) medical treatment of sexual
29 assault survivors, as defined in Section 1a of the Sexual
30 Assault Survivors Emergency Treatment Act, for injuries
31 sustained as a result of the sexual assault, including
32 examinations and laboratory tests to discover evidence which
33 may be used in criminal proceedings arising from the sexual
34 assault; (16) the diagnosis and treatment of sickle cell
35 anemia; and (17) any other medical care, and any other type of

1 remedial care recognized under the laws of this State, but not
2 including abortions, or induced miscarriages or premature
3 births, unless, in the opinion of a physician, such procedures
4 are necessary for the preservation of the life of the woman
5 seeking such treatment, or except an induced premature birth
6 intended to produce a live viable child and such procedure is
7 necessary for the health of the mother or her unborn child. The
8 Illinois Department, by rule, shall prohibit any physician from
9 providing medical assistance to anyone eligible therefor under
10 this Code where such physician has been found guilty of
11 performing an abortion procedure in a wilful and wanton manner
12 upon a woman who was not pregnant at the time such abortion
13 procedure was performed. The term "any other type of remedial
14 care" shall include nursing care and nursing home service for
15 persons who rely on treatment by spiritual means alone through
16 prayer for healing.

17 Notwithstanding any other provision of this Section, a
18 comprehensive tobacco use cessation program that includes
19 purchasing prescription drugs or prescription medical devices
20 approved by the Food and Drug administration shall be covered
21 under the medical assistance program under this Article for
22 persons who are otherwise eligible for assistance under this
23 Article.

24 Notwithstanding any other provision of this Code, the
25 Illinois Department may not require, as a condition of payment
26 for any laboratory test authorized under this Article, that a
27 physician's handwritten signature appear on the laboratory
28 test order form. The Illinois Department may, however, impose
29 other appropriate requirements regarding laboratory test order
30 documentation.

31 The ~~Illinois~~ Department of Healthcare and Family Services
32 ~~Public Aid~~ shall provide the following services to persons
33 eligible for assistance under this Article who are
34 participating in education, training or employment programs
35 operated by the Department of Human Services as successor to
36 the Department of Public Aid:

1 (1) dental services, which shall include but not be
2 limited to prosthodontics; and

3 (2) eyeglasses prescribed by a physician skilled in the
4 diseases of the eye, or by an optometrist, whichever the
5 person may select.

6 The Illinois Department, by rule, may distinguish and
7 classify the medical services to be provided only in accordance
8 with the classes of persons designated in Section 5-2.

9 The Illinois Department shall authorize the provision of,
10 and shall authorize payment for, screening by low-dose
11 mammography for the presence of occult breast cancer for women
12 35 years of age or older who are eligible for medical
13 assistance under this Article, as follows: a baseline mammogram
14 for women 35 to 39 years of age and an annual mammogram for
15 women 40 years of age or older. All screenings shall include a
16 physical breast exam, instruction on self-examination and
17 information regarding the frequency of self-examination and
18 its value as a preventative tool. As used in this Section,
19 "low-dose mammography" means the x-ray examination of the
20 breast using equipment dedicated specifically for mammography,
21 including the x-ray tube, filter, compression device, image
22 receptor, and cassettes, with an average radiation exposure
23 delivery of less than one rad mid-breast, with 2 views for each
24 breast.

25 Any medical or health care provider shall immediately
26 recommend, to any pregnant woman who is being provided prenatal
27 services and is suspected of drug abuse or is addicted as
28 defined in the Alcoholism and Other Drug Abuse and Dependency
29 Act, referral to a local substance abuse treatment provider
30 licensed by the Department of Human Services or to a licensed
31 hospital which provides substance abuse treatment services.
32 The Department of Healthcare and Family Services ~~Public Aid~~
33 shall assure coverage for the cost of treatment of the drug
34 abuse or addiction for pregnant recipients in accordance with
35 the Illinois Medicaid Program in conjunction with the
36 Department of Human Services.

1 All medical providers providing medical assistance to
2 pregnant women under this Code shall receive information from
3 the Department on the availability of services under the Drug
4 Free Families with a Future or any comparable program providing
5 case management services for addicted women, including
6 information on appropriate referrals for other social services
7 that may be needed by addicted women in addition to treatment
8 for addiction.

9 The Illinois Department, in cooperation with the
10 Departments of Human Services (as successor to the Department
11 of Alcoholism and Substance Abuse) and Public Health, through a
12 public awareness campaign, may provide information concerning
13 treatment for alcoholism and drug abuse and addiction, prenatal
14 health care, and other pertinent programs directed at reducing
15 the number of drug-affected infants born to recipients of
16 medical assistance.

17 Neither the ~~Illinois~~ Department of Healthcare and Family
18 Services ~~Public Aid~~ nor the Department of Human Services shall
19 sanction the recipient solely on the basis of her substance
20 abuse.

21 The Illinois Department shall establish such regulations
22 governing the dispensing of health services under this Article
23 as it shall deem appropriate. The Department should seek the
24 advice of formal professional advisory committees appointed by
25 the Director of the Illinois Department for the purpose of
26 providing regular advice on policy and administrative matters,
27 information dissemination and educational activities for
28 medical and health care providers, and consistency in
29 procedures to the Illinois Department.

30 The Illinois Department may develop and contract with
31 Partnerships of medical providers to arrange medical services
32 for persons eligible under Section 5-2 of this Code.
33 Implementation of this Section may be by demonstration projects
34 in certain geographic areas. The Partnership shall be
35 represented by a sponsor organization. The Department, by rule,
36 shall develop qualifications for sponsors of Partnerships.

1 Nothing in this Section shall be construed to require that the
2 sponsor organization be a medical organization.

3 The sponsor must negotiate formal written contracts with
4 medical providers for physician services, inpatient and
5 outpatient hospital care, home health services, treatment for
6 alcoholism and substance abuse, and other services determined
7 necessary by the Illinois Department by rule for delivery by
8 Partnerships. Physician services must include prenatal and
9 obstetrical care. The Illinois Department shall reimburse
10 medical services delivered by Partnership providers to clients
11 in target areas according to provisions of this Article and the
12 Illinois Health Finance Reform Act, except that:

13 (1) Physicians participating in a Partnership and
14 providing certain services, which shall be determined by
15 the Illinois Department, to persons in areas covered by the
16 Partnership may receive an additional surcharge for such
17 services.

18 (2) The Department may elect to consider and negotiate
19 financial incentives to encourage the development of
20 Partnerships and the efficient delivery of medical care.

21 (3) Persons receiving medical services through
22 Partnerships may receive medical and case management
23 services above the level usually offered through the
24 medical assistance program.

25 Medical providers shall be required to meet certain
26 qualifications to participate in Partnerships to ensure the
27 delivery of high quality medical services. These
28 qualifications shall be determined by rule of the Illinois
29 Department and may be higher than qualifications for
30 participation in the medical assistance program. Partnership
31 sponsors may prescribe reasonable additional qualifications
32 for participation by medical providers, only with the prior
33 written approval of the Illinois Department.

34 Nothing in this Section shall limit the free choice of
35 practitioners, hospitals, and other providers of medical
36 services by clients. In order to ensure patient freedom of

1 choice, the Illinois Department shall immediately promulgate
2 all rules and take all other necessary actions so that provided
3 services may be accessed from therapeutically certified
4 optometrists to the full extent of the Illinois Optometric
5 Practice Act of 1987 without discriminating between service
6 providers.

7 The Department shall apply for a waiver from the United
8 States Health Care Financing Administration to allow for the
9 implementation of Partnerships under this Section.

10 The Illinois Department shall require health care
11 providers to maintain records that document the medical care
12 and services provided to recipients of Medical Assistance under
13 this Article. The Illinois Department shall require health care
14 providers to make available, when authorized by the patient, in
15 writing, the medical records in a timely fashion to other
16 health care providers who are treating or serving persons
17 eligible for Medical Assistance under this Article. All
18 dispensers of medical services shall be required to maintain
19 and retain business and professional records sufficient to
20 fully and accurately document the nature, scope, details and
21 receipt of the health care provided to persons eligible for
22 medical assistance under this Code, in accordance with
23 regulations promulgated by the Illinois Department. The rules
24 and regulations shall require that proof of the receipt of
25 prescription drugs, dentures, prosthetic devices and
26 eyeglasses by eligible persons under this Section accompany
27 each claim for reimbursement submitted by the dispenser of such
28 medical services. No such claims for reimbursement shall be
29 approved for payment by the Illinois Department without such
30 proof of receipt, unless the Illinois Department shall have put
31 into effect and shall be operating a system of post-payment
32 audit and review which shall, on a sampling basis, be deemed
33 adequate by the Illinois Department to assure that such drugs,
34 dentures, prosthetic devices and eyeglasses for which payment
35 is being made are actually being received by eligible
36 recipients. Within 90 days after the effective date of this

1 amendatory Act of 1984, the Illinois Department shall establish
2 a current list of acquisition costs for all prosthetic devices
3 and any other items recognized as medical equipment and
4 supplies reimbursable under this Article and shall update such
5 list on a quarterly basis, except that the acquisition costs of
6 all prescription drugs shall be updated no less frequently than
7 every 30 days as required by Section 5-5.12.

8 The rules and regulations of the Illinois Department shall
9 require that a written statement including the required opinion
10 of a physician shall accompany any claim for reimbursement for
11 abortions, or induced miscarriages or premature births. This
12 statement shall indicate what procedures were used in providing
13 such medical services.

14 The Illinois Department shall require all dispensers of
15 medical services, other than an individual practitioner or
16 group of practitioners, desiring to participate in the Medical
17 Assistance program established under this Article to disclose
18 all financial, beneficial, ownership, equity, surety or other
19 interests in any and all firms, corporations, partnerships,
20 associations, business enterprises, joint ventures, agencies,
21 institutions or other legal entities providing any form of
22 health care services in this State under this Article.

23 The Illinois Department may require that all dispensers of
24 medical services desiring to participate in the medical
25 assistance program established under this Article disclose,
26 under such terms and conditions as the Illinois Department may
27 by rule establish, all inquiries from clients and attorneys
28 regarding medical bills paid by the Illinois Department, which
29 inquiries could indicate potential existence of claims or liens
30 for the Illinois Department.

31 Enrollment of a vendor that provides non-emergency medical
32 transportation, defined by the Department by rule, shall be
33 conditional for 180 days. During that time, the Department of
34 Healthcare and Family Services ~~Public Aid~~ may terminate the
35 vendor's eligibility to participate in the medical assistance
36 program without cause. That termination of eligibility is not

1 subject to the Department's hearing process.

2 The Illinois Department shall establish policies,
3 procedures, standards and criteria by rule for the acquisition,
4 repair and replacement of orthotic and prosthetic devices and
5 durable medical equipment. Such rules shall provide, but not be
6 limited to, the following services: (1) immediate repair or
7 replacement of such devices by recipients without medical
8 authorization; and (2) rental, lease, purchase or
9 lease-purchase of durable medical equipment in a
10 cost-effective manner, taking into consideration the
11 recipient's medical prognosis, the extent of the recipient's
12 needs, and the requirements and costs for maintaining such
13 equipment. Such rules shall enable a recipient to temporarily
14 acquire and use alternative or substitute devices or equipment
15 pending repairs or replacements of any device or equipment
16 previously authorized for such recipient by the Department.

17 The Department shall execute, relative to the nursing home
18 prescreening project, written inter-agency agreements with the
19 Department of Human Services and the Department on Aging, to
20 effect the following: (i) intake procedures and common
21 eligibility criteria for those persons who are receiving
22 non-institutional services; and (ii) the establishment and
23 development of non-institutional services in areas of the State
24 where they are not currently available or are undeveloped.

25 The Illinois Department shall develop and operate, in
26 cooperation with other State Departments and agencies and in
27 compliance with applicable federal laws and regulations,
28 appropriate and effective systems of health care evaluation and
29 programs for monitoring of utilization of health care services
30 and facilities, as it affects persons eligible for medical
31 assistance under this Code.

32 The Illinois Department shall report annually to the
33 General Assembly, no later than the second Friday in April of
34 1979 and each year thereafter, in regard to:

35 (a) actual statistics and trends in utilization of
36 medical services by public aid recipients;

1 (b) actual statistics and trends in the provision of
2 the various medical services by medical vendors;

3 (c) current rate structures and proposed changes in
4 those rate structures for the various medical vendors; and

5 (d) efforts at utilization review and control by the
6 Illinois Department.

7 The period covered by each report shall be the 3 years
8 ending on the June 30 prior to the report. The report shall
9 include suggested legislation for consideration by the General
10 Assembly. The filing of one copy of the report with the
11 Speaker, one copy with the Minority Leader and one copy with
12 the Clerk of the House of Representatives, one copy with the
13 President, one copy with the Minority Leader and one copy with
14 the Secretary of the Senate, one copy with the Legislative
15 Research Unit, and such additional copies with the State
16 Government Report Distribution Center for the General Assembly
17 as is required under paragraph (t) of Section 7 of the State
18 Library Act shall be deemed sufficient to comply with this
19 Section.

20 (Source: P.A. 92-16, eff. 6-28-01; 92-651, eff. 7-11-02;
21 92-789, eff. 8-6-02; 93-632, eff. 2-1-04; 93-841, eff. 7-30-04;
22 93-981, eff. 8-23-04; revised 10-22-04.)

23 (305 ILCS 5/5-5.01) (from Ch. 23, par. 5-5.01)

24 Sec. 5-5.01. The Department of Healthcare and Family
25 Services ~~Public Aid~~ may establish and implement a pilot project
26 for determining the feasibility of authorizing medical
27 assistance payments for the costs of diagnosis and treatment of
28 Alzheimer's disease.

29 (Source: P.A. 84-773.)

30 (305 ILCS 5/5-5.1) (from Ch. 23, par. 5-5.1)

31 Sec. 5-5.1. Grouping of Facilities. The Department of
32 Healthcare and Family Services ~~Public Aid~~ shall, for purposes
33 of payment, provide for groupings of nursing facilities.
34 Factors to be considered in grouping facilities may include,

1 but are not limited to, size, age, patient mix or geographical
2 area.

3 The groupings developed under this Section shall be
4 considered in determining reasonable cost reimbursement
5 formulas. However, this Section shall not preclude the
6 Department from recognizing and evaluating the cost of capital
7 on a facility-by-facility basis.

8 (Source: P.A. 80-1142.)

9 (305 ILCS 5/5-5.3) (from Ch. 23, par. 5-5.3)

10 Sec. 5-5.3. Conditions of Payment - Prospective Rates -
11 Accounting Principles. This amendatory Act establishes certain
12 conditions for the Department of Public Aid (now Healthcare and
13 Family Services) in instituting rates for the care of
14 recipients of medical assistance in skilled nursing facilities
15 and intermediate care facilities. Such conditions shall assure
16 a method under which the payment for skilled nursing and
17 intermediate care services, provided to recipients under the
18 Medical Assistance Program shall be on a reasonable cost
19 related basis, which is prospectively determined annually by
20 the Department of Public Aid (now Healthcare and Family
21 Services). The annually established payment rate shall take
22 effect on July 1 in 1984 and subsequent years. There shall be
23 no rate increase during calendar year 1983 and the first six
24 months of calendar year 1984.

25 The determination of the payment shall be made on the basis
26 of generally accepted accounting principles that shall take
27 into account the actual costs to the facility of providing
28 skilled nursing and intermediate care services to recipients
29 under the medical assistance program.

30 The resultant total rate for a specified type of service
31 shall be an amount which shall have been determined to be
32 adequate to reimburse allowable costs of a facility that is
33 economically and efficiently operated. The Department shall
34 establish an effective date for each facility or group of
35 facilities after which rates shall be paid on a reasonable cost

1 related basis which shall be no sooner than the effective date
2 of this amendatory Act of 1977.

3 (Source: P.A. 91-357, eff. 7-29-99.)

4 (305 ILCS 5/5-5.4) (from Ch. 23, par. 5-5.4)

5 Sec. 5-5.4. Standards of Payment - Department of Healthcare
6 and Family Services ~~Public Aid~~. The Department of Healthcare
7 and Family Services ~~Public Aid~~ shall develop standards of
8 payment of skilled nursing and intermediate care services in
9 facilities providing such services under this Article which:

10 (1) Provide for the determination of a facility's payment
11 for skilled nursing and intermediate care services on a
12 prospective basis. The amount of the payment rate for all
13 nursing facilities certified by the Department of Public Health
14 under the Nursing Home Care Act as Intermediate Care for the
15 Developmentally Disabled facilities, Long Term Care for Under
16 Age 22 facilities, Skilled Nursing facilities, or Intermediate
17 Care facilities under the medical assistance program shall be
18 prospectively established annually on the basis of historical,
19 financial, and statistical data reflecting actual costs from
20 prior years, which shall be applied to the current rate year
21 and updated for inflation, except that the capital cost element
22 for newly constructed facilities shall be based upon projected
23 budgets. The annually established payment rate shall take
24 effect on July 1 in 1984 and subsequent years. No rate increase
25 and no update for inflation shall be provided on or after July
26 1, 1994 and before July 1, 2006, unless specifically provided
27 for in this Section. The changes made by this amendatory Act of
28 the 93rd General Assembly extending the duration of the
29 prohibition against a rate increase or update for inflation are
30 effective retroactive to July 1, 2004.

31 For facilities licensed by the Department of Public Health
32 under the Nursing Home Care Act as Intermediate Care for the
33 Developmentally Disabled facilities or Long Term Care for Under
34 Age 22 facilities, the rates taking effect on July 1, 1998
35 shall include an increase of 3%. For facilities licensed by the

1 Department of Public Health under the Nursing Home Care Act as
2 Skilled Nursing facilities or Intermediate Care facilities,
3 the rates taking effect on July 1, 1998 shall include an
4 increase of 3% plus \$1.10 per resident-day, as defined by the
5 Department.

6 For facilities licensed by the Department of Public Health
7 under the Nursing Home Care Act as Intermediate Care for the
8 Developmentally Disabled facilities or Long Term Care for Under
9 Age 22 facilities, the rates taking effect on July 1, 1999
10 shall include an increase of 1.6% plus \$3.00 per resident-day,
11 as defined by the Department. For facilities licensed by the
12 Department of Public Health under the Nursing Home Care Act as
13 Skilled Nursing facilities or Intermediate Care facilities,
14 the rates taking effect on July 1, 1999 shall include an
15 increase of 1.6% and, for services provided on or after October
16 1, 1999, shall be increased by \$4.00 per resident-day, as
17 defined by the Department.

18 For facilities licensed by the Department of Public Health
19 under the Nursing Home Care Act as Intermediate Care for the
20 Developmentally Disabled facilities or Long Term Care for Under
21 Age 22 facilities, the rates taking effect on July 1, 2000
22 shall include an increase of 2.5% per resident-day, as defined
23 by the Department. For facilities licensed by the Department of
24 Public Health under the Nursing Home Care Act as Skilled
25 Nursing facilities or Intermediate Care facilities, the rates
26 taking effect on July 1, 2000 shall include an increase of 2.5%
27 per resident-day, as defined by the Department.

28 For facilities licensed by the Department of Public Health
29 under the Nursing Home Care Act as skilled nursing facilities
30 or intermediate care facilities, a new payment methodology must
31 be implemented for the nursing component of the rate effective
32 July 1, 2003. The Department of Public Aid (now Healthcare and
33 Family Services) shall develop the new payment methodology
34 using the Minimum Data Set (MDS) as the instrument to collect
35 information concerning nursing home resident condition
36 necessary to compute the rate. The Department ~~of Public Aid~~

1 shall develop the new payment methodology to meet the unique
2 needs of Illinois nursing home residents while remaining
3 subject to the appropriations provided by the General Assembly.
4 A transition period from the payment methodology in effect on
5 June 30, 2003 to the payment methodology in effect on July 1,
6 2003 shall be provided for a period not exceeding 3 years after
7 implementation of the new payment methodology as follows:

8 (A) For a facility that would receive a lower nursing
9 component rate per patient day under the new system than
10 the facility received effective on the date immediately
11 preceding the date that the Department implements the new
12 payment methodology, the nursing component rate per
13 patient day for the facility shall be held at the level in
14 effect on the date immediately preceding the date that the
15 Department implements the new payment methodology until a
16 higher nursing component rate of reimbursement is achieved
17 by that facility.

18 (B) For a facility that would receive a higher nursing
19 component rate per patient day under the payment
20 methodology in effect on July 1, 2003 than the facility
21 received effective on the date immediately preceding the
22 date that the Department implements the new payment
23 methodology, the nursing component rate per patient day for
24 the facility shall be adjusted.

25 (C) Notwithstanding paragraphs (A) and (B), the
26 nursing component rate per patient day for the facility
27 shall be adjusted subject to appropriations provided by the
28 General Assembly.

29 For facilities licensed by the Department of Public Health
30 under the Nursing Home Care Act as Intermediate Care for the
31 Developmentally Disabled facilities or Long Term Care for Under
32 Age 22 facilities, the rates taking effect on March 1, 2001
33 shall include a statewide increase of 7.85%, as defined by the
34 Department.

35 For facilities licensed by the Department of Public Health
36 under the Nursing Home Care Act as Intermediate Care for the

1 Developmentally Disabled facilities or Long Term Care for Under
2 Age 22 facilities, the rates taking effect on April 1, 2002
3 shall include a statewide increase of 2.0%, as defined by the
4 Department. This increase terminates on July 1, 2002; beginning
5 July 1, 2002 these rates are reduced to the level of the rates
6 in effect on March 31, 2002, as defined by the Department.

7 For facilities licensed by the Department of Public Health
8 under the Nursing Home Care Act as skilled nursing facilities
9 or intermediate care facilities, the rates taking effect on
10 July 1, 2001 shall be computed using the most recent cost
11 reports on file with the Department of Public Aid no later than
12 April 1, 2000, updated for inflation to January 1, 2001. For
13 rates effective July 1, 2001 only, rates shall be the greater
14 of the rate computed for July 1, 2001 or the rate effective on
15 June 30, 2001.

16 Notwithstanding any other provision of this Section, for
17 facilities licensed by the Department of Public Health under
18 the Nursing Home Care Act as skilled nursing facilities or
19 intermediate care facilities, the Illinois Department shall
20 determine by rule the rates taking effect on July 1, 2002,
21 which shall be 5.9% less than the rates in effect on June 30,
22 2002.

23 Notwithstanding any other provision of this Section, for
24 facilities licensed by the Department of Public Health under
25 the Nursing Home Care Act as skilled nursing facilities or
26 intermediate care facilities, if the payment methodologies
27 required under Section 5A-12 and the waiver granted under 42
28 CFR 433.68 are approved by the United States Centers for
29 Medicare and Medicaid Services, the rates taking effect on July
30 1, 2004 shall be 3.0% greater than the rates in effect on June
31 30, 2004. These rates shall take effect only upon approval and
32 implementation of the payment methodologies required under
33 Section 5A-12.

34 Notwithstanding any other provisions of this Section, for
35 facilities licensed by the Department of Public Health under
36 the Nursing Home Care Act as skilled nursing facilities or

1 intermediate care facilities, the rates taking effect on
2 January 1, 2005 shall be 3% more than the rates in effect on
3 December 31, 2004.

4 For facilities licensed by the Department of Public Health
5 under the Nursing Home Care Act as Intermediate Care for the
6 Developmentally Disabled facilities or as long-term care
7 facilities for residents under 22 years of age, the rates
8 taking effect on July 1, 2003 shall include a statewide
9 increase of 4%, as defined by the Department.

10 Notwithstanding any other provision of this Section, for
11 facilities licensed by the Department of Public Health under
12 the Nursing Home Care Act as skilled nursing facilities or
13 intermediate care facilities, effective January 1, 2005,
14 facility rates shall be increased by the difference between (i)
15 a facility's per diem property, liability, and malpractice
16 insurance costs as reported in the cost report filed with the
17 Department of Public Aid and used to establish rates effective
18 July 1, 2001 and (ii) those same costs as reported in the
19 facility's 2002 cost report. These costs shall be passed
20 through to the facility without caps or limitations, except for
21 adjustments required under normal auditing procedures.

22 Rates established effective each July 1 shall govern
23 payment for services rendered throughout that fiscal year,
24 except that rates established on July 1, 1996 shall be
25 increased by 6.8% for services provided on or after January 1,
26 1997. Such rates will be based upon the rates calculated for
27 the year beginning July 1, 1990, and for subsequent years
28 thereafter until June 30, 2001 shall be based on the facility
29 cost reports for the facility fiscal year ending at any point
30 in time during the previous calendar year, updated to the
31 midpoint of the rate year. The cost report shall be on file
32 with the Department no later than April 1 of the current rate
33 year. Should the cost report not be on file by April 1, the
34 Department shall base the rate on the latest cost report filed
35 by each skilled care facility and intermediate care facility,
36 updated to the midpoint of the current rate year. In

1 determining rates for services rendered on and after July 1,
2 1985, fixed time shall not be computed at less than zero. The
3 Department shall not make any alterations of regulations which
4 would reduce any component of the Medicaid rate to a level
5 below what that component would have been utilizing in the rate
6 effective on July 1, 1984.

7 (2) Shall take into account the actual costs incurred by
8 facilities in providing services for recipients of skilled
9 nursing and intermediate care services under the medical
10 assistance program.

11 (3) Shall take into account the medical and psycho-social
12 characteristics and needs of the patients.

13 (4) Shall take into account the actual costs incurred by
14 facilities in meeting licensing and certification standards
15 imposed and prescribed by the State of Illinois, any of its
16 political subdivisions or municipalities and by the U.S.
17 Department of Health and Human Services pursuant to Title XIX
18 of the Social Security Act.

19 The Department of Healthcare and Family Services ~~Public Aid~~
20 shall develop precise standards for payments to reimburse
21 nursing facilities for any utilization of appropriate
22 rehabilitative personnel for the provision of rehabilitative
23 services which is authorized by federal regulations, including
24 reimbursement for services provided by qualified therapists or
25 qualified assistants, and which is in accordance with accepted
26 professional practices. Reimbursement also may be made for
27 utilization of other supportive personnel under appropriate
28 supervision.

29 (Source: P.A. 93-20, eff. 6-20-03; 93-649, eff. 1-8-04; 93-659,
30 eff. 2-3-04; 93-841, eff. 7-30-04; 93-1087, eff. 2-28-05;
31 94-48, eff. 7-1-05; 94-85, eff. 6-28-05; revised 8-9-05.)

32 (305 ILCS 5/5-5.4c)

33 Sec. 5-5.4c. Bed reserves; approval. The Department of
34 Healthcare and Family Services ~~Public Aid~~ shall approve bed
35 reserves at a daily rate of 75% of an individual's current

1 Medicaid per diem, for nursing facilities 90% or more of whose
2 residents are Medicaid recipients and that have occupancy
3 levels of at least 93% for resident bed reserves not exceeding
4 10 days.

5 (Source: P.A. 93-841, eff. 7-30-04.)

6 (305 ILCS 5/5-5.5) (from Ch. 23, par. 5-5.5)

7 Sec. 5-5.5. Elements of Payment Rate.

8 (a) The Department of Healthcare and Family Services ~~Public~~
9 ~~Aid~~ shall develop a prospective method for determining payment
10 rates for skilled nursing and intermediate care services in
11 nursing facilities composed of the following cost elements:

12 (1) Standard Services, with the cost of this component
13 being determined by taking into account the actual costs to
14 the facilities of these services subject to cost ceilings
15 to be defined in the Department's rules.

16 (2) Resident Services, with the cost of this component
17 being determined by taking into account the actual costs,
18 needs and utilization of these services, as derived from an
19 assessment of the resident needs in the nursing facilities.
20 The Department shall adopt rules governing reimbursement
21 for resident services as listed in Section 5-1.1. Surveys
22 or assessments of resident needs under this Section shall
23 include a review by the facility of the results of such
24 assessments and a discussion of issues in dispute with
25 authorized survey staff, unless the facility elects not to
26 participate in such a review process. Surveys or
27 assessments of resident needs under this Section may be
28 conducted semi-annually and payment rates relating to
29 resident services may be changed on a semi-annual basis.
30 The Illinois Department shall initiate a project, either on
31 a pilot basis or Statewide, to reimburse the cost of
32 resident services based on a methodology which utilizes an
33 assessment of resident needs to determine the level of
34 reimbursement. This methodology shall be different from
35 the payment criteria for resident services utilized by the

1 Illinois Department on July 1, 1981. On March 1, 1982, and
2 each year thereafter, until such time when the Illinois
3 Department adopts the methodology used in such project for
4 use statewide, the Illinois Department shall report to the
5 General Assembly on the implementation and progress of such
6 project. The report shall include:

7 (A) A statement of the Illinois Department's goals
8 and objectives for such project;

9 (B) A description of such project, including the
10 number and type of nursing facilities involved in the
11 project;

12 (C) A description of the methodology used in such
13 project;

14 (D) A description of the Illinois Department's
15 application of the methodology;

16 (E) A statement on the methodology's effect on the
17 quality of care given to residents in the sample
18 nursing facilities; and

19 (F) A statement on the cost of the methodology used
20 in such project and a comparison of this cost with the
21 cost of the current payment criteria.

22 (3) Ancillary Services, with the payment rate being
23 developed for each individual type of service. Payment
24 shall be made only when authorized under procedures
25 developed by the Department of Healthcare and Family
26 Services ~~Public Aid~~.

27 (4) Nurse's Aide Training, with the cost of this
28 component being determined by taking into account the
29 actual cost to the facilities of such training.

30 (5) Real Estate Taxes, with the cost of this component
31 being determined by taking into account the figures
32 contained in the most currently available cost reports
33 (with no imposition of maximums) updated to the midpoint of
34 the current rate year for long term care services rendered
35 between July 1, 1984 and June 30, 1985, and with the cost
36 of this component being determined by taking into account

1 the actual 1983 taxes for which the nursing homes were
2 assessed (with no imposition of maximums) updated to the
3 midpoint of the current rate year for long term care
4 services rendered between July 1, 1985 and June 30, 1986.

5 (b) In developing a prospective method for determining
6 payment rates for skilled nursing and intermediate care
7 services in nursing facilities, the Department of Healthcare
8 and Family Services ~~Public Aid~~ shall consider the following
9 cost elements:

10 (1) Reasonable capital cost determined by utilizing
11 incurred interest rate and the current value of the
12 investment, including land, utilizing composite rates, or
13 by utilizing such other reasonable cost related methods
14 determined by the Department. However, beginning with the
15 rate reimbursement period effective July 1, 1987, the
16 Department shall be prohibited from establishing,
17 including, and implementing any depreciation factor in
18 calculating the capital cost element.

19 (2) Profit, with the actual amount being produced and
20 accruing to the providers in the form of a return on their
21 total investment, on the basis of their ability to
22 economically and efficiently deliver a type of service. The
23 method of payment may assure the opportunity for a profit,
24 but shall not guarantee or establish a specific amount as a
25 cost.

26 (c) The Illinois Department may implement the amendatory
27 changes to this Section made by this amendatory Act of 1991
28 through the use of emergency rules in accordance with the
29 provisions of Section 5.02 of the Illinois Administrative
30 Procedure Act. For purposes of the Illinois Administrative
31 Procedure Act, the adoption of rules to implement the
32 amendatory changes to this Section made by this amendatory Act
33 of 1991 shall be deemed an emergency and necessary for the
34 public interest, safety and welfare.

35 (d) No later than January 1, 2001, the Department of Public
36 Aid shall file with the Joint Committee on Administrative

1 Rules, pursuant to the Illinois Administrative Procedure Act, a
2 proposed rule, or a proposed amendment to an existing rule,
3 regarding payment for appropriate services, including
4 assessment, care planning, discharge planning, and treatment
5 provided by nursing facilities to residents who have a serious
6 mental illness.

7 (Source: P.A. 93-632, eff. 2-1-04.)

8 (305 ILCS 5/5-5.5a) (from Ch. 23, par. 5-5.5a)

9 Sec. 5-5.5a. Kosher kitchen and food service.

10 (a) The Department of Healthcare and Family Services ~~Public~~
11 ~~Aid~~ may develop in its rate structure for skilled nursing
12 facilities and intermediate care facilities an accommodation
13 for fully kosher kitchen and food service operations,
14 rabbinically approved or certified on an annual basis for a
15 facility in which the only kitchen or all kitchens are fully
16 kosher (a fully kosher facility). Beginning in the fiscal year
17 after the fiscal year when this amendatory Act of 1990 becomes
18 effective, the rate structure may provide for an additional
19 payment to such facility not to exceed 50 cents per resident
20 per day if 60% or more of the residents in the facility request
21 kosher foods or food products prepared in accordance with
22 Jewish religious dietary requirements for religious purposes
23 in a fully kosher facility. Based upon food cost reports of the
24 Illinois Department of Agriculture regarding kosher and
25 non-kosher food available in the various regions of the State,
26 this rate structure may be periodically adjusted by the
27 Department but may not exceed the maximum authorized under this
28 subsection (a).

29 (b) The Department shall by rule determine how a facility
30 with a fully kosher kitchen and food service may be determined
31 to be eligible and apply for the rate accommodation specified
32 in subsection (a).

33 (Source: P.A. 86-1464.)

34 (305 ILCS 5/5-5.7) (from Ch. 23, par. 5-5.7)

1 Sec. 5-5.7. Cost Reports - Audits. The Department of
2 Healthcare and Family Services ~~Public Aid~~ shall work with the
3 Department of Public Health to use cost report information
4 currently being collected under provisions of the "Nursing Home
5 Care Act", approved August 23, 1979, as amended. The Department
6 of Healthcare and Family Services ~~Public Aid~~ may, in
7 conjunction with the Department of Public Health, develop in
8 accordance with generally accepted accounting principles a
9 uniform chart of accounts which each facility providing
10 services under the medical assistance program shall adopt,
11 after a reasonable period.

12 Nursing homes licensed under the Nursing Home Care Act and
13 providers of adult developmental training services certified
14 by the Department of Human Services pursuant to Section 15.2 of
15 the Mental Health and Developmental Disabilities
16 Administrative Act which provide services to clients eligible
17 for medical assistance under this Article are responsible for
18 submitting the required annual cost report to the Department of
19 Healthcare and Family Services ~~Public Aid~~.

20 The Department of Healthcare and Family Services ~~Public Aid~~
21 shall audit the financial and statistical records of each
22 provider participating in the medical assistance program as a
23 skilled nursing or intermediate care facility over a 3 year
24 period, beginning with the close of the first cost reporting
25 year. Following the end of this 3-year term, audits of the
26 financial and statistical records will be performed each year
27 in at least 20% of the facilities participating in the medical
28 assistance program with at least 10% being selected on a random
29 sample basis, and the remainder selected on the basis of
30 exceptional profiles. All audits shall be conducted in
31 accordance with generally accepted auditing standards.

32 The Department of Healthcare and Family Services ~~Public Aid~~
33 shall establish prospective payment rates for categories of
34 service needed within the skilled nursing and intermediate care
35 levels of services, in order to more appropriately recognize
36 the individual needs of patients in nursing facilities.

1 The Department of Healthcare and Family Services ~~Public Aid~~
2 shall provide, during the process of establishing the payment
3 rate for skilled nursing and intermediate care services, or
4 when a substantial change in rates is proposed, an opportunity
5 for public review and comment on the proposed rates prior to
6 their becoming effective.

7 (Source: P.A. 89-507, eff. 7-1-97.)

8 (305 ILCS 5/5-5.8a) (from Ch. 23, par. 5-5.8a)

9 Sec. 5-5.8a. Payment for exceptional care.

10 (a) For the provision of exceptional medical care, the
11 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
12 ~~Aid~~ may make payments only to skilled nursing facilities that
13 substantially meet the licensure and certification
14 requirements prescribed by the Department of Public Health.
15 Only the Department of Public Health shall be responsible for
16 determining whether licensure and certification requirements
17 for skilled nursing care facilities have been substantially
18 met. The rate of payment shall be negotiated with the
19 facilities offering to provide the exceptional medical care. A
20 facility's costs of providing exceptional care shall not be
21 considered in determining the rate of payment to skilled
22 nursing facilities under Sections 5-5.3 through 5-5.5. Payment
23 for exceptional medical care shall not exceed the rate that the
24 Illinois Department would be required to pay under the Medical
25 Assistance Program for the same care in a hospital.

26 (b) The Illinois Department shall adopt rules and
27 regulations under the Illinois Administrative Procedure Act to
28 implement this Section. Those rules and regulations shall set
29 forth the procedures to be followed by facilities when
30 submitting an initial exceptional medical care certification
31 request and exceptional medical care payment requests. The
32 rules and regulations shall also include the procedures and
33 criteria used by the Illinois Department in determining whether
34 to approve a skilled nursing facility's initial exceptional
35 medical care certification request and exceptional medical

1 care payment requests. The rules shall provide that the
2 Illinois Department, upon receipt of a facility's request for
3 payment for exceptional medical care and all necessary
4 documentation, shall, after negotiations between the Illinois
5 Department and the facility are completed, determine and notify
6 the facility whether the request has been approved or denied.
7 (Source: P.A. 88-412.)

8 (305 ILCS 5/5-5.8b) (from Ch. 23, par. 5-5.8b)

9 Sec. 5-5.8b. Payment to Campus Facilities. There is hereby
10 established a separate payment category for campus facilities.
11 A "campus facility" is defined as an entity which consists of a
12 long term care facility (or group of facilities if the
13 facilities are on the same contiguous parcel of real estate)
14 which meets all of the following criteria as of May 1, 1987:
15 the entity provides care for both children and adults;
16 residents of the entity reside in three or more separate
17 buildings with congregate and small group living arrangements
18 on a single campus; the entity provides three or more separate
19 licensed levels of care; the entity (or a part of the entity)
20 is enrolled with the Department of Public Aid (now Department
21 of Healthcare and Family Services) as a provider of long term
22 care services and receives payments from that ~~the~~ Department ~~of~~
23 ~~Public Aid~~; the entity (or a part of the entity) receives
24 funding from the Department of Mental Health and Developmental
25 Disabilities (now the Department of Human Services); and the
26 entity (or a part of the entity) holds a current license as a
27 child care institution issued by the Department of Children and
28 Family Services.

29 The Department of Healthcare and Family Services ~~Public~~
30 ~~Aid~~, the Department of Human Services, and the Department of
31 Children and Family Services shall develop jointly a rate
32 methodology or methodologies for campus facilities. Such
33 methodology or methodologies may establish a single rate to be
34 paid by all the agencies, or a separate rate to be paid by each
35 agency, or separate components to be paid to different parts of

1 the campus facility. All campus facilities shall receive the
2 same rate of payment for similar services. Any methodology
3 developed pursuant to this section shall take into account the
4 actual costs to the facility of providing services to
5 residents, and shall be adequate to reimburse the allowable
6 costs of a campus facility which is economically and
7 efficiently operated. Any methodology shall be established on
8 the basis of historical, financial, and statistical data
9 submitted by campus facilities, and shall take into account the
10 actual costs incurred by campus facilities in providing
11 services, and in meeting licensing and certification standards
12 imposed and prescribed by the State of Illinois, any of its
13 political subdivisions or municipalities and by the United
14 States Department of Health and Human Services. Rates may be
15 established on a prospective or retrospective basis. Any
16 methodology shall provide reimbursement for appropriate
17 payment elements, including the following: standard services,
18 patient services, real estate taxes, and capital costs.

19 (Source: P.A. 89-507, eff. 7-1-97.)

20 (305 ILCS 5/5-5.22)

21 Sec. 5-5.22. Nursing homes; inspections of care. With
22 respect to facilities licensed under the Nursing Home Care Act,
23 the Department of Public Aid (now Healthcare and Family
24 Services) may not initiate or reinstate inspections of care
25 before July 1, 2003. Nothing in this Section, however,
26 prohibits a facility from requesting, nor the Department from
27 conducting, an interim inspection of care if the facility meets
28 the requirements outlined in the Department's rules in effect
29 on November 15, 2001.

30 (Source: P.A. 92-725, eff. 7-25-02.)

31 (305 ILCS 5/5-5.23)

32 Sec. 5-5.23. Children's mental health services.

33 (a) The Department of Healthcare and Family Services ~~Public~~
34 ~~Aid~~, by rule, shall require the screening and assessment of a

1 child prior to any Medicaid-funded admission to an inpatient
2 hospital for psychiatric services to be funded by Medicaid. The
3 screening and assessment shall include a determination of the
4 appropriateness and availability of out-patient support
5 services for necessary treatment. The Department, by rule,
6 shall establish methods and standards of payment for the
7 screening, assessment, and necessary alternative support
8 services.

9 (b) The Department of Healthcare and Family Services ~~Public~~
10 ~~Aid~~, to the extent allowable under federal law, shall secure
11 federal financial participation for Individual Care Grant
12 expenditures made by the Department of Human Services for the
13 Medicaid optional service authorized under Section 1905(h) of
14 the federal Social Security Act, pursuant to the provisions of
15 Section 7.1 of the Mental Health and Developmental Disabilities
16 Administrative Act.

17 (c) The Department of Healthcare and Family Services ~~Public~~
18 ~~Aid~~ shall work jointly with the Department of Human Services to
19 implement subsections (a) and (b).

20 (Source: P.A. 93-495, eff. 8-8-03.)

21 (305 ILCS 5/5-5.24)

22 Sec. 5-5.24 ~~5-5.23~~. Prenatal and perinatal care. The
23 Department of Healthcare and Family Services ~~Public Aid~~ may
24 provide reimbursement under this Article for all prenatal and
25 perinatal health care services that are provided for the
26 purpose of preventing low-birthweight infants, reducing the
27 need for neonatal intensive care hospital services, and
28 promoting perinatal health. These services may include
29 comprehensive risk assessments for pregnant women, women with
30 infants, and infants, lactation counseling, nutrition
31 counseling, childbirth support, psychosocial counseling,
32 treatment and prevention of periodontal disease, and other
33 support services that have been proven to improve birth
34 outcomes. The Department shall maximize the use of preventive
35 prenatal and perinatal health care services consistent with

1 federal statutes, rules, and regulations. The Department of
2 Public Aid (now Department of Healthcare and Family Services)
3 shall develop a plan for prenatal and perinatal preventive
4 health care and shall present the plan to the General Assembly
5 by January 1, 2004. On or before January 1, 2006 and every 2
6 years thereafter, the Department shall report to the General
7 Assembly concerning the effectiveness of prenatal and
8 perinatal health care services reimbursed under this Section in
9 preventing low-birthweight infants and reducing the need for
10 neonatal intensive care hospital services. Each such report
11 shall include an evaluation of how the ratio of expenditures
12 for treating low-birthweight infants compared with the
13 investment in promoting healthy births and infants in local
14 community areas throughout Illinois relates to healthy infant
15 development in those areas.

16 (Source: P.A. 93-536, eff. 8-18-03; revised 9-25-03.)

17 (305 ILCS 5/5-5d)

18 Sec. 5-5d. Enhanced transition and follow-up services. The
19 Department of Healthcare and Family Services ~~Public Aid~~ shall
20 apply for any necessary waivers pursuant to Section 1915(c) of
21 the Social Security Act to facilitate the transition from one
22 residential setting to another and follow-up services. Nothing
23 in this Section shall be construed ~~considered~~ as limiting
24 current similar programs by the Department of Human Services or
25 the Department on Aging.

26 (Source: P.A. 93-902, eff. 8-10-04; 93-1031, eff. 8-27-04;
27 revised 10-22-04.)

28 (305 ILCS 5/5-9) (from Ch. 23, par. 5-9)

29 Sec. 5-9. Choice of Medical Dispensers. Applicants and
30 recipients shall be entitled to free choice of those qualified
31 practitioners, hospitals, nursing homes, and other dispensers
32 of medical services meeting the requirements and complying with
33 the rules and regulations of the Illinois Department. However,
34 the Director of Healthcare and Family Services ~~Public Aid~~ may,

1 after providing reasonable notice and opportunity for hearing,
2 deny, suspend or terminate any otherwise qualified person,
3 firm, corporation, association, agency, institution, or other
4 legal entity, from participation as a vendor of goods or
5 services under the medical assistance program authorized by
6 this Article if the Director finds such vendor of medical
7 services in violation of this Act or the policy or rules and
8 regulations issued pursuant to this Act. Any physician who has
9 been convicted of performing an abortion procedure in a wilful
10 and wanton manner upon a woman who was not pregnant at the time
11 such abortion procedure was performed shall be automatically
12 removed from the list of physicians qualified to participate as
13 a vendor of medical services under the medical assistance
14 program authorized by this Article.

15 (Source: P.A. 82-263.)

16 (305 ILCS 5/5-11) (from Ch. 23, par. 5-11)

17 Sec. 5-11. Co-operative arrangements; contracts with other
18 State agencies, health care and rehabilitation organizations,
19 and fiscal intermediaries.

20 (a) The Illinois Department may enter into co-operative
21 arrangements with State agencies responsible for administering
22 or supervising the administration of health services and
23 vocational rehabilitation services to the end that there may be
24 maximum utilization of such services in the provision of
25 medical assistance.

26 The Illinois Department shall, not later than June 30,
27 1993, enter into one or more co-operative arrangements with the
28 Department of Mental Health and Developmental Disabilities
29 providing that the Department of Mental Health and
30 Developmental Disabilities will be responsible for
31 administering or supervising all programs for services to
32 persons in community care facilities for persons with
33 developmental disabilities, including but not limited to
34 intermediate care facilities, that are supported by State funds
35 or by funding under Title XIX of the federal Social Security

1 Act. The responsibilities of the Department of Mental Health
2 and Developmental Disabilities under these agreements are
3 transferred to the Department of Human Services as provided in
4 the Department of Human Services Act.

5 The Department may also contract with such State health and
6 rehabilitation agencies and other public or private health care
7 and rehabilitation organizations to act for it in supplying
8 designated medical services to persons eligible therefor under
9 this Article. Any contracts with health services or health
10 maintenance organizations shall be restricted to organizations
11 which have been certified as being in compliance with standards
12 promulgated pursuant to the laws of this State governing the
13 establishment and operation of health services or health
14 maintenance organizations. The Department shall renegotiate
15 the contracts with health maintenance organizations and
16 managed care community networks that took effect August 1,
17 2003, so as to produce \$70,000,000 savings to the Department
18 net of resulting increases to the fee-for-service program for
19 State fiscal year 2006. The Department may also contract with
20 insurance companies or other corporate entities serving as
21 fiscal intermediaries in this State for the Federal Government
22 in respect to Medicare payments under Title XVIII of the
23 Federal Social Security Act to act for the Department in paying
24 medical care suppliers. The provisions of Section 9 of "An Act
25 in relation to State finance", approved June 10, 1919, as
26 amended, notwithstanding, such contracts with State agencies,
27 other health care and rehabilitation organizations, or fiscal
28 intermediaries may provide for advance payments.

29 (b) For purposes of this subsection (b), "managed care
30 community network" means an entity, other than a health
31 maintenance organization, that is owned, operated, or governed
32 by providers of health care services within this State and that
33 provides or arranges primary, secondary, and tertiary managed
34 health care services under contract with the Illinois
35 Department exclusively to persons participating in programs
36 administered by the Illinois Department.

1 The Illinois Department may certify managed care community
2 networks, including managed care community networks owned,
3 operated, managed, or governed by State-funded medical
4 schools, as risk-bearing entities eligible to contract with the
5 Illinois Department as Medicaid managed care organizations.
6 The Illinois Department may contract with those managed care
7 community networks to furnish health care services to or
8 arrange those services for individuals participating in
9 programs administered by the Illinois Department. The rates for
10 those provider-sponsored organizations may be determined on a
11 prepaid, capitated basis. A managed care community network may
12 choose to contract with the Illinois Department to provide only
13 pediatric health care services. The Illinois Department shall
14 by rule adopt the criteria, standards, and procedures by which
15 a managed care community network may be permitted to contract
16 with the Illinois Department and shall consult with the
17 Department of Insurance in adopting these rules.

18 A county provider as defined in Section 15-1 of this Code
19 may contract with the Illinois Department to provide primary,
20 secondary, or tertiary managed health care services as a
21 managed care community network without the need to establish a
22 separate entity and shall be deemed a managed care community
23 network for purposes of this Code only to the extent it
24 provides services to participating individuals. A county
25 provider is entitled to contract with the Illinois Department
26 with respect to any contracting region located in whole or in
27 part within the county. A county provider is not required to
28 accept enrollees who do not reside within the county.

29 In order to (i) accelerate and facilitate the development
30 of integrated health care in contracting areas outside counties
31 with populations in excess of 3,000,000 and counties adjacent
32 to those counties and (ii) maintain and sustain the high
33 quality of education and residency programs coordinated and
34 associated with local area hospitals, the Illinois Department
35 may develop and implement a demonstration program from managed
36 care community networks owned, operated, managed, or governed

1 by State-funded medical schools. The Illinois Department shall
2 prescribe by rule the criteria, standards, and procedures for
3 effecting this demonstration program.

4 A managed care community network that contracts with the
5 Illinois Department to furnish health care services to or
6 arrange those services for enrollees participating in programs
7 administered by the Illinois Department shall do all of the
8 following:

9 (1) Provide that any provider affiliated with the
10 managed care community network may also provide services on
11 a fee-for-service basis to Illinois Department clients not
12 enrolled in such managed care entities.

13 (2) Provide client education services as determined
14 and approved by the Illinois Department, including but not
15 limited to (i) education regarding appropriate utilization
16 of health care services in a managed care system, (ii)
17 written disclosure of treatment policies and restrictions
18 or limitations on health services, including, but not
19 limited to, physical services, clinical laboratory tests,
20 hospital and surgical procedures, prescription drugs and
21 biologics, and radiological examinations, and (iii)
22 written notice that the enrollee may receive from another
23 provider those covered services that are not provided by
24 the managed care community network.

25 (3) Provide that enrollees within the system may choose
26 the site for provision of services and the panel of health
27 care providers.

28 (4) Not discriminate in enrollment or disenrollment
29 practices among recipients of medical services or
30 enrollees based on health status.

31 (5) Provide a quality assurance and utilization review
32 program that meets the requirements established by the
33 Illinois Department in rules that incorporate those
34 standards set forth in the Health Maintenance Organization
35 Act.

36 (6) Issue a managed care community network

1 identification card to each enrollee upon enrollment. The
2 card must contain all of the following:

3 (A) The enrollee's health plan.

4 (B) The name and telephone number of the enrollee's
5 primary care physician or the site for receiving
6 primary care services.

7 (C) A telephone number to be used to confirm
8 eligibility for benefits and authorization for
9 services that is available 24 hours per day, 7 days per
10 week.

11 (7) Ensure that every primary care physician and
12 pharmacy in the managed care community network meets the
13 standards established by the Illinois Department for
14 accessibility and quality of care. The Illinois Department
15 shall arrange for and oversee an evaluation of the
16 standards established under this paragraph (7) and may
17 recommend any necessary changes to these standards.

18 (8) Provide a procedure for handling complaints that
19 meets the requirements established by the Illinois
20 Department in rules that incorporate those standards set
21 forth in the Health Maintenance Organization Act.

22 (9) Maintain, retain, and make available to the
23 Illinois Department records, data, and information, in a
24 uniform manner determined by the Illinois Department,
25 sufficient for the Illinois Department to monitor
26 utilization, accessibility, and quality of care.

27 (10) Provide that the pharmacy formulary used by the
28 managed care community network and its contract providers
29 be no more restrictive than the Illinois Department's
30 pharmaceutical program on the effective date of this
31 amendatory Act of 1998 and as amended after that date.

32 The Illinois Department shall contract with an entity or
33 entities to provide external peer-based quality assurance
34 review for the managed health care programs administered by the
35 Illinois Department. The entity shall be representative of
36 Illinois physicians licensed to practice medicine in all its

1 branches and have statewide geographic representation in all
2 specialties of medical care that are provided in managed
3 health care programs administered by the Illinois Department.
4 The entity may not be a third party payer and shall maintain
5 offices in locations around the State in order to provide
6 service and continuing medical education to physician
7 participants within those managed health care programs
8 administered by the Illinois Department. The review process
9 shall be developed and conducted by Illinois physicians
10 licensed to practice medicine in all its branches. In
11 consultation with the entity, the Illinois Department may
12 contract with other entities for professional peer-based
13 quality assurance review of individual categories of services
14 other than services provided, supervised, or coordinated by
15 physicians licensed to practice medicine in all its branches.
16 The Illinois Department shall establish, by rule, criteria to
17 avoid conflicts of interest in the conduct of quality assurance
18 activities consistent with professional peer-review standards.
19 All quality assurance activities shall be coordinated by the
20 Illinois Department.

21 Each managed care community network must demonstrate its
22 ability to bear the financial risk of serving individuals under
23 this program. The Illinois Department shall by rule adopt
24 standards for assessing the solvency and financial soundness of
25 each managed care community network. Any solvency and financial
26 standards adopted for managed care community networks shall be
27 no more restrictive than the solvency and financial standards
28 adopted under Section 1856(a) of the Social Security Act for
29 provider-sponsored organizations under Part C of Title XVIII of
30 the Social Security Act.

31 The Illinois Department may implement the amendatory
32 changes to this Code made by this amendatory Act of 1998
33 through the use of emergency rules in accordance with Section
34 5-45 of the Illinois Administrative Procedure Act. For purposes
35 of that Act, the adoption of rules to implement these changes
36 is deemed an emergency and necessary for the public interest,

1 safety, and welfare.

2 (c) Not later than June 30, 1996, the Illinois Department
3 shall enter into one or more cooperative arrangements with the
4 Department of Public Health for the purpose of developing a
5 single survey for nursing facilities, including but not limited
6 to facilities funded under Title XVIII or Title XIX of the
7 federal Social Security Act or both, which shall be
8 administered and conducted solely by the Department of Public
9 Health. The Departments shall test the single survey process on
10 a pilot basis, with both the Departments of Public Aid and
11 Public Health represented on the consolidated survey team. The
12 pilot will sunset June 30, 1997. After June 30, 1997, unless
13 otherwise determined by the Governor, a single survey shall be
14 implemented by the Department of Public Health which would not
15 preclude staff from the Department of Healthcare and Family
16 Services (formerly Department of Public Aid) from going on-site
17 to nursing facilities to perform necessary audits and reviews
18 which shall not replicate the single State agency survey
19 required by this Act. This Section shall not apply to community
20 or intermediate care facilities for persons with developmental
21 disabilities.

22 (d) Nothing in this Code in any way limits or otherwise
23 impairs the authority or power of the Illinois Department to
24 enter into a negotiated contract pursuant to this Section with
25 a managed care community network or a health maintenance
26 organization, as defined in the Health Maintenance
27 Organization Act, that provides for termination or nonrenewal
28 of the contract without cause, upon notice as provided in the
29 contract, and without a hearing.

30 (Source: P.A. 94-48, eff. 7-1-05.)

31 (305 ILCS 5/5-11.1)

32 Sec. 5-11.1. Cooperative arrangements; contracts. The
33 Illinois Department may enter into cooperative arrangements
34 with State agencies responsible for administering or
35 supervising the administration of health services and

1 vocational rehabilitation services to maximize utilization of
2 these services in the provision of medical assistance.

3 The Illinois Department shall, not later than June 30,
4 1994, enter into one or more cooperative arrangements with the
5 Department of Mental Health and Developmental Disabilities
6 providing that the Department of Mental Health and
7 Developmental Disabilities will be responsible for
8 administering or supervising all programs for services to
9 persons in community care facilities for persons with mental
10 illness, including but not limited to intermediate care
11 facilities, that are supported by State funds or by funding
12 under Title XIX of the federal Social Security Act. The
13 responsibilities of the Department of Mental Health and
14 Developmental Disabilities under these agreements are
15 transferred to the Department of Human Services as provided in
16 the Department of Human Services Act.

17 The Department may also contract with State health and
18 rehabilitation agencies and other public or private health care
19 and rehabilitation organizations to act for it in supplying
20 designated medical services to persons eligible under this
21 Section. Any contracts with health services or health
22 maintenance organizations shall be restricted to organizations
23 which have been certified as being in compliance with standards
24 promulgated under the laws of this State governing the
25 establishment and operation of health services or health
26 maintenance organizations. The Department may also contract
27 with insurance companies or other corporate entities serving as
28 fiscal intermediaries in this State for the federal government
29 in respect to Medicare payments under Title XVIII of the
30 federal Social Security Act to act for the Department in paying
31 medical care suppliers. Nothing in this Section shall be
32 construed to abrogate any existing doctor/patient
33 relationships with ~~Illinois~~ Department of Healthcare and
34 Family Services ~~Public Aid~~ recipients or the free choice of
35 clients or their guardians to select a physician to provide
36 medical care. The provisions of Section 9 of the State Finance

1 Act notwithstanding, such contracts with State agencies, other
2 health care and rehabilitation organizations, or fiscal
3 intermediaries may provide for advance payments.

4 (Source: P.A. 91-357, eff. 7-29-99.)

5 (305 ILCS 5/5-16.1) (from Ch. 23, par. 5-16.1)

6 Sec. 5-16.1. Case Management Services. The Illinois
7 Department may develop, implement and evaluate a Case
8 Management Services Program which provides services consistent
9 with the provisions of this Section, and the Inter-Agency
10 Agreement between the Department of Healthcare and Family
11 Services (formerly Department of Public Aid) and the Department
12 of Public Health, for a targeted population on a less than
13 Statewide basis in the State of Illinois. The purpose of this
14 Case Management Services Program shall be to assist eligible
15 participants in gaining access to needed medical, social,
16 educational and other services thereby reducing the likelihood
17 of long-term welfare dependency. The Case Management Services
18 Program shall have the following characteristics:

19 (a) It shall be conducted for a period of no less than
20 5 consecutive fiscal years in one urban area containing a
21 high proportion, as determined by Department of Healthcare
22 and Family Services ~~Public Aid~~ and Department of Public
23 Health records, of Medicaid eligible pregnant or parenting
24 girls under 17 years of age at the time of the initial
25 assessment and in one rural area containing a high
26 proportion, as determined by Department of Healthcare and
27 Family Services ~~Public Aid~~ and Department of Public Health
28 records, of Medicaid eligible pregnant or parenting girls
29 under 17 years of age at the time of the initial
30 assessment.

31 (b) Providers participating in the program shall be
32 paid an amount per patient per month, to be set by the
33 Illinois Department, for the case management services
34 provided.

35 (c) Providers eligible to participate in the program

1 shall be nurses or social workers, licensed to practice in
2 Illinois, who comply with the rules and regulations
3 established by the Illinois Department and the
4 Inter-Agency Agreement between the Department of
5 Healthcare and Family Services (formerly Department of
6 Public Aid) and the Department of Public Health. The
7 Illinois Department may terminate a provider's
8 participation in the program if the provider is determined
9 to have failed to comply with any applicable program
10 standard or procedure established by the Illinois
11 Department.

12 (d) Each eligible participant in an area where the Case
13 Management Services Program is being conducted may
14 voluntarily designate a case manager, of her own choosing
15 to assume responsibility for her care.

16 (e) A participant may change her designated case
17 manager provided that she informs the Illinois Department
18 by the 20th day of the month in order for the change to be
19 effective in the following month.

20 (f) The Illinois Department shall, by rule, establish
21 procedures for providing case management services when the
22 designated source becomes unavailable or wishes to
23 withdraw from any obligation as case management services
24 provider.

25 (g) In accordance with rules adopted by the Illinois
26 Department, a participant may discontinue participation in
27 the program upon timely notice to the Illinois Department,
28 in which case the participant shall remain eligible for
29 assistance under all applicable provisions of Article V of
30 this Code.

31 The Illinois Department shall take any necessary steps to
32 obtain authorization or waiver under federal law to implement a
33 Case Management Services Program. Participation shall be
34 voluntary for the provider and the recipient.

35 (Source: P.A. 87-685.)

1 (305 ILCS 5/5-16.4)

2 Sec. 5-16.4. Medical Assistance Provider Payment Fund.

3 (a) There is created in the State treasury the Medical
4 Assistance Provider Payment Fund. Interest earned by the Fund
5 shall be credited to the Fund.

6 (b) The Fund is created for the purpose of disbursing
7 moneys as follows:

8 (1) For medical services provided to recipients of aid
9 under Articles V, VI, and XII.

10 (2) For payment of administrative expenses incurred by
11 the Illinois Department or its agent in performing the
12 activities authorized by this Section.

13 (3) For making transfers to the General Obligation Bond
14 Retirement and Interest Fund, as those transfers are
15 authorized in the proceedings authorizing debt under the
16 Medicaid Liability Liquidity Borrowing Act, but transfers
17 made under this paragraph (3) may not exceed the principal
18 amount of debt issued under that Act.

19 Disbursements from the Fund, other than transfers to the
20 General Obligation Bond Retirement and Interest Fund (which
21 shall be made in accordance with the provisions of the Medicaid
22 Liability Liquidity Borrowing Act), shall be by warrants drawn
23 by the State Comptroller upon receipt of vouchers duly executed
24 and certified by the Illinois Department.

25 (c) The Fund shall consist of the following:

26 (1) All federal matching funds received by the Illinois
27 Department as a result of expenditures made by the Illinois
28 Department that are attributable to moneys deposited into
29 the Fund.

30 (2) Proceeds from any short-term borrowing directed to
31 the Fund by the Governor pursuant to the Medicaid Liability
32 Liquidity Borrowing Act.

33 (3) Amounts transferred into the Fund under subsection
34 (d) of this Section.

35 (4) All other moneys received for the Fund from any
36 other source, including interest earned on those moneys.

1 (d) Beginning July 1, 1995, on the 13th and 26th days of
2 each month the State Comptroller and Treasurer shall transfer
3 from the General Revenue Fund to the Medical Assistance
4 Provider Payment Fund an amount equal to 1/48th of the annual
5 Medical Assistance appropriation to the Department of
6 Healthcare and Family Services (formerly Illinois Department
7 of Public Aid) from the Medical Assistance Provider Payment
8 Fund, plus cumulative deficiencies from those prior transfers.
9 In addition to those transfers, the State Comptroller and
10 Treasurer may transfer from the General Revenue Fund to the
11 Medical Assistance Provider Payment Fund as much as is
12 necessary to pay claims pursuant to the new twice-monthly
13 payment schedule established in Section 5-16.5 and to avoid
14 interest liabilities under the State Prompt Payment Act. No
15 transfers made pursuant to this subsection shall interfere with
16 the timely payment of the general State aid payment made
17 pursuant to Section 18-11 of the School Code.

18 (Source: P.A. 88-554, eff. 7-26-94.)

19 (305 ILCS 5/5-21)

20 Sec. 5-21. Immunization. By July 1, 1994, the Illinois
21 Department shall, in cooperation with the Department of Public
22 Health, establish and implement a pilot program that will
23 provide immunization services for children on a walk-in basis
24 at local public aid offices. The Director shall determine the
25 number and location of the local public aid offices that will
26 participate in the pilot program. The Illinois Department shall
27 submit a report on the effectiveness of the program to the
28 General Assembly on or before December 31, 1995. The Department
29 of Healthcare and Family Services (formerly Department of
30 Public Aid) and the Department of Human Services, in
31 cooperation with the Department of Public Health, shall
32 continue to implement the pilot program after the effective
33 date of this amendatory Act of 1996.

34 (Source: P.A. 88-493; 88-670, eff. 12-2-94; 89-507, eff.
35 7-1-97.)

1 (305 ILCS 5/5-24)

2 (Section scheduled to be repealed on January 1, 2014)

3 Sec. 5-24. Disease management programs and services for
4 chronic conditions; pilot project.

5 (a) In this Section, "disease management programs and
6 services" means services administered to patients in order to
7 improve their overall health and to prevent clinical
8 exacerbations and complications, using cost-effective,
9 evidence-based practice guidelines and patient self-management
10 strategies. Disease management programs and services include
11 all of the following:

12 (1) A population identification process.

13 (2) Evidence-based or consensus-based clinical
14 practice guidelines, risk identification, and matching of
15 interventions with clinical need.

16 (3) Patient self-management and disease education.

17 (4) Process and outcomes measurement, evaluation,
18 management, and reporting.

19 (b) Subject to appropriations, the Department of
20 Healthcare and Family Services ~~Public Aid~~ may undertake a pilot
21 project to study patient outcomes, for patients with chronic
22 diseases, associated with the use of disease management
23 programs and services for chronic condition management.
24 "Chronic diseases" include, but are not limited to, diabetes,
25 congestive heart failure, and chronic obstructive pulmonary
26 disease.

27 (c) The disease management programs and services pilot
28 project shall examine whether chronic disease management
29 programs and services for patients with specific chronic
30 conditions do any or all of the following:

31 (1) Improve the patient's overall health in a more
32 expeditious manner.

33 (2) Lower costs in other aspects of the medical
34 assistance program, such as hospital admissions, days in
35 skilled nursing homes, emergency room visits, or more

1 frequent physician office visits.

2 (d) In carrying out the pilot project, the Department of
3 Healthcare and Family Services ~~Public Aid~~ shall examine all
4 relevant scientific literature and shall consult with health
5 care practitioners including, but not limited to, physicians,
6 surgeons, registered pharmacists, and registered nurses.

7 (e) The Department of Healthcare and Family Services ~~Public~~
8 ~~Aid~~ shall consult with medical experts, disease advocacy
9 groups, and academic institutions to develop criteria to be
10 used in selecting a vendor for the pilot project.

11 (f) The Department of Healthcare and Family Services ~~Public~~
12 ~~Aid~~ may adopt rules to implement this Section.

13 (g) This Section is repealed 10 years after the effective
14 date of this amendatory Act of the 93rd General Assembly.

15 (Source: P.A. 93-518, eff. 1-1-04.)

16 (305 ILCS 5/5A-2) (from Ch. 23, par. 5A-2)

17 (Section scheduled to be repealed on July 1, 2008)

18 Sec. 5A-2. Assessment; no local authorization to tax.

19 (a) Subject to Sections 5A-3 and 5A-10, an annual
20 assessment on inpatient services is imposed on each hospital
21 provider in an amount equal to the hospital's occupied bed days
22 multiplied by \$84.19 multiplied by the proration factor for
23 State fiscal year 2004 and the hospital's occupied bed days
24 multiplied by \$84.19 for State fiscal year 2005.

25 The Department of Healthcare and Family Services ~~Public Aid~~
26 shall use the number of occupied bed days as reported by each
27 hospital on the Annual Survey of Hospitals conducted by the
28 Department of Public Health to calculate the hospital's annual
29 assessment. If the sum of a hospital's occupied bed days is not
30 reported on the Annual Survey of Hospitals or if there are data
31 errors in the reported sum of a hospital's occupied bed days as
32 determined by the Department of Healthcare and Family Services
33 (formerly Department of Public Aid), then the Department of
34 Healthcare and Family Services ~~Public Aid~~ may obtain the sum of
35 occupied bed days from any source available, including, but not

1 limited to, records maintained by the hospital provider, which
2 may be inspected at all times during business hours of the day
3 by the Department of Healthcare and Family Services ~~Public Aid~~
4 or its duly authorized agents and employees.

5 Subject to Sections 5A-3 and 5A-10, for the privilege of
6 engaging in the occupation of hospital provider, beginning
7 August 1, 2005, an annual assessment is imposed on each
8 hospital provider for State fiscal years 2006, 2007, and 2008,
9 in an amount equal to 2.5835% of the hospital provider's
10 adjusted gross hospital revenue for inpatient services and
11 2.5835% of the hospital provider's adjusted gross hospital
12 revenue for outpatient services. If the hospital provider's
13 adjusted gross hospital revenue is not available, then the
14 Illinois Department may obtain the hospital provider's
15 adjusted gross hospital revenue from any source available,
16 including, but not limited to, records maintained by the
17 hospital provider, which may be inspected at all times during
18 business hours of the day by the Illinois Department or its
19 duly authorized agents and employees.

20 (b) Nothing in this Article shall be construed to authorize
21 any home rule unit or other unit of local government to license
22 for revenue or to impose a tax or assessment upon hospital
23 providers or the occupation of hospital provider, or a tax or
24 assessment measured by the income or earnings of a hospital
25 provider.

26 (c) As provided in Section 5A-14, this Section is repealed
27 on July 1, 2008.

28 (Source: P.A. 93-659, eff. 2-3-04; 93-841, eff. 7-30-04;
29 93-1066, eff. 1-15-05; 94-242, eff. 7-18-05.)

30 (305 ILCS 5/5A-4) (from Ch. 23, par. 5A-4)

31 Sec. 5A-4. Payment of assessment; penalty.

32 (a) The annual assessment imposed by Section 5A-2 for State
33 fiscal year 2004 shall be due and payable on June 18 of the
34 year. The assessment imposed by Section 5A-2 for State fiscal
35 year 2005 shall be due and payable in quarterly installments,

1 each equalling one-fourth of the assessment for the year, on
2 July 19, October 19, January 18, and April 19 of the year. The
3 assessment imposed by Section 5A-2 for State fiscal year 2006
4 and each subsequent State fiscal year shall be due and payable
5 in quarterly installments, each equaling one-fourth of the
6 assessment for the year, on the fourteenth State business day
7 of September, December, March, and May. No installment payment
8 of an assessment imposed by Section 5A-2 shall be due and
9 payable, however, until after: (i) the hospital provider
10 receives written notice from the Department of Healthcare and
11 Family Services (formerly Department of Public Aid) that the
12 payment methodologies to hospitals required under Section
13 5A-12 or Section 5A-12.1, whichever is applicable for that
14 fiscal year, have been approved by the Centers for Medicare and
15 Medicaid Services of the U.S. Department of Health and Human
16 Services and the waiver under 42 CFR 433.68 for the assessment
17 imposed by Section 5A-2, if necessary, has been granted by the
18 Centers for Medicare and Medicaid Services of the U.S.
19 Department of Health and Human Services; and (ii) the hospital
20 has received the payments required under Section 5A-12 or
21 Section 5A-12.1, whichever is applicable for that fiscal year.
22 Upon notification to the Department of approval of the payment
23 methodologies required under Section 5A-12 or Section 5A-12.1,
24 whichever is applicable for that fiscal year, and the waiver
25 granted under 42 CFR 433.68, all quarterly installments
26 otherwise due under Section 5A-2 prior to the date of
27 notification shall be due and payable to the Department upon
28 written direction from the Department and receipt of the
29 payments required under Section 5A-12.1.

30 (b) The Illinois Department is authorized to establish
31 delayed payment schedules for hospital providers that are
32 unable to make installment payments when due under this Section
33 due to financial difficulties, as determined by the Illinois
34 Department.

35 (c) If a hospital provider fails to pay the full amount of
36 an installment when due (including any extensions granted under

1 subsection (b)), there shall, unless waived by the Illinois
2 Department for reasonable cause, be added to the assessment
3 imposed by Section 5A-2 a penalty assessment equal to the
4 lesser of (i) 5% of the amount of the installment not paid on
5 or before the due date plus 5% of the portion thereof remaining
6 unpaid on the last day of each 30-day period thereafter or (ii)
7 100% of the installment amount not paid on or before the due
8 date. For purposes of this subsection, payments will be
9 credited first to unpaid installment amounts (rather than to
10 penalty or interest), beginning with the most delinquent
11 installments.

12 (Source: P.A. 93-659, eff. 2-3-04; 93-841, eff. 7-30-04;
13 93-1066, eff. 1-15-05; 94-242, eff. 7-18-05.)

14 (305 ILCS 5/5A-5) (from Ch. 23, par. 5A-5)

15 Sec. 5A-5. Notice; penalty; maintenance of records.

16 (a) The Department of Healthcare and Family Services ~~Public~~
17 ~~Aid~~ shall send a notice of assessment to every hospital
18 provider subject to assessment under this Article. The notice
19 of assessment shall notify the hospital of its assessment and
20 shall be sent after receipt by the Department of notification
21 from the Centers for Medicare and Medicaid Services of the U.S.
22 Department of Health and Human Services that the payment
23 methodologies required under Section 5A-12 or Section 5A-12.1,
24 whichever is applicable for that fiscal year, and, if
25 necessary, the waiver granted under 42 CFR 433.68 have been
26 approved. The notice shall be on a form prepared by the
27 Illinois Department and shall state the following:

28 (1) The name of the hospital provider.

29 (2) The address of the hospital provider's principal
30 place of business from which the provider engages in the
31 occupation of hospital provider in this State, and the name
32 and address of each hospital operated, conducted, or
33 maintained by the provider in this State.

34 (3) The occupied bed days or adjusted gross hospital
35 revenue of the hospital provider (whichever is

1 applicable), the amount of assessment imposed under
2 Section 5A-2 for the State fiscal year for which the notice
3 is sent, and the amount of each quarterly installment to be
4 paid during the State fiscal year.

5 (4) (Blank).

6 (5) Other reasonable information as determined by the
7 Illinois Department.

8 (b) If a hospital provider conducts, operates, or maintains
9 more than one hospital licensed by the Illinois Department of
10 Public Health, the provider shall pay the assessment for each
11 hospital separately.

12 (c) Notwithstanding any other provision in this Article, in
13 the case of a person who ceases to conduct, operate, or
14 maintain a hospital in respect of which the person is subject
15 to assessment under this Article as a hospital provider, the
16 assessment for the State fiscal year in which the cessation
17 occurs shall be adjusted by multiplying the assessment computed
18 under Section 5A-2 by a fraction, the numerator of which is the
19 number of days in the year during which the provider conducts,
20 operates, or maintains the hospital and the denominator of
21 which is 365. Immediately upon ceasing to conduct, operate, or
22 maintain a hospital, the person shall pay the assessment for
23 the year as so adjusted (to the extent not previously paid).

24 (d) Notwithstanding any other provision in this Article, a
25 provider who commences conducting, operating, or maintaining a
26 hospital, upon notice by the Illinois Department, shall pay the
27 assessment computed under Section 5A-2 and subsection (e) in
28 installments on the due dates stated in the notice and on the
29 regular installment due dates for the State fiscal year
30 occurring after the due dates of the initial notice.

31 (e) Notwithstanding any other provision in this Article,
32 for State fiscal years 2004 and 2005, in the case of a hospital
33 provider that did not conduct, operate, or maintain a hospital
34 throughout calendar year 2001, the assessment for that State
35 fiscal year shall be computed on the basis of hypothetical
36 occupied bed days for the full calendar year as determined by

1 the Illinois Department. Notwithstanding any other provision
2 in this Article, for State fiscal years after 2005, in the case
3 of a hospital provider that did not conduct, operate, or
4 maintain a hospital in 2003, the assessment for that State
5 fiscal year shall be computed on the basis of hypothetical
6 adjusted gross hospital revenue for the hospital's first full
7 fiscal year as determined by the Illinois Department (which may
8 be based on annualization of the provider's actual revenues for
9 a portion of the year, or revenues of a comparable hospital for
10 the year, including revenues realized by a prior provider of
11 the same hospital during the year).

12 (f) Every hospital provider subject to assessment under
13 this Article shall keep sufficient records to permit the
14 determination of adjusted gross hospital revenue for the
15 hospital's fiscal year. All such records shall be kept in the
16 English language and shall, at all times during regular
17 business hours of the day, be subject to inspection by the
18 Illinois Department or its duly authorized agents and
19 employees.

20 (g) The Illinois Department may, by rule, provide a
21 hospital provider a reasonable opportunity to request a
22 clarification or correction of any clerical or computational
23 errors contained in the calculation of its assessment, but such
24 corrections shall not extend to updating the cost report
25 information used to calculate the assessment.

26 (h) (Blank).

27 (Source: P.A. 93-659, eff. 2-3-04; 93-841, eff. 7-30-04;
28 94-242, eff. 7-18-05.)

29 (305 ILCS 5/5A-10) (from Ch. 23, par. 5A-10)

30 Sec. 5A-10. Applicability.

31 (a) The assessment imposed by Section 5A-2 shall not take
32 effect or shall cease to be imposed, and any moneys remaining
33 in the Fund shall be refunded to hospital providers in
34 proportion to the amounts paid by them, if:

35 (1) the sum of the appropriations for State fiscal

1 years 2004 and 2005 from the General Revenue Fund for
2 hospital payments under the medical assistance program is
3 less than \$4,500,000,000 or the appropriation for each of
4 State fiscal years 2006, 2007 and 2008 from the General
5 Revenue Fund for hospital payments under the medical
6 assistance program is less than \$2,500,000,000 increased
7 annually to reflect any increase in the number of
8 recipients; or

9 (2) the Department of Healthcare and Family Services
10 (formerly Department of Public Aid) makes changes in its
11 rules that reduce the hospital inpatient or outpatient
12 payment rates, including adjustment payment rates, in
13 effect on October 1, 2004, except for hospitals described
14 in subsection (b) of Section 5A-3 and except for changes in
15 the methodology for calculating outlier payments to
16 hospitals for exceptionally costly stays, so long as those
17 changes do not reduce aggregate expenditures below the
18 amount expended in State fiscal year 2005 for such
19 services; or

20 (3) the payments to hospitals required under Section
21 5A-12 are changed or are not eligible for federal matching
22 funds under Title XIX or XXI of the Social Security Act.

23 (b) The assessment imposed by Section 5A-2 shall not take
24 effect or shall cease to be imposed if the assessment is
25 determined to be an impermissible tax under Title XIX of the
26 Social Security Act. Moneys in the Hospital Provider Fund
27 derived from assessments imposed prior thereto shall be
28 disbursed in accordance with Section 5A-8 to the extent federal
29 matching is not reduced due to the impermissibility of the
30 assessments, and any remaining moneys shall be refunded to
31 hospital providers in proportion to the amounts paid by them.

32 (Source: P.A. 93-659, eff. 2-3-04; 94-242, eff. 7-18-05.)

33 (305 ILCS 5/5A-13)

34 Sec. 5A-13. Emergency rulemaking. The Department of
35 Healthcare and Family Services (formerly Department of Public

1 Aid) may adopt rules necessary to implement this amendatory Act
2 of the 94th General Assembly through the use of emergency
3 rulemaking in accordance with Section 5-45 of the Illinois
4 Administrative Procedure Act. For purposes of that Act, the
5 General Assembly finds that the adoption of rules to implement
6 this amendatory Act of the 94th General Assembly is deemed an
7 emergency and necessary for the public interest, safety, and
8 welfare.

9 (Source: P.A. 93-659, eff. 2-3-04; 94-242, eff. 7-18-05.)

10 (305 ILCS 5/6-11) (from Ch. 23, par. 6-11)

11 Sec. 6-11. State funded General Assistance.

12 (a) Effective July 1, 1992, all State funded General
13 Assistance and related medical benefits shall be governed by
14 this Section. Other parts of this Code or other laws related to
15 General Assistance shall remain in effect to the extent they do
16 not conflict with the provisions of this Section. If any other
17 part of this Code or other laws of this State conflict with the
18 provisions of this Section, the provisions of this Section
19 shall control.

20 (b) State funded General Assistance shall consist of 2
21 separate programs. One program shall be for adults with no
22 children and shall be known as State Transitional Assistance.
23 The other program shall be for families with children and for
24 pregnant women and shall be known as State Family and Children
25 Assistance.

26 (c) (1) To be eligible for State Transitional Assistance on
27 or after July 1, 1992, an individual must be ineligible for
28 assistance under any other Article of this Code, must be
29 determined chronically needy, and must be one of the following:

30 (A) age 18 or over or

31 (B) married and living with a spouse, regardless of
32 age.

33 (2) The Illinois Department or the local governmental unit
34 shall determine whether individuals are chronically needy as
35 follows:

1 (A) Individuals who have applied for Supplemental
2 Security Income (SSI) and are awaiting a decision on
3 eligibility for SSI who are determined disabled by the
4 Illinois Department using the SSI standard shall be
5 considered chronically needy, except that individuals
6 whose disability is based solely on substance addictions
7 (drug abuse and alcoholism) and whose disability would
8 cease were their addictions to end shall be eligible only
9 for medical assistance and shall not be eligible for cash
10 assistance under the State Transitional Assistance
11 program.

12 (B) If an individual has been denied SSI due to a
13 finding of "not disabled" (either at the Administrative Law
14 Judge level or above, or at a lower level if that
15 determination was not appealed), the Illinois Department
16 shall adopt that finding and the individual shall not be
17 eligible for State Transitional Assistance or any related
18 medical benefits. Such an individual may not be determined
19 disabled by the Illinois Department for a period of 12
20 months, unless the individual shows that there has been a
21 substantial change in his or her medical condition or that
22 there has been a substantial change in other factors, such
23 as age or work experience, that might change the
24 determination of disability.

25 (C) The Illinois Department, by rule, may specify other
26 categories of individuals as chronically needy; nothing in
27 this Section, however, shall be deemed to require the
28 inclusion of any specific category other than as specified
29 in paragraphs (A) and (B).

30 (3) For individuals in State Transitional Assistance,
31 medical assistance shall be provided in an amount and nature
32 determined by the ~~Illinois~~ Department of Healthcare and Family
33 Services ~~Public Aid~~ by rule. The amount and nature of medical
34 assistance provided need not be the same as that provided under
35 paragraph (4) of subsection (d) of this Section, and nothing in
36 this paragraph (3) shall be construed to require the coverage

1 of any particular medical service. In addition, the amount and
2 nature of medical assistance provided may be different for
3 different categories of individuals determined chronically
4 needy.

5 (4) The Illinois Department shall determine, by rule, those
6 assistance recipients under Article VI who shall be subject to
7 employment, training, or education programs including
8 Earnfare, the content of those programs, and the penalties for
9 failure to cooperate in those programs.

10 (5) The Illinois Department shall, by rule, establish
11 further eligibility requirements, including but not limited to
12 residence, need, and the level of payments.

13 (d) (1) To be eligible for State Family and Children
14 Assistance, a family unit must be ineligible for assistance
15 under any other Article of this Code and must contain a child
16 who is:

17 (A) under age 18 or

18 (B) age 18 and a full-time student in a secondary
19 school or the equivalent level of vocational or technical
20 training, and who may reasonably be expected to complete
21 the program before reaching age 19.

22 Those children shall be eligible for State Family and
23 Children Assistance.

24 (2) The natural or adoptive parents of the child living in
25 the same household may be eligible for State Family and
26 Children Assistance.

27 (3) A pregnant woman whose pregnancy has been verified
28 shall be eligible for income maintenance assistance under the
29 State Family and Children Assistance program.

30 (4) The amount and nature of medical assistance provided
31 under the State Family and Children Assistance program shall be
32 determined by the ~~Illinois~~ Department of Healthcare and Family
33 Services ~~Public Aid~~ by rule. The amount and nature of medical
34 assistance provided need not be the same as that provided under
35 paragraph (3) of subsection (c) of this Section, and nothing in
36 this paragraph (4) shall be construed to require the coverage

1 of any particular medical service.

2 (5) The Illinois Department shall, by rule, establish
3 further eligibility requirements, including but not limited to
4 residence, need, and the level of payments.

5 (e) A local governmental unit that chooses to participate
6 in a General Assistance program under this Section shall
7 provide funding in accordance with Section 12-21.13 of this
8 Act. Local governmental funds used to qualify for State funding
9 may only be expended for clients eligible for assistance under
10 this Section 6-11 and related administrative expenses.

11 (f) In order to qualify for State funding under this
12 Section, a local governmental unit shall be subject to the
13 supervision and the rules and regulations of the Illinois
14 Department.

15 (g) Notwithstanding any other provision in this Code, the
16 Illinois Department is authorized to reduce payment levels used
17 to determine cash grants provided to recipients of State
18 Transitional Assistance at any time within a Fiscal Year in
19 order to ensure that cash benefits for State Transitional
20 Assistance do not exceed the amounts appropriated for those
21 cash benefits. Changes in payment levels may be accomplished by
22 emergency rule under Section 5-45 of the Illinois
23 Administrative Procedure Act, except that the limitation on the
24 number of emergency rules that may be adopted in a 24-month
25 period shall not apply and the provisions of Sections 5-115 and
26 5-125 of the Illinois Administrative Procedure Act shall not
27 apply. This provision shall also be applicable to any reduction
28 in payment levels made upon implementation of this amendatory
29 Act of 1995.

30 (Source: P.A. 92-111, eff. 1-1-02.)

31 (305 ILCS 5/9-1) (from Ch. 23, par. 9-1)

32 Sec. 9-1. Declaration of Purpose. It is the purpose of this
33 Article to aid applicants for and recipients of public aid
34 under Articles III, IV, V, and VI, to increase their capacities
35 for self-support, self-care, and responsible citizenship, and

1 to assist them in maintaining and strengthening family life. If
2 authorized pursuant to Section 9-8, this Article may be
3 extended to former and potential recipients and to persons
4 whose income does not exceed the standard established to
5 determine eligibility for aid as a medically indigent person
6 under Article V. The Department, with the written consent of
7 the Governor, may also:

8 (a) extend this Article to individuals and their families
9 with income closely related to national indices of poverty who
10 have special needs resulting from institutionalization of a
11 family member or conditions that may lead to
12 institutionalization or who live in impoverished areas or in
13 facilities developed to serve persons of low income;

14 (b) establish, where indicated, schedules of payment for
15 service provided based on ability to pay;

16 (c) provide for the coordinated delivery of the services
17 described in this Article and related services offered by other
18 public or private agencies or institutions, and cooperate with
19 the Illinois Department on Aging to enable it to properly
20 execute and fulfill its duties pursuant to the provisions of
21 Section 4.01 of the "Illinois Act on the Aging", as now or
22 hereafter amended;

23 (d) provide in-home care services, such as chore and
24 housekeeping services or homemaker services, to recipients of
25 public aid under Articles IV and VI, the scope and eligibility
26 criteria for such services to be determined by rule;

27 (e) contract with other State agencies for the purchase of
28 social service under Title XX of the Social Security Act, such
29 services to be provided pursuant to such other agencies'
30 enabling legislation; and

31 (f) cooperate with the ~~Illinois~~ Department of Healthcare
32 and Family Services ~~Public Aid~~ to provide services to public
33 aid recipients for the treatment and prevention of alcoholism
34 and substance abuse.

35 (Source: P.A. 92-16, eff. 6-28-01; 92-111, eff. 1-1-02; 92-651,
36 eff. 7-11-02.)

1 (305 ILCS 5/9-13)

2 Sec. 9-13. Survey of teen parent services. The Social
3 Services Advisory Committee shall conduct a survey of all
4 policy related to the provision of teen parent services and
5 make administrative and legislative recommendations to prevent
6 duplication, correct inconsistencies, and generally improve
7 the provision of services to teen parents within the Department
8 of Public Aid (now Healthcare and Family Services). The results
9 of the survey, including recommendations shall be submitted in
10 written form to the General Assembly, no later than December 1,
11 1994.

12 (Source: P.A. 88-412.)

13 (305 ILCS 5/9A-9.5)

14 Sec. 9A-9.5. Health care advocates; committee. The
15 Department of Human Services and the Department of Healthcare
16 and Family Services ~~Public Aid~~ shall jointly establish an
17 interagency committee to do the following:

18 (1) Assist the departments in making recommendations
19 on incorporating health care advocates into education,
20 training, and placement programs under this Article. The
21 advocates should be individuals who are knowledgeable
22 about various types of health insurance programs.

23 (2) Develop more outreach and educational materials to
24 help TANF families make informed choices concerning health
25 insurance and health care. The materials should target
26 families that are transitioning from receipt of public aid
27 to employment.

28 (3) Develop methods to simplify the process of applying
29 for medical assistance under Article V.

30 (Source: P.A. 93-150, eff. 7-10-03.)

31 (305 ILCS 5/10-1) (from Ch. 23, par. 10-1)

32 Sec. 10-1. Declaration of Public Policy - Persons Eligible
33 for Child Support Enforcement Services - Fees for

1 Non-Applicants and Non-Recipients.) It is the intent of this
2 Code that the financial aid and social welfare services herein
3 provided supplement rather than supplant the primary and
4 continuing obligation of the family unit for self-support to
5 the fullest extent permitted by the resources available to it.
6 This primary and continuing obligation applies whether the
7 family unit of parents and children or of husband and wife
8 remains intact and resides in a common household or whether the
9 unit has been broken by absence of one or more members of the
10 unit. The obligation of the family unit is particularly
11 applicable when a member is in necessitous circumstances and
12 lacks the means of a livelihood compatible with health and
13 well-being.

14 It is the purpose of this Article to provide for locating
15 an absent parent or spouse, for determining his financial
16 circumstances, and for enforcing his legal obligation of
17 support, if he is able to furnish support, in whole or in part.
18 The ~~Illinois~~ Department of Healthcare and Family Services
19 ~~Public Aid~~ shall give priority to establishing, enforcing and
20 collecting the current support obligation, and then to past due
21 support owed to the family unit, except with respect to
22 collections effected through the intercept programs provided
23 for in this Article.

24 The child support enforcement services provided hereunder
25 shall be furnished dependents of an absent parent or spouse who
26 are applicants for or recipients of financial aid under this
27 Code. It is not, however, a condition of eligibility for
28 financial aid that there be no responsible relatives who are
29 reasonably able to provide support. Nor, except as provided in
30 Sections 4-1.7 and 10-8, shall the existence of such relatives
31 or their payment of support contributions disqualify a needy
32 person for financial aid.

33 By accepting financial aid under this Code, a spouse or a
34 parent or other person having custody of a child shall be
35 deemed to have made assignment to the Illinois Department for
36 aid under Articles III, IV, V and VII or to a local

1 governmental unit for aid under Article VI of any and all
2 rights, title, and interest in any support obligation,
3 including statutory interest thereon, up to the amount of
4 financial aid provided. The rights to support assigned to the
5 Department of Healthcare and Family Services (formerly
6 Illinois Department of Public Aid) or local governmental unit
7 shall constitute an obligation owed the State or local
8 governmental unit by the person who is responsible for
9 providing the support, and shall be collectible under all
10 applicable processes.

11 The ~~Illinois~~ Department of Healthcare and Family Services
12 ~~Public Aid~~ shall also furnish the child support enforcement
13 services established under this Article in behalf of persons
14 who are not applicants for or recipients of financial aid under
15 this Code in accordance with the requirements of Title IV, Part
16 D of the Social Security Act. The Department may establish a
17 schedule of reasonable fees, to be paid for the services
18 provided and may deduct a collection fee, not to exceed 10% of
19 the amount collected, from such collection. The ~~Illinois~~
20 Department of Healthcare and Family Services ~~Public Aid~~ shall
21 cause to be published and distributed publications reasonably
22 calculated to inform the public that individuals who are not
23 recipients of or applicants for public aid under this Code are
24 eligible for the child support enforcement services under this
25 Article X. Such publications shall set forth an explanation, in
26 plain language, that the child support enforcement services
27 program is independent of any public aid program under the Code
28 and that the receiving of child support enforcement services in
29 no way implies that the person receiving such services is
30 receiving public aid.

31 (Source: P.A. 94-90, eff. 1-1-06.)

32 (305 ILCS 5/10-10.4)

33 Sec. 10-10.4. Payment of Support to State Disbursement
34 Unit.

35 (a) As used in this Section:

1 "Order for support", "obligor", "obligee", and "payor"
2 mean those terms as defined in the Income Withholding for
3 Support Act, except that "order for support" shall not mean
4 orders providing for spousal maintenance under which there is
5 no child support obligation.

6 (b) Notwithstanding any other provision of this Code to the
7 contrary, each court or administrative order for support
8 entered or modified on or after October 1, 1999 shall require
9 that support payments be made to the State Disbursement Unit
10 established under Section 10-26 if:

11 (1) a party to the order is receiving child support
12 enforcement services under this Article X; or

13 (2) no party to the order is receiving child support
14 enforcement services, but the support payments are made
15 through income withholding.

16 (c) Support payments shall be made to the State
17 Disbursement Unit if:

18 (1) the order for support was entered before October 1,
19 1999, and a party to the order is receiving child support
20 enforcement services under this Article X; or

21 (2) no party to the order is receiving child support
22 enforcement services, and the support payments are being
23 made through income withholding.

24 (c-5) If no party to the order is receiving child support
25 enforcement services under this Article X, and the support
26 payments are not being made through income withholding, then
27 support payments shall be made as directed in the order for
28 support.

29 (c-10) At any time, and notwithstanding the existence of an
30 order directing payments to be made elsewhere, the Department
31 of Healthcare and Family Services ~~Public Aid~~ may provide notice
32 to the obligor and, where applicable, to the obligor's payor:

33 (1) to make support payments to the State Disbursement
34 Unit if:

35 (A) a party to the order for support is receiving
36 child support enforcement services under this Article

1 X; or

2 (B) no party to the order for support is receiving
3 child support enforcement services under this Article
4 X, but the support payments are made through income
5 withholding; or

6 (2) to make support payments to the State Disbursement
7 Unit of another state upon request of another state's Title
8 IV-D child support enforcement agency, in accordance with
9 the requirements of Title IV, Part D of the Social Security
10 Act and regulations promulgated under that Part D.

11 (c-15) Within 15 days after the effective date of this
12 amendatory Act of the 91st General Assembly, the clerk of the
13 circuit court shall provide written notice to the obligor to
14 make payments directly to the clerk of the circuit court if no
15 party to the order is receiving child support enforcement
16 services under this Article X, the support payments are not
17 made through income withholding, and the order for support
18 requires support payments to be made directly to the clerk of
19 the circuit court.

20 (c-20) If the State Disbursement Unit receives a support
21 payment that was not appropriately made to the Unit under this
22 Section, the Unit shall immediately return the payment to the
23 sender, including, if possible, instructions detailing where
24 to send the support payments.

25 (d) The notices under subsections (c-10) and (c-15) may be
26 sent by ordinary mail, certified mail, return receipt
27 requested, facsimile transmission, or other electronic
28 process, or may be served upon the obligor or payor using any
29 method provided by law for service of a summons. A copy of the
30 notice shall be provided to the obligee and, when the order for
31 support was entered by the court, to the clerk of the court.

32 (Source: P.A. 91-212, eff. 7-20-99; 91-677, eff. 1-5-00;
33 92-590, eff. 7-1-02.)

34 (305 ILCS 5/10-15) (from Ch. 23, par. 10-15)

35 Sec. 10-15. Enforcement of administrative order; costs and

1 fees. If a responsible relative refuses, neglects, or fails to
2 comply with a final administrative support or reimbursement
3 order of the Illinois Department entered by the Child and
4 Spouse Support Unit pursuant to Sections 10-11 or 10-11.1 or
5 registered pursuant to Section 10-17.1, the Child and Spouse
6 Support Unit may file suit against the responsible relative or
7 relatives to secure compliance with the administrative order.

8 Suits shall be instituted in the name of the People of the
9 State of Illinois on the relation of the Department of
10 Healthcare and Family Services ~~Public Aid~~ of the State of
11 Illinois and the spouse or dependent children for whom the
12 support order has been issued.

13 The court shall order the payment of the support
14 obligation, or orders for reimbursement of moneys for support
15 provided, directly to the Illinois Department but the order
16 shall permit the Illinois Department to direct the responsible
17 relative or relatives to make payments of support directly to
18 the spouse or dependent children, or to some person or agency
19 in his or their behalf, as provided in Section 10-8 or 10-10,
20 as applicable.

21 Whenever it is determined in a proceeding to enforce an
22 administrative order that the responsible relative is
23 unemployed, and support is sought on behalf of applicants for
24 or recipients of financial aid under Article IV of this Code or
25 other persons who are given access to the child support
26 enforcement services of this Article as provided in Section
27 10-1, the court may order the responsible relative to seek
28 employment and report periodically to the court with a diary,
29 listing or other memorandum of his or her efforts in accordance
30 with such order. In addition, the court may order the
31 unemployed responsible relative to report to the Illinois
32 Department for participation in job search, training or work
33 programs established under Section 9-6 of this Code or to the
34 Illinois Department of Employment Security for job search
35 services or to make application with the local Job Training
36 Partnership Act provider for participation in job search,

1 training or work programs.

2 Charges imposed in accordance with the provisions of
3 Section 10-21 shall be enforced by the Court in a suit filed
4 under this Section.

5 To the extent the provisions of this Section are
6 inconsistent with the requirements pertaining to the State
7 Disbursement Unit under Sections 10-10.4 and 10-26 of this
8 Code, the requirements pertaining to the State Disbursement
9 Unit shall apply.

10 (Source: P.A. 91-212, eff. 7-20-99; 92-16, eff. 6-28-01;
11 92-590, eff. 7-1-02.)

12 (305 ILCS 5/10-16.7)

13 Sec. 10-16.7. Child support enforcement debit
14 authorization.

15 (a) For purposes of this Section:

16 "Financial institution" and "account" are defined as set
17 forth in Section 10-24.

18 "Payor" is defined as set forth in Section 15 of the Income
19 Withholding for Support Act.

20 "Order for support" means any order for periodic payment of
21 funds to the State Disbursement Unit for the support of a child
22 or, where applicable, for support of a child and a parent with
23 whom the child resides, that is entered or modified under this
24 Code or under the Illinois Marriage and Dissolution of Marriage
25 Act, the Non-Support of Spouse and Children Act, the
26 Non-Support Punishment Act, or the Illinois Parentage Act of
27 1984, or that is entered or registered for modification or
28 enforcement under the Uniform Interstate Family Support Act.

29 "Obligor" means an individual who owes a duty to make
30 payments under an order for support in a case in which child
31 support enforcement services are being provided under this
32 Article X.

33 (b) The Department of Public Aid (now Healthcare and Family
34 Services) shall adopt a child support enforcement debit
35 authorization form that, upon being signed by an obligor,

1 authorizes a financial institution holding an account on the
2 obligor's behalf to debit the obligor's account periodically in
3 an amount equal to the amount of child support that the obligor
4 is required to pay periodically and transfer that amount to the
5 State Disbursement Unit. The form shall include instructions to
6 the financial institution concerning the debiting of accounts
7 held on behalf of obligors and the transfer of the debited
8 amounts to the State Disbursement Unit. In adopting the form,
9 the Department may consult with the Office of Banks and Real
10 Estate and the Department of Financial Institutions. The
11 Department must adopt the form within 6 months after the
12 effective date of this amendatory Act of the 93rd General
13 Assembly. Promptly after adopting the form, the Department must
14 notify each financial institution conducting business in this
15 State that the form has been adopted and is ready for use.

16 (c) An obligor who does not have a payor may sign a child
17 support debit authorization form adopted by the Department
18 under this Section. The obligor may sign a form in relation to
19 any or all of the financial institutions holding an account on
20 the obligor's behalf. Promptly after an obligor signs a child
21 support debit authorization form, the Department shall send the
22 original signed form to the appropriate financial institution.
23 Subject to subsection (e), upon receiving the form, the
24 financial institution shall debit the account and transfer the
25 debited amounts to the State Disbursement Unit according to the
26 instructions in the form. A financial institution that complies
27 with a child support debit authorization form signed by an
28 obligor and issued under this Section shall not be subject to
29 civil liability with respect to any individual or any agency.

30 (d) The signing and issuance of a child support debit
31 authorization form under this Section does not relieve the
32 obligor from responsibility for compliance with any
33 requirement under the order for support.

34 (e) A financial institution is obligated to debit the
35 account of an obligor pursuant to this Section only if or to
36 the extent:

1 (1) the financial institution reasonably believes the
2 debit authorization form is a true and authentic original
3 document;

4 (2) there are finally collected funds in the account;
5 and

6 (3) the account is not subject to offsetting claims of
7 the financial institution, whether due at the time of
8 receipt of the debit authorization form or thereafter to
9 become due and whether liquidated or unliquidated.

10 To the extent the account of the obligor is pledged or held
11 by the financial institution as security for a loan or other
12 obligation, or that the financial institution has any other
13 claim or lien against the account, the financial institution is
14 entitled to retain the account.

15 (Source: P.A. 93-736, eff. 7-14-04.)

16 (305 ILCS 5/10-17.9)

17 Sec. 10-17.9. Past due support information to State
18 Department of Revenue.

19 (a) The Illinois Department may provide by rule for
20 certification to the Illinois Department of Revenue of past due
21 support owed by responsible relatives under a support order
22 entered by a court or administrative body of this or any other
23 State on behalf of resident or non-resident persons. The rule
24 shall provide for notice to and an opportunity to be heard by
25 each responsible relative affected. Any final administrative
26 decision rendered by the Department shall be reviewed only
27 under and in accordance with the Administrative Review Law. A
28 responsible relative may avoid certification to the Illinois
29 Department of Revenue by establishing a satisfactory repayment
30 record as determined by the Illinois Department of Healthcare
31 and Family Services ~~Public Aid~~.

32 (b) A certified past due support amount shall be final. The
33 certified amount shall be payable to the Illinois Department of
34 Revenue upon written notification of the certification to the
35 responsible relative by the Illinois Department of Revenue.

1 (c) In the event a responsible relative overpays pursuant
2 to collection under this Section and the applicable Sections of
3 the Illinois Income Tax Act, the overpayment shall be a credit
4 against future support obligations. If the current support
5 obligation of the responsible relative has terminated under
6 operation of law or court order, any moneys overpaid but still
7 in the possession of the Department shall be promptly returned
8 to the responsible relative.

9 (d) Except as otherwise provided in this Article, any child
10 support delinquency certified to the Illinois Department of
11 Revenue shall be treated as a child support delinquency for all
12 other purposes, and any collection action by the State's
13 Attorney or the Illinois Department of Revenue with respect to
14 any delinquency certified under this Article shall have the
15 same priority against attachment, execution, assignment, or
16 other collection action as is provided by any other provision
17 of State law.

18 (e) Any child support delinquency collected by the Illinois
19 Department of Revenue, including those amounts that result in
20 overpayment of a child support delinquency, shall be paid to
21 the State Disbursement Unit established under Section 10-26.

22 (Source: P.A. 91-212, eff. 7-20-99.)

23 (305 ILCS 5/10-24.35)

24 Sec. 10-24.35. Accommodation of financial institutions.
25 The Illinois Department ~~of Public Aid~~ shall make a reasonable
26 effort to accommodate those financial institutions on which the
27 requirements of this Article X would impose a hardship. In the
28 case of a non-automated financial institution, a paper copy
29 including either social security numbers or tax identification
30 numbers is an acceptable format. In order to allow for data
31 processing implementation, no agreement shall become effective
32 earlier than 90 days after its execution.

33 (Source: P.A. 90-18, eff. 7-1-97.)

34 (305 ILCS 5/10-24.40)

1 Sec. 10-24.40. Financial institution's charges on account.

2 (a) If the Illinois Department ~~of Public Aid~~ requests a
3 financial institution to hold or encumber assets in an account
4 as defined in Section 10-24, the financial institution at which
5 the account as defined in Section 10-24 is maintained may
6 charge and collect its normally scheduled account activity fees
7 to maintain the account during the period of time the account
8 assets are held or encumbered.

9 (b) If the Illinois Department ~~of Public Aid~~ takes any
10 action to enforce a lien or levy imposed on an account, as
11 defined in Section 10-24, under Section 10-25.5, the financial
12 institution at which the account is maintained may charge to
13 the account a fee of up to \$50 and shall deduct the amount of
14 the fee from the account before remitting any moneys from the
15 account to the Illinois Department ~~of Public Aid~~.

16 (Source: P.A. 90-18, eff. 7-1-97.)

17 (305 ILCS 5/10-24.50)

18 Sec. 10-24.50. Financial institution's freedom from
19 liability. A financial institution that provides information
20 under Sections 10-24 through 10-24.50 shall not be liable to
21 any account holder, owner, or other person in any civil,
22 criminal, or administrative action for any of the following:

23 (1) Disclosing the required information to the
24 Illinois Department ~~of Public Aid~~, any other provisions of
25 the law notwithstanding.

26 (2) Holding, encumbering, or surrendering any of an
27 individual's accounts as defined in Section 10-24 in
28 response to a lien or order to withhold and deliver issued
29 by:

30 (A) the Illinois Department ~~of Public Aid~~ under
31 Sections 10-25 and 10-25.5; or

32 (B) a person or entity acting on behalf of the
33 Illinois Department ~~of Public Aid~~.

34 (3) Any other action taken or omission made in good
35 faith to comply with Sections 10-24 through 10-24.50,

1 including individual or mechanical errors, provided that
2 the action or omission does not constitute gross negligence
3 or willful misconduct.

4 (Source: P.A. 90-18, eff. 7-1-97.)

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

6 Sec. 11-9. Protection of records - Exceptions. For the
7 protection of applicants and recipients, the Illinois
8 Department, the county departments and local governmental
9 units and their respective officers and employees are
10 prohibited, except as hereinafter provided, from disclosing
11 the contents of any records, files, papers and communications,
12 except for purposes directly connected with the administration
13 of public aid under this Code.

14 In any judicial proceeding, except a proceeding directly
15 concerned with the administration of programs provided for in
16 this Code, such records, files, papers and communications, and
17 their contents shall be deemed privileged communications and
18 shall be disclosed only upon the order of the court, where the
19 court finds such to be necessary in the interest of justice.

20 The Illinois Department shall establish and enforce
21 reasonable rules and regulations governing the custody, use and
22 preservation of the records, papers, files, and communications
23 of the Illinois Department, the county departments and local
24 governmental units receiving State or Federal funds or aid. The
25 governing body of other local governmental units shall in like
26 manner establish and enforce rules and regulations governing
27 the same matters.

28 The contents of case files pertaining to recipients under
29 Articles IV, V, and VI shall be made available without subpoena
30 or formal notice to the officers of any court, to all law
31 enforcing agencies, and to such other persons or agencies as
32 from time to time may be authorized by any court. In
33 particular, the contents of those case files shall be made
34 available upon request to a law enforcement agency for the
35 purpose of determining the current address of a recipient with

1 respect to whom an arrest warrant is outstanding, and the
2 current address of a recipient who was a victim of a felony or
3 a witness to a felony shall be made available upon request to a
4 State's Attorney of this State or a State's Attorney's
5 investigator. Information shall also be disclosed to the
6 Illinois State Scholarship Commission pursuant to an
7 investigation or audit by the Illinois State Scholarship
8 Commission of a delinquent student loan or monetary award.

9 This Section does not prevent the Illinois Department and
10 local governmental units from reporting to appropriate law
11 enforcement officials the desertion or abandonment by a parent
12 of a child, as a result of which financial aid has been
13 necessitated under Articles IV, V, or VI, or reporting to
14 appropriate law enforcement officials instances in which a
15 mother under age 18 has a child out of wedlock and is an
16 applicant for or recipient of aid under any Article of this
17 Code. The Illinois Department may provide by rule for the
18 county departments and local governmental units to initiate
19 proceedings under the Juvenile Court Act of 1987 to have
20 children declared to be neglected when they deem such action
21 necessary to protect the children from immoral influences
22 present in their home or surroundings.

23 This Section does not preclude the full exercise of the
24 powers of the Board of Public Aid Commissioners to inspect
25 records and documents, as provided for all advisory boards
26 pursuant to Section 5-505 of the Departments of State
27 Government Law (20 ILCS 5/5-505).

28 This Section does not preclude exchanges of information
29 among the Department of Healthcare and Family Services
30 (formerly Illinois Department of Public Aid), the Department of
31 Human Services (as successor to the Department of Public Aid),
32 and the Illinois Department of Revenue for the purpose of
33 verifying sources and amounts of income and for other purposes
34 directly connected with the administration of this Code and of
35 the Illinois Income Tax Act.

36 The provisions of this Section and of Section 11-11 as they

1 apply to applicants and recipients of public aid under Article
2 V shall be operative only to the extent that they do not
3 conflict with any Federal law or regulation governing Federal
4 grants to this State for such programs.

5 The ~~Illinois~~ Department of Healthcare and Family Services
6 ~~Public Aid~~ and the Department of Human Services (as successor
7 to the Illinois Department of Public Aid) shall enter into an
8 inter-agency agreement with the Department of Children and
9 Family Services to establish a procedure by which employees of
10 the Department of Children and Family Services may have
11 immediate access to records, files, papers, and communications
12 (except medical, alcohol or drug assessment or treatment,
13 mental health, or any other medical records) of the Illinois
14 Department, county departments, and local governmental units
15 receiving State or federal funds or aid, if the Department of
16 Children and Family Services determines the information is
17 necessary to perform its duties under the Abused and Neglected
18 Child Reporting Act, the Child Care Act of 1969, and the
19 Children and Family Services Act.

20 (Source: P.A. 92-111, eff. 1-1-02; 93-311, eff. 1-1-04.)

21 (305 ILCS 5/11-16) (from Ch. 23, par. 11-16)

22 Sec. 11-16. Changes in grants; cancellations, revocations,
23 suspensions.

24 (a) All grants of financial aid under this Code shall be
25 considered as frequently as may be required by the rules of the
26 Illinois Department. The Department of Healthcare and Family
27 Services ~~Public Aid~~ shall consider grants of financial aid to
28 children who are eligible under Article V of this Code at least
29 annually and shall take into account those reports filed, or
30 required to be filed, pursuant to Sections 11-18 and 11-19.
31 After such investigation as may be necessary, the amount and
32 manner of giving aid may be changed or the aid may be entirely
33 withdrawn if the County Department, local governmental unit, or
34 Illinois Department finds that the recipient's circumstances
35 have altered sufficiently to warrant such action. Financial aid

1 may at any time be canceled or revoked for cause or suspended
2 for such period as may be proper.

3 (b) Whenever any such grant of financial aid is cancelled,
4 revoked, reduced, or terminated because of the failure of the
5 recipient to cooperate with the Department, including but not
6 limited to the failure to keep an appointment, attend a
7 meeting, or produce proof or verification of eligibility or
8 need, the grant shall be reinstated in full, retroactive to the
9 date of the change in or termination of the grant, provided
10 that within 10 working days after the first day the financial
11 aid would have been available, the recipient cooperates with
12 the Department and is not otherwise ineligible for benefits for
13 the period in question. This subsection (b) does not apply to
14 sanctions imposed for the failure of any recipient to
15 participate as required in the child support enforcement
16 program or in any educational, training, or employment program
17 under this Code or any other sanction under Section 4-21, nor
18 does this subsection (b) apply to any cancellation, revocation,
19 reduction, termination, or sanction imposed for the failure of
20 any recipient to cooperate in the monthly reporting process or
21 the quarterly reporting process.

22 (Source: P.A. 91-357, eff. 7-29-99; 92-597, eff. 6-28-02.)

23 (305 ILCS 5/12-1) (from Ch. 23, par. 12-1)

24 Sec. 12-1. Administration of Code; ~~Illinois~~ Department of
25 Healthcare and Family Services ~~Public Aid~~.

26 (a) This Code shall be administered by the Department of
27 Human Services and the Department of Healthcare and Family
28 Services (formerly Illinois Department of Public Aid) as
29 provided in the Department of Human Services Act.

30 (b) The Department of Healthcare and Family Services ~~Public~~
31 ~~Aid~~ shall be under the supervision and direction of the
32 Director of Healthcare and Family Services ~~Public Aid~~, as
33 provided in Section 5-20 of the Departments of State Government
34 Law (20 ILCS 5/5-20). The Director shall be appointed pursuant
35 to the provisions of Section 5-605 and meet the qualifications

1 of Section 5-230 of that Law.

2 The Assistant Director of Healthcare and Family Services
3 ~~Public Aid~~, created by Section 5-165 of the Departments of
4 State Government Law (20 ILCS 5/5-165), shall be appointed
5 pursuant to the provisions of Section 5-605 of that Law and
6 shall meet the qualifications prescribed in Section 5-230 of
7 that Law.

8 The salaries of the Director and the Assistant Director
9 shall be those specified in Section 5-395 of the Departments of
10 State Government Law (20 ILCS 5/5-395).

11 The ~~Illinois~~ Department of Healthcare and Family Services
12 ~~Public Aid~~ and the Director of Healthcare and Family Services
13 ~~Public Aid~~ shall comply with other provisions of the Civil
14 Administrative Code of Illinois which are generally applicable
15 to the several departments of the State Government created by
16 that Code.

17 (Source: P.A. 91-239, eff. 1-1-00.)

18 (305 ILCS 5/12-4.7c)

19 Sec. 12-4.7c. Exchange of information after July 1, 1997.

20 (a) The Department of Human Services shall exchange with
21 the ~~Illinois~~ Department of Healthcare and Family Services
22 ~~Public Aid~~ information that may be necessary for the
23 enforcement of child support orders entered pursuant to
24 Sections 10-10 and 10-11 of this Code or pursuant to the
25 Illinois Marriage and Dissolution of Marriage Act, the
26 Non-Support of Spouse and Children Act, the Non-Support
27 Punishment Act, the Revised Uniform Reciprocal Enforcement of
28 Support Act, the Uniform Interstate Family Support Act, or the
29 Illinois Parentage Act of 1984.

30 (b) Notwithstanding any provisions in this Code to the
31 contrary, the Department of Human Services shall not be liable
32 to any person for any disclosure of information to the
33 Department of Healthcare and Family Services (formerly
34 Illinois Department of Public Aid) under subsection (a) or for
35 any other action taken in good faith to comply with the

1 requirements of subsection (a).

2 (Source: P.A. 90-18, eff. 7-1-97; 91-613, eff. 10-1-99.)

3 (305 ILCS 5/12-4.25) (from Ch. 23, par. 12-4.25)

4 Sec. 12-4.25. Medical assistance program; vendor
5 participation.

6 (A) The Illinois Department may deny, suspend or terminate
7 the eligibility of any person, firm, corporation, association,
8 agency, institution or other legal entity to participate as a
9 vendor of goods or services to recipients under the medical
10 assistance program under Article V, if after reasonable notice
11 and opportunity for a hearing the Illinois Department finds:

12 (a) Such vendor is not complying with the Department's
13 policy or rules and regulations, or with the terms and
14 conditions prescribed by the Illinois Department in its
15 vendor agreement, which document shall be developed by the
16 Department as a result of negotiations with each vendor
17 category, including physicians, hospitals, long term care
18 facilities, pharmacists, optometrists, podiatrists and
19 dentists setting forth the terms and conditions applicable
20 to the participation of each vendor group in the program;
21 or

22 (b) Such vendor has failed to keep or make available
23 for inspection, audit or copying, after receiving a written
24 request from the Illinois Department, such records
25 regarding payments claimed for providing services. This
26 section does not require vendors to make available patient
27 records of patients for whom services are not reimbursed
28 under this Code; or

29 (c) Such vendor has failed to furnish any information
30 requested by the Department regarding payments for
31 providing goods or services; or

32 (d) Such vendor has knowingly made, or caused to be
33 made, any false statement or representation of a material
34 fact in connection with the administration of the medical
35 assistance program; or

1 (e) Such vendor has furnished goods or services to a
2 recipient which are (1) in excess of his or her needs, (2)
3 harmful to the recipient, or (3) of grossly inferior
4 quality, all of such determinations to be based upon
5 competent medical judgment and evaluations; or

6 (f) The vendor; a person with management
7 responsibility for a vendor; an officer or person owning,
8 either directly or indirectly, 5% or more of the shares of
9 stock or other evidences of ownership in a corporate
10 vendor; an owner of a sole proprietorship which is a
11 vendor; or a partner in a partnership which is a vendor,
12 either:

13 (1) was previously terminated from participation
14 in the Illinois medical assistance program, or was
15 terminated from participation in a medical assistance
16 program in another state that is of the same kind as
17 the program of medical assistance provided under
18 Article V of this Code; or

19 (2) was a person with management responsibility
20 for a vendor previously terminated from participation
21 in the Illinois medical assistance program, or
22 terminated from participation in a medical assistance
23 program in another state that is of the same kind as
24 the program of medical assistance provided under
25 Article V of this Code, during the time of conduct
26 which was the basis for that vendor's termination; or

27 (3) was an officer, or person owning, either
28 directly or indirectly, 5% or more of the shares of
29 stock or other evidences of ownership in a corporate
30 vendor previously terminated from participation in the
31 Illinois medical assistance program, or terminated
32 from participation in a medical assistance program in
33 another state that is of the same kind as the program
34 of medical assistance provided under Article V of this
35 Code, during the time of conduct which was the basis
36 for that vendor's termination; or

1 (4) was an owner of a sole proprietorship or
2 partner of a partnership previously terminated from
3 participation in the Illinois medical assistance
4 program, or terminated from participation in a medical
5 assistance program in another state that is of the same
6 kind as the program of medical assistance provided
7 under Article V of this Code, during the time of
8 conduct which was the basis for that vendor's
9 termination; or

10 (g) The vendor; a person with management
11 responsibility for a vendor; an officer or person owning,
12 either directly or indirectly, 5% or more of the shares of
13 stock or other evidences of ownership in a corporate
14 vendor; an owner of a sole proprietorship which is a
15 vendor; or a partner in a partnership which is a vendor,
16 either:

17 (1) has engaged in practices prohibited by
18 applicable federal or State law or regulation relating
19 to the medical assistance program; or

20 (2) was a person with management responsibility
21 for a vendor at the time that such vendor engaged in
22 practices prohibited by applicable federal or State
23 law or regulation relating to the medical assistance
24 program; or

25 (3) was an officer, or person owning, either
26 directly or indirectly, 5% or more of the shares of
27 stock or other evidences of ownership in a vendor at
28 the time such vendor engaged in practices prohibited by
29 applicable federal or State law or regulation relating
30 to the medical assistance program; or

31 (4) was an owner of a sole proprietorship or
32 partner of a partnership which was a vendor at the time
33 such vendor engaged in practices prohibited by
34 applicable federal or State law or regulation relating
35 to the medical assistance program; or

36 (h) The direct or indirect ownership of the vendor

1 (including the ownership of a vendor that is a sole
2 proprietorship, a partner's interest in a vendor that is a
3 partnership, or ownership of 5% or more of the shares of
4 stock or other evidences of ownership in a corporate
5 vendor) has been transferred by an individual who is
6 terminated or barred from participating as a vendor to the
7 individual's spouse, child, brother, sister, parent,
8 grandparent, grandchild, uncle, aunt, niece, nephew,
9 cousin, or relative by marriage.

10 (A-5) The Illinois Department may deny, suspend, or
11 terminate the eligibility of any person, firm, corporation,
12 association, agency, institution, or other legal entity to
13 participate as a vendor of goods or services to recipients
14 under the medical assistance program under Article V if, after
15 reasonable notice and opportunity for a hearing, the Illinois
16 Department finds that the vendor; a person with management
17 responsibility for a vendor; an officer or person owning,
18 either directly or indirectly, 5% or more of the shares of
19 stock or other evidences of ownership in a corporate vendor; an
20 owner of a sole proprietorship that is a vendor; or a partner
21 in a partnership that is a vendor has been convicted of a
22 felony offense based on fraud or willful misrepresentation
23 related to any of the following:

24 (1) The medical assistance program under Article V of
25 this Code.

26 (2) A medical assistance program in another state that
27 is of the same kind as the program of medical assistance
28 provided under Article V of this Code.

29 (3) The Medicare program under Title XVIII of the
30 Social Security Act.

31 (4) The provision of health care services.

32 (B) The Illinois Department shall deny, suspend or
33 terminate the eligibility of any person, firm, corporation,
34 association, agency, institution or other legal entity to
35 participate as a vendor of goods or services to recipients
36 under the medical assistance program under Article V:

1 (1) if such vendor is not properly licensed;

2 (2) within 30 days of the date when such vendor's
3 professional license, certification or other authorization
4 has been refused renewal or has been revoked, suspended or
5 otherwise terminated; or

6 (3) if such vendor has been convicted of a violation of
7 this Code, as provided in Article VIII A.

8 (C) Upon termination of a vendor of goods or services from
9 participation in the medical assistance program authorized by
10 this Article, a person with management responsibility for such
11 vendor during the time of any conduct which served as the basis
12 for that vendor's termination is barred from participation in
13 the medical assistance program.

14 Upon termination of a corporate vendor, the officers and
15 persons owning, directly or indirectly, 5% or more of the
16 shares of stock or other evidences of ownership in the vendor
17 during the time of any conduct which served as the basis for
18 that vendor's termination are barred from participation in the
19 medical assistance program. A person who owns, directly or
20 indirectly, 5% or more of the shares of stock or other
21 evidences of ownership in a terminated corporate vendor may not
22 transfer his or her ownership interest in that vendor to his or
23 her spouse, child, brother, sister, parent, grandparent,
24 grandchild, uncle, aunt, niece, nephew, cousin, or relative by
25 marriage.

26 Upon termination of a sole proprietorship or partnership,
27 the owner or partners during the time of any conduct which
28 served as the basis for that vendor's termination are barred
29 from participation in the medical assistance program. The owner
30 of a terminated vendor that is a sole proprietorship, and a
31 partner in a terminated vendor that is a partnership, may not
32 transfer his or her ownership or partnership interest in that
33 vendor to his or her spouse, child, brother, sister, parent,
34 grandparent, grandchild, uncle, aunt, niece, nephew, cousin,
35 or relative by marriage.

36 Rules adopted by the Illinois Department to implement these

1 provisions shall specifically include a definition of the term
2 "management responsibility" as used in this Section. Such
3 definition shall include, but not be limited to, typical job
4 titles, and duties and descriptions which will be considered as
5 within the definition of individuals with management
6 responsibility for a provider.

7 (D) If a vendor has been suspended from the medical
8 assistance program under Article V of the Code, the Director
9 may require that such vendor correct any deficiencies which
10 served as the basis for the suspension. The Director shall
11 specify in the suspension order a specific period of time,
12 which shall not exceed one year from the date of the order,
13 during which a suspended vendor shall not be eligible to
14 participate. At the conclusion of the period of suspension the
15 Director shall reinstate such vendor, unless he finds that such
16 vendor has not corrected deficiencies upon which the suspension
17 was based.

18 If a vendor has been terminated from the medical assistance
19 program under Article V, such vendor shall be barred from
20 participation for at least one year, except that if a vendor
21 has been terminated based on a conviction of a violation of
22 Article VIII A or a conviction of a felony based on fraud or a
23 willful misrepresentation related to (i) the medical
24 assistance program under Article V, (ii) a medical assistance
25 program in another state that is of the kind provided under
26 Article V, (iii) the Medicare program under Title XVIII of the
27 Social Security Act, or (iv) the provision of health care
28 services, then the vendor shall be barred from participation
29 for 5 years or for the length of the vendor's sentence for that
30 conviction, whichever is longer. At the end of one year a
31 vendor who has been terminated may apply for reinstatement to
32 the program. Upon proper application to be reinstated such
33 vendor may be deemed eligible by the Director providing that
34 such vendor meets the requirements for eligibility under this
35 Code. If such vendor is deemed not eligible for reinstatement,
36 he shall be barred from again applying for reinstatement for

1 one year from the date his application for reinstatement is
2 denied.

3 A vendor whose termination from participation in the
4 Illinois medical assistance program under Article V was based
5 solely on an action by a governmental entity other than the
6 Illinois Department may, upon reinstatement by that
7 governmental entity or upon reversal of the termination, apply
8 for rescission of the termination from participation in the
9 Illinois medical assistance program. Upon proper application
10 for rescission, the vendor may be deemed eligible by the
11 Director if the vendor meets the requirements for eligibility
12 under this Code.

13 If a vendor has been terminated and reinstated to the
14 medical assistance program under Article V and the vendor is
15 terminated a second or subsequent time from the medical
16 assistance program, the vendor shall be barred from
17 participation for at least 2 years, except that if a vendor has
18 been terminated a second time based on a conviction of a
19 violation of Article VIIIA or a conviction of a felony based on
20 fraud or a willful misrepresentation related to (i) the medical
21 assistance program under Article V, (ii) a medical assistance
22 program in another state that is of the kind provided under
23 Article V, (iii) the Medicare program under Title XVIII of the
24 Social Security Act, or (iv) the provision of health care
25 services, then the vendor shall be barred from participation
26 for life. At the end of 2 years, a vendor who has been
27 terminated may apply for reinstatement to the program. Upon
28 application to be reinstated, the vendor may be deemed eligible
29 if the vendor meets the requirements for eligibility under this
30 Code. If the vendor is deemed not eligible for reinstatement,
31 the vendor shall be barred from again applying for
32 reinstatement for 2 years from the date the vendor's
33 application for reinstatement is denied.

34 (E) The Illinois Department may recover money improperly or
35 erroneously paid, or overpayments, either by setoff, crediting
36 against future billings or by requiring direct repayment to the

1 Illinois Department.

2 If the Illinois Department ~~of Public Aid~~ establishes
3 through an administrative hearing that the overpayments
4 resulted from the vendor or alternate payee willfully making,
5 or causing to be made, a false statement or misrepresentation
6 of a material fact in connection with billings and payments
7 under the medical assistance program under Article V, the
8 Department may recover interest on the amount of the
9 overpayments at the rate of 5% per annum. For purposes of this
10 paragraph, "willfully" means that a person makes a statement or
11 representation with actual knowledge that it was false, or
12 makes a statement or representation with knowledge of facts or
13 information that would cause one to be aware that the statement
14 or representation was false when made.

15 (F) The Illinois Department may withhold payments to any
16 vendor or alternate payee during the pendency of any proceeding
17 under this Section. The Illinois Department shall state by rule
18 with as much specificity as practicable the conditions under
19 which payments will not be withheld during the pendency of any
20 proceeding under this Section. Payments may be denied for bills
21 submitted with service dates occurring during the pendency of a
22 proceeding where the final administrative decision is to
23 terminate eligibility to participate in the medical assistance
24 program. The Illinois Department shall state by rule with as
25 much specificity as practicable the conditions under which
26 payments will not be denied for such bills. The Illinois
27 Department ~~of Public Aid~~ shall state by rule a process and
28 criteria by which a vendor or alternate payee may request full
29 or partial release of payments withheld under this subsection.
30 The Department must complete a proceeding under this Section in
31 a timely manner.

32 (F-5) The Illinois Department may temporarily withhold
33 payments to a vendor or alternate payee if any of the following
34 individuals have been indicted or otherwise charged under a law
35 of the United States or this or any other state with a felony
36 offense that is based on alleged fraud or willful

1 misrepresentation on the part of the individual related to (i)
2 the medical assistance program under Article V of this Code,
3 (ii) a medical assistance program provided in another state
4 which is of the kind provided under Article V of this Code,
5 (iii) the Medicare program under Title XVIII of the Social
6 Security Act, or (iv) the provision of health care services:

7 (1) If the vendor or alternate payee is a corporation:
8 an officer of the corporation or an individual who owns,
9 either directly or indirectly, 5% or more of the shares of
10 stock or other evidence of ownership of the corporation.

11 (2) If the vendor is a sole proprietorship: the owner
12 of the sole proprietorship.

13 (3) If the vendor or alternate payee is a partnership:
14 a partner in the partnership.

15 (4) If the vendor or alternate payee is any other
16 business entity authorized by law to transact business in
17 this State: an officer of the entity or an individual who
18 owns, either directly or indirectly, 5% or more of the
19 evidences of ownership of the entity.

20 If the Illinois Department withholds payments to a vendor
21 or alternate payee under this subsection, the Department shall
22 not release those payments to the vendor or alternate payee
23 while any criminal proceeding related to the indictment or
24 charge is pending unless the Department determines that there
25 is good cause to release the payments before completion of the
26 proceeding. If the indictment or charge results in the
27 individual's conviction, the Illinois Department shall retain
28 all withheld payments, which shall be considered forfeited to
29 the Department. If the indictment or charge does not result in
30 the individual's conviction, the Illinois Department shall
31 release to the vendor or alternate payee all withheld payments.

32 (G) The provisions of the Administrative Review Law, as now
33 or hereafter amended, and the rules adopted pursuant thereto,
34 shall apply to and govern all proceedings for the judicial
35 review of final administrative decisions of the Illinois
36 Department under this Section. The term "administrative

1 decision" is defined as in Section 3-101 of the Code of Civil
2 Procedure.

3 (G-5) Non-emergency transportation.

4 (1) Notwithstanding any other provision in this
5 Section, for non-emergency transportation vendors, the
6 Department may terminate the vendor from participation in
7 the medical assistance program prior to an evidentiary
8 hearing but after reasonable notice and opportunity to
9 respond as established by the Department by rule.

10 (2) Vendors of non-emergency medical transportation
11 services, as defined by the Department by rule, shall
12 submit to a fingerprint-based criminal background check on
13 current and future information available in the State
14 system and current information available through the
15 Federal Bureau of Investigation's system by submitting all
16 necessary fees and information in the form and manner
17 prescribed by the Department of State Police. The following
18 individuals shall be subject to the check:

19 (A) In the case of a vendor that is a corporation,
20 every shareholder who owns, directly or indirectly, 5%
21 or more of the outstanding shares of the corporation.

22 (B) In the case of a vendor that is a partnership,
23 every partner.

24 (C) In the case of a vendor that is a sole
25 proprietorship, the sole proprietor.

26 (D) Each officer or manager of the vendor.

27 Each such vendor shall be responsible for payment of
28 the cost of the criminal background check.

29 (3) Vendors of non-emergency medical transportation
30 services may be required to post a surety bond. The
31 Department shall establish, by rule, the criteria and
32 requirements for determining when a surety bond must be
33 posted and the value of the bond.

34 (4) The Department, or its agents, may refuse to accept
35 requests for non-emergency transportation authorizations,
36 including prior-approval and post-approval requests, for a

1 specific non-emergency transportation vendor if:

2 (A) the Department has initiated a notice of
3 termination of the vendor from participation in the
4 medical assistance program; or

5 (B) the Department has issued notification of its
6 withholding of payments pursuant to subsection (F-5)
7 of this Section; or

8 (C) the Department has issued a notification of its
9 withholding of payments due to reliable evidence of
10 fraud or willful misrepresentation pending
11 investigation.

12 (H) Nothing contained in this Code shall in any way limit
13 or otherwise impair the authority or power of any State agency
14 responsible for licensing of vendors.

15 (I) Based on a finding of noncompliance on the part of a
16 nursing home with any requirement for certification under Title
17 XVIII or XIX of the Social Security Act (42 U.S.C. Sec. 1395 et
18 seq. or 42 U.S.C. Sec. 1396 et seq.), the Illinois Department
19 may impose one or more of the following remedies after notice
20 to the facility:

21 (1) Termination of the provider agreement.

22 (2) Temporary management.

23 (3) Denial of payment for new admissions.

24 (4) Civil money penalties.

25 (5) Closure of the facility in emergency situations or
26 transfer of residents, or both.

27 (6) State monitoring.

28 (7) Denial of all payments when the Health Care Finance
29 Administration has imposed this sanction.

30 The Illinois Department shall by rule establish criteria
31 governing continued payments to a nursing facility subsequent
32 to termination of the facility's provider agreement if, in the
33 sole discretion of the Illinois Department, circumstances
34 affecting the health, safety, and welfare of the facility's
35 residents require those continued payments. The Illinois
36 Department may condition those continued payments on the

1 appointment of temporary management, sale of the facility to
2 new owners or operators, or other arrangements that the
3 Illinois Department determines best serve the needs of the
4 facility's residents.

5 Except in the case of a facility that has a right to a
6 hearing on the finding of noncompliance before an agency of the
7 federal government, a facility may request a hearing before a
8 State agency on any finding of noncompliance within 60 days
9 after the notice of the intent to impose a remedy. Except in
10 the case of civil money penalties, a request for a hearing
11 shall not delay imposition of the penalty. The choice of
12 remedies is not appealable at a hearing. The level of
13 noncompliance may be challenged only in the case of a civil
14 money penalty. The Illinois Department shall provide by rule
15 for the State agency that will conduct the evidentiary
16 hearings.

17 The Illinois Department may collect interest on unpaid
18 civil money penalties.

19 The Illinois Department may adopt all rules necessary to
20 implement this subsection (I).

21 (J) The Illinois Department, by rule, may permit individual
22 practitioners to designate that Department payments that may be
23 due the practitioner be made to an alternate payee or alternate
24 payees.

25 (a) Such alternate payee or alternate payees shall be
26 required to register as an alternate payee in the Medical
27 Assistance Program with the Illinois Department.

28 (b) If a practitioner designates an alternate payee,
29 the alternate payee and practitioner shall be jointly and
30 severally liable to the Department for payments made to the
31 alternate payee. Pursuant to subsection (E) of this
32 Section, any Department action to recover money or
33 overpayments from an alternate payee shall be subject to an
34 administrative hearing.

35 (c) Registration as an alternate payee or alternate
36 payees in the Illinois Medical Assistance Program shall be

1 conditional. At any time, the Illinois Department may deny
2 or cancel any alternate payee's registration in the
3 Illinois Medical Assistance Program without cause. Any
4 such denial or cancellation is not subject to an
5 administrative hearing.

6 (d) The Illinois Department may seek a revocation of
7 any alternate payee, and all owners, officers, and
8 individuals with management responsibility for such
9 alternate payee shall be permanently prohibited from
10 participating as an owner, an officer, or an individual
11 with management responsibility with an alternate payee in
12 the Illinois Medical Assistance Program, if after
13 reasonable notice and opportunity for a hearing the
14 Illinois Department finds that:

15 (1) the alternate payee is not complying with the
16 Department's policy or rules and regulations, or with
17 the terms and conditions prescribed by the Illinois
18 Department in its alternate payee registration
19 agreement; or

20 (2) the alternate payee has failed to keep or make
21 available for inspection, audit, or copying, after
22 receiving a written request from the Illinois
23 Department, such records regarding payments claimed as
24 an alternate payee; or

25 (3) the alternate payee has failed to furnish any
26 information requested by the Illinois Department
27 regarding payments claimed as an alternate payee; or

28 (4) the alternate payee has knowingly made, or
29 caused to be made, any false statement or
30 representation of a material fact in connection with
31 the administration of the Illinois Medical Assistance
32 Program; or

33 (5) the alternate payee, a person with management
34 responsibility for an alternate payee, an officer or
35 person owning, either directly or indirectly, 5% or
36 more of the shares of stock or other evidences of

1 ownership in a corporate alternate payee, or a partner
2 in a partnership which is an alternate payee:

3 (a) was previously terminated from
4 participation as a vendor in the Illinois Medical
5 Assistance Program, or was previously revoked as
6 an alternate payee in the Illinois Medical
7 Assistance Program, or was terminated from
8 participation as a vendor in a medical assistance
9 program in another state that is of the same kind
10 as the program of medical assistance provided
11 under Article V of this Code; or

12 (b) was a person with management
13 responsibility for a vendor previously terminated
14 from participation as a vendor in the Illinois
15 Medical Assistance Program, or was previously
16 revoked as an alternate payee in the Illinois
17 Medical Assistance Program, or was terminated from
18 participation as a vendor in a medical assistance
19 program in another state that is of the same kind
20 as the program of medical assistance provided
21 under Article V of this Code, during the time of
22 conduct which was the basis for that vendor's
23 termination or alternate payee's revocation; or

24 (c) was an officer, or person owning, either
25 directly or indirectly, 5% or more of the shares of
26 stock or other evidences of ownership in a
27 corporate vendor previously terminated from
28 participation as a vendor in the Illinois Medical
29 Assistance Program, or was previously revoked as
30 an alternate payee in the Illinois Medical
31 Assistance Program, or was terminated from
32 participation as a vendor in a medical assistance
33 program in another state that is of the same kind
34 as the program of medical assistance provided
35 under Article V of this Code, during the time of
36 conduct which was the basis for that vendor's

1 termination; or

2 (d) was an owner of a sole proprietorship or
3 partner in a partnership previously terminated
4 from participation as a vendor in the Illinois
5 Medical Assistance Program, or was previously
6 revoked as an alternate payee in the Illinois
7 Medical Assistance Program, or was terminated from
8 participation as a vendor in a medical assistance
9 program in another state that is of the same kind
10 as the program of medical assistance provided
11 under Article V of this Code, during the time of
12 conduct which was the basis for that vendor's
13 termination or alternate payee's revocation; or

14 (6) the alternate payee, a person with management
15 responsibility for an alternate payee, an officer or
16 person owning, either directly or indirectly, 5% or
17 more of the shares of stock or other evidences of
18 ownership in a corporate alternate payee, or a partner
19 in a partnership which is an alternate payee:

20 (a) has engaged in conduct prohibited by
21 applicable federal or State law or regulation
22 relating to the Illinois Medical Assistance
23 Program; or

24 (b) was a person with management
25 responsibility for a vendor or alternate payee at
26 the time that the vendor or alternate payee engaged
27 in practices prohibited by applicable federal or
28 State law or regulation relating to the Illinois
29 Medical Assistance Program; or

30 (c) was an officer, or person owning, either
31 directly or indirectly, 5% or more of the shares of
32 stock or other evidences of ownership in a vendor
33 or alternate payee at the time such vendor or
34 alternate payee engaged in practices prohibited by
35 applicable federal or State law or regulation
36 relating to the Illinois Medical Assistance

1 Program; or

2 (d) was an owner of a sole proprietorship or
3 partner in a partnership which was a vendor or
4 alternate payee at the time such vendor or
5 alternate payee engaged in practices prohibited by
6 applicable federal or State law or regulation
7 relating to the Illinois Medical Assistance
8 Program; or

9 (7) the direct or indirect ownership of the vendor
10 or alternate payee (including the ownership of a vendor
11 or alternate payee that is a partner's interest in a
12 vendor or alternate payee, or ownership of 5% or more
13 of the shares of stock or other evidences of ownership
14 in a corporate vendor or alternate payee) has been
15 transferred by an individual who is terminated or
16 barred from participating as a vendor or is prohibited
17 or revoked as an alternate payee to the individual's
18 spouse, child, brother, sister, parent, grandparent,
19 grandchild, uncle, aunt, niece, nephew, cousin, or
20 relative by marriage.

21 (Source: P.A. 94-265, eff. 1-1-06.)

22 (305 ILCS 5/12-4.35)

23 Sec. 12-4.35. Medical services for certain noncitizens.

24 (a) Notwithstanding Section 1-11 of this Code or Section
25 20(a) of the Children's Health Insurance Program Act, the
26 Department of Healthcare and Family Services ~~Public Aid~~ may
27 provide medical services to noncitizens who have not yet
28 attained 19 years of age and who are not eligible for medical
29 assistance under Article V of this Code or under the Children's
30 Health Insurance Program created by the Children's Health
31 Insurance Program Act due to their not meeting the otherwise
32 applicable provisions of Section 1-11 of this Code or Section
33 20(a) of the Children's Health Insurance Program Act. The
34 medical services available, standards for eligibility, and
35 other conditions of participation under this Section shall be

1 established by rule by the Department; however, any such rule
2 shall be at least as restrictive as the rules for medical
3 assistance under Article V of this Code or the Children's
4 Health Insurance Program created by the Children's Health
5 Insurance Program Act.

6 (b) The Department is authorized to take any action,
7 including without limitation cessation of enrollment,
8 reduction of available medical services, and changing
9 standards for eligibility, that is deemed necessary by the
10 Department during a State fiscal year to assure that payments
11 under this Section do not exceed available funds.

12 (c) Continued enrollment of individuals into the program
13 created under this Section in any fiscal year is contingent
14 upon continued enrollment of individuals into the Children's
15 Health Insurance Program during that fiscal year.

16 (d) (Blank).

17 (Source: P.A. 94-48, eff. 7-1-05.)

18 (305 ILCS 5/12-4.201)

19 Sec. 12-4.201. (a) Data warehouse concerning medical and
20 related services. The ~~Illinois~~ Department of Healthcare and
21 Family Services ~~Public Aid~~ may purchase services and materials
22 associated with the costs of developing and implementing a data
23 warehouse comprised of management and decision making
24 information in regard to the liability associated with, and
25 utilization of, medical and related services, out of moneys
26 available for that purpose.

27 (b) The Department of Healthcare and Family Services ~~Public~~
28 ~~Aid~~ shall perform all necessary administrative functions to
29 expand its linearly-scalable data warehouse to encompass other
30 healthcare data sources at both the Department of Human
31 Services and the Department of Public Health. The Department of
32 Healthcare and Family Services ~~Public Aid~~ shall leverage the
33 inherent capabilities of the data warehouse to accomplish this
34 expansion with marginal additional technical administration.
35 The purpose of this expansion is to allow for programmatic

1 review and analysis including the interrelatedness among the
2 various healthcare programs in order to ascertain
3 effectiveness toward, and ultimate impact on, clients.
4 Beginning July 1, 2005, the Department of Healthcare and Family
5 Services (formerly Department of Public Aid) shall supply
6 quarterly reports to the Commission on Government Forecasting
7 and Accountability detailing progress toward this mandate.

8 (Source: P.A. 94-267, eff. 7-19-05.)

9 (305 ILCS 5/12-9) (from Ch. 23, par. 12-9)

10 Sec. 12-9. Public Aid Recoveries Trust Fund; uses. The
11 Public Aid Recoveries Trust Fund shall consist of (1)
12 recoveries by the Department of Healthcare and Family Services
13 (formerly Illinois Department of Public Aid) authorized by this
14 Code in respect to applicants or recipients under Articles III,
15 IV, V, and VI, including recoveries made by the Department of
16 Healthcare and Family Services (formerly Illinois Department
17 of Public Aid) from the estates of deceased recipients, (2)
18 recoveries made by the Department of Healthcare and Family
19 Services (formerly Illinois Department of Public Aid) in
20 respect to applicants and recipients under the Children's
21 Health Insurance Program, and (3) federal funds received on
22 behalf of and earned by State universities and local
23 governmental entities for services provided to applicants or
24 recipients covered under this Code. The Fund shall be held as a
25 special fund in the State Treasury.

26 Disbursements from this Fund shall be only (1) for the
27 reimbursement of claims collected by the Department of
28 Healthcare and Family Services (formerly Illinois Department
29 of Public Aid) through error or mistake, (2) for payment to
30 persons or agencies designated as payees or co-payees on any
31 instrument, whether or not negotiable, delivered to the
32 Department of Healthcare and Family Services (formerly
33 Illinois Department of Public Aid) as a recovery under this
34 Section, such payment to be in proportion to the respective
35 interests of the payees in the amount so collected, (3) for

1 payments to the Department of Human Services for collections
2 made by the Department of Healthcare and Family Services
3 (formerly Illinois Department of Public Aid) on behalf of the
4 Department of Human Services under this Code, (4) for payment
5 of administrative expenses incurred in performing the
6 activities authorized under this Code, (5) for payment of fees
7 to persons or agencies in the performance of activities
8 pursuant to the collection of monies owed the State that are
9 collected under this Code, (6) for payments of any amounts
10 which are reimbursable to the federal government which are
11 required to be paid by State warrant by either the State or
12 federal government, and (7) for payments to State universities
13 and local governmental entities of federal funds for services
14 provided to applicants or recipients covered under this Code.
15 Disbursements from this Fund for purposes of items (4) and (5)
16 of this paragraph shall be subject to appropriations from the
17 Fund to the Department of Healthcare and Family Services
18 (formerly Illinois Department of Public Aid).

19 The balance in this Fund on the first day of each calendar
20 quarter, after payment therefrom of any amounts reimbursable to
21 the federal government, and minus the amount reasonably
22 anticipated to be needed to make the disbursements during that
23 quarter authorized by this Section, shall be certified by the
24 Director of Healthcare and Family Services ~~the Illinois~~
25 ~~Department of Public Aid~~ and transferred by the State
26 Comptroller to the Drug Rebate Fund or the General Revenue Fund
27 in the State Treasury, as appropriate, within 30 days of the
28 first day of each calendar quarter.

29 On July 1, 1999, the State Comptroller shall transfer the
30 sum of \$5,000,000 from the Public Aid Recoveries Trust Fund
31 (formerly the Public Assistance Recoveries Trust Fund) into the
32 DHS Recoveries Trust Fund.

33 (Source: P.A. 92-10, eff. 6-11-01; 92-16, eff. 6-28-01; 93-20,
34 eff. 6-20-03.)

1 Sec. 12-10.2a. Child Support Administrative Fund.

2 (a) Beginning July 1, 2002, the Child Support
3 Administrative Fund is created as a special fund in the State
4 treasury. Moneys in the Fund may be used, subject to
5 appropriation, only for the Department of Healthcare and Family
6 Services' (formerly Department of Public Aid's) child support
7 administrative expenses, as defined in this Section.

8 (a-5) Moneys in the Child Support Administrative Fund shall
9 consist of the following:

10 (1) all federal grants received by the Illinois
11 Department funded by Title IV-D of the Social Security Act,
12 except those federal funds received under the Title IV-D
13 program as reimbursement for expenditures from the General
14 Revenue Fund;

15 (2) incentive payments received by the Illinois
16 Department from other states or political subdivisions of
17 other states for the enforcement and collection by the
18 Department of an assigned child support obligation in
19 behalf of those other states or their political
20 subdivisions pursuant to the provisions of Title IV-D of
21 the Social Security Act;

22 (3) incentive payments retained by the Illinois
23 Department from the amounts that otherwise would be paid to
24 the federal government to reimburse the federal
25 government's share of the support collection for the
26 Department's enforcement and collection of an assigned
27 support obligation on behalf of the State of Illinois
28 pursuant to the provisions of Title IV-D of the Social
29 Security Act;

30 (4) all fees charged by the Department for child
31 support enforcement services, as authorized under Title
32 IV-D of the Social Security Act and Section 10-1 of this
33 Code, and any other fees, costs, fines, recoveries, or
34 penalties provided for by State or federal law and received
35 by the Department under the Child Support Enforcement
36 Program established by Title IV-D of the Social Security

1 Act;

2 (5) all amounts appropriated by the General Assembly
3 for deposit into the Child Support Administrative Fund; and

4 (6) any gifts, grants, donations, or awards from
5 individuals, private businesses, nonprofit associations,
6 and governmental entities.

7 (a-10) The moneys identified in subsection (a-5) of this
8 Section shall include moneys receipted on or after July 1,
9 2002, regardless of the fiscal year in which the moneys were
10 earned.

11 (b) As used in this Section, "child support administrative
12 expenses" means administrative expenses, including payment to
13 the Health Insurance Reserve Fund for group insurance costs at
14 the rate certified by the Department of Central Management
15 Services, except those required to be paid from the General
16 Revenue Fund, including personal and contractual services,
17 incurred by the Department of Healthcare and Family Services
18 (formerly Department of Public Aid), either directly or under
19 its contracts with SDU contractors as defined in Section
20 10-26.2, in performing activities authorized by Article X of
21 this Code, and including appropriations to other State agencies
22 or offices. The term includes expenses incurred by the
23 Department of Healthcare and Family Services (formerly
24 Department of Public Aid) in administering the Child Support
25 Enforcement Trust Fund and the State Disbursement Unit
26 Revolving Fund.

27 (c) Child support administrative expenses incurred in
28 fiscal year 2003 or thereafter shall be paid only from moneys
29 appropriated from the Child Support Administrative Fund.

30 (d) Before April 1, 2003 and before April 1 of each year
31 thereafter, the Department of Healthcare and Family Services
32 (formerly Department of Public Aid) shall provide notification
33 to the General Assembly of the amount of the Department's child
34 support administrative expenses expected to be incurred during
35 the fiscal year beginning on the next July 1, including the
36 estimated amount required for the operation of the State

1 Disbursement Unit, which shall be separately identified in the
2 annual administrative appropriation.

3 (e) For the fiscal year beginning July 1, 2002 and for each
4 fiscal year thereafter, the State Comptroller and the State
5 Treasurer shall transfer from the Child Support Enforcement
6 Trust Fund to the Child Support Administrative Fund amounts as
7 determined by the Department necessary to enable the Department
8 to meet its child support administrative expenses for the
9 then-current fiscal year. For any fiscal year, the State
10 Comptroller and the State Treasurer may not transfer more than
11 the total amount appropriated for the Department's child
12 support administrative expenses for that fiscal year.

13 (f) By December 1, 2001, the Illinois Department shall
14 provide a corrective action plan to the General Assembly
15 regarding the establishment of accurate accounts in the Child
16 Support Enforcement Trust Fund. The plan shall include those
17 tasks that may be required to establish accurate accounts, the
18 estimated time for completion of each of those tasks and the
19 plan, and the estimated cost for completion of each of the
20 tasks and the plan.

21 (Source: P.A. 92-44, eff. 7-1-01; 92-570, eff. 6-26-02.)

22 (305 ILCS 5/12-10.4)

23 Sec. 12-10.4. Juvenile Rehabilitation Services Medicaid
24 Matching Fund. There is created in the State Treasury the
25 Juvenile Rehabilitation Services Medicaid Matching Fund.
26 Deposits to this Fund shall consist of all moneys received from
27 the federal government for behavioral health services secured
28 by counties under the Medicaid Rehabilitation Option pursuant
29 to Title XIX of the Social Security Act or under the Children's
30 Health Insurance Program pursuant to the Children's Health
31 Insurance Program Act and Title XXI of the Social Security Act
32 for minors who are committed to mental health facilities by the
33 Illinois court system and for residential placements secured by
34 the Department of Corrections for minors as a condition of
35 their parole.

1 Disbursements from the Fund shall be made, subject to
2 appropriation, by the ~~Illinois~~ Department of Healthcare and
3 Family Services ~~Public Aid~~ for grants to the Department of
4 Corrections and those counties which secure behavioral health
5 services ordered by the courts and which have an interagency
6 agreement with the Department and submit detailed bills
7 according to standards determined by the Department.

8 (Source: P.A. 90-587, eff. 7-1-98; 91-266, eff. 7-23-99;
9 91-712, eff. 7-1-00.)

10 (305 ILCS 5/12-10.5)

11 Sec. 12-10.5. Medical Special Purposes Trust Fund.

12 (a) The Medical Special Purposes Trust Fund ("the Fund") is
13 created. Any grant, gift, donation, or legacy of money or
14 securities that the Department of Healthcare and Family
15 Services ~~Public Aid~~ is authorized to receive under Section
16 12-4.18 or Section 12-4.19, and that is dedicated for functions
17 connected with the administration of any medical program
18 administered by the Department, shall be deposited into the
19 Fund. All federal moneys received by the Department as
20 reimbursement for disbursements authorized to be made from the
21 Fund shall also be deposited into the Fund. In addition,
22 federal moneys received on account of State expenditures made
23 in connection with obtaining compliance with the federal Health
24 Insurance Portability and Accountability Act (HIPAA) shall be
25 deposited into the Fund.

26 (b) No moneys received from a service provider or a
27 governmental or private entity that is enrolled with the
28 Department as a provider of medical services shall be deposited
29 into the Fund.

30 (c) Disbursements may be made from the Fund for the
31 purposes connected with the grants, gifts, donations, or
32 legacies deposited into the Fund, including, but not limited
33 to, medical quality assessment projects, eligibility
34 population studies, medical information systems evaluations,
35 and other administrative functions that assist the Department

1 in fulfilling its health care mission under the Illinois Public
2 Aid Code and the Children's Health Insurance Program Act.

3 (Source: P.A. 92-37, eff. 7-1-01; 92-597, eff. 6-28-02; 92-651,
4 eff. 7-11-02.)

5 (305 ILCS 5/12-13.1)

6 Sec. 12-13.1. Inspector General.

7 (a) The Governor shall appoint, and the Senate shall
8 confirm, an Inspector General who shall function within the
9 Illinois Department of Public Aid (now Healthcare and Family
10 Services) and report to the Governor. The term of the Inspector
11 General shall expire on the third Monday of January, 1997 and
12 every 4 years thereafter.

13 (b) In order to prevent, detect, and eliminate fraud,
14 waste, abuse, mismanagement, and misconduct, the Inspector
15 General shall oversee the ~~Illinois~~ Department of Healthcare and
16 Family Services' ~~Public Aid's~~ integrity functions, which
17 include, but are not limited to, the following:

18 (1) Investigation of misconduct by employees, vendors,
19 contractors and medical providers.

20 (2) Audits of medical providers related to ensuring
21 that appropriate payments are made for services rendered
22 and to the recovery of overpayments.

23 (3) Monitoring of quality assurance programs generally
24 related to the medical assistance program and specifically
25 related to any managed care program.

26 (4) Quality control measurements of the programs
27 administered by the ~~Illinois~~ Department of Healthcare and
28 Family Services ~~Public Aid~~.

29 (5) Investigations of fraud or intentional program
30 violations committed by clients of the ~~Illinois~~ Department
31 of Healthcare and Family Services ~~Public Aid~~.

32 (6) Actions initiated against contractors or medical
33 providers for any of the following reasons:

34 (A) Violations of the medical assistance program.

35 (B) Sanctions against providers brought in

1 conjunction with the Department of Public Health or the
2 Department of Human Services (as successor to the
3 Department of Mental Health and Developmental
4 Disabilities).

5 (C) Recoveries of assessments against hospitals
6 and long-term care facilities.

7 (D) Sanctions mandated by the United States
8 Department of Health and Human Services against
9 medical providers.

10 (E) Violations of contracts related to any managed
11 care programs.

12 (7) Representation of the ~~Illinois~~ Department of
13 Healthcare and Family Services ~~Public Aid~~ at hearings with
14 the Illinois Department of Professional Regulation in
15 actions taken against professional licenses held by
16 persons who are in violation of orders for child support
17 payments.

18 (b-5) At the request of the Secretary of Human Services,
19 the Inspector General shall, in relation to any function
20 performed by the Department of Human Services as successor to
21 the Department of Public Aid, exercise one or more of the
22 powers provided under this Section as if those powers related
23 to the Department of Human Services; in such matters, the
24 Inspector General shall report his or her findings to the
25 Secretary of Human Services.

26 (c) The Inspector General shall have access to all
27 information, personnel and facilities of the ~~Illinois~~
28 Department of Healthcare and Family Services ~~Public Aid~~ and the
29 Department of Human Services (as successor to the Department of
30 Public Aid), their employees, vendors, contractors and medical
31 providers and any federal, State or local governmental agency
32 that are necessary to perform the duties of the Office as
33 directly related to public assistance programs administered by
34 those departments. No medical provider shall be compelled,
35 however, to provide individual medical records of patients who
36 are not clients of the Medical Assistance Program. State and

1 local governmental agencies are authorized and directed to
2 provide the requested information, assistance or cooperation.

3 (d) The Inspector General shall serve as the ~~Illinois~~
4 Department of Healthcare and Family Services' ~~Public Aid's~~
5 primary liaison with law enforcement, investigatory and
6 prosecutorial agencies, including but not limited to the
7 following:

8 (1) The Department of State Police.

9 (2) The Federal Bureau of Investigation and other
10 federal law enforcement agencies.

11 (3) The various Inspectors General of federal agencies
12 overseeing the programs administered by the ~~Illinois~~
13 Department of Healthcare and Family Services ~~Public Aid~~.

14 (4) The various Inspectors General of any other State
15 agencies with responsibilities for portions of programs
16 primarily administered by the ~~Illinois~~ Department of
17 Healthcare and Family Services ~~Public Aid~~.

18 (5) The Offices of the several United States Attorneys
19 in Illinois.

20 (6) The several State's Attorneys.

21 The Inspector General shall meet on a regular basis with
22 these entities to share information regarding possible
23 misconduct by any persons or entities involved with the public
24 aid programs administered by the ~~Illinois~~ Department of
25 Healthcare and Family Services ~~Public Aid~~.

26 (e) All investigations conducted by the Inspector General
27 shall be conducted in a manner that ensures the preservation of
28 evidence for use in criminal prosecutions. If the Inspector
29 General determines that a possible criminal act relating to
30 fraud in the provision or administration of the medical
31 assistance program has been committed, the Inspector General
32 shall immediately notify the Medicaid Fraud Control Unit. If
33 the Inspector General determines that a possible criminal act
34 has been committed within the jurisdiction of the Office, the
35 Inspector General may request the special expertise of the
36 Department of State Police. The Inspector General may present

1 for prosecution the findings of any criminal investigation to
2 the Office of the Attorney General, the Offices of the several
3 United States ~~State~~ Attorneys in Illinois or the several
4 State's Attorneys.

5 (f) To carry out his or her duties as described in this
6 Section, the Inspector General and his or her designees shall
7 have the power to compel by subpoena the attendance and
8 testimony of witnesses and the production of books, electronic
9 records and papers as directly related to public assistance
10 programs administered by the ~~Illinois~~ Department of Healthcare
11 and Family Services ~~Public Aid~~ or the Department of Human
12 Services (as successor to the Department of Public Aid). No
13 medical provider shall be compelled, however, to provide
14 individual medical records of patients who are not clients of
15 the Medical Assistance Program.

16 (g) The Inspector General shall report all convictions,
17 terminations, and suspensions taken against vendors,
18 contractors and medical providers to the ~~Illinois~~ Department of
19 Healthcare and Family Services ~~Public Aid~~ and to any agency
20 responsible for licensing or regulating those persons or
21 entities.

22 (h) The Inspector General shall make annual reports,
23 findings, and recommendations regarding the Office's
24 investigations into reports of fraud, waste, abuse,
25 mismanagement, or misconduct relating to any public aid
26 programs administered by the ~~Illinois~~ Department of Healthcare
27 and Family Services ~~Public Aid~~ or the Department of Human
28 Services (as successor to the Department of Public Aid) to the
29 General Assembly and the Governor. These reports shall include,
30 but not be limited to, the following information:

31 (1) Aggregate provider billing and payment
32 information, including the number of providers at various
33 Medicaid earning levels.

34 (2) The number of audits of the medical assistance
35 program and the dollar savings resulting from those audits.

36 (3) The number of prescriptions rejected annually

1 under the ~~Illinois~~ Department of Healthcare and Family
2 Services' ~~Public Aid's~~ Refill Too Soon program and the
3 dollar savings resulting from that program.

4 (4) Provider sanctions, in the aggregate, including
5 terminations and suspensions.

6 (5) A detailed summary of the investigations
7 undertaken in the previous fiscal year. These summaries
8 shall comply with all laws and rules regarding maintaining
9 confidentiality in the public aid programs.

10 (i) Nothing in this Section shall limit investigations by
11 the ~~Illinois~~ Department of Healthcare and Family Services
12 ~~Public Aid~~ or the Department of Human Services that may
13 otherwise be required by law or that may be necessary in their
14 capacity as the central administrative authorities responsible
15 for administration of public aid programs in this State.

16 (Source: P.A. 89-507, eff. 7-1-97; 90-725, eff. 8-7-98; revised
17 10-11-05.)

18 (305 ILCS 5/12-16) (from Ch. 23, par. 12-16)

19 Sec. 12-16. Public Aid Claims Enforcement Division of
20 Office of Attorney General. The Public Aid Claims Enforcement
21 Division in the Office of the Attorney General, established
22 pursuant to the 1949 Code, shall institute in behalf of the
23 State all court actions referred to it by the Department of
24 Healthcare and Family Services (formerly Illinois Department
25 of Public Aid) or the Department of Human Services (as
26 successor to the Illinois Department of Public Aid) under this
27 Code and other laws for the recovery of financial aid provided
28 under the public aid programs, the enforcement of obligations
29 of support, and the enforcement of other claims, penalties and
30 obligations.

31 The Division shall be staffed with attorneys appointed by
32 the Attorney General as Special Assistant Attorneys' General
33 whose special duty it shall be to execute the aforesaid duties.
34 The Assistant Attorneys' General shall be assigned exclusively
35 to such duties. They may engage only in such political

1 activities as are not prohibited by the Hatch Political
2 Activity Act, Title 5, U.S.C.A., Sections 118i et seq.

3 The Attorney General may request the appropriate State's
4 Attorney of a county or staff of the Child and Spouse Support
5 Unit established under Section 10-3.1 of this Code to institute
6 any such action in behalf of the State or to assist the
7 Attorney General in the prosecution of actions instituted by
8 his Office.

9 (Source: P.A. 89-507, eff. 7-1-97.)

10 Section 9400. The Medicaid Revenue Act is amended by
11 changing Section 1-2 as follows:

12 (305 ILCS 35/1-2) (from Ch. 23, par. 7051-2)

13 Sec. 1-2. Legislative finding and declaration. The General
14 Assembly hereby finds, determines, and declares:

15 (1) It is in the public interest and it is the public
16 policy of this State to provide for and improve the basic
17 medical care and long-term health care services of its
18 indigent, most vulnerable citizens.

19 (2) Preservation of health, alleviation of sickness, and
20 correction of handicapping conditions for persons requiring
21 maintenance support are essential if those persons are to have
22 an opportunity to become self-supporting or to attain a greater
23 capacity for self-care.

24 (3) For persons who are medically indigent but otherwise
25 able to provide themselves a livelihood, it is of special
26 importance to maintain their incentives for continued
27 independence and preserve their limited resources for ordinary
28 maintenance needed to prevent their total or substantial
29 dependence on public support.

30 (4) The State has historically provided for care and
31 services, in conjunction with the federal government, through
32 the establishment and funding of a medical assistance program
33 administered by the Department of Healthcare and Family
34 Services (formerly Department of Public Aid) and approved by

1 the Secretary of Health and Human Services under Title XIX of
2 the federal Social Security Act, that program being commonly
3 referred to as "Medicaid".

4 (5) The Medicaid program is a funding partnership between
5 the State of Illinois and the federal government, with the
6 Department of Healthcare and Family Services ~~Public Aid~~ being
7 designated as the single State agency responsible for the
8 administration of the program, but with the State historically
9 receiving 50% of the amounts expended as medical assistance
10 under the Medicaid program from the federal government.

11 (6) To raise a portion of Illinois' share of the Medicaid
12 funds after July 1, 1991, the General Assembly enacted Public
13 Act 87-13 to provide for the collection of provider
14 participation fees from designated health care providers
15 receiving Medicaid payments.

16 (7) On September 12, 1991, the Secretary of Health and
17 Human Services proposed regulations that could have reduced the
18 federal matching of Medicaid expenditures incurred on or after
19 January 1, 1992 by the portion of the expenditures paid from
20 funds raised through the provider participation fees.

21 (8) To prevent the Secretary from enacting those
22 regulations but at the same time to impose certain statutory
23 limitations on the means by which states may raise Medicaid
24 funds eligible for federal matching, Congress enacted the
25 Medicaid Voluntary Contribution and Provider-Specific Tax
26 Amendments of 1991, Public Law 102-234.

27 (9) Public Law 102-234 provides for a state's share of
28 Medicaid funding eligible for federal matching to be raised
29 through "broad-based health care related taxes", meaning,
30 generally, a tax imposed with respect to a class of health care
31 items or services (or providers thereof) specified therein,
32 which (i) is imposed on all items or services or providers in
33 the class in the state, except federal or public providers, and
34 (ii) is imposed uniformly on all providers in the class at the
35 same rate with respect to the same base.

36 (10) The separate classes of health care items and services

1 established by P.L. 102-234 include inpatient and outpatient
2 hospital services, nursing facility services, and services of
3 intermediate care facilities for the mentally retarded.

4 (11) The provider participation fees imposed under P.A.
5 87-13 may not meet the standards under P.L. 102-234.

6 (12) The resulting hospital Medicaid reimbursement
7 reductions may force the closure of some hospitals now serving
8 a disproportionately high number of the needy, who would then
9 have to be cared for by remaining hospitals at substantial cost
10 to those remaining hospitals.

11 (13) The hospitals in the State are all part of and benefit
12 from a hospital system linked together in a number of ways,
13 including common licensing and regulation, health care
14 standards, education, research and disease control reporting,
15 patient transfers for specialist care, and organ donor
16 networks.

17 (14) Each hospital's patient population demographics,
18 including the proportion of patients whose care is paid by
19 Medicaid, is subject to change over time.

20 (15) Hospitals in the State have a special interest in the
21 payment of adequate reimbursement levels for hospital care by
22 Medicaid.

23 (16) Most hospitals are exempt from payment of most
24 federal, State, and local income, sales, property, and other
25 taxes.

26 (17) The hospital assessment enacted by this Act under the
27 guidelines of P.L. 102-234 is the most efficient means of
28 raising the federally matchable funds needed for hospital care
29 reimbursement.

30 (18) Cook County Hospital and Oak Forest Hospital are
31 public hospitals owned and operated by Cook County with unique
32 fiscal problems, including a patient population that is
33 primarily Medicaid or altogether nonpaying, that make an
34 intergovernmental transfer payment arrangement a more
35 appropriate means of financing than the regular hospital
36 assessment and reimbursement provisions.

1 (19) Sole community hospitals provide access to essential
2 care that would otherwise not be reasonably available in the
3 community they serve, such that imposition of assessments on
4 them in their precarious financial circumstances may force
5 their closure and have the effect of reducing access to health
6 care.

7 (20) Each nursing home's resident population demographics,
8 including the proportion of residents whose care is paid by
9 Medicaid, is subject to change over time in that, among other
10 things, residents currently able to pay the cost of nursing
11 home care may become dependent on Medicaid support for
12 continued care and services as resources are depleted.

13 (21) As the citizens of the State age, increased pressures
14 will be placed on limited facilities to provide reasonable
15 levels of care for a greater number of geriatric residents, and
16 all involved in the nursing home industry, providers and
17 residents, have a special interest in the maintenance of
18 adequate Medicaid support for all nursing facilities.

19 (22) The assessments on nursing homes enacted by this Act
20 under the guidelines of P.L. 102-234 are the most efficient
21 means of raising the federally matchable funds needed for
22 nursing home care reimbursement.

23 (23) All intermediate care facilities for persons with
24 developmental disabilities receive a high degree of Medicaid
25 support and benefits and therefore have a special interest in
26 the maintenance of adequate Medicaid support.

27 (24) The assessments on intermediate care facilities for
28 persons with developmental disabilities enacted by this Act
29 under the guidelines of P.L. 102-234 are the most efficient
30 means of raising the federally matchable funds needed for
31 reimbursement of providers of intermediate care for persons
32 with developmental disabilities.

33 (Source: P.A. 87-861; 88-380.)

34 Section 9405. The Nursing Home Grant Assistance Act is
35 amended by changing Section 20 as follows:

1 (305 ILCS 40/20) (from Ch. 23, par. 7100-20)

2 Sec. 20. Nursing Home Grant Assistance Program.

3 (a) (Blank).

4 (b) The Department, subject to appropriation, may use up to
5 2.5% of the moneys received under this Act for the costs of
6 administering and enforcing the program.

7 (c) Within 30 days after the end of the quarterly period in
8 which the distribution agent is required to file the
9 certification and make the payment required by this Act, and
10 after verification with the ~~Illinois~~ Department of Healthcare
11 and Family Services ~~Public Aid~~ of the licensing status of the
12 distribution agent, the Director shall order the payment to be
13 made from appropriations made for the purposes of this Act.

14 (d) Disbursements shall be by warrants drawn by the State
15 Comptroller upon receipt of vouchers duly executed and
16 certified by the Department. The Department shall prepare and
17 certify to the State Comptroller the disbursement of the grants
18 to qualified distributing agents for payment to the eligible
19 individuals certified to the Department by the qualified
20 distributing agents.

21 The amount to be paid per calendar quarter to a qualified
22 distribution agent shall not exceed, for each eligible
23 individual, \$500 multiplied by a fraction equal to the number
24 of days that the eligible individual's nursing home care was
25 not paid for, in whole or in part, by a federal, State, or
26 combined federal-State medical care program, divided by the
27 number of calendar days in the quarter. Any amount the
28 qualified distribution agent owes to the Department under
29 Section 30 shall be deducted from the amount of the payment to
30 the qualified distribution agent.

31 If the amount appropriated or available is insufficient to
32 meet all or part of any quarterly payment certification, the
33 payment certified to each qualified distributing agent shall be
34 uniformly reduced by an amount which will permit a payment to
35 be made to each qualified distributing agent. Within 10 days

1 after receipt by the State Comptroller of the disbursement
2 certification to the qualified distributing agents, the State
3 Comptroller shall cause the warrants to be drawn for the
4 respective amounts in accordance with the directions contained
5 in that certification.

6 (e) Notwithstanding any other provision of this Act, as
7 soon as is practicable after the effective date of this
8 amendatory Act of 1994, the Department shall order that
9 payments be made, subject to appropriation, to the appropriate
10 distribution agents for grants to persons who were eligible
11 individuals during the fourth quarter of fiscal year 1993 to
12 the extent that those individuals did not receive a grant for
13 that quarter or the fourth quarter of fiscal year 1992. An
14 eligible individual, or a person acting on behalf of an
15 eligible individual, must apply on or before December 31, 1994
16 for a grant under this subsection (e). The amount to be paid to
17 each distribution agent under this subsection shall be
18 calculated as provided in subsection (d). Distribution agents
19 shall distribute the grants to eligible individuals as required
20 in Section 30. For the purpose of determining grants under this
21 subsection (e), a nursing home that is a distribution agent
22 under this Act shall file with the Department, on or before
23 September 30, 1994, a certification disclosing the information
24 required under Section 15 with respect to the fourth quarter of
25 fiscal year 1993.

26 (Source: P.A. 94-91, eff. 7-1-05.)

27 Section 9410. The Elder Abuse and Neglect Act is amended by
28 changing Section 2 as follows:

29 (320 ILCS 20/2) (from Ch. 23, par. 6602)

30 Sec. 2. Definitions. As used in this Act, unless the
31 context requires otherwise:

32 (a) "Abuse" means causing any physical, mental or sexual
33 injury to an eligible adult, including exploitation of such
34 adult's financial resources.

1 Nothing in this Act shall be construed to mean that an
2 eligible adult is a victim of abuse or neglect for the sole
3 reason that he or she is being furnished with or relies upon
4 treatment by spiritual means through prayer alone, in
5 accordance with the tenets and practices of a recognized church
6 or religious denomination.

7 Nothing in this Act shall be construed to mean that an
8 eligible adult is a victim of abuse because of health care
9 services provided or not provided by licensed health care
10 professionals.

11 (a-5) "Abuser" means a person who abuses, neglects, or
12 financially exploits an eligible adult.

13 (a-7) "Caregiver" means a person who either as a result of
14 a family relationship, voluntarily, or in exchange for
15 compensation has assumed responsibility for all or a portion of
16 the care of an eligible adult who needs assistance with
17 activities of daily living.

18 (b) "Department" means the Department on Aging of the State
19 of Illinois.

20 (c) "Director" means the Director of the Department.

21 (d) "Domestic living situation" means a residence where the
22 eligible adult lives alone or with his or her family or a
23 caregiver, or others, or a board and care home or other
24 community-based unlicensed facility, but is not:

25 (1) A licensed facility as defined in Section 1-113 of
26 the Nursing Home Care Act;

27 (2) A "life care facility" as defined in the Life Care
28 Facilities Act;

29 (3) A home, institution, or other place operated by the
30 federal government or agency thereof or by the State of
31 Illinois;

32 (4) A hospital, sanitarium, or other institution, the
33 principal activity or business of which is the diagnosis,
34 care, and treatment of human illness through the
35 maintenance and operation of organized facilities
36 therefor, which is required to be licensed under the

1 Hospital Licensing Act;

2 (5) A "community living facility" as defined in the
3 Community Living Facilities Licensing Act;

4 (6) A "community residential alternative" as defined
5 in the Community Residential Alternatives Licensing Act;
6 and

7 (7) A "community-integrated living arrangement" as
8 defined in the Community-Integrated Living Arrangements
9 Licensure and Certification Act.

10 (e) "Eligible adult" means a person 60 years of age or
11 older who resides in a domestic living situation and is, or is
12 alleged to be, abused, neglected, or financially exploited by
13 another individual.

14 (f) "Emergency" means a situation in which an eligible
15 adult is living in conditions presenting a risk of death or
16 physical, mental or sexual injury and the provider agency has
17 reason to believe the eligible adult is unable to consent to
18 services which would alleviate that risk.

19 (f-5) "Mandated reporter" means any of the following
20 persons while engaged in carrying out their professional
21 duties:

22 (1) a professional or professional's delegate while
23 engaged in: (i) social services, (ii) law enforcement,
24 (iii) education, (iv) the care of an eligible adult or
25 eligible adults, or (v) any of the occupations required to
26 be licensed under the Clinical Psychologist Licensing Act,
27 the Clinical Social Work and Social Work Practice Act, the
28 Illinois Dental Practice Act, the Dietetic and Nutrition
29 Services Practice Act, the Marriage and Family Therapy
30 Licensing Act, the Medical Practice Act of 1987, the
31 Naprapathic Practice Act, the Nursing and Advanced
32 Practice Nursing Act, the Nursing Home Administrators
33 Licensing and Disciplinary Act, the Illinois Occupational
34 Therapy Practice Act, the Illinois Optometric Practice Act
35 of 1987, the Pharmacy Practice Act of 1987, the Illinois
36 Physical Therapy Act, the Physician Assistant Practice Act

1 of 1987, the Podiatric Medical Practice Act of 1987, the
2 Respiratory Care Practice Act, the Professional Counselor
3 and Clinical Professional Counselor Licensing Act, the
4 Illinois Speech-Language Pathology and Audiology Practice
5 Act, the Veterinary Medicine and Surgery Practice Act of
6 2004, and the Illinois Public Accounting Act;

7 (2) an employee of a vocational rehabilitation
8 facility prescribed or supervised by the Department of
9 Human Services;

10 (3) an administrator, employee, or person providing
11 services in or through an unlicensed community based
12 facility;

13 (4) a Christian Science Practitioner;

14 (5) field personnel of the Department of Healthcare and
15 Family Services ~~Public Aid~~, Department of Public Health,
16 and Department of Human Services, and any county or
17 municipal health department;

18 (6) personnel of the Department of Human Services, the
19 Guardianship and Advocacy Commission, the State Fire
20 Marshal, local fire departments, the Department on Aging
21 and its subsidiary Area Agencies on Aging and provider
22 agencies, and the Office of State Long Term Care Ombudsman;

23 (7) any employee of the State of Illinois not otherwise
24 specified herein who is involved in providing services to
25 eligible adults, including professionals providing medical
26 or rehabilitation services and all other persons having
27 direct contact with eligible adults;

28 (8) a person who performs the duties of a coroner or
29 medical examiner; or

30 (9) a person who performs the duties of a paramedic or
31 an emergency medical technician.

32 (g) "Neglect" means another individual's failure to
33 provide an eligible adult with or willful withholding from an
34 eligible adult the necessities of life including, but not
35 limited to, food, clothing, shelter or medical care. This
36 subsection does not create any new affirmative duty to provide

1 support to eligible adults. Nothing in this Act shall be
2 construed to mean that an eligible adult is a victim of neglect
3 because of health care services provided or not provided by
4 licensed health care professionals.

5 (h) "Provider agency" means any public or nonprofit agency
6 in a planning and service area appointed by the regional
7 administrative agency with prior approval by the Department on
8 Aging to receive and assess reports of alleged or suspected
9 abuse, neglect, or financial exploitation.

10 (i) "Regional administrative agency" means any public or
11 nonprofit agency in a planning and service area so designated
12 by the Department, provided that the designated Area Agency on
13 Aging shall be designated the regional administrative agency if
14 it so requests. The Department shall assume the functions of
15 the regional administrative agency for any planning and service
16 area where another agency is not so designated.

17 (j) "Substantiated case" means a reported case of alleged
18 or suspected abuse, neglect, or financial exploitation in which
19 a provider agency, after assessment, determines that there is
20 reason to believe abuse, neglect, or financial exploitation has
21 occurred.

22 (Source: P.A. 92-16, eff. 6-28-01; 93-281 eff. 12-31-03;
23 93-300, eff. 1-1-04; revised 9-22-03.)

24 Section 9415. The Senior Citizens and Disabled Persons
25 Property Tax Relief and Pharmaceutical Assistance Act is
26 amended by changing Section 4 as follows:

27 (320 ILCS 25/4) (from Ch. 67 1/2, par. 404)

28 Sec. 4. Amount of Grant.

29 (a) In general. Any individual 65 years or older or any
30 individual who will become 65 years old during the calendar
31 year in which a claim is filed, and any surviving spouse of
32 such a claimant, who at the time of death received or was
33 entitled to receive a grant pursuant to this Section, which
34 surviving spouse will become 65 years of age within the 24

1 months immediately following the death of such claimant and
2 which surviving spouse but for his or her age is otherwise
3 qualified to receive a grant pursuant to this Section, and any
4 disabled person whose annual household income is less than
5 \$14,000 for grant years before the 1998 grant year, less than
6 \$16,000 for the 1998 and 1999 grant years, and less than (i)
7 \$21,218 for a household containing one person, (ii) \$28,480 for
8 a household containing 2 persons, or (iii) \$35,740 for a
9 household containing 3 or more persons for the 2000 grant year
10 and thereafter and whose household is liable for payment of
11 property taxes accrued or has paid rent constituting property
12 taxes accrued and is domiciled in this State at the time he or
13 she files his or her claim is entitled to claim a grant under
14 this Act. With respect to claims filed by individuals who will
15 become 65 years old during the calendar year in which a claim
16 is filed, the amount of any grant to which that household is
17 entitled shall be an amount equal to 1/12 of the amount to
18 which the claimant would otherwise be entitled as provided in
19 this Section, multiplied by the number of months in which the
20 claimant was 65 in the calendar year in which the claim is
21 filed.

22 (b) Limitation. Except as otherwise provided in
23 subsections (a) and (f) of this Section, the maximum amount of
24 grant which a claimant is entitled to claim is the amount by
25 which the property taxes accrued which were paid or payable
26 during the last preceding tax year or rent constituting
27 property taxes accrued upon the claimant's residence for the
28 last preceding taxable year exceeds 3 1/2% of the claimant's
29 household income for that year but in no event is the grant to
30 exceed (i) \$700 less 4.5% of household income for that year for
31 those with a household income of \$14,000 or less or (ii) \$70 if
32 household income for that year is more than \$14,000.

33 (c) Public aid recipients. If household income in one or
34 more months during a year includes cash assistance in excess of
35 \$55 per month from the Department of Healthcare and Family
36 Services ~~Public Aid~~ or the Department of Human Services (acting

1 as successor to the Department of Public Aid under the
2 Department of Human Services Act) which was determined under
3 regulations of that Department on a measure of need that
4 included an allowance for actual rent or property taxes paid by
5 the recipient of that assistance, the amount of grant to which
6 that household is entitled, except as otherwise provided in
7 subsection (a), shall be the product of (1) the maximum amount
8 computed as specified in subsection (b) of this Section and (2)
9 the ratio of the number of months in which household income did
10 not include such cash assistance over \$55 to the number twelve.
11 If household income did not include such cash assistance over
12 \$55 for any months during the year, the amount of the grant to
13 which the household is entitled shall be the maximum amount
14 computed as specified in subsection (b) of this Section. For
15 purposes of this paragraph (c), "cash assistance" does not
16 include any amount received under the federal Supplemental
17 Security Income (SSI) program.

18 (d) Joint ownership. If title to the residence is held
19 jointly by the claimant with a person who is not a member of
20 his or her household, the amount of property taxes accrued used
21 in computing the amount of grant to which he or she is entitled
22 shall be the same percentage of property taxes accrued as is
23 the percentage of ownership held by the claimant in the
24 residence.

25 (e) More than one residence. If a claimant has occupied
26 more than one residence in the taxable year, he or she may
27 claim only one residence for any part of a month. In the case
28 of property taxes accrued, he or she shall prorate 1/12 of the
29 total property taxes accrued on his or her residence to each
30 month that he or she owned and occupied that residence; and, in
31 the case of rent constituting property taxes accrued, shall
32 prorate each month's rent payments to the residence actually
33 occupied during that month.

34 (f) There is hereby established a program of pharmaceutical
35 assistance to the aged and disabled which shall be administered
36 by the Department in accordance with this Act, to consist of

1 payments to authorized pharmacies, on behalf of beneficiaries
2 of the program, for the reasonable costs of covered
3 prescription drugs. Each beneficiary who pays \$5 for an
4 identification card shall pay no additional prescription
5 costs. Each beneficiary who pays \$25 for an identification card
6 shall pay \$3 per prescription. In addition, after a beneficiary
7 receives \$2,000 in benefits during a State fiscal year, that
8 beneficiary shall also be charged 20% of the cost of each
9 prescription for which payments are made by the program during
10 the remainder of the fiscal year. To become a beneficiary under
11 this program a person must: (1) be (i) 65 years of age or
12 older, or (ii) the surviving spouse of such a claimant, who at
13 the time of death received or was entitled to receive benefits
14 pursuant to this subsection, which surviving spouse will become
15 65 years of age within the 24 months immediately following the
16 death of such claimant and which surviving spouse but for his
17 or her age is otherwise qualified to receive benefits pursuant
18 to this subsection, or (iii) disabled, and (2) be domiciled in
19 this State at the time he or she files his or her claim, and (3)
20 have a maximum household income of less than \$14,000 for grant
21 years before the 1998 grant year, less than \$16,000 for the
22 1998 and 1999 grant years, and less than (i) \$21,218 for a
23 household containing one person, (ii) \$28,480 for a household
24 containing 2 persons, or (iii) \$35,740 for a household
25 containing 3 more persons for the 2000 grant year and
26 thereafter. In addition, each eligible person must (1) obtain
27 an identification card from the Department, (2) at the time the
28 card is obtained, sign a statement assigning to the State of
29 Illinois benefits which may be otherwise claimed under any
30 private insurance plans, and (3) present the identification
31 card to the dispensing pharmacist.

32 The Department may adopt rules specifying participation
33 requirements for the pharmaceutical assistance program,
34 including copayment amounts, identification card fees,
35 expenditure limits, and the benefit threshold after which a 20%
36 charge is imposed on the cost of each prescription, to be in

1 effect on and after July 1, 2004. Notwithstanding any other
2 provision of this paragraph, however, the Department may not
3 increase the identification card fee above the amount in effect
4 on May 1, 2003 without the express consent of the General
5 Assembly. To the extent practicable, those requirements shall
6 be commensurate with the requirements provided in rules adopted
7 by the Department of Healthcare and Family Services ~~Public Aid~~
8 to implement the pharmacy assistance program under Section
9 5-5.12a of the Illinois Public Aid Code.

10 Whenever a generic equivalent for a covered prescription
11 drug is available, the Department shall reimburse only for the
12 reasonable costs of the generic equivalent, less the co-pay
13 established in this Section, unless (i) the covered
14 prescription drug contains one or more ingredients defined as a
15 narrow therapeutic index drug at 21 CFR 320.33, (ii) the
16 prescriber indicates on the face of the prescription "brand
17 medically necessary", and (iii) the prescriber specifies that a
18 substitution is not permitted. When issuing an oral
19 prescription for covered prescription medication described in
20 item (i) of this paragraph, the prescriber shall stipulate
21 "brand medically necessary" and that a substitution is not
22 permitted. If the covered prescription drug and its authorizing
23 prescription do not meet the criteria listed above, the
24 beneficiary may purchase the non-generic equivalent of the
25 covered prescription drug by paying the difference between the
26 generic cost and the non-generic cost plus the beneficiary
27 co-pay.

28 Any person otherwise eligible for pharmaceutical
29 assistance under this Act whose covered drugs are covered by
30 any public program for assistance in purchasing any covered
31 prescription drugs shall be ineligible for assistance under
32 this Act to the extent such costs are covered by such other
33 plan.

34 The fee to be charged by the Department for the
35 identification card shall be equal to \$5 per coverage year for
36 persons below the official poverty line as defined by the

1 United States Department of Health and Human Services and \$25
2 per coverage year for all other persons.

3 In the event that 2 or more persons are eligible for any
4 benefit under this Act, and are members of the same household,
5 (1) each such person shall be entitled to participate in the
6 pharmaceutical assistance program, provided that he or she
7 meets all other requirements imposed by this subsection and (2)
8 each participating household member contributes the fee
9 required for that person by the preceding paragraph for the
10 purpose of obtaining an identification card.

11 The provisions of this subsection (f), other than this
12 paragraph, are inoperative after December 31, 2005.
13 Beneficiaries who received benefits under the program
14 established by this subsection (f) are not entitled, at the
15 termination of the program, to any refund of the identification
16 card fee paid under this subsection.

17 (g) Effective January 1, 2006, there is hereby established
18 a program of pharmaceutical assistance to the aged and
19 disabled, entitled the Illinois Seniors and Disabled Drug
20 Coverage Program, which shall be administered by the Department
21 of Healthcare and Family Services and the Department on Aging
22 in accordance with this subsection, to consist of coverage of
23 specified prescription drugs on behalf of beneficiaries of the
24 program as set forth in this subsection. The program under this
25 subsection replaces and supersedes the program established
26 under subsection (f), which shall end at midnight on December
27 31, 2005.

28 To become a beneficiary under the program established under
29 this subsection, a person must:

30 (1) be (i) 65 years of age or older or (ii) disabled;

31 and

32 (2) be domiciled in this State; and

33 (3) enroll with a qualified Medicare Part D
34 Prescription Drug Plan if eligible and apply for all
35 available subsidies under Medicare Part D; and

36 (4) have a maximum household income of (i) less than

1 \$21,218 for a household containing one person, (ii) less
2 than \$28,480 for a household containing 2 persons, or (iii)
3 less than \$35,740 for a household containing 3 or more
4 persons. If any income eligibility limit set forth in items
5 (i) through (iii) is less than 200% of the Federal Poverty
6 Level for any year, the income eligibility limit for that
7 year for households of that size shall be income equal to
8 or less than 200% of the Federal Poverty Level.

9 All individuals enrolled as of December 31, 2005, in the
10 pharmaceutical assistance program operated pursuant to
11 subsection (f) of this Section and all individuals enrolled as
12 of December 31, 2005, in the SeniorCare Medicaid waiver program
13 operated pursuant to Section 5-5.12a of the Illinois Public Aid
14 Code shall be automatically enrolled in the program established
15 by this subsection for the first year of operation without the
16 need for further application, except that they must apply for
17 Medicare Part D and the Low Income Subsidy under Medicare Part
18 D. A person enrolled in the pharmaceutical assistance program
19 operated pursuant to subsection (f) of this Section as of
20 December 31, 2005, shall not lose eligibility in future years
21 due only to the fact that they have not reached the age of 65.

22 To the extent permitted by federal law, the Department may
23 act as an authorized representative of a beneficiary in order
24 to enroll the beneficiary in a Medicare Part D Prescription
25 Drug Plan if the beneficiary has failed to choose a plan and,
26 where possible, to enroll beneficiaries in the low-income
27 subsidy program under Medicare Part D or assist them in
28 enrolling in that program.

29 Beneficiaries under the program established under this
30 subsection shall be divided into the following 4 eligibility
31 groups:

32 (A) Eligibility Group 1 shall consist of beneficiaries
33 who are not eligible for Medicare Part D coverage and who
34 are:

35 (i) disabled and under age 65; or

36 (ii) age 65 or older, with incomes over 200% of the

1 Federal Poverty Level; or

2 (iii) age 65 or older, with incomes at or below
3 200% of the Federal Poverty Level and not eligible for
4 federally funded means-tested benefits due to
5 immigration status.

6 (B) Eligibility Group 2 shall consist of beneficiaries
7 otherwise described in Eligibility Group 1 but who are
8 eligible for Medicare Part D coverage.

9 (C) Eligibility Group 3 shall consist of beneficiaries
10 age 65 or older, with incomes at or below 200% of the
11 Federal Poverty Level, who are not barred from receiving
12 federally funded means-tested benefits due to immigration
13 status and are eligible for Medicare Part D coverage.

14 (D) Eligibility Group 4 shall consist of beneficiaries
15 age 65 or older, with incomes at or below 200% of the
16 Federal Poverty Level, who are not barred from receiving
17 federally funded means-tested benefits due to immigration
18 status and are not eligible for Medicare Part D coverage.

19 If the State applies and receives federal approval for a
20 waiver under Title XIX of the Social Security Act, persons in
21 Eligibility Group 4 shall continue to receive benefits through
22 the approved waiver, and Eligibility Group 4 may be expanded to
23 include disabled persons under age 65 with incomes under 200%
24 of the Federal Poverty Level who are not eligible for Medicare
25 and who are not barred from receiving federally funded
26 means-tested benefits due to immigration status.

27 The program established under this subsection shall cover
28 the cost of covered prescription drugs in excess of the
29 beneficiary cost-sharing amounts set forth in this paragraph
30 that are not covered by Medicare. In 2006, beneficiaries shall
31 pay a co-payment of \$2 for each prescription of a generic drug
32 and \$5 for each prescription of a brand-name drug. In future
33 years, beneficiaries shall pay co-payments equal to the
34 co-payments required under Medicare Part D for "other
35 low-income subsidy eligible individuals" pursuant to 42 CFR
36 423.782(b). Once the program established under this subsection

1 and Medicare combined have paid \$1,750 in a year for covered
2 prescription drugs, the beneficiary shall pay 20% of the cost
3 of each prescription in addition to the co-payments set forth
4 in this paragraph.

5 For beneficiaries eligible for Medicare Part D coverage,
6 the program established under this subsection shall pay 100% of
7 the premiums charged by a qualified Medicare Part D
8 Prescription Drug Plan for Medicare Part D basic prescription
9 drug coverage, not including any late enrollment penalties.
10 Qualified Medicare Part D Prescription Drug Plans may be
11 limited by the Department of Healthcare and Family Services to
12 those plans that sign a coordination agreement with the
13 Department.

14 Notwithstanding Section 3.15, for purposes of the program
15 established under this subsection, the term "covered
16 prescription drug" has the following meanings:

17 For Eligibility Group 1, "covered prescription drug"
18 means: (1) any cardiovascular agent or drug; (2) any
19 insulin or other prescription drug used in the treatment of
20 diabetes, including syringe and needles used to administer
21 the insulin; (3) any prescription drug used in the
22 treatment of arthritis; (4) any prescription drug used in
23 the treatment of cancer; (5) any prescription drug used in
24 the treatment of Alzheimer's disease; (6) any prescription
25 drug used in the treatment of Parkinson's disease; (7) any
26 prescription drug used in the treatment of glaucoma; (8)
27 any prescription drug used in the treatment of lung disease
28 and smoking-related illnesses; (9) any prescription drug
29 used in the treatment of osteoporosis; and (10) any
30 prescription drug used in the treatment of multiple
31 sclerosis. The Department may add additional therapeutic
32 classes by rule. The Department may adopt a preferred drug
33 list within any of the classes of drugs described in items
34 (1) through (10) of this paragraph. The specific drugs or
35 therapeutic classes of covered prescription drugs shall be
36 indicated by rule.

1 For Eligibility Group 2, "covered prescription drug"
2 means those drugs covered for Eligibility Group 1 that are
3 also covered by the Medicare Part D Prescription Drug Plan
4 in which the beneficiary is enrolled.

5 For Eligibility Group 3, "covered prescription drug"
6 means those drugs covered by the Medicare Part D
7 Prescription Drug Plan in which the beneficiary is
8 enrolled.

9 For Eligibility Group 4, "covered prescription drug"
10 means those drugs covered by the Medical Assistance Program
11 under Article V of the Illinois Public Aid Code.

12 An individual in Eligibility Group 3 or 4 may opt to
13 receive a \$25 monthly payment in lieu of the direct coverage
14 described in this subsection.

15 Any person otherwise eligible for pharmaceutical
16 assistance under this subsection whose covered drugs are
17 covered by any public program is ineligible for assistance
18 under this subsection to the extent that the cost of those
19 drugs is covered by the other program.

20 The Department of Healthcare and Family Services shall
21 establish by rule the methods by which it will provide for the
22 coverage called for in this subsection. Those methods may
23 include direct reimbursement to pharmacies or the payment of a
24 capitated amount to Medicare Part D Prescription Drug Plans.

25 For a pharmacy to be reimbursed under the program
26 established under this subsection, it must comply with rules
27 adopted by the Department of Healthcare and Family Services
28 regarding coordination of benefits with Medicare Part D
29 Prescription Drug Plans. A pharmacy may not charge a
30 Medicare-enrolled beneficiary of the program established under
31 this subsection more for a covered prescription drug than the
32 appropriate Medicare cost-sharing less any payment from or on
33 behalf of the Department of Healthcare and Family Services.

34 The Department of Healthcare and Family Services or the
35 Department on Aging, as appropriate, may adopt rules regarding
36 applications, counting of income, proof of Medicare status,

1 mandatory generic policies, and pharmacy reimbursement rates
2 and any other rules necessary for the cost-efficient operation
3 of the program established under this subsection.

4 (Source: P.A. 93-130, eff. 7-10-03; 94-86, eff. 1-1-06.)

5 Section 9420. The Partnership for Long-Term Care Act is
6 amended by changing Sections 15, 20, 25, 50, and 60 as follows:

7 (320 ILCS 35/15) (from Ch. 23, par. 6801-15)

8 Sec. 15. Program.

9 (a) The Department on Aging, in cooperation with the
10 Department of Insurance, and the Department of Healthcare and
11 Family Services ~~Public Aid~~, shall administer the program.

12 (b) The Departments shall seek any federal waivers and
13 approvals necessary to accomplish the purposes of this Act.

14 (Source: P.A. 88-328; 89-525, eff. 7-19-96.)

15 (320 ILCS 35/20) (from Ch. 23, par. 6801-20)

16 Sec. 20. Program participant eligibility for Medicaid.

17 (a) Individuals who participate in the program and have
18 resources above the eligibility levels for receipt of medical
19 assistance under Title XIX of the Social Security Act
20 (Subchapter XIX (commencing with Section 1396) of Chapter 7 of
21 Title 42 of the United States Code) shall be eligible to
22 receive in-home supportive service benefits and Medicaid
23 benefits through the Department of Healthcare and Family
24 Services ~~Public Aid~~ if, before becoming eligible for benefits,
25 they have purchased a long-term care insurance policy covering
26 long-term care that has been certified by the Department of
27 Insurance under Section 30 of this Act.

28 (b) Individuals may purchase certified long-term care
29 insurance policies which cover long-term care services in
30 amounts equal to the resources they wish to protect.

31 (b-5) An individual may purchase a certified long-term care
32 insurance policy which protects an individual's total assets.
33 To be eligible for total asset protection, an amount equal to

1 the average cost of 4 years of long-term care services in a
2 nursing facility must be purchased.

3 (b-7) Although a resource has been protected by the
4 Partnership Policy, income is to be applied to the cost of care
5 when the insured becomes Medicaid eligible.

6 (c) The resource protection provided by this Act shall be
7 effective only for long-term care policies which cover
8 long-term care services, that are delivered, issued for
9 delivery, or renewed on or after July 1, 1992.

10 (d) When an individual purchases a certified long-term care
11 insurance policy, the issuer must notify the purchaser of the
12 benefits of purchasing inflation protection for the long-term
13 care insurance policy.

14 (e) An insurance company may offer for sale a policy as
15 described in paragraph (b) of this Section or paragraph (b-5)
16 of this Section or both types of policies.

17 (Source: P.A. 89-507, eff. 7-1-97; 89-525, eff. 7-19-96; 90-14,
18 eff. 7-1-97.)

19 (320 ILCS 35/25) (from Ch. 23, par. 6801-25)

20 Sec. 25. Protection of resources.

21 (a) Notwithstanding any other provision of law, the
22 resources, to the extent described in subsection (b), of an
23 individual who (i) purchases a certified long-term care
24 insurance policy which covers long-term care services and (ii)
25 has received all the benefit payments that are payable under
26 that policy or contract for items described in subsection (b)
27 shall not be considered in determining:

28 (1) Medicaid eligibility.

29 (2) The amount of any Medicaid payment.

30 (3) The amount of any subsequent recovery by the State
31 of payments made for medical services to the extent federal
32 law permits.

33 (4) Eligibility for in-home supportive services.

34 (5) The amount of any payment for in-home supportive
35 services.

1 (b) Benefit payments described in subsection (a) must be
2 for one or more of the following:

3 (1) In-home supportive service benefits and Medicaid
4 long-term care services specified in regulations by the
5 Department of Healthcare and Family Services ~~Public Aid~~.

6 (2) Long-term care services delivered to insured
7 individuals in a community setting as part of an individual
8 assessment and case management program provided by
9 coordinating entities designated or approved by the
10 Department on Aging.

11 (3) Services the insured individual received while
12 meeting the disability criteria for eligibility for
13 long-term care benefits established by the Departments.

14 (Source: P.A. 89-525, eff. 7-19-96.)

15 (320 ILCS 35/50) (from Ch. 23, par. 6801-50)

16 Sec. 50. Task force.

17 (a) An executive and legislative advisory task force shall
18 be created to provide advice and assistance in designing and
19 implementing the Partnership for Long-term Care Program. The
20 task force shall be composed of representatives, designated by
21 the director of each of the following agencies or departments:

22 (1) The Department on Aging.

23 (2) The Department of Public Aid (now Department of
24 Healthcare and Family Services).

25 (3) (Blank).

26 (4) The Department of Insurance.

27 (5) The Department of Commerce and Community Affairs
28 (now Department of Commerce and Economic Opportunity).

29 (6) The Legislative Research Unit.

30 (b) The task force shall consult with persons knowledgeable
31 of and concerned with long-term care, including, but not
32 limited to the following:

33 (1) Consumers.

34 (2) Health care providers.

35 (3) Representatives of long-term care insurance

1 companies and administrators of health care service plans
2 that cover long-term care services.

3 (4) Providers of long-term care.

4 (5) Private employers.

5 (6) Academic specialists in long-term care and aging.

6 (7) Representatives of the public employees' and
7 teachers' retirement systems.

8 (c) The task force shall be established, and its members
9 designated, not later than March 1, 1993. The task force shall
10 make recommendations to the Department on Aging concerning the
11 policy components of the program on or before September 1,
12 1993.

13 (Source: P.A. 89-507, eff. 7-1-97; 89-525, eff. 7-19-96; 90-14,
14 eff. 7-1-97; revised 12-6-03.)

15 (320 ILCS 35/60) (from Ch. 23, par. 6801-60)

16 Sec. 60. Administrative costs.

17 (a) The Department on Aging, in conjunction with the
18 Department of Healthcare and Family Services ~~Public Aid~~, the
19 Department of Insurance, and the Department of Commerce and
20 Economic Opportunity ~~Community Affairs~~, shall submit
21 applications for State or federal grants or federal waivers, or
22 funding from nationally distributed private foundation grants,
23 or insurance reimbursements to be used to pay the
24 administrative expenses of implementation of the program. The
25 Department on Aging, in conjunction with those other
26 departments, also shall seek moneys from these same sources for
27 the purpose of implementing the program, including moneys
28 appropriated for that purpose.

29 (b) In implementing this Act, the Department on Aging may
30 negotiate contracts, on a nonbid basis, with long-term care
31 insurers, health care insurers, health care service plans, or
32 both, for the provision of coverage for long-term care services
33 that will meet the certification requirements set forth in
34 Section 30 and the other requirements of this Act.

35 (Source: P.A. 89-507, eff. 7-1-97; 89-525, eff. 7-19-96; 90-14,

1 eff. 7-1-97; revised 12-6-03.)

2 Section 9425. The All-Inclusive Care for the Elderly Act is
3 amended by changing Sections 10, 15, 20, 25, and 30 as follows:

4 (320 ILCS 40/10) (from Ch. 23, par. 6910)

5 Sec. 10. Services for eligible persons. Within the context
6 of the PACE program established under this Act, the ~~Illinois~~
7 Department of Healthcare and Family Services ~~Public Aid~~ may
8 include any or all of the services in Article V ~~5~~ of the
9 Illinois Public Aid Code.

10 An eligible person may elect to receive services from the
11 PACE program. If such an election is made, the eligible person
12 shall not remain eligible for payment through the regular
13 Medicare or Medicaid program. All services and programs
14 provided through the PACE program shall be provided in
15 accordance with this Act. An eligible person may elect to
16 disenroll from the PACE program at any time.

17 For purposes of this Act, "eligible person" means a frail
18 elderly individual who voluntarily enrolls in the PACE program,
19 whose income and resources do not exceed limits established by
20 the ~~Illinois~~ Department of Healthcare and Family Services
21 ~~Public Aid~~ and for whom a licensed physician certifies that
22 such a program provides an appropriate alternative to
23 institutionalized care. The term "frail elderly" means an
24 individual who meets the age and functional eligibility
25 requirements established by the ~~Illinois~~ Department of
26 Healthcare and Family Services ~~Public Aid~~.

27 (Source: P.A. 94-48, eff. 7-1-05.)

28 (320 ILCS 40/15) (from Ch. 23, par. 6915)

29 Sec. 15. Program implementation.

30 (a) Upon receipt of federal approval, the Illinois
31 Department of Public Aid (now Department of Healthcare and
32 Family Services) shall implement the PACE program pursuant to
33 the provisions of the approved Title XIX State plan.

1 (b) Using a risk-based financing model, the nonprofit
2 organization providing the PACE program shall assume
3 responsibility for all costs generated by the PACE program
4 participants, and it shall create and maintain a risk reserve
5 fund that will cover any cost overages for any participant. The
6 PACE program is responsible for the entire range of services in
7 the consolidated service model, including hospital and nursing
8 home care, according to participant need as determined by a
9 multidisciplinary team. The nonprofit organization providing
10 the PACE program is responsible for the full financial risk.
11 Specific arrangements of the risk-based financing model shall
12 be adopted and negotiated by the federal Centers for Medicare
13 and Medicaid Services, the nonprofit organization providing
14 the PACE program, and the ~~Illinois~~ Department of Healthcare and
15 Family Services ~~Public Aid~~.

16 (Source: P.A. 94-48, eff. 7-1-05.)

17 (320 ILCS 40/20) (from Ch. 23, par. 6920)

18 Sec. 20. Duties of the ~~Illinois~~ Department of Healthcare
19 and Family Services.

20 (a) The ~~Illinois~~ Department of Healthcare and Family
21 Services shall provide a system for reimbursement for services
22 to the PACE program.

23 (b) The ~~Illinois~~ Department of Healthcare and Family
24 Services shall develop and implement a contract with the
25 nonprofit organization providing the PACE program that sets
26 forth contractual obligations for the PACE program, including
27 but not limited to reporting and monitoring of utilization of
28 costs of the program as required by the Illinois Department.

29 (c) The ~~Illinois~~ Department of Healthcare and Family
30 Services shall acknowledge that it is participating in the
31 national PACE project as initiated by Congress.

32 (d) The ~~Illinois~~ Department of Healthcare and Family
33 Services or its designee shall be responsible for certifying
34 the eligibility for services of all PACE program participants.

35 (Source: P.A. 87-411.)

1 (320 ILCS 40/25) (from Ch. 23, par. 6925)

2 Sec. 25. Rules and regulations. The ~~Illinois~~ Department of
3 Healthcare and Family Services shall promulgate rules and
4 regulations necessary to implement this Act.

5 (Source: P.A. 87-411.)

6 (320 ILCS 40/30) (from Ch. 23, par. 6930)

7 Sec. 30. Rate of payment. The General Assembly shall make
8 appropriations to the ~~Illinois~~ Department of Healthcare and
9 Family Services ~~Public Aid~~ to fund services under this Act
10 provided at a monthly capitated rate. The ~~Illinois~~ Department
11 shall annually renegotiate a monthly capitated rate for the
12 contracted services based on the 95% of the Medicaid
13 fee-for-service costs of an actuarially similar population.

14 (Source: P.A. 87-411.)

15 Section 9430. The Older Adult Services Act is amended by
16 changing Sections 10, 15, 20, 25, 30, and 35 as follows:

17 (320 ILCS 42/10)

18 Sec. 10. Definitions. In this Act:

19 "Advisory Committee" means the Older Adult Services
20 Advisory Committee.

21 "Certified nursing home" means any nursing home licensed
22 under the Nursing Home Care Act and certified under Title XIX
23 of the Social Security Act to participate as a vendor in the
24 medical assistance program under Article V of the Illinois
25 Public Aid Code.

26 "Comprehensive case management" means the assessment of
27 needs and preferences of an older adult at the direction of the
28 older adult or the older adult's designated representative and
29 the arrangement, coordination, and monitoring of an optimum
30 package of services to meet the needs of the older adult.

31 "Consumer-directed" means decisions made by an informed
32 older adult from available services and care options, which may

1 range from independently making all decisions and managing
2 services directly to limited participation in decision-making,
3 based upon the functional and cognitive level of the older
4 adult.

5 "Coordinated point of entry" means an integrated access
6 point where consumers receive information and assistance,
7 assessment of needs, care planning, referral, assistance in
8 completing applications, authorization of services where
9 permitted, and follow-up to ensure that referrals and services
10 are accessed.

11 "Department" means the Department on Aging, in
12 collaboration with the departments of Public Health and
13 Healthcare and Family Services ~~Public Aid~~ and other relevant
14 agencies and in consultation with the Advisory Committee,
15 except as otherwise provided.

16 "Departments" means the Department on Aging, the
17 departments of Public Health and Healthcare and Family Services
18 ~~Public Aid~~, and other relevant agencies in collaboration with
19 each other and in consultation with the Advisory Committee,
20 except as otherwise provided.

21 "Family caregiver" means an adult family member or another
22 individual who is an uncompensated provider of home-based or
23 community-based care to an older adult.

24 "Health services" means activities that promote, maintain,
25 improve, or restore mental or physical health or that are
26 palliative in nature.

27 "Older adult" means a person age 60 or older and, if
28 appropriate, the person's family caregiver.

29 "Person-centered" means a process that builds upon an older
30 adult's strengths and capacities to engage in activities that
31 promote community life and that reflect the older adult's
32 preferences, choices, and abilities, to the extent
33 practicable.

34 "Priority service area" means an area identified by the
35 Departments as being less-served with respect to the
36 availability of and access to older adult services in Illinois.

1 The Departments shall determine by rule the criteria and
2 standards used to designate such areas.

3 "Priority service plan" means the plan developed pursuant
4 to Section 25 of this Act.

5 "Provider" means any supplier of services under this Act.

6 "Residential setting" means the place where an older adult
7 lives.

8 "Restructuring" means the transformation of Illinois'
9 comprehensive system of older adult services from funding
10 primarily a facility-based service delivery system to
11 primarily a home-based and community-based system, taking into
12 account the continuing need for 24-hour skilled nursing care
13 and congregate housing with services.

14 "Services" means the range of housing, health, financial,
15 and supportive services, other than acute health care services,
16 that are delivered to an older adult with functional or
17 cognitive limitations, or socialization needs, who requires
18 assistance to perform activities of daily living, regardless of
19 the residential setting in which the services are delivered.

20 "Supportive services" means non-medical assistance given
21 over a period of time to an older adult that is needed to
22 compensate for the older adult's functional or cognitive
23 limitations, or socialization needs, or those services
24 designed to restore, improve, or maintain the older adult's
25 functional or cognitive abilities.

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

27 (320 ILCS 42/15)

28 Sec. 15. Designation of lead agency; annual report.

29 (a) The Department on Aging shall be the lead agency for:
30 the provision of services to older adults and their family
31 caregivers; restructuring Illinois' service delivery system
32 for older adults; and implementation of this Act, except where
33 otherwise provided. The Department on Aging shall collaborate
34 with the departments of Public Health and Healthcare and Family
35 Services ~~Public Aid~~ and any other relevant agencies, and shall

1 consult with the Advisory Committee, in all aspects of these
2 duties, except as otherwise provided in this Act.

3 (b) The Departments shall promulgate rules to implement
4 this Act pursuant to the Illinois Administrative Procedure Act.

5 (c) On January 1, 2006, and each January 1 thereafter, the
6 Department shall issue a report to the General Assembly on
7 progress made in complying with this Act, impediments thereto,
8 recommendations of the Advisory Committee, and any
9 recommendations for legislative changes necessary to implement
10 this Act. To the extent practicable, all reports required by
11 this Act shall be consolidated into a single report.

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

13 (320 ILCS 42/20)

14 Sec. 20. Priority service areas; service expansion.

15 (a) The requirements of this Section are subject to the
16 availability of funding.

17 (b) The Department shall expand older adult services that
18 promote independence and permit older adults to remain in their
19 own homes and communities. Priority shall be given to both the
20 expansion of services and the development of new services in
21 priority service areas.

22 (c) Inventory of services. The Department shall develop and
23 maintain an inventory and assessment of (i) the types and
24 quantities of public older adult services and, to the extent
25 possible, privately provided older adult services, including
26 the unduplicated count, location, and characteristics of
27 individuals served by each facility, program, or service and
28 (ii) the resources supporting those services.

29 (d) Priority service areas. The Departments shall assess
30 the current and projected need for older adult services
31 throughout the State, analyze the results of the inventory, and
32 identify priority service areas, which shall serve as the basis
33 for a priority service plan to be filed with the Governor and
34 the General Assembly no later than July 1, 2006, and every 5
35 years thereafter.

1 (e) Moneys appropriated by the General Assembly for the
2 purpose of this Section, receipts from donations, grants, fees,
3 or taxes that may accrue from any public or private sources to
4 the Department for the purpose of this Section, and savings
5 attributable to the nursing home conversion program as
6 calculated in subsection (h) shall be deposited into the
7 Department on Aging State Projects Fund. Interest earned by
8 those moneys in the Fund shall be credited to the Fund.

9 (f) Moneys described in subsection (e) from the Department
10 on Aging State Projects Fund shall be used for older adult
11 services, regardless of where the older adult receives the
12 service, with priority given to both the expansion of services
13 and the development of new services in priority service areas.
14 Fundable services shall include:

- 15 (1) Housing, health services, and supportive services:
16 (A) adult day care;
17 (B) adult day care for persons with Alzheimer's
18 disease and related disorders;
19 (C) activities of daily living;
20 (D) care-related supplies and equipment;
21 (E) case management;
22 (F) community reintegration;
23 (G) companion;
24 (H) congregate meals;
25 (I) counseling and education;
26 (J) elder abuse prevention and intervention;
27 (K) emergency response and monitoring;
28 (L) environmental modifications;
29 (M) family caregiver support;
30 (N) financial;
31 (O) home delivered meals;
32 (P) homemaker;
33 (Q) home health;
34 (R) hospice;
35 (S) laundry;
36 (T) long-term care ombudsman;

- 1 (U) medication reminders;
- 2 (V) money management;
- 3 (W) nutrition services;
- 4 (X) personal care;
- 5 (Y) respite care;
- 6 (Z) residential care;
- 7 (AA) senior benefits outreach;
- 8 (BB) senior centers;
- 9 (CC) services provided under the Assisted Living
10 and Shared Housing Act, or sheltered care services that
11 meet the requirements of the Assisted Living and Shared
12 Housing Act, or services provided under Section
13 5-5.01a of the Illinois Public Aid Code (the Supportive
14 Living Facilities Program);
- 15 (DD) telemedicine devices to monitor recipients in
16 their own homes as an alternative to hospital care,
17 nursing home care, or home visits;
- 18 (EE) training for direct family caregivers;
- 19 (FF) transition;
- 20 (GG) transportation;
- 21 (HH) wellness and fitness programs; and
- 22 (II) other programs designed to assist older
23 adults in Illinois to remain independent and receive
24 services in the most integrated residential setting
25 possible for that person.
- 26 (2) Older Adult Services Demonstration Grants,
27 pursuant to subsection (g) of this Section.
- 28 (g) Older Adult Services Demonstration Grants. The
29 Department shall establish a program of demonstration grants to
30 assist in the restructuring of the delivery system for older
31 adult services and provide funding for innovative service
32 delivery models and system change and integration initiatives.
33 The Department shall prescribe, by rule, the grant application
34 process. At a minimum, every application must include:
- 35 (1) The type of grant sought;
- 36 (2) A description of the project;

- 1 (3) The objective of the project;
- 2 (4) The likelihood of the project meeting identified
3 needs;
- 4 (5) The plan for financing, administration, and
5 evaluation of the project;
- 6 (6) The timetable for implementation;
- 7 (7) The roles and capabilities of responsible
8 individuals and organizations;
- 9 (8) Documentation of collaboration with other service
10 providers, local community government leaders, and other
11 stakeholders, other providers, and any other stakeholders
12 in the community;
- 13 (9) Documentation of community support for the
14 project, including support by other service providers,
15 local community government leaders, and other
16 stakeholders;
- 17 (10) The total budget for the project;
- 18 (11) The financial condition of the applicant; and
- 19 (12) Any other application requirements that may be
20 established by the Department by rule.

21 Each project may include provisions for a designated staff
22 person who is responsible for the development of the project
23 and recruitment of providers.

24 Projects may include, but are not limited to: adult family
25 foster care; family adult day care; assisted living in a
26 supervised apartment; personal services in a subsidized
27 housing project; evening and weekend home care coverage; small
28 incentive grants to attract new providers; money following the
29 person; cash and counseling; managed long-term care; and at
30 least one respite care project that establishes a local
31 coordinated network of volunteer and paid respite workers,
32 coordinates assignment of respite workers to caregivers and
33 older adults, ensures the health and safety of the older adult,
34 provides training for caregivers, and ensures that support
35 groups are available in the community.

36 A demonstration project funded in whole or in part by an

1 Older Adult Services Demonstration Grant is exempt from the
2 requirements of the Illinois Health Facilities Planning Act. To
3 the extent applicable, however, for the purpose of maintaining
4 the statewide inventory authorized by the Illinois Health
5 Facilities Planning Act, the Department shall send to the
6 Health Facilities Planning Board a copy of each grant award
7 made under this subsection (g).

8 The Department, in collaboration with the Departments of
9 Public Health and Healthcare and Family Services ~~Public Aid~~,
10 shall evaluate the effectiveness of the projects receiving
11 grants under this Section.

12 (h) No later than July 1 of each year, the Department of
13 Public Health shall provide information to the Department of
14 Healthcare and Family Services ~~Public Aid~~ to enable the
15 Department of Healthcare and Family Services ~~Public Aid~~ to
16 annually document and verify the savings attributable to the
17 nursing home conversion program for the previous fiscal year to
18 estimate an annual amount of such savings that may be
19 appropriated to the Department on Aging State Projects Fund and
20 notify the General Assembly, the Department on Aging, the
21 Department of Human Services, and the Advisory Committee of the
22 savings no later than October 1 of the same fiscal year.

23 (Source: P.A. 93-1031, eff. 8-27-04; 94-342, eff. 7-26-05.)

24 (320 ILCS 42/25)

25 Sec. 25. Older adult services restructuring. No later than
26 January 1, 2005, the Department shall commence the process of
27 restructuring the older adult services delivery system.
28 Priority shall be given to both the expansion of services and
29 the development of new services in priority service areas.
30 Subject to the availability of funding, the restructuring shall
31 include, but not be limited to, the following:

32 (1) Planning. The Department shall develop a plan to
33 restructure the State's service delivery system for older
34 adults. The plan shall include a schedule for the
35 implementation of the initiatives outlined in this Act and all

1 other initiatives identified by the participating agencies to
2 fulfill the purposes of this Act. Financing for older adult
3 services shall be based on the principle that "money follows
4 the individual". The plan shall also identify potential
5 impediments to delivery system restructuring and include any
6 known regulatory or statutory barriers.

7 (2) Comprehensive case management. The Department shall
8 implement a statewide system of holistic comprehensive case
9 management. The system shall include the identification and
10 implementation of a universal, comprehensive assessment tool
11 to be used statewide to determine the level of functional,
12 cognitive, socialization, and financial needs of older adults.
13 This tool shall be supported by an electronic intake,
14 assessment, and care planning system linked to a central
15 location. "Comprehensive case management" includes services
16 and coordination such as (i) comprehensive assessment of the
17 older adult (including the physical, functional, cognitive,
18 psycho-social, and social needs of the individual); (ii)
19 development and implementation of a service plan with the older
20 adult to mobilize the formal and family resources and services
21 identified in the assessment to meet the needs of the older
22 adult, including coordination of the resources and services
23 with any other plans that exist for various formal services,
24 such as hospital discharge plans, and with the information and
25 assistance services; (iii) coordination and monitoring of
26 formal and family service delivery, including coordination and
27 monitoring to ensure that services specified in the plan are
28 being provided; (iv) periodic reassessment and revision of the
29 status of the older adult with the older adult or, if
30 necessary, the older adult's designated representative; and
31 (v) in accordance with the wishes of the older adult, advocacy
32 on behalf of the older adult for needed services or resources.

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

36 (4) Public web site. The Department shall develop a public

1 web site that provides links to available services, resources,
2 and reference materials concerning caregiving, diseases, and
3 best practices for use by professionals, older adults, and
4 family caregivers.

5 (5) Expansion of older adult services. The Department shall
6 expand older adult services that promote independence and
7 permit older adults to remain in their own homes and
8 communities.

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

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

16 (8) Enhanced transition and follow-up services. The
17 Department shall implement a program of transition from one
18 residential setting to another and follow-up services,
19 regardless of residential setting, pursuant to rules with
20 respect to (i) resident eligibility, (ii) assessment of the
21 resident's health, cognitive, social, and financial needs,
22 (iii) development of transition plans, and (iv) the level of
23 services that must be available before transitioning a resident
24 from one setting to another.

25 (9) Family caregiver support. The Department shall develop
26 strategies for public and private financing of services that
27 supplement and support family caregivers.

28 (10) Quality standards and quality improvement. The
29 Department shall establish a core set of uniform quality
30 standards for all providers that focus on outcomes and take
31 into consideration consumer choice and satisfaction, and the
32 Department shall require each provider to implement a
33 continuous quality improvement process to address consumer
34 issues. The continuous quality improvement process must
35 benchmark performance, be person-centered and data-driven, and
36 focus on consumer satisfaction.

1 (11) Workforce. The Department shall develop strategies to
2 attract and retain a qualified and stable worker pool, provide
3 living wages and benefits, and create a work environment that
4 is conducive to long-term employment and career development.
5 Resources such as grants, education, and promotion of career
6 opportunities may be used.

7 (12) Coordination of services. The Department shall
8 identify methods to better coordinate service networks to
9 maximize resources and minimize duplication of services and
10 ease of application.

11 (13) Barriers to services. The Department shall identify
12 barriers to the provision, availability, and accessibility of
13 services and shall implement a plan to address those barriers.
14 The plan shall: (i) identify barriers, including but not
15 limited to, statutory and regulatory complexity, reimbursement
16 issues, payment issues, and labor force issues; (ii) recommend
17 changes to State or federal laws or administrative rules or
18 regulations; (iii) recommend application for federal waivers
19 to improve efficiency and reduce cost and paperwork; (iv)
20 develop innovative service delivery models; and (v) recommend
21 application for federal or private service grants.

22 (14) Reimbursement and funding. The Department shall
23 investigate and evaluate costs and payments by defining costs
24 to implement a uniform, audited provider cost reporting system
25 to be considered by all Departments in establishing payments.
26 To the extent possible, multiple cost reporting mandates shall
27 not be imposed.

28 (15) Medicaid nursing home cost containment and Medicare
29 utilization. The Department of Healthcare and Family Services
30 (formerly Department of Public Aid), in collaboration with the
31 Department on Aging and the Department of Public Health and in
32 consultation with the Advisory Committee, shall propose a plan
33 to contain Medicaid nursing home costs and maximize Medicare
34 utilization. The plan must not impair the ability of an older
35 adult to choose among available services. The plan shall
36 include, but not be limited to, (i) techniques to maximize the

1 use of the most cost-effective services without sacrificing
2 quality and (ii) methods to identify and serve older adults in
3 need of minimal services to remain independent, but who are
4 likely to develop a need for more extensive services in the
5 absence of those minimal services.

6 (16) Bed reduction. The Department of Public Health shall
7 implement a nursing home conversion program to reduce the
8 number of Medicaid-certified nursing home beds in areas with
9 excess beds. The Department of Healthcare and Family Services
10 ~~Public Aid~~ shall investigate changes to the Medicaid nursing
11 facility reimbursement system in order to reduce beds. Such
12 changes may include, but are not limited to, incentive payments
13 that will enable facilities to adjust to the restructuring and
14 expansion of services required by the Older Adult Services Act,
15 including adjustments for the voluntary closure or layaway of
16 nursing home beds certified under Title XIX of the federal
17 Social Security Act. Any savings shall be reallocated to fund
18 home-based or community-based older adult services pursuant to
19 Section 20.

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

25 (A) private long-term care insurance coverage for
26 older adult services;

27 (B) enhancement of federal long-term care financing
28 initiatives;

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

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

32 (E) strategies to reduce reliance on government
33 programs;

34 (F) fraudulent asset divestiture and financial
35 planning prevention; and

36 (G) methods to supplement and support family and

1 community caregiving.

2 (18) Older Adult Services Demonstration Grants. The
3 Department shall implement a program of demonstration grants
4 that will assist in the restructuring of the older adult
5 services delivery system, and shall provide funding for
6 innovative service delivery models and system change and
7 integration initiatives pursuant to subsection (g) of Section
8 20.

9 (19) Bed need methodology update. For the purposes of
10 determining areas with excess beds, the Departments shall
11 provide information and assistance to the Health Facilities
12 Planning Board to update the Bed Need Methodology for Long-Term
13 Care to update the assumptions used to establish the
14 methodology to make them consistent with modern older adult
15 services.

16 (20) Affordable housing. The Departments shall utilize the
17 recommendations of Illinois' Annual Comprehensive Housing
18 Plan, as developed by the Affordable Housing Task Force through
19 the Governor's Executive Order 2003-18, in their efforts to
20 address the affordable housing needs of older adults.

21 (Source: P.A. 93-1031, eff. 8-27-04; 94-236, eff. 7-14-05.)

22 (320 ILCS 42/30)

23 Sec. 30. Nursing home conversion program.

24 (a) The Department of Public Health, in collaboration with
25 the Department on Aging and the Department of Healthcare and
26 Family Services ~~Public Aid~~, shall establish a nursing home
27 conversion program. Start-up grants, pursuant to subsections
28 (l) and (m) of this Section, shall be made available to nursing
29 homes as appropriations permit as an incentive to reduce
30 certified beds, retrofit, and retool operations to meet new
31 service delivery expectations and demands.

32 (b) Grant moneys shall be made available for capital and
33 other costs related to: (1) the conversion of all or a part of
34 a nursing home to an assisted living establishment or a special
35 program or unit for persons with Alzheimer's disease or related

1 disorders licensed under the Assisted Living and Shared Housing
2 Act or a supportive living facility established under Section
3 5-5.01a of the Illinois Public Aid Code; (2) the conversion of
4 multi-resident bedrooms in the facility into single-occupancy
5 rooms; and (3) the development of any of the services
6 identified in a priority service plan that can be provided by a
7 nursing home within the confines of a nursing home or
8 transportation services. Grantees shall be required to provide
9 a minimum of a 20% match toward the total cost of the project.

10 (c) Nothing in this Act shall prohibit the co-location of
11 services or the development of multifunctional centers under
12 subsection (f) of Section 20, including a nursing home offering
13 community-based services or a community provider establishing
14 a residential facility.

15 (d) A certified nursing home with at least 50% of its
16 resident population having their care paid for by the Medicaid
17 program is eligible to apply for a grant under this Section.

18 (e) Any nursing home receiving a grant under this Section
19 shall reduce the number of certified nursing home beds by a
20 number equal to or greater than the number of beds being
21 converted for one or more of the permitted uses under item (1)
22 or (2) of subsection (b). The nursing home shall retain the
23 Certificate of Need for its nursing and sheltered care beds
24 that were converted for 15 years. If the beds are reinstated by
25 the provider or its successor in interest, the provider shall
26 pay to the fund from which the grant was awarded, on an
27 amortized basis, the amount of the grant. The Department shall
28 establish, by rule, the bed reduction methodology for nursing
29 homes that receive a grant pursuant to item (3) of subsection
30 (b).

31 (f) Any nursing home receiving a grant under this Section
32 shall agree that, for a minimum of 10 years after the date that
33 the grant is awarded, a minimum of 50% of the nursing home's
34 resident population shall have their care paid for by the
35 Medicaid program. If the nursing home provider or its successor
36 in interest ceases to comply with the requirement set forth in

1 this subsection, the provider shall pay to the fund from which
2 the grant was awarded, on an amortized basis, the amount of the
3 grant.

4 (g) Before awarding grants, the Department of Public Health
5 shall seek recommendations from the Department on Aging and the
6 Department of Healthcare and Family Services ~~Public Aid~~. The
7 Department of Public Health shall attempt to balance the
8 distribution of grants among geographic regions, and among
9 small and large nursing homes. The Department of Public Health
10 shall develop, by rule, the criteria for the award of grants
11 based upon the following factors:

12 (1) the unique needs of older adults (including those
13 with moderate and low incomes), caregivers, and providers
14 in the geographic area of the State the grantee seeks to
15 serve;

16 (2) whether the grantee proposes to provide services in
17 a priority service area;

18 (3) the extent to which the conversion or transition
19 will result in the reduction of certified nursing home beds
20 in an area with excess beds;

21 (4) the compliance history of the nursing home; and

22 (5) any other relevant factors identified by the
23 Department, including standards of need.

24 (h) A conversion funded in whole or in part by a grant
25 under this Section must not:

26 (1) diminish or reduce the quality of services
27 available to nursing home residents;

28 (2) force any nursing home resident to involuntarily
29 accept home-based or community-based services instead of
30 nursing home services;

31 (3) diminish or reduce the supply and distribution of
32 nursing home services in any community below the level of
33 need, as defined by the Department by rule; or

34 (4) cause undue hardship on any person who requires
35 nursing home care.

36 (i) The Department shall prescribe, by rule, the grant

1 application process. At a minimum, every application must
2 include:

3 (1) the type of grant sought;

4 (2) a description of the project;

5 (3) the objective of the project;

6 (4) the likelihood of the project meeting identified
7 needs;

8 (5) the plan for financing, administration, and
9 evaluation of the project;

10 (6) the timetable for implementation;

11 (7) the roles and capabilities of responsible
12 individuals and organizations;

13 (8) documentation of collaboration with other service
14 providers, local community government leaders, and other
15 stakeholders, other providers, and any other stakeholders
16 in the community;

17 (9) documentation of community support for the
18 project, including support by other service providers,
19 local community government leaders, and other
20 stakeholders;

21 (10) the total budget for the project;

22 (11) the financial condition of the applicant; and

23 (12) any other application requirements that may be
24 established by the Department by rule.

25 (j) A conversion project funded in whole or in part by a
26 grant under this Section is exempt from the requirements of the
27 Illinois Health Facilities Planning Act. The Department of
28 Public Health, however, shall send to the Health Facilities
29 Planning Board a copy of each grant award made under this
30 Section.

31 (k) Applications for grants are public information, except
32 that nursing home financial condition and any proprietary data
33 shall be classified as nonpublic data.

34 (l) The Department of Public Health may award grants from
35 the Long Term Care Civil Money Penalties Fund established under
36 Section 1919(h) (2) (A) (ii) of the Social Security Act and 42 CFR

1 488.422(g) if the award meets federal requirements.

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

3 (320 ILCS 42/35)

4 Sec. 35. Older Adult Services Advisory Committee.

5 (a) The Older Adult Services Advisory Committee is created
6 to advise the directors of Aging, Healthcare and Family
7 Services ~~Public Aid~~, and Public Health on all matters related
8 to this Act and the delivery of services to older adults in
9 general.

10 (b) The Advisory Committee shall be comprised of the
11 following:

12 (1) The Director of Aging or his or her designee, who
13 shall serve as chair and shall be an ex officio and
14 nonvoting member.

15 (2) The Director of Healthcare and Family Services
16 ~~Public Aid~~ and the Director of Public Health or their
17 designees, who shall serve as vice-chairs and shall be ex
18 officio and nonvoting members.

19 (3) One representative each of the Governor's Office,
20 the Department of Healthcare and Family Services ~~Public~~
21 ~~Aid~~, the Department of Public Health, the Department of
22 Veterans' Affairs, the Department of Human Services, the
23 Department of Insurance, the Department of Commerce and
24 Economic Opportunity, the Department on Aging, the
25 Department on Aging's State Long Term Care Ombudsman, the
26 Illinois Housing Finance Authority, and the Illinois
27 Housing Development Authority, each of whom shall be
28 selected by his or her respective director and shall be an
29 ex officio and nonvoting member.

30 (4) Thirty-two members appointed by the Director of
31 Aging in collaboration with the directors of Public Health
32 and Healthcare and Family Services ~~Public Aid~~, and selected
33 from the recommendations of statewide associations and
34 organizations, as follows:

35 (A) One member representing the Area Agencies on

1 Aging;

2 (B) Four members representing nursing homes or
3 licensed assisted living establishments;

4 (C) One member representing home health agencies;

5 (D) One member representing case management
6 services;

7 (E) One member representing statewide senior
8 center associations;

9 (F) One member representing Community Care Program
10 homemaker services;

11 (G) One member representing Community Care Program
12 adult day services;

13 (H) One member representing nutrition project
14 directors;

15 (I) One member representing hospice programs;

16 (J) One member representing individuals with
17 Alzheimer's disease and related dementias;

18 (K) Two members representing statewide trade or
19 labor unions;

20 (L) One advanced practice nurse with experience in
21 gerontological nursing;

22 (M) One physician specializing in gerontology;

23 (N) One member representing regional long-term
24 care ombudsmen;

25 (O) One member representing township officials;

26 (P) One member representing municipalities;

27 (Q) One member representing county officials;

28 (R) One member representing the parish nurse
29 movement;

30 (S) One member representing pharmacists;

31 (T) Two members representing statewide
32 organizations engaging in advocacy or legal
33 representation on behalf of the senior population;

34 (U) Two family caregivers;

35 (V) Two citizen members over the age of 60;

36 (W) One citizen with knowledge in the area of

1 gerontology research or health care law;

2 (X) One representative of health care facilities
3 licensed under the Hospital Licensing Act; and

4 (Y) One representative of primary care service
5 providers.

6 The Director of Aging, in collaboration with the Directors
7 of Public Health and Healthcare and Family Services ~~Public Aid~~,
8 may appoint additional citizen members to the Older Adult
9 Services Advisory Committee. Each such additional member must
10 be either an individual age 60 or older or an uncompensated
11 caregiver for a family member or friend who is age 60 or older.

12 (c) Voting members of the Advisory Committee shall serve
13 for a term of 3 years or until a replacement is named. All
14 members shall be appointed no later than January 1, 2005. Of
15 the initial appointees, as determined by lot, 10 members shall
16 serve a term of one year; 10 shall serve for a term of 2 years;
17 and 12 shall serve for a term of 3 years. Any member appointed
18 to fill a vacancy occurring prior to the expiration of the term
19 for which his or her predecessor was appointed shall be
20 appointed for the remainder of that term. The Advisory
21 Committee shall meet at least quarterly and may meet more
22 frequently at the call of the Chair. A simple majority of those
23 appointed shall constitute a quorum. The affirmative vote of a
24 majority of those present and voting shall be necessary for
25 Advisory Committee action. Members of the Advisory Committee
26 shall receive no compensation for their services.

27 (d) The Advisory Committee shall have an Executive
28 Committee comprised of the Chair, the Vice Chairs, and up to 15
29 members of the Advisory Committee appointed by the Chair who
30 have demonstrated expertise in developing, implementing, or
31 coordinating the system restructuring initiatives defined in
32 Section 25. The Executive Committee shall have responsibility
33 to oversee and structure the operations of the Advisory
34 Committee and to create and appoint necessary subcommittees and
35 subcommittee members.

36 (e) The Advisory Committee shall study and make

1 recommendations related to the implementation of this Act,
2 including but not limited to system restructuring initiatives
3 as defined in Section 25 or otherwise related to this Act.

4 (Source: P.A. 93-1031, eff. 8-27-04; 94-31, eff. 6-14-05.)

5 Section 9435. The Senior Pharmaceutical Assistance Act is
6 amended by changing Section 15 as follows:

7 (320 ILCS 50/15)

8 Sec. 15. Senior Pharmaceutical Assistance Review
9 Committee.

10 (a) The Senior Pharmaceutical Assistance Review Committee
11 is created. The Committee shall consist of 17 members as
12 follows:

13 (1) Twelve members appointed as follows: 2 members of
14 the General Assembly and 1 member of the general public,
15 appointed by the President of the Senate; 2 members of the
16 General Assembly and 1 member of the general public,
17 appointed by the Minority Leader of the Senate; 2 members
18 of the General Assembly and 1 member of the general public,
19 appointed by the Speaker of the House of Representatives;
20 and 2 members of the General Assembly and 1 member of the
21 general public, appointed by the Minority Leader of the
22 House of Representatives. These members shall serve at the
23 pleasure of the appointing authority.

24 (2) The Director of Aging or his or her designee.

25 (3) The Director of Revenue or his or her designee.

26 (4) The Director of Healthcare and Family Services
27 ~~Public Aid~~ or his or her designee.

28 (5) The Secretary of Human Services or his or her
29 designee.

30 (6) The Director of Public Health or his or her
31 designee.

32 (b) Members appointed from the general public shall
33 represent the following associations, organizations, and
34 interests: statewide membership-based senior advocacy

1 organizations, pharmaceutical manufacturers, pharmacists,
2 dispensing pharmacies, physicians, and providers of services
3 to senior citizens. No single organization may have more than
4 one representative appointed as a member from the general
5 public.

6 (c) The President of the Senate and Speaker of the House of
7 Representatives shall each designate one member of the
8 Committee to serve as co-chairs.

9 (d) Committee members shall serve without compensation or
10 reimbursement for expenses.

11 (e) The Committee shall meet at the call of the co-chairs,
12 but at least quarterly.

13 (f) The Committee may conduct public hearings to gather
14 testimony from interested parties regarding pharmaceutical
15 assistance for Illinois seniors, including changes to existing
16 and proposed programs.

17 (g) The Committee may advise appropriate State agencies
18 regarding the establishment of proposed programs or changes to
19 existing programs. The State agencies shall take into
20 consideration any recommendations made by the Committee.

21 (h) The Committee shall report to the General Assembly and
22 the Governor annually or as it deems necessary regarding
23 proposed or recommended changes to pharmaceutical assistance
24 programs that benefit Illinois seniors and any associated costs
25 of those changes.

26 (i) In the event that a prescription drug benefit is added
27 to the federal Medicare program, the Committee shall make
28 recommendations for the realignment of State-operated senior
29 prescription drug programs so that Illinois residents qualify
30 for at least substantially the same level of benefits available
31 to them prior to implementation of the Medicare prescription
32 drug benefit, provided that a resident remains eligible for
33 such a State-operated program. The Committee shall report its
34 recommendations to the General Assembly and the Governor by
35 January 1, 2005.

36 (Source: P.A. 92-594, eff. 6-27-02; 93-843, eff. 7-30-04.)

1 Section 9440. The Family Caregiver Act is amended by
2 changing Section 16 as follows:

3 (320 ILCS 65/16)

4 Sec. 16. Family caregiver demonstration grant. The
5 Department shall seek federal funding for the establishment and
6 assessment of a Family Caregiver Training and Support
7 Demonstration Project. The Department is authorized to fund 2
8 sites, one in a rural community and one in a more urban area.
9 The Department shall adopt rules governing participation and
10 oversight of the program. The Department shall seek technical
11 assistance from the Department of Public Aid (now Healthcare
12 and Family Services) and the Department of Human Services. The
13 Department shall advise the Governor and the General Assembly
14 regarding the effectiveness of the program within 6 months
15 after the conclusion of the demonstration period.

16 (Source: P.A. 93-864, eff. 8-5-04.)

17 Section 9445. The Abandoned Newborn Infant Protection Act
18 is amended by changing Section 45 as follows:

19 (325 ILCS 2/45)

20 Sec. 45. Medical assistance. Notwithstanding any other
21 provision of law, a newborn infant relinquished in accordance
22 with this Act shall be deemed eligible for medical assistance
23 under the Illinois Public Aid Code, and a hospital providing
24 medical services to such an infant shall be reimbursed for
25 those services in accordance with the payment methodologies
26 authorized under that Code. In addition, for any day that a
27 hospital has custody of a newborn infant relinquished in
28 accordance with this Act and the infant does not require
29 medically necessary care, the hospital shall be reimbursed by
30 the ~~Illinois~~ Department of Healthcare and Family Services
31 ~~Public Aid~~ at the general acute care per diem rate, in
32 accordance with 89 Ill. Adm. Code 148.270(c).

1 (Source: P.A. 92-408, eff. 8-17-01; 92-432, eff. 8-17-01.)

2 Section 9450. The Abused and Neglected Child Reporting Act
3 is amended by changing Sections 4 and 7.20 as follows:

4 (325 ILCS 5/4) (from Ch. 23, par. 2054)

5 Sec. 4. Persons required to report; privileged
6 communications; transmitting false report. Any physician,
7 resident, intern, hospital, hospital administrator and
8 personnel engaged in examination, care and treatment of
9 persons, surgeon, dentist, dentist hygienist, osteopath,
10 chiropractor, podiatrist, physician assistant, substance abuse
11 treatment personnel, funeral home director or employee,
12 coroner, medical examiner, emergency medical technician,
13 acupuncturist, crisis line or hotline personnel, school
14 personnel, educational advocate assigned to a child pursuant to
15 the School Code, truant officers, social worker, social
16 services administrator, domestic violence program personnel,
17 registered nurse, licensed practical nurse, genetic counselor,
18 respiratory care practitioner, advanced practice nurse, home
19 health aide, director or staff assistant of a nursery school or
20 a child day care center, recreational program or facility
21 personnel, law enforcement officer, licensed professional
22 counselor, licensed clinical professional counselor,
23 registered psychologist and assistants working under the
24 direct supervision of a psychologist, psychiatrist, or field
25 personnel of the ~~Illinois~~ Department of Healthcare and Family
26 Services ~~Public Aid~~, Public Health, Human Services (acting as
27 successor to the Department of Mental Health and Developmental
28 Disabilities, Rehabilitation Services, or Public Aid),
29 Corrections, Human Rights, or Children and Family Services,
30 supervisor and administrator of general assistance under the
31 Illinois Public Aid Code, probation officer, or any other
32 foster parent, homemaker or child care worker having reasonable
33 cause to believe a child known to them in their professional or
34 official capacity may be an abused child or a neglected child

1 shall immediately report or cause a report to be made to the
2 Department.

3 Any member of the clergy having reasonable cause to believe
4 that a child known to that member of the clergy in his or her
5 professional capacity may be an abused child as defined in item
6 (c) of the definition of "abused child" in Section 3 of this
7 Act shall immediately report or cause a report to be made to
8 the Department.

9 Whenever such person is required to report under this Act
10 in his capacity as a member of the staff of a medical or other
11 public or private institution, school, facility or agency, or
12 as a member of the clergy, he shall make report immediately to
13 the Department in accordance with the provisions of this Act
14 and may also notify the person in charge of such institution,
15 school, facility or agency, or church, synagogue, temple,
16 mosque, or other religious institution, or his designated agent
17 that such report has been made. Under no circumstances shall
18 any person in charge of such institution, school, facility or
19 agency, or church, synagogue, temple, mosque, or other
20 religious institution, or his designated agent to whom such
21 notification has been made, exercise any control, restraint,
22 modification or other change in the report or the forwarding of
23 such report to the Department.

24 The privileged quality of communication between any
25 professional person required to report and his patient or
26 client shall not apply to situations involving abused or
27 neglected children and shall not constitute grounds for failure
28 to report as required by this Act.

29 A member of the clergy may claim the privilege under
30 Section 8-803 of the Code of Civil Procedure.

31 In addition to the above persons required to report
32 suspected cases of abused or neglected children, any other
33 person may make a report if such person has reasonable cause to
34 believe a child may be an abused child or a neglected child.

35 Any person who enters into employment on and after July 1,
36 1986 and is mandated by virtue of that employment to report

1 under this Act, shall sign a statement on a form prescribed by
2 the Department, to the effect that the employee has knowledge
3 and understanding of the reporting requirements of this Act.
4 The statement shall be signed prior to commencement of the
5 employment. The signed statement shall be retained by the
6 employer. The cost of printing, distribution, and filing of the
7 statement shall be borne by the employer.

8 The Department shall provide copies of this Act, upon
9 request, to all employers employing persons who shall be
10 required under the provisions of this Section to report under
11 this Act.

12 Any person who knowingly transmits a false report to the
13 Department commits the offense of disorderly conduct under
14 subsection (a)(7) of Section 26-1 of the "Criminal Code of
15 1961". Any person who violates this provision a second or
16 subsequent time shall be guilty of a Class 3 felony.

17 Any person who knowingly and willfully violates any
18 provision of this Section other than a second or subsequent
19 violation of transmitting a false report as described in the
20 preceding paragraph, is guilty of a Class A misdemeanor for a
21 first violation and a Class 4 felony for a second or subsequent
22 violation; except that if the person acted as part of a plan or
23 scheme having as its object the prevention of discovery of an
24 abused or neglected child by lawful authorities for the purpose
25 of protecting or insulating any person or entity from arrest or
26 prosecution, the person is guilty of a Class 4 felony for a
27 first offense and a Class 3 felony for a second or subsequent
28 offense (regardless of whether the second or subsequent offense
29 involves any of the same facts or persons as the first or other
30 prior offense).

31 A child whose parent, guardian or custodian in good faith
32 selects and depends upon spiritual means through prayer alone
33 for the treatment or cure of disease or remedial care may be
34 considered neglected or abused, but not for the sole reason
35 that his parent, guardian or custodian accepts and practices
36 such beliefs.

1 A child shall not be considered neglected or abused solely
2 because the child is not attending school in accordance with
3 the requirements of Article 26 of the School Code, as amended.

4 (Source: P.A. 92-16, eff. 6-28-01; 92-801, eff. 8-16-02;
5 93-137, eff. 7-10-03; 93-356, eff. 7-24-03; 93-431, eff.
6 8-5-03; 93-1041, eff. 9-29-04.)

7 (325 ILCS 5/7.20)

8 Sec. 7.20. Inter-agency agreements for information. The
9 Department shall enter into an inter-agency agreement with the
10 Secretary of State to establish a procedure by which employees
11 of the Department may have immediate access to driver's license
12 records maintained by the Secretary of State if the Department
13 determines the information is necessary to perform its duties
14 under the Abused and Neglected Child Reporting Act, the Child
15 Care Act of 1969, and the Children and Family Services Act. The
16 Department shall enter into an inter-agency agreement with the
17 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
18 ~~Aid~~ and the Department of Human Services (acting as successor
19 to the Department of Public Aid under the Department of Human
20 Services Act) to establish a procedure by which employees of
21 the Department may have immediate access to records, files,
22 papers, and communications (except medical, alcohol or drug
23 assessment or treatment, mental health, or any other medical
24 records) of the ~~Illinois~~ Department of Healthcare and Family
25 Services ~~Public Aid~~, county departments of public aid, the
26 Department of Human Services, and local governmental units
27 receiving State or federal funds or aid to provide public aid,
28 if the Department determines the information is necessary to
29 perform its duties under the Abused and Neglected Child
30 Reporting Act, the Child Care Act of 1969, and the Children and
31 Family Services Act.

32 (Source: P.A. 88-614, eff. 9-7-94; 89-507, eff. 7-1-97.)

33 Section 9455. The Early Intervention Services System Act is
34 amended by changing Sections 4, 5, and 13.5 as follows:

1 (325 ILCS 20/4) (from Ch. 23, par. 4154)

2 Sec. 4. Illinois Interagency Council on Early
3 Intervention.

4 (a) There is established the Illinois Interagency Council
5 on Early Intervention. The Council shall be composed of at
6 least 15 but not more than 25 members. The members of the
7 Council and the designated chairperson of the Council shall be
8 appointed by the Governor. The Council member representing the
9 lead agency may not serve as chairperson of the Council. The
10 Council shall be composed of the following members:

11 (1) The Secretary of Human Services (or his or her
12 designee) and 2 additional representatives of the
13 Department of Human Services designated by the Secretary,
14 plus the Directors (or their designees) of the following
15 State agencies involved in the provision of or payment for
16 early intervention services to eligible infants and
17 toddlers and their families:

18 (A) Illinois State Board of Education;

19 (B) (Blank);

20 (C) (Blank);

21 (D) Illinois Department of Children and Family
22 Services;

23 (E) University of Illinois Division of Specialized
24 Care for Children;

25 (F) Illinois Department of Healthcare and Family
26 Services ~~Public Aid~~;

27 (G) Illinois Department of Public Health;

28 (H) (Blank);

29 (I) Illinois Planning Council on Developmental
30 Disabilities; and

31 (J) Illinois Department of Insurance.

32 (2) Other members as follows:

33 (A) At least 20% of the members of the Council
34 shall be parents, including minority parents, of
35 infants or toddlers with disabilities or children with

1 disabilities aged 12 or younger, with knowledge of, or
2 experience with, programs for infants and toddlers
3 with disabilities. At least one such member shall be a
4 parent of an infant or toddler with a disability or a
5 child with a disability aged 6 or younger;

6 (B) At least 20% of the members of the Council
7 shall be public or private providers of early
8 intervention services;

9 (C) One member shall be a representative of the
10 General Assembly; and

11 (D) One member shall be involved in the preparation
12 of professional personnel to serve infants and
13 toddlers similar to those eligible for services under
14 this Act.

15 The Council shall meet at least quarterly and in such
16 places as it deems necessary. Terms of the initial members
17 appointed under paragraph (2) shall be determined by lot at the
18 first Council meeting as follows: of the persons appointed
19 under subparagraphs (A) and (B), one-third shall serve one year
20 terms, one-third shall serve 2 year terms, and one-third shall
21 serve 3 year terms; and of the persons appointed under
22 subparagraphs (C) and (D), one shall serve a 2 year term and
23 one shall serve a 3 year term. Thereafter, successors appointed
24 under paragraph (2) shall serve 3 year terms. Once appointed,
25 members shall continue to serve until their successors are
26 appointed. No member shall be appointed to serve more than 2
27 consecutive terms.

28 Council members shall serve without compensation but shall
29 be reimbursed for reasonable costs incurred in the performance
30 of their duties, including costs related to child care, and
31 parents may be paid a stipend in accordance with applicable
32 requirements.

33 The Council shall prepare and approve a budget using funds
34 appropriated for the purpose to hire staff, and obtain the
35 services of such professional, technical, and clerical
36 personnel as may be necessary to carry out its functions under

1 this Act. This funding support and staff shall be directed by
2 the lead agency.

3 (b) The Council shall:

4 (1) advise and assist the lead agency in the
5 performance of its responsibilities including but not
6 limited to the identification of sources of fiscal and
7 other support services for early intervention programs,
8 and the promotion of interagency agreements which assign
9 financial responsibility to the appropriate agencies;

10 (2) advise and assist the lead agency in the
11 preparation of applications and amendments to
12 applications;

13 (3) review and advise on relevant regulations and
14 standards proposed by the related State agencies;

15 (4) advise and assist the lead agency in the
16 development, implementation and evaluation of the
17 comprehensive early intervention services system; and

18 (5) prepare and submit an annual report to the Governor
19 and to the General Assembly on the status of early
20 intervention programs for eligible infants and toddlers
21 and their families in Illinois. The annual report shall
22 include (i) the estimated number of eligible infants and
23 toddlers in this State, (ii) the number of eligible infants
24 and toddlers who have received services under this Act and
25 the cost of providing those services, (iii) the estimated
26 cost of providing services under this Act to all eligible
27 infants and toddlers in this State, and (iv) data and other
28 information as is requested to be included by the
29 Legislative Advisory Committee established under Section
30 13.50 of this Act. The report shall be posted by the lead
31 agency on the early intervention website as required under
32 paragraph (f) of Section 5 of this Act.

33 No member of the Council shall cast a vote on or
34 participate substantially in any matter which would provide a
35 direct financial benefit to that member or otherwise give the
36 appearance of a conflict of interest under State law. All

1 provisions and reporting requirements of the Illinois
2 Governmental Ethics Act shall apply to Council members.

3 (Source: P.A. 91-357; eff. 7-29-99; 92-307, eff. 8-9-01.)

4 (325 ILCS 20/5) (from Ch. 23, par. 4155)

5 Sec. 5. Lead Agency. The Department of Human Services is
6 designated the lead agency and shall provide leadership in
7 establishing and implementing the coordinated, comprehensive,
8 interagency and interdisciplinary system of early intervention
9 services. The lead agency shall not have the sole
10 responsibility for providing these services. Each
11 participating State agency shall continue to coordinate those
12 early intervention services relating to health, social service
13 and education provided under this authority.

14 The lead agency is responsible for carrying out the
15 following:

16 (a) The general administration, supervision, and
17 monitoring of programs and activities receiving assistance
18 under Section 673 of the Individuals with Disabilities
19 Education Act (20 United States Code 1473).

20 (b) The identification and coordination of all
21 available resources within the State from federal, State,
22 local and private sources.

23 (c) The development of procedures to ensure that
24 services are provided to eligible infants and toddlers and
25 their families in a timely manner pending the resolution of
26 any disputes among public agencies or service providers.

27 (d) The resolution of intra-agency and interagency
28 regulatory and procedural disputes.

29 (e) The development and implementation of formal
30 interagency agreements, and the entry into such
31 agreements, between the lead agency and (i) the Department
32 of Healthcare and Family Services ~~Public Aid~~, (ii) the
33 University of Illinois Division of Specialized Care for
34 Children, and (iii) other relevant State agencies that:

35 (1) define the financial responsibility of each

1 agency for paying for early intervention services
2 (consistent with existing State and federal law and
3 rules, including the requirement that early
4 intervention funds be used as the payor of last
5 resort), a hierarchical order of payment as among the
6 agencies for early intervention services that are
7 covered under or may be paid by programs in other
8 agencies, and procedures for direct billing,
9 collecting reimbursements for payments made, and
10 resolving service and payment disputes; and

11 (2) include all additional components necessary to
12 ensure meaningful cooperation and coordination.

13 Interagency agreements under this paragraph (e) must
14 be reviewed and revised to implement the purposes of this
15 amendatory Act of the 92nd General Assembly no later than
16 60 days after the effective date of this amendatory Act of
17 the 92nd General Assembly.

18 (f) The maintenance of an early intervention website.
19 Within 30 days after the effective date of this amendatory
20 Act of the 92nd General Assembly, the lead agency shall
21 post and keep posted on this website the following: (i) the
22 current annual report required under subdivision (b) (5) of
23 Section 4 of this Act, and the annual reports of the prior
24 3 years, (ii) the most recent Illinois application for
25 funds prepared under Section 637 of the Individuals with
26 Disabilities Education Act filed with the United States
27 Department of Education, (iii) proposed modifications of
28 the application prepared for public comment, (iv) notice of
29 Council meetings, Council agendas, and minutes of its
30 proceedings for at least the previous year, (v) proposed
31 and final early intervention rules, (vi) requests for
32 proposals, and (vii) all reports created for dissemination
33 to the public that are related to the early intervention
34 program, including reports prepared at the request of the
35 Council, the General Assembly, and the Legislative
36 Advisory Committee established under Section 13.50 of this

1 Act. Each such document shall be posted on the website
2 within 3 working days after the document's completion.

3 (Source: P.A. 92-307, eff. 8-9-01.)

4 (325 ILCS 20/13.5)

5 Sec. 13.5. Other programs.

6 (a) When an application or a review of eligibility for
7 early intervention services is made, and at any eligibility
8 redetermination thereafter, the family shall be asked if it is
9 currently enrolled in Medicaid, KidCare, or the Title V program
10 administered by the University of Illinois Division of
11 Specialized Care for Children. If the family is enrolled in any
12 of these programs, that information shall be put on the
13 individualized family service plan and entered into the
14 computerized case management system, and shall require that the
15 individualized family services plan of a child who has been
16 found eligible for services through the Division of Specialized
17 Care for Children state that the child is enrolled in that
18 program. For those programs in which the family is not
19 enrolled, a preliminary eligibility screen shall be conducted
20 simultaneously for (i) medical assistance (Medicaid) under
21 Article V of the Illinois Public Aid Code, (ii) children's
22 health insurance program (KidCare) benefits under the
23 Children's Health Insurance Program Act, and (iii) Title V
24 maternal and child health services provided through the
25 Division of Specialized Care for Children of the University of
26 Illinois.

27 (b) For purposes of determining family fees under
28 subsection (f) of Section 13 and determining eligibility for
29 the other programs and services specified in items (i) through
30 (iii) of subsection (a), the lead agency shall develop and use,
31 within 60 days after the effective date of this amendatory Act
32 of the 92nd General Assembly, with the cooperation of the
33 Department of Public Aid (now Healthcare and Family Services)
34 and the Division of Specialized Care for Children of the
35 University of Illinois, a screening device that provides

1 sufficient information for the early intervention regional
2 intake entities or other agencies to establish eligibility for
3 those other programs and shall, in cooperation with the
4 Illinois Department of Public Aid (now Healthcare and Family
5 Services) and the Division of Specialized Care for Children,
6 train the regional intake entities on using the screening
7 device.

8 (c) When a child is determined eligible for and enrolled in
9 the early intervention program and has been found to at least
10 meet the threshold income eligibility requirements for
11 Medicaid or KidCare, the regional intake entity shall complete
12 a KidCare/Medicaid application with the family and forward it
13 to the ~~Illinois~~ Department of Healthcare and Family Services'
14 ~~Public Aid's~~ KidCare Unit for a determination of eligibility.

15 (d) With the cooperation of the Department of Healthcare
16 and Family Services ~~Public Aid~~, the lead agency shall establish
17 procedures that ensure the timely and maximum allowable
18 recovery of payments for all early intervention services and
19 allowable administrative costs under Article V of the Illinois
20 Public Aid Code and the Children's Health Insurance Program Act
21 and shall include those procedures in the interagency agreement
22 required under subsection (e) of Section 5 of this Act.

23 (e) For purposes of making referrals for final
24 determinations of eligibility for KidCare benefits under the
25 Children's Health Insurance Program Act and for medical
26 assistance under Article V of the Illinois Public Aid Code, the
27 lead agency shall require each early intervention regional
28 intake entity to enroll as a "KidCare agent" in order for the
29 entity to complete the KidCare application as authorized under
30 Section 22 of the Children's Health Insurance Program Act.

31 (f) For purposes of early intervention services that may be
32 provided by the Division of Specialized Care for Children of
33 the University of Illinois (DSCC), the lead agency shall
34 establish procedures whereby the early intervention regional
35 intake entities may determine whether children enrolled in the
36 early intervention program may also be eligible for those

1 services, and shall develop, within 60 days after the effective
2 date of this amendatory Act of the 92nd General Assembly, (i)
3 the inter-agency agreement required under subsection (e) of
4 Section 5 of this Act, establishing that early intervention
5 funds are to be used as the payor of last resort when services
6 required under an individualized family services plan may be
7 provided to an eligible child through the DSCC, and (ii)
8 training guidelines for the regional intake entities and
9 providers that explain eligibility and billing procedures for
10 services through DSCC.

11 (g) The lead agency shall require that an individual
12 applying for or renewing enrollment as a provider of services
13 in the early intervention program state whether or not he or
14 she is also enrolled as a DSCC provider. This information shall
15 be noted next to the name of the provider on the computerized
16 roster of Illinois early intervention providers, and regional
17 intake entities shall make every effort to refer families
18 eligible for DSCC services to these providers.

19 (Source: P.A. 92-307, eff. 8-9-01.)

20 Section 9460. The Interagency Board for Children who are
21 Deaf or Hard-of-Hearing and have an Emotional or Behavioral
22 Disorder Act is amended by changing Section 4 as follows:

23 (325 ILCS 35/4) (from Ch. 23, par. 6704)

24 Sec. 4. Appointment. The Board shall consist of 12 members,
25 one of whom shall be appointed by the Governor. The State
26 Superintendent of Education shall appoint 2 members, one of
27 whom shall be a parent of a child who is deaf or
28 hard-of-hearing and has an emotional or behavioral disorder,
29 and one of whom shall be an employee of the agency. The
30 Director of Children and Family Services shall appoint 2
31 members, one of whom shall be a parent, foster parent, or legal
32 guardian of a child who is deaf or hard-of-hearing and has an
33 emotional or behavioral disorder, and one of whom shall be an
34 employee of the agency. The Secretary of Human Services shall

1 appoint 4 members, 2 of whom shall be parents of children who
2 are deaf or hard of hearing and have an emotional or behavioral
3 disorder, and 2 of whom shall be employees of the agency.

4 The Director of Healthcare and Family Services ~~Public Aid~~
5 shall appoint one member who shall be an employee of the
6 agency. The Community and Residential Services Authority for
7 Behavior Disturbed and Severe Emotionally Disturbed Students
8 shall appoint one member who shall be an employee of the
9 Authority, and the Director of the Division of Specialized Care
10 for Children shall appoint one member who shall be an employee
11 of that agency.

12 Each appointing authority shall give preference to any
13 qualified deaf employee when making appointments to the Board.
14 (Source: P.A. 89-507, eff. 7-1-97; 89-680, eff. 1-1-97; 90-14,
15 eff. 7-1-97.)

16 Section 9465. The Mental Health and Developmental
17 Disabilities Code is amended by changing Sections 5-107 and
18 5-107.1 as follows:

19 (405 ILCS 5/5-107) (from Ch. 91 1/2, par. 5-107)

20 Sec. 5-107. Remittances from intermediary agencies under
21 Title XVIII of the Federal Social Security Act for services to
22 persons in State facilities shall be deposited with the State
23 Treasurer and placed in the Mental Health Fund. Payments
24 received from the Department of Healthcare and Family Services
25 ~~Public Aid~~ under Title XIX of the Federal Social Security Act
26 for services to persons in State facilities shall be deposited
27 with the State Treasurer and shall be placed in the General
28 Revenue Fund.

29 The Auditor General shall audit or cause to be audited all
30 amounts collected by the Department.

31 (Source: P.A. 80-1414.)

32 (405 ILCS 5/5-107.1) (from Ch. 91 1/2, par. 5-107.1)

33 Sec. 5-107.1. Remittances from or on behalf of licensed

1 long-term care facilities through Department of Healthcare and
2 Family Services ~~Public Aid~~ reimbursement and monies from other
3 funds for Day Training Programs for clients with a
4 developmental disability shall be deposited with the State
5 Treasurer and placed in the Mental Health Fund.

6 The Auditor General shall audit or cause to be audited all
7 amounts collected by the Department.

8 (Source: P.A. 88-380.)

9 Section 9470. The Children's Mental Health Act of 2003 is
10 amended by changing Section 5 as follows:

11 (405 ILCS 49/5)

12 Sec. 5. Children's Mental Health Plan.

13 (a) The State of Illinois shall develop a Children's Mental
14 Health Plan containing short-term and long-term
15 recommendations to provide comprehensive, coordinated mental
16 health prevention, early intervention, and treatment services
17 for children from birth through age 18. This Plan shall include
18 but not be limited to:

19 (1) Coordinated provider services and interagency
20 referral networks for children from birth through age 18 to
21 maximize resources and minimize duplication of services.

22 (2) Guidelines for incorporating social and emotional
23 development into school learning standards and educational
24 programs, pursuant to Section 15 of this Act.

25 (3) Protocols for implementing screening and
26 assessment of children prior to any admission to an
27 inpatient hospital for psychiatric services, pursuant to
28 subsection (a) of Section 5-5.23 of the Illinois Public Aid
29 Code.

30 (4) Recommendations regarding a State budget for
31 children's mental health prevention, early intervention,
32 and treatment across all State agencies.

33 (5) Recommendations for State and local mechanisms for
34 integrating federal, State, and local funding sources for

1 children's mental health.

2 (6) Recommendations for building a qualified and
3 adequately trained workforce prepared to provide mental
4 health services for children from birth through age 18 and
5 their families.

6 (7) Recommendations for facilitating research on best
7 practices and model programs, and dissemination of this
8 information to Illinois policymakers, practitioners, and
9 the general public through training, technical assistance,
10 and educational materials.

11 (8) Recommendations for a comprehensive, multi-faceted
12 public awareness campaign to reduce the stigma of mental
13 illness and educate families, the general public, and other
14 key audiences about the benefits of children's social and
15 emotional development, and how to access services.

16 (9) Recommendations for creating a quality-driven
17 children's mental health system with shared accountability
18 among key State agencies and programs that conducts ongoing
19 needs assessments, uses outcome indicators and benchmarks
20 to measure progress, and implements quality data tracking
21 and reporting systems.

22 (b) The Children's Mental Health Partnership (hereafter
23 referred to as "the Partnership") is created. The Partnership
24 shall have the responsibility of developing and monitoring the
25 implementation of the Children's Mental Health Plan as approved
26 by the Governor. The Children's Mental Health Partnership shall
27 be comprised of: the Secretary of Human Services or his or her
28 designee; the State Superintendent of Education or his or her
29 designee; the directors of the departments of Children and
30 Family Services, Healthcare and Family Services ~~Public Aid~~,
31 Public Health, and Corrections, or their designees; the head of
32 the Illinois Violence Prevention Authority, or his or her
33 designee; the Attorney General or his or her designee; up to 25
34 representatives of community mental health authorities and
35 statewide mental health, children and family advocacy, early
36 childhood, education, health, substance abuse, violence

1 prevention, and juvenile justice organizations or
2 associations, to be appointed by the Governor; and 2 members of
3 each caucus of the House of Representatives and Senate
4 appointed by the Speaker of the House of Representatives and
5 the President of the Senate, respectively. The Governor shall
6 appoint the Partnership Chair and shall designate a Governor's
7 staff liaison to work with the Partnership.

8 (c) The Partnership shall submit a Preliminary Plan to the
9 Governor on September 30, 2004 and shall submit the Final Plan
10 on June 30, 2005. Thereafter, on September 30 of each year, the
11 Partnership shall submit an annual report to the Governor on
12 the progress of Plan implementation and recommendations for
13 revisions in the Plan. The Final Plan and annual reports
14 submitted in subsequent years shall include estimates of
15 savings achieved in prior fiscal years under subsection (a) of
16 Section 5-5.23 of the Illinois Public Aid Code and federal
17 financial participation received under subsection (b) of
18 Section 5-5.23 of that Code. The Department of Healthcare and
19 Family Services ~~Public Aid~~ shall provide technical assistance
20 in developing these estimates and reports.

21 (Source: P.A. 93-495, eff. 8-8-03.)

22 Section 9475. The Sexual Assault Survivors Emergency
23 Treatment Act is amended by changing Sections 6 and 7 as
24 follows:

25 (410 ILCS 70/6) (from Ch. 111 1/2, par. 87-6)

26 Sec. 6. Powers and duties of Departments of Public Health
27 and Healthcare and Family Services ~~Public Aid~~.

28 (a) The Department of Public Health shall have the duties
29 and responsibilities required by Sections 2, 6.1, 6.2, and 6.4.

30 (b) The Department of Healthcare and Family Services ~~Public~~
31 ~~Aid~~ shall have the duties and responsibilities required by
32 Sections 6.3 and 7.

33 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

1 (410 ILCS 70/7) (from Ch. 111 1/2, par. 87-7)

2 Sec. 7. Hospital charges and reimbursement. When any
3 hospital or ambulance provider furnishes emergency services to
4 any alleged sexual assault survivor, as defined by the
5 Department of Healthcare and Family Services ~~Public Aid~~
6 pursuant to Section 6.3 of this Act, who is neither eligible to
7 receive such services under the Illinois Public Aid Code nor
8 covered as to such services by a policy of insurance, the
9 hospital and ambulance provider shall furnish such services to
10 that person without charge and shall be entitled to be
11 reimbursed for its billed charges in providing such services by
12 the Department of Healthcare and Family Services ~~Public Aid~~.
13 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

14 Section 9480. The Alzheimer's Disease Assistance Act is
15 amended by changing Sections 6 and 7 as follows:

16 (410 ILCS 405/6) (from Ch. 111 1/2, par. 6956)

17 Sec. 6. ADA Advisory Committee. There is created the
18 Alzheimer's Disease Advisory Committee consisting of 21 voting
19 members appointed by the Director of the Department, as well as
20 5 nonvoting members as hereinafter provided in this Section.
21 The Director or his designee shall serve as one of the 21
22 voting members and as the Chairman of the Committee. Those
23 appointed as voting members shall include persons who are
24 experienced in research and the delivery of services to victims
25 and their families. Such members shall include 4 physicians
26 licensed to practice medicine in all of its branches, one
27 representative of a postsecondary educational institution
28 which administers or is affiliated with a medical center in the
29 State, one representative of a licensed hospital, one
30 registered nurse, one representative of a long term care
31 facility under the Nursing Home Care Act, one representative of
32 an area agency on aging as defined by Section 3.07 of the
33 Illinois Act on the Aging, one social worker, one
34 representative of an organization established under the

1 Illinois Insurance Code for the purpose of providing health
2 insurance, 5 family members or representatives of victims of
3 Alzheimer's disease and related disorders, and 4 members of the
4 general public. Among the physician appointments shall be
5 persons with specialties in the fields of neurology, family
6 medicine, psychiatry and pharmacology. Among the general
7 public members, at least 2 appointments shall include persons
8 65 years of age or older.

9 In addition to the 21 voting members, the Secretary of
10 Human Services (or his or her designee) and one additional
11 representative of the Department of Human Services designated
12 by the Secretary plus the Directors of the following State
13 agencies or their designees shall serve as nonvoting members:
14 Department on Aging, Department of Healthcare and Family
15 Services ~~Public Aid~~, and Guardianship and Advocacy Commission.

16 Each voting member appointed by the Director of Public
17 Health shall serve for a term of 2 years, and until his
18 successor is appointed and qualified. Members of the Committee
19 shall not be compensated but shall be reimbursed for expenses
20 actually incurred in the performance of their duties. No more
21 than 11 voting members may be of the same political party.
22 Vacancies shall be filled in the same manner as original
23 appointments.

24 The Committee shall review all State programs and services
25 provided by State agencies that are directed toward persons
26 with Alzheimer's disease and related dementias, and recommend
27 changes to improve the State's response to this serious health
28 problem.

29 (Source: P.A. 93-929, eff. 8-12-04.)

30 (410 ILCS 405/7) (from Ch. 111 1/2, par. 6957)

31 Sec. 7. Regional ADA center funding. Pursuant to
32 appropriations enacted by the General Assembly, the Department
33 shall provide funds to hospitals affiliated with each Regional
34 ADA Center for necessary research and for the development and
35 maintenance of services for victims of Alzheimer's disease and

1 related disorders and their families. For the fiscal year
2 beginning July 1, 2003, and each year thereafter, the
3 Department shall effect payments under this Section to
4 hospitals affiliated with each Regional ADA Center through the
5 Department of Healthcare and Family Services (formerly
6 Illinois Department of Public Aid) under the Excellence in
7 Alzheimer's Disease Center Treatment Act. The Department of
8 Healthcare and Family Services ~~Public Aid~~ shall annually report
9 to the Advisory Committee established under this Act regarding
10 the funding of centers under this Act. The Department shall
11 include the annual expenditures for this purpose in the plan
12 required by Section 5 of this Act.

13 (Source: P.A. 93-20, eff. 6-20-03; 93-929, eff. 8-12-04.)

14 Section 9485. The Excellence in Alzheimer's Disease Center
15 Treatment Act is amended by changing Sections 25, 30, 45, and
16 55 as follows:

17 (410 ILCS 407/25)

18 Sec. 25. The Alzheimer's Disease Center Clinical Fund.

19 (a) Each institution defined as a Qualified Academic
20 Medical Center Hospital - Pre 1996 Designation shall be
21 eligible for payments from the Alzheimer's Disease Center
22 Clinical Fund.

23 (b) Appropriations allocated to this Fund shall be divided
24 among the qualifying hospitals. The Department of Healthcare
25 and Family Services ~~Public Aid~~ shall calculate payment rates
26 for each hospital qualifying under this Section as follows:

27 (1) Hospitals that qualify under the Qualified
28 Academic Medical Center Hospital - Pre 1996 Designation
29 shall be paid a rate of \$55.50 for each Medicaid inpatient
30 day of care.

31 (2) No qualifying hospital shall receive payments
32 under this Section that exceed \$1,200,000.

33 (c) Payments under this Section shall be made at least
34 quarterly.

1 (Source: P.A. 93-929, eff. 8-12-04.)

2 (410 ILCS 407/30)

3 Sec. 30. The Alzheimer's Disease Center Expanded Clinical
4 Fund.

5 (a) Each institution defined as a Qualified Academic
6 Medical Center Hospital - Pre 1996 Designation or as a
7 Qualified Academic Medical Center Hospital - Post 1996
8 Designation shall be eligible for payments from the Alzheimer's
9 Disease Center Expanded Clinical Fund.

10 (b) Appropriations allocated to this Fund shall be divided
11 among the qualifying hospitals. The Department of Healthcare
12 and Family Services ~~Public Aid~~ shall calculate payment rates
13 for each hospital qualifying under this Section as follows:

14 (1) Hospitals that are defined as a Qualifying Academic
15 Medical Center Hospital - Pre 1996 Designation shall be
16 paid \$13.90 for each Medicaid inpatient day of care.

17 (2) Hospitals that are defined as a Qualifying Academic
18 Medical Center Hospital - Post 1996 Designation and do not
19 meet the Pre 1996 Designation criterion, shall be paid
20 \$10.75 for each Medicaid inpatient day of care.

21 (3) Hospitals that qualify under the Pre and Post 1996
22 Designation shall qualify for payments under this Section
23 according to the payment guidelines for Pre 1996 Designated
24 hospitals.

25 (4) No qualifying hospital shall receive payments
26 under this Section that exceed \$300,000.

27 (c) Payments under this Section shall be made at least
28 quarterly.

29 (Source: P.A. 93-929, eff. 8-12-04.)

30 (410 ILCS 407/45)

31 Sec. 45. Payment of funds. The Comptroller shall disburse
32 all funds appropriated to the Alzheimer's Disease Center
33 Clinical Fund, the Alzheimer's Disease Center Expanded
34 Clinical Fund, and the Alzheimer's Disease Center Independent

1 Clinical Fund to the appropriate Qualified Academic Medical
2 Center Hospitals (either Pre 1996 or Post 1996 Designation) as
3 the funds are appropriated by the General Assembly and come due
4 under this Act. The payment of these funds shall be made
5 through the Department of Healthcare and Family Services ~~Public~~
6 ~~Aid~~.

7 (Source: P.A. 93-929, eff. 8-12-04.)

8 (410 ILCS 407/55)

9 Sec. 55. Payment methodology. The Department of Healthcare
10 and Family Services ~~Public Aid~~ shall promulgate rules necessary
11 to make payments to the Qualifying Academic Medical Center
12 Hospitals (either Pre 1996 or Post 1996 Designation) utilizing
13 a reimbursement methodology consistent with this Act for
14 distribution of all moneys from the funds in a manner that
15 would help ensure these funds could be matchable to the maximum
16 extent possible under Title XIX of the Social Security Act.

17 (Source: P.A. 93-929, eff. 8-12-04.)

18 Section 9490. The Hemophilia Care Act is amended by
19 changing the title of the Act and Section 1 as follows:

20 (410 ILCS 420/Act title)

21 An Act establishing in the ~~Illinois~~ Department of
22 Healthcare and Family Services ~~Public Aid~~ a program for the
23 care of persons suffering from hemophilia, establishing a
24 Hemophilia Advisory Committee and designating powers and
25 duties in relation thereto.

26 (410 ILCS 420/1) (from Ch. 111 1/2, par. 2901)

27 Sec. 1. Definitions. As used in this Act, unless the
28 context clearly requires otherwise:

29 (1) "Department" means the ~~Illinois~~ Department of
30 Healthcare and Family Services ~~Public Aid~~.

31 (1.5) "Director" means the Director of Healthcare and
32 Family Services ~~Public Aid~~.

1 (2) (Blank).

2 (3) "Hemophilia" means a bleeding tendency resulting from a
3 genetically determined deficiency in the blood.

4 (4) "Committee" means the Hemophilia Advisory Committee
5 created under this Act.

6 (5) "Eligible person" means any resident of the State
7 suffering from hemophilia.

8 (6) "Family" means:

9 (a) In the case of a patient who is a dependent of
10 another person or couple as defined by the Illinois Income
11 Tax Act, all those persons for whom exemption is claimed in
12 the State income tax return of the person or couple whose
13 dependent the eligible person is, and

14 (b) In all other cases, all those persons for whom
15 exemption is claimed in the State income tax return of the
16 eligible person, or of the eligible person and his spouse.

17 (7) "Eligible cost of hemophilia services" means the cost
18 of blood transfusions, blood derivatives, and for outpatient
19 services, of physician charges, medical supplies, and
20 appliances, used in the treatment of eligible persons for
21 hemophilia, plus one half of the cost of hospital inpatient
22 care, minus any amount of such cost which is eligible for
23 payment or reimbursement by any hospital or medical insurance
24 program, by any other government medical or financial
25 assistance program, or by any charitable assistance program.

26 (8) "Gross income" means the base income for State income
27 tax purposes of all members of the family.

28 (9) "Available family income" means the lesser of:

29 (a) Gross income minus the sum of (1) \$5,500, and (2)
30 \$3,500 times the number of persons in the family, or

31 (b) One half of gross income.

32 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

33 Section 9495. The Renal Disease Treatment Act is amended by
34 changing the title of the Act and Sections 1, 2, 3, and 3.01 as
35 follows:

1 (410 ILCS 430/Act title)

2 An Act to establish in the Department of Healthcare and
3 Family Services ~~Public Aid~~ a program for the care of persons
4 suffering from chronic renal diseases, designating powers and
5 duties in relation thereto, and making an appropriation
6 therefor.

7 (410 ILCS 430/1) (from Ch. 111 1/2, par. 22.31)

8 Sec. 1. The Department of Healthcare and Family Services
9 ~~Public Aid~~ shall establish a program for the care and treatment
10 of persons suffering from chronic renal diseases. This program
11 shall assist persons suffering from chronic renal diseases who
12 require lifesaving care and treatment for such renal disease,
13 but who are unable to pay for such services on a continuing
14 basis.

15 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

16 (410 ILCS 430/2) (from Ch. 111 1/2, par. 22.32)

17 Sec. 2. The Director of Healthcare and Family Services
18 (formerly Director of Public Aid) shall appoint a Renal Disease
19 Advisory Committee to consult with the Department in the
20 administration of this Act. The Committee shall be composed of
21 15 persons representing hospitals and medical schools which
22 establish dialysis centers or kidney transplant programs,
23 voluntary agencies interested in kidney diseases, physicians
24 licensed to practice medicine in all of its branches, and the
25 general public. Each member shall hold office for a term of 4
26 years and until his successor is appointed and qualified,
27 except that the terms of the members appointed pursuant to
28 Public Act 78-538 shall expire as designated at the time of
29 appointment, 1 at the end of the first year, 1 at the end of the
30 second year, 1 at the end of the third year, and 1 at the end of
31 the fourth year, after the date of appointment. Any person
32 appointed to fill a vacancy occurring prior to the expiration
33 of the term for which his predecessor was appointed shall be

1 appointed for the remainder of such term. The Committee shall
2 meet as frequently as the Director of Healthcare and Family
3 Services ~~Public Aid~~ deems necessary, but not less than once
4 each year. The Committee members shall receive no compensation
5 but shall be reimbursed for actual expenses incurred in
6 carrying out their duties as members of this Committee.

7 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

8 (410 ILCS 430/3) (from Ch. 111 1/2, par. 22.33)

9 Sec. 3. Duties of Departments of Healthcare and Family
10 Services ~~Public Aid~~ and Public Health.

11 (A) The Department of Healthcare and Family Services ~~Public~~
12 ~~Aid~~ shall:

13 (a) With the advice of the Renal Disease Advisory
14 Committee, develop standards for determining eligibility
15 for care and treatment under this program. Among other
16 standards so developed under this paragraph, candidates,
17 to be eligible for care and treatment, must be evaluated in
18 a center properly staffed and equipped for such evaluation.

19 (b) (Blank).

20 (c) (Blank).

21 (d) Extend financial assistance to persons suffering
22 from chronic renal diseases in obtaining the medical,
23 surgical, nursing, pharmaceutical, and technical services
24 necessary in caring for such diseases, including the
25 renting of home dialysis equipment. The Renal Disease
26 Advisory Committee shall recommend to the Department the
27 extent of financial assistance, including the reasonable
28 charges and fees, for:

29 (1) Treatment in a dialysis facility;

30 (2) Hospital treatment for dialysis and transplant
31 surgery;

32 (3) Treatment in a limited care facility;

33 (4) Home dialysis training; and

34 (5) Home dialysis.

35 (e) Assist in equipping dialysis centers.

1 (B) The Department of Public Health shall:

2 (a) Assist in the development and expansion of programs
3 for the care and treatment of persons suffering from
4 chronic renal diseases, including dialysis and other
5 medical or surgical procedures and techniques that will
6 have a lifesaving effect in the care and treatment of
7 persons suffering from these diseases.

8 (b) Assist in the development of programs for the
9 prevention of chronic renal diseases.

10 (c) Institute and carry on an educational program among
11 physicians, hospitals, public health departments, and the
12 public concerning chronic renal diseases, including the
13 dissemination of information and the conducting of
14 educational programs concerning the prevention of chronic
15 renal diseases and the methods for the care and treatment
16 of persons suffering from these diseases.

17 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

18 (410 ILCS 430/3.01) (from Ch. 111 1/2, par. 22.33.01)

19 Sec. 3.01. The provisions of the Illinois Administrative
20 Procedure Act are hereby expressly adopted and shall apply to
21 all administrative rules and procedures of the Department of
22 Healthcare and Family Services ~~Public Aid~~ under this Act,
23 except that Section 5-35 of the Illinois Administrative
24 Procedure Act relating to procedures for rule-making does not
25 apply to the adoption of any rule required by federal law in
26 connection with which the Department is precluded by law from
27 exercising any discretion.

28 (Source: P.A. 89-507, eff. 7-1-97; 90-587, eff. 7-1-98.)

29 Section 9500. The Genetic Information Privacy Act is
30 amended by changing Section 22 as follows:

31 (410 ILCS 513/22)

32 Sec. 22. Tests to determine inherited characteristics in
33 paternity proceedings. Nothing in this Act shall be construed

1 to affect or restrict in any way the ordering of or use of
2 results from deoxyribonucleic acid (DNA) testing or other tests
3 to determine inherited characteristics by the court in a
4 judicial proceeding under the Illinois Parentage Act of 1984 or
5 by the ~~Illinois~~ Department of Healthcare and Family Services
6 ~~Public Aid~~ in an administrative paternity proceeding under
7 Article X of the Illinois Public Aid Code and rules promulgated
8 under that Article.

9 (Source: P.A. 90-25, eff. 1-1-98.)

10 Section 9505. The Head and Spinal Cord Injury Act is
11 amended by changing Section 6 as follows:

12 (410 ILCS 515/6) (from Ch. 111 1/2, par. 7856)

13 Sec. 6. (a) There is hereby created the Advisory Council on
14 Spinal Cord and Head Injuries within the Department of Human
15 Services. The Council shall consist of 29 members, appointed by
16 the Governor with the advice and consent of the Senate. Members
17 shall serve 3-year terms and until their successors are
18 appointed by the Governor with the advice and consent of the
19 Senate. The members appointed by the Governor shall include 2
20 neurosurgeons, 2 orthopedic surgeons, 2 rehabilitation
21 specialists, one of whom shall be a registered nurse, 4 persons
22 with head injuries or family members of persons with head
23 injuries, 4 persons with spinal cord injuries or family members
24 of persons with spinal cord injuries, a representative of an
25 Illinois college or university, and a representative from
26 health institutions or private industry. These members shall
27 not serve more than 2 consecutive 3-year terms. The Governor
28 shall appoint one individual from each of the following
29 entities to the Council as ex-officio members: the unit of the
30 Department of Human Services that is responsible for the
31 administration of the vocational rehabilitation program,
32 another unit within the Department of Human Services that
33 provides services for individuals with disabilities, the State
34 Board of Education, the Department of Public Health, the

1 Department of Insurance, the Department of Healthcare and
2 Family Services ~~Public Aid~~, the Division of Specialized Care
3 for Children of the University of Illinois, the Statewide
4 Independent Living Council, and the State Rehabilitation
5 Advisory Council. Ex-officio members are not subject to limit
6 of 2 consecutive 3-year terms. The appointment of individuals
7 representing State agencies shall be conditioned on their
8 continued employment with their respective agencies.

9 (b) From funds appropriated for such purpose, the
10 Department of Human Services shall provide to the Council the
11 necessary staff and expenses to carry out the duties and
12 responsibilities assigned by the Council. Such staff shall
13 consist of a director and other support staff.

14 (c) Meetings shall be held at least every 90 days or at the
15 call of the Council chairman, who shall be elected by the
16 Council.

17 (d) Each member shall be reimbursed for reasonable and
18 necessary expenses actually incurred in the performance of his
19 official duties.

20 (e) The Council shall adopt written procedures to govern
21 its activities. Consultants shall be provided for the Council
22 from appropriations made for such purpose.

23 (f) The Council shall make recommendations to the Governor
24 for developing and administering a State plan to provide
25 services for spinal cord and head injured persons.

26 (g) No member of the Council may participate in or seek to
27 influence a decision or vote of the Council if the member would
28 be directly involved with the matter or if he would derive
29 income from it. A violation of this prohibition shall be
30 grounds for a person to be removed as a member of the Council
31 by the Governor.

32 (h) The Council shall:

33 (1) promote meetings and programs for the discussion of
34 reducing the debilitating effects of spinal cord and head
35 injuries and disseminate information in cooperation with
36 any other department, agency or entity on the prevention,

1 evaluation, care, treatment and rehabilitation of persons
2 affected by spinal cord and head injuries;

3 (2) study and review current prevention, evaluation,
4 care, treatment and rehabilitation technologies and
5 recommend appropriate preparation, training, retraining
6 and distribution of manpower and resources in the provision
7 of services to spinal cord and head injured persons through
8 private and public residential facilities, day programs
9 and other specialized services;

10 (3) recommend specific methods, means and procedures
11 which should be adopted to improve and upgrade the State's
12 service delivery system for spinal cord and head injured
13 citizens of this State;

14 (4) participate in developing and disseminating
15 criteria and standards which may be required for future
16 funding or licensing of facilities, day programs and other
17 specialized services for spinal cord and head injured
18 persons in this State;

19 (5) report annually to the Governor and the General
20 Assembly on its activities, and on the results of its
21 studies and the recommendations of the Council; and

22 (6) be the advisory board for purposes of federal
23 programs regarding traumatic brain injury.

24 (i) The Department of Human Services may accept on behalf
25 of the Council federal funds, gifts and donations from
26 individuals, private organizations and foundations, and any
27 other funds that may become available.

28 (Source: P.A. 89-507, eff. 7-1-97; 90-453, eff. 8-16-97.)

29 Section 9510. The Vital Records Act is amended by changing
30 Sections 12, 17, 22, 24, and 25.1 as follows:

31 (410 ILCS 535/12) (from Ch. 111 1/2, par. 73-12)

32 Sec. 12. Live births; place of registration.

33 (1) Each live birth which occurs in this State shall be
34 registered with the local or subregistrar of the district in

1 which the birth occurred as provided in this Section, within 7
2 days after the birth. When a birth occurs on a moving
3 conveyance, the city, village, township, or road district in
4 which the child is first removed from the conveyance shall be
5 considered the place of birth and a birth certificate shall be
6 filed in the registration district in which the place is
7 located.

8 (2) When a birth occurs in an institution, the person in
9 charge of the institution or his designated representative
10 shall obtain and record all the personal and statistical
11 particulars relative to the parents of the child that are
12 required to properly complete the live birth certificate; shall
13 secure the required personal signatures on the hospital
14 worksheet; shall prepare the certificate from this worksheet;
15 and shall file the certificate with the local registrar. The
16 institution shall retain the hospital worksheet permanently or
17 as otherwise specified by rule. The physician in attendance
18 shall verify or provide the date of birth and medical
19 information required by the certificate, within 24 hours after
20 the birth occurs.

21 (3) When a birth occurs outside an institution, the
22 certificate shall be prepared and filed by one of the following
23 in the indicated order of priority:

24 (a) The physician in attendance at or immediately after
25 the birth, or in the absence of such a person,

26 (b) Any other person in attendance at or immediately
27 after the birth, or in the absence of such a person,

28 (c) The father, the mother, or in the absence of the
29 father and the inability of the mother, the person in
30 charge of the premises where the birth occurred.

31 (4) Unless otherwise provided in this Act, if the mother
32 was not married to the father of the child at either the time
33 of conception or the time of birth, the name of the father
34 shall be entered on the child's birth certificate only if the
35 mother and the person to be named as the father have signed an
36 acknowledgment of parentage in accordance with subsection (5).

1 Unless otherwise provided in this Act, if the mother was
2 married at the time of conception or birth and the presumed
3 father (that is, the mother's husband) is not the biological
4 father of the child, the name of the biological father shall be
5 entered on the child's birth certificate only if, in accordance
6 with subsection (5), (i) the mother and the person to be named
7 as the father have signed an acknowledgment of parentage and
8 (ii) the mother and presumed father have signed a denial of
9 paternity.

10 (5) Upon the birth of a child to an unmarried woman, or
11 upon the birth of a child to a woman who was married at the time
12 of conception or birth and whose husband is not the biological
13 father of the child, the institution at the time of birth and
14 the local registrar or county clerk after the birth shall do
15 the following:

16 (a) Provide (i) an opportunity for the child's mother
17 and father to sign an acknowledgment of parentage and (ii)
18 if the presumed father is not the biological father, an
19 opportunity for the mother and presumed father to sign a
20 denial of paternity. The signing and witnessing of the
21 acknowledgment of parentage or, if the presumed father of
22 the child is not the biological father, the acknowledgment
23 of parentage and denial of paternity conclusively
24 establishes a parent and child relationship in accordance
25 with Sections 5 and 6 of the Illinois Parentage Act of
26 1984.

27 The ~~Illinois~~ Department of Healthcare and Family
28 Services ~~Public Aid~~ shall furnish the acknowledgment of
29 parentage and denial of paternity form to institutions,
30 county clerks, and State and local registrars' offices. The
31 form shall include instructions to send the original signed
32 and witnessed acknowledgment of parentage and denial of
33 paternity to the ~~Illinois~~ Department of Healthcare and
34 Family Services ~~Public Aid~~.

35 (b) Provide the following documents, furnished by the
36 ~~Illinois~~ Department of Healthcare and Family Services

1 ~~Public Aid~~, to the child's mother, biological father, and
2 (if the person presumed to be the child's father is not the
3 biological father) presumed father for their review at the
4 time the opportunity is provided to establish a parent and
5 child relationship:

6 (i) An explanation of the implications of,
7 alternatives to, legal consequences of, and the rights
8 and responsibilities that arise from signing an
9 acknowledgment of parentage and, if necessary, a
10 denial of paternity, including an explanation of the
11 parental rights and responsibilities of child support,
12 visitation, custody, retroactive support, health
13 insurance coverage, and payment of birth expenses.

14 (ii) An explanation of the benefits of having a
15 child's parentage established and the availability of
16 parentage establishment and child support enforcement
17 services.

18 (iii) A request for an application for child
19 support enforcement services from the ~~Illinois~~
20 Department of Healthcare and Family Services ~~Public~~
21 ~~Aid~~.

22 (iv) Instructions concerning the opportunity to
23 speak, either by telephone or in person, with staff of
24 the ~~Illinois~~ Department of Healthcare and Family
25 Services ~~Public Aid~~ who are trained to clarify
26 information and answer questions about paternity
27 establishment.

28 (v) Instructions for completing and signing the
29 acknowledgment of parentage and denial of paternity.

30 (c) Provide an oral explanation of the documents and
31 instructions set forth in subdivision (5) (b), including an
32 explanation of the implications of, alternatives to, legal
33 consequences of, and the rights and responsibilities that
34 arise from signing an acknowledgment of parentage and, if
35 necessary, a denial of paternity. The oral explanation may
36 be given in person or through the use of video or audio

1 equipment.

2 (6) The institution, State or local registrar, or county
3 clerk shall provide an opportunity for the child's father or
4 mother to sign a rescission of parentage. The signing and
5 witnessing of the rescission of parentage voids the
6 acknowledgment of parentage and nullifies the presumption of
7 paternity if executed and filed with the Department of
8 Healthcare and Family Services (formerly Illinois Department
9 of Public Aid) within the time frame contained in Section 5 of
10 the Illinois Parentage Act of 1984. The ~~Illinois~~ Department of
11 Healthcare and Family Services ~~Public Aid~~ shall furnish the
12 rescission of parentage form to institutions, county clerks,
13 and State and local registrars' offices. The form shall include
14 instructions to send the original signed and witnessed
15 rescission of parentage to the ~~Illinois~~ Department of
16 Healthcare and Family Services ~~Public Aid~~.

17 (7) An acknowledgment of paternity signed pursuant to
18 Section 6 of the Illinois Parentage Act of 1984 may be
19 challenged in court only on the basis of fraud, duress, or
20 material mistake of fact, with the burden of proof upon the
21 challenging party. Pending outcome of a challenge to the
22 acknowledgment of paternity, the legal responsibilities of the
23 signatories shall remain in full force and effect, except upon
24 order of the court upon a showing of good cause.

25 (8) When the process for acknowledgment of parentage as
26 provided for under subsection (5) establishes the paternity of
27 a child whose certificate of birth is on file in another state,
28 the ~~Illinois~~ Department of Healthcare and Family Services
29 ~~Public Aid~~ shall forward a copy of the acknowledgment of
30 parentage, the denial of paternity, if applicable, and the
31 rescission of parentage, if applicable, to the birth record
32 agency of the state where the child's certificate of birth is
33 on file.

34 (9) In the event the parent-child relationship has been
35 established in accordance with subdivision (a)(1) of Section 6
36 of the Parentage Act of 1984, the names of the biological

1 mother and biological father so established shall be entered on
2 the child's birth certificate, and the names of the surrogate
3 mother and surrogate mother's husband, if any, shall not be on
4 the birth certificate.

5 (Source: P.A. 91-308, eff. 7-29-99; 92-590, eff. 7-1-02.)

6 (410 ILCS 535/17) (from Ch. 111 1/2, par. 73-17)

7 Sec. 17. (1) For a person born in this State, the State
8 Registrar of Vital Records shall establish a new certificate of
9 birth when he receives any of the following:

10 (a) A certificate of adoption as provided in Section 16
11 or a certified copy of the order of adoption together with
12 the information necessary to identify the original
13 certificate of birth and to establish the new certificate
14 of birth; except that a new certificate of birth shall not
15 be established if so requested by the court ordering the
16 adoption, the adoptive parents, or the adopted person.

17 (b) A certificate of adoption or a certified copy of
18 the order of adoption entered in a court of competent
19 jurisdiction of any other state or country declaring
20 adopted a child born in the State of Illinois, together
21 with the information necessary to identify the original
22 certificate of birth and to establish the new certificate
23 of birth; except that a new certificate of birth shall not
24 be established if so requested by the court ordering the
25 adoption, the adoptive parents, or the adopted person.

26 (c) A request that a new certificate be established and
27 such evidence as required by regulation proving that such
28 person has been legitimized, or that the circuit court,
29 the Department of Healthcare and Family Services (formerly
30 Illinois Department of Public Aid), or a court or
31 administrative agency of any other state has established
32 the paternity of such a person by judicial or
33 administrative processes or by voluntary acknowledgment,
34 which is accompanied by the social security numbers of all
35 persons determined and presumed to be the parents.

1 (d) An affidavit by a physician that he has performed
2 an operation on a person, and that by reason of the
3 operation the sex designation on such person's birth record
4 should be changed. The State Registrar of Vital Records may
5 make any investigation or require any further information
6 he deems necessary.

7 Each request for a new certificate of birth shall be
8 accompanied by a fee of \$15 and entitles the applicant to one
9 certification or certified copy of the new certificate. If the
10 request is for additional copies, it shall be accompanied by a
11 fee of \$2 for each additional certification or certified copy.

12 (2) When a new certificate of birth is established, the
13 actual place and date of birth shall be shown; provided, in the
14 case of adoption of a person born in this State by parents who
15 were residents of this State at the time of the birth of the
16 adopted person, the place of birth may be shown as the place of
17 residence of the adoptive parents at the time of such person's
18 birth, if specifically requested by them, and any new
19 certificate of birth established prior to the effective date of
20 this amendatory Act may be corrected accordingly if so
21 requested by the adoptive parents or the adopted person when of
22 legal age. The social security numbers of the parents shall not
23 be recorded on the certificate of birth. The social security
24 numbers may only be used for purposes allowed under federal
25 law. The new certificate shall be substituted for the original
26 certificate of birth:

27 (a) Thereafter, the original certificate and the
28 evidence of adoption, paternity, legitimation, or sex
29 change shall not be subject to inspection or certification
30 except upon order of the circuit court or as provided by
31 regulation.

32 (b) Upon receipt of notice of annulment of adoption,
33 the original certificate of birth shall be restored to its
34 place in the files, and the new certificate and evidence
35 shall not be subject to inspection or certification except
36 upon order of the circuit court.

1 (3) If no certificate of birth is on file for the person
2 for whom a new certificate is to be established under this
3 Section, a delayed record of birth shall be filed with the
4 State Registrar of Vital Records as provided in Section 14 or
5 Section 15 of this Act before a new certificate of birth is
6 established, except that when the date and place of birth and
7 parentage have been established in the adoption proceedings, a
8 delayed record shall not be required.

9 (4) When a new certificate of birth is established by the
10 State Registrar of Vital Records, all copies of the original
11 certificate of birth in the custody of any custodian of
12 permanent local records in this State shall be transmitted to
13 the State Registrar of Vital Records as directed, and shall be
14 sealed from inspection.

15 (5) Nothing in this Section shall be construed to prohibit
16 the amendment of a birth certificate in accordance with
17 subsection (6) of Section 22.

18 (Source: P.A. 89-6, eff. 3-6-95; 89-257, eff. 1-1-96; 89-626,
19 eff. 8-9-96; 90-18, eff. 7-1-97.)

20 (410 ILCS 535/22) (from Ch. 111 1/2, par. 73-22)

21 Sec. 22. (1) A certificate or record filed under this Act
22 may be amended only in accordance with this Act and such
23 regulations as the Department may adopt to protect the
24 integrity of vital records. An application for an amendment
25 shall be accompanied by a fee of \$15 which includes the
26 provision of one certification or certified copy of the amended
27 birth record. If the request is for additional copies, it shall
28 be accompanied by a fee of \$2 for each additional certification
29 or certified copy. Such amendments may only be made in
30 connection with the original certificates and may not be made
31 on copies of such certificates without the approval of the
32 State Registrar of Vital Records. The provisions of this
33 Section shall also be applicable to a certificate or record
34 filed under any former Act relating to the registration of
35 births, stillbirths, and deaths. Any original certificate or

1 record filed with the county clerk prior to January 1, 1916,
2 may be amended by the county clerk under the same provisions of
3 this Section, or regulations adopted pursuant thereto, as apply
4 to the State Registrar of Vital Records governing amendments to
5 certificates or records filed with the Department subsequent to
6 December 31, 1915.

7 (2) A certificate that is amended under this Section after
8 its filing shall have the correction entered on its face; shall
9 clearly indicate that an amendment has been made; and shall
10 show the date of the amendment. A summary description of the
11 evidence submitted in support of an amendment shall be
12 permanently retained by the Department either as an original
13 record or in microphotographic form. Documents from which such
14 summary descriptions are made may be returned by the Department
15 to the person or persons submitting them. The Department shall
16 prescribe by regulation the conditions under which, within one
17 year after the date of occurrence, additions or minor
18 corrections may be made without the certificate being
19 considered amended.

20 (3) An amendment to a delayed birth registration
21 established under the provisions of Section 15 of this Act may
22 be made by the State Registrar of Vital Records only upon the
23 basis of an order from the court which originally established
24 the facts of birth.

25 (4) Upon receipt of a certified copy of a court order
26 changing the name or names of a person born in this State, the
27 official custodian shall amend the original certificate of
28 birth to reflect the changes.

29 (5) (Blank).

30 (6) When the paternity of a child with a certificate of
31 birth on file in this State is established through voluntary
32 acknowledgment or by a court or administrative agency under the
33 laws of this or any other state, the State Registrar of Vital
34 Records shall amend the original record accordingly, upon
35 notification from a circuit court of this State or the
36 Department of Healthcare and Family Services (formerly

1 Illinois Department of Public Aid), or upon receipt of a
2 certified copy of another state's acknowledgment or judicial or
3 administrative determination of paternity.

4 (7) Notwithstanding any other provision of this Act, if an
5 adopted person applies in accordance with this Section for the
6 amendment of the name on his or her birth certificate, the
7 State Registrar shall amend the birth certificate if the person
8 provides documentation or other evidence supporting the
9 application that would be deemed sufficient if the
10 documentation or evidence had been submitted in support of an
11 application by a person who has not been adopted.

12 (8) When paternity has been established after the birth in
13 accordance with Section 12, the State Registrar of Vital
14 Records shall amend the original record accordingly.

15 (9) Upon application by the parents not later than one year
16 after an acknowledgment of parentage under this Act or the
17 Illinois Public Aid Code or a judicial or administrative
18 determination or establishment of paternity or parentage, the
19 State Registrar of Vital Records shall amend the child's name
20 on the child's certificate of birth in accordance with the
21 application. No more than one application to change a child's
22 name may be made under this subsection (9).

23 (10) When a certificate is amended by the State Registrar
24 of Vital Records under this Section, the State Registrar of
25 Vital Records shall furnish a copy of the summary description
26 to the custodian of any permanent local records and such
27 records shall be amended accordingly.

28 (Source: P.A. 89-6, eff. 3-6-95; 89-257, eff. 1-1-96; 89-626,
29 eff. 8-9-96; 89-641, eff. 8-9-96; 90-18, eff. 7-1-97.)

30 (410 ILCS 535/24) (from Ch. 111 1/2, par. 73-24)

31 Sec. 24. (1) To protect the integrity of vital records, to
32 insure their proper use, and to insure the efficient and proper
33 administration of the vital records system, access to vital
34 records, and indexes thereof, including vital records in the
35 custody of local registrars and county clerks originating prior

1 to January 1, 1916, is limited to the custodian and his
2 employees, and then only for administrative purposes, except
3 that the indexes of those records in the custody of local
4 registrars and county clerks, originating prior to January 1,
5 1916, shall be made available to persons for the purpose of
6 genealogical research. Original, photographic or
7 microphotographic reproductions of original records of births
8 100 years old and older and deaths 50 years old and older, and
9 marriage records 75 years old and older on file in the State
10 Office of Vital Records and in the custody of the county clerks
11 may be made available for inspection in the Illinois State
12 Archives reference area, Illinois Regional Archives
13 Depositories, and other libraries approved by the Illinois
14 State Registrar and the Director of the Illinois State
15 Archives, provided that the photographic or microphotographic
16 copies are made at no cost to the county or to the State of
17 Illinois. It is unlawful for any custodian to permit inspection
18 of, or to disclose information contained in, vital records, or
19 to copy or permit to be copied, all or part of any such record
20 except as authorized by this Act or regulations adopted
21 pursuant thereto.

22 (2) The State Registrar of Vital Records, or his agent, and
23 any municipal, county, multi-county, public health district,
24 or regional health officer recognized by the Department may
25 examine vital records for the purpose only of carrying out the
26 public health programs and responsibilities under his
27 jurisdiction.

28 (3) The State Registrar of Vital Records, may disclose, or
29 authorize the disclosure of, data contained in the vital
30 records when deemed essential for bona fide research purposes
31 which are not for private gain.

32 This amendatory Act of 1973 does not apply to any home rule
33 unit.

34 (4) The State Registrar shall exchange with the ~~Illinois~~
35 Department of Healthcare and Family Services ~~Public Aid~~
36 information that may be necessary for the establishment of

1 paternity and the establishment, modification, and enforcement
2 of child support orders entered pursuant to the Illinois Public
3 Aid Code, the Illinois Marriage and Dissolution of Marriage
4 Act, the Non-Support of Spouse and Children Act, the
5 Non-Support Punishment Act, the Revised Uniform Reciprocal
6 Enforcement of Support Act, the Uniform Interstate Family
7 Support Act, or the Illinois Parentage Act of 1984.
8 Notwithstanding any provisions in this Act to the contrary, the
9 State Registrar shall not be liable to any person for any
10 disclosure of information to the Department of Healthcare and
11 Family Services (formerly Illinois Department of Public Aid)
12 under this subsection or for any other action taken in good
13 faith to comply with the requirements of this subsection.

14 (Source: P.A. 90-18, eff. 7-1-97; 91-613, eff. 10-1-99.)

15 (410 ILCS 535/25.1) (from Ch. 111 1/2, par. 73-25.1)

16 Sec. 25.1. (a) When the State Registrar of Vital Records
17 receives or prepares a death certificate the Registrar shall
18 make an appropriate notation in the birth certificate record of
19 that person that the person is deceased. The Registrar shall
20 also notify the appropriate municipal or county custodian of
21 such birth record that the person is deceased, and such
22 custodian shall likewise make an appropriate notation in its
23 records.

24 (b) In response to any inquiry, the Registrar or a
25 custodian shall not provide a copy of a birth certificate or
26 information concerning the birth record of any deceased person
27 except as provided in this subsection (b) or as otherwise
28 provided in this Act or as approved by the Department. When a
29 copy of the birth certificate of a deceased person is
30 requested, the Registrar or custodian shall require the person
31 making the request to complete an information form, which shall
32 be developed and furnished by the Department and shall include,
33 at a minimum, the name, address, telephone number, social
34 security number and driver's license number of the person
35 making the request. Before furnishing the copy, the custodian

1 shall prominently stamp on the copy the word "DECEASED" and
2 write or stamp on the copy the date of death of the deceased
3 person. The custodian shall retain the information form
4 completed by the person making the request, and note on the
5 birth certificate record that such a request was made. The
6 custodian shall make the information form available to the
7 Department of State Police or any local law enforcement agency
8 upon request. A city or county custodian shall promptly submit
9 copies of all completed forms to the Registrar. The word
10 "DECEASED" and the date of death shall not appear on a copy of
11 a birth certificate furnished to a parent of a child who died
12 within 3 months of birth, provided no other copy of a birth
13 certificate was furnished to the parent prior to the child's
14 death.

15 (c) The Registrar shall furnish, no later than 60 days
16 after receipt of a form used to request a birth certificate
17 record of a deceased person, a copy of the form and a copy of
18 the corresponding birth certificate record to the ~~Illinois~~
19 Department of Healthcare and Family Services ~~Public Aid~~ and the
20 Department of Human Services. The ~~Illinois~~ Department of
21 Healthcare and Family Services ~~Public Aid~~ and the Department of
22 Human Services shall, upon receipt of such information, check
23 their records to ensure that no claim for public assistance
24 under the Illinois Public Aid Code is being made either by a
25 person purporting to be the deceased person or by any person on
26 behalf of the deceased person.

27 (d) Notwithstanding the requirements of subsection (b),
28 when the death of a child occurs within 90 days of that child's
29 live birth, the mother listed on the birth certificate of that
30 child may request the issuance of a copy of a certificate of
31 live birth from the State Registrar. Such request shall be made
32 in accordance with subsection (b), shall indicate the
33 requestor's relationship to the child, and shall be made not
34 later than 9 months from the date of the death of the child.
35 Except as provided herein, the Registrar shall conform to all
36 requirements of this Act in issuing copies of certificates

1 under this subsection (d).

2 (Source: P.A. 94-7, eff. 6-6-05.)

3 Section 9515. The Illinois Vehicle Code is amended by
4 changing Sections 2-109.1, 2-123, 3-412, and 16-104b as
5 follows:

6 (625 ILCS 5/2-109.1)

7 Sec. 2-109.1. Exchange of information.

8 (a) The Secretary of State shall exchange information with
9 the ~~Illinois~~ Department of Healthcare and Family Services
10 ~~Public Aid~~ which may be necessary for the establishment of
11 paternity and the establishment, modification, and enforcement
12 of child support orders pursuant to the Illinois Public Aid
13 Code, the Illinois Marriage and Dissolution of Marriage Act,
14 the Non-Support of Spouse and Children Act, the Non-Support
15 Punishment Act, the Revised Uniform Reciprocal Enforcement of
16 Support Act, the Uniform Interstate Family Support Act, or the
17 Illinois Parentage Act of 1984.

18 (b) Notwithstanding any provisions in this Code to the
19 contrary, the Secretary of State shall not be liable to any
20 person for any disclosure of information to the Department of
21 Healthcare and Family Services (formerly Illinois Department
22 of Public Aid) under subsection (a) or for any other action
23 taken in good faith to comply with the requirements of
24 subsection (a).

25 (Source: P.A. 90-18, eff. 7-1-97; 91-613, eff. 7-1-00.)

26 (625 ILCS 5/2-123) (from Ch. 95 1/2, par. 2-123)

27 Sec. 2-123. Sale and Distribution of Information.

28 (a) Except as otherwise provided in this Section, the
29 Secretary may make the driver's license, vehicle and title
30 registration lists, in part or in whole, and any statistical
31 information derived from these lists available to local
32 governments, elected state officials, state educational
33 institutions, and all other governmental units of the State and

1 Federal Government requesting them for governmental purposes.
2 The Secretary shall require any such applicant for services to
3 pay for the costs of furnishing such services and the use of
4 the equipment involved, and in addition is empowered to
5 establish prices and charges for the services so furnished and
6 for the use of the electronic equipment utilized.

7 (b) The Secretary is further empowered to and he may, in
8 his discretion, furnish to any applicant, other than listed in
9 subsection (a) of this Section, vehicle or driver data on a
10 computer tape, disk, other electronic format or computer
11 processable medium, or printout at a fixed fee of \$250 for
12 orders received before October 1, 2003 and \$500 for orders
13 received on or after October 1, 2003, in advance, and require
14 in addition a further sufficient deposit based upon the
15 Secretary of State's estimate of the total cost of the
16 information requested and a charge of \$25 for orders received
17 before October 1, 2003 and \$50 for orders received on or after
18 October 1, 2003, per 1,000 units or part thereof identified or
19 the actual cost, whichever is greater. The Secretary is
20 authorized to refund any difference between the additional
21 deposit and the actual cost of the request. This service shall
22 not be in lieu of an abstract of a driver's record nor of a
23 title or registration search. This service may be limited to
24 entities purchasing a minimum number of records as required by
25 administrative rule. The information sold pursuant to this
26 subsection shall be the entire vehicle or driver data list, or
27 part thereof. The information sold pursuant to this subsection
28 shall not contain personally identifying information unless
29 the information is to be used for one of the purposes
30 identified in subsection (f-5) of this Section. Commercial
31 purchasers of driver and vehicle record databases shall enter
32 into a written agreement with the Secretary of State that
33 includes disclosure of the commercial use of the information to
34 be purchased.

35 (b-1) The Secretary is further empowered to and may, in his
36 or her discretion, furnish vehicle or driver data on a computer

1 tape, disk, or other electronic format or computer processible
2 medium, at no fee, to any State or local governmental agency
3 that uses the information provided by the Secretary to transmit
4 data back to the Secretary that enables the Secretary to
5 maintain accurate driving records, including dispositions of
6 traffic cases. This information may be provided without fee not
7 more often than once every 6 months.

8 (c) Secretary of State may issue registration lists. The
9 Secretary of State shall compile and publish, at least
10 annually, a list of all registered vehicles. Each list of
11 registered vehicles shall be arranged serially according to the
12 registration numbers assigned to registered vehicles and shall
13 contain in addition the names and addresses of registered
14 owners and a brief description of each vehicle including the
15 serial or other identifying number thereof. Such compilation
16 may be in such form as in the discretion of the Secretary of
17 State may seem best for the purposes intended.

18 (d) The Secretary of State shall furnish no more than 2
19 current available lists of such registrations to the sheriffs
20 of all counties and to the chiefs of police of all cities and
21 villages and towns of 2,000 population and over in this State
22 at no cost. Additional copies may be purchased by the sheriffs
23 or chiefs of police at the fee of \$500 each or at the cost of
24 producing the list as determined by the Secretary of State.
25 Such lists are to be used for governmental purposes only.

26 (e) (Blank).

27 (e-1) (Blank).

28 (f) The Secretary of State shall make a title or
29 registration search of the records of his office and a written
30 report on the same for any person, upon written application of
31 such person, accompanied by a fee of \$5 for each registration
32 or title search. The written application shall set forth the
33 intended use of the requested information. No fee shall be
34 charged for a title or registration search, or for the
35 certification thereof requested by a government agency. The
36 report of the title or registration search shall not contain

1 personally identifying information unless the request for a
2 search was made for one of the purposes identified in
3 subsection (f-5) of this Section. The report of the title or
4 registration search shall not contain highly restricted
5 personal information unless specifically authorized by this
6 Code.

7 The Secretary of State shall certify a title or
8 registration record upon written request. The fee for
9 certification shall be \$5 in addition to the fee required for a
10 title or registration search. Certification shall be made under
11 the signature of the Secretary of State and shall be
12 authenticated by Seal of the Secretary of State.

13 The Secretary of State may notify the vehicle owner or
14 registrant of the request for purchase of his title or
15 registration information as the Secretary deems appropriate.

16 No information shall be released to the requestor until
17 expiration of a 10 day period. This 10 day period shall not
18 apply to requests for information made by law enforcement
19 officials, government agencies, financial institutions,
20 attorneys, insurers, employers, automobile associated
21 businesses, persons licensed as a private detective or firms
22 licensed as a private detective agency under the Private
23 Detective, Private Alarm, Private Security, and Locksmith Act
24 of 2004, who are employed by or are acting on behalf of law
25 enforcement officials, government agencies, financial
26 institutions, attorneys, insurers, employers, automobile
27 associated businesses, and other business entities for
28 purposes consistent with the Illinois Vehicle Code, the vehicle
29 owner or registrant or other entities as the Secretary may
30 exempt by rule and regulation.

31 Any misrepresentation made by a requestor of title or
32 vehicle information shall be punishable as a petty offense,
33 except in the case of persons licensed as a private detective
34 or firms licensed as a private detective agency which shall be
35 subject to disciplinary sanctions under Section 40-10 of the
36 Private Detective, Private Alarm, Private Security, and

1 Locksmith Act of 2004.

2 (f-5) The Secretary of State shall not disclose or
3 otherwise make available to any person or entity any personally
4 identifying information obtained by the Secretary of State in
5 connection with a driver's license, vehicle, or title
6 registration record unless the information is disclosed for one
7 of the following purposes:

8 (1) For use by any government agency, including any
9 court or law enforcement agency, in carrying out its
10 functions, or any private person or entity acting on behalf
11 of a federal, State, or local agency in carrying out its
12 functions.

13 (2) For use in connection with matters of motor vehicle
14 or driver safety and theft; motor vehicle emissions; motor
15 vehicle product alterations, recalls, or advisories;
16 performance monitoring of motor vehicles, motor vehicle
17 parts, and dealers; and removal of non-owner records from
18 the original owner records of motor vehicle manufacturers.

19 (3) For use in the normal course of business by a
20 legitimate business or its agents, employees, or
21 contractors, but only:

22 (A) to verify the accuracy of personal information
23 submitted by an individual to the business or its
24 agents, employees, or contractors; and

25 (B) if such information as so submitted is not
26 correct or is no longer correct, to obtain the correct
27 information, but only for the purposes of preventing
28 fraud by, pursuing legal remedies against, or
29 recovering on a debt or security interest against, the
30 individual.

31 (4) For use in research activities and for use in
32 producing statistical reports, if the personally
33 identifying information is not published, redisclosed, or
34 used to contact individuals.

35 (5) For use in connection with any civil, criminal,
36 administrative, or arbitral proceeding in any federal,

1 State, or local court or agency or before any
2 self-regulatory body, including the service of process,
3 investigation in anticipation of litigation, and the
4 execution or enforcement of judgments and orders, or
5 pursuant to an order of a federal, State, or local court.

6 (6) For use by any insurer or insurance support
7 organization or by a self-insured entity or its agents,
8 employees, or contractors in connection with claims
9 investigation activities, antifraud activities, rating, or
10 underwriting.

11 (7) For use in providing notice to the owners of towed
12 or impounded vehicles.

13 (8) For use by any person licensed as a private
14 detective or firm licensed as a private detective agency
15 under the Private Detective, Private Alarm, Private
16 Security, and Locksmith Act of 1993, private investigative
17 agency or security service licensed in Illinois for any
18 purpose permitted under this subsection.

19 (9) For use by an employer or its agent or insurer to
20 obtain or verify information relating to a holder of a
21 commercial driver's license that is required under chapter
22 313 of title 49 of the United States Code.

23 (10) For use in connection with the operation of
24 private toll transportation facilities.

25 (11) For use by any requester, if the requester
26 demonstrates it has obtained the written consent of the
27 individual to whom the information pertains.

28 (12) For use by members of the news media, as defined
29 in Section 1-148.5, for the purpose of newsgathering when
30 the request relates to the operation of a motor vehicle or
31 public safety.

32 (13) For any other use specifically authorized by law,
33 if that use is related to the operation of a motor vehicle
34 or public safety.

35 (f-6) The Secretary of State shall not disclose or
36 otherwise make available to any person or entity any highly

1 restricted personal information obtained by the Secretary of
2 State in connection with a driver's license, vehicle, or title
3 registration record unless specifically authorized by this
4 Code.

5 (g) 1. The Secretary of State may, upon receipt of a
6 written request and a fee of \$6 before October 1, 2003 and
7 a fee of \$12 on and after October 1, 2003, furnish to the
8 person or agency so requesting a driver's record. Such
9 document may include a record of: current driver's license
10 issuance information, except that the information on
11 judicial driving permits shall be available only as
12 otherwise provided by this Code; convictions; orders
13 entered revoking, suspending or cancelling a driver's
14 license or privilege; and notations of accident
15 involvement. All other information, unless otherwise
16 permitted by this Code, shall remain confidential.
17 Information released pursuant to a request for a driver's
18 record shall not contain personally identifying
19 information, unless the request for the driver's record was
20 made for one of the purposes set forth in subsection (f-5)
21 of this Section.

22 2. The Secretary of State shall not disclose or
23 otherwise make available to any person or entity any highly
24 restricted personal information obtained by the Secretary
25 of State in connection with a driver's license, vehicle, or
26 title registration record unless specifically authorized
27 by this Code. The Secretary of State may certify an
28 abstract of a driver's record upon written request
29 therefor. Such certification shall be made under the
30 signature of the Secretary of State and shall be
31 authenticated by the Seal of his office.

32 3. All requests for driving record information shall be
33 made in a manner prescribed by the Secretary and shall set
34 forth the intended use of the requested information.

35 The Secretary of State may notify the affected driver
36 of the request for purchase of his driver's record as the

1 Secretary deems appropriate.

2 No information shall be released to the requester until
3 expiration of a 10 day period. This 10 day period shall not
4 apply to requests for information made by law enforcement
5 officials, government agencies, financial institutions,
6 attorneys, insurers, employers, automobile associated
7 businesses, persons licensed as a private detective or
8 firms licensed as a private detective agency under the
9 Private Detective, Private Alarm, Private Security, and
10 Locksmith Act of 2004, who are employed by or are acting on
11 behalf of law enforcement officials, government agencies,
12 financial institutions, attorneys, insurers, employers,
13 automobile associated businesses, and other business
14 entities for purposes consistent with the Illinois Vehicle
15 Code, the affected driver or other entities as the
16 Secretary may exempt by rule and regulation.

17 Any misrepresentation made by a requestor of driver
18 information shall be punishable as a petty offense, except
19 in the case of persons licensed as a private detective or
20 firms licensed as a private detective agency which shall be
21 subject to disciplinary sanctions under Section 40-10 of
22 the Private Detective, Private Alarm, Private Security,
23 and Locksmith Act of 2004.

24 4. The Secretary of State may furnish without fee, upon
25 the written request of a law enforcement agency, any
26 information from a driver's record on file with the
27 Secretary of State when such information is required in the
28 enforcement of this Code or any other law relating to the
29 operation of motor vehicles, including records of
30 dispositions; documented information involving the use of
31 a motor vehicle; whether such individual has, or previously
32 had, a driver's license; and the address and personal
33 description as reflected on said driver's record.

34 5. Except as otherwise provided in this Section, the
35 Secretary of State may furnish, without fee, information
36 from an individual driver's record on file, if a written

1 request therefor is submitted by any public transit system
2 or authority, public defender, law enforcement agency, a
3 state or federal agency, or an Illinois local
4 intergovernmental association, if the request is for the
5 purpose of a background check of applicants for employment
6 with the requesting agency, or for the purpose of an
7 official investigation conducted by the agency, or to
8 determine a current address for the driver so public funds
9 can be recovered or paid to the driver, or for any other
10 purpose set forth in subsection (f-5) of this Section.

11 The Secretary may also furnish the courts a copy of an
12 abstract of a driver's record, without fee, subsequent to
13 an arrest for a violation of Section 11-501 or a similar
14 provision of a local ordinance. Such abstract may include
15 records of dispositions; documented information involving
16 the use of a motor vehicle as contained in the current
17 file; whether such individual has, or previously had, a
18 driver's license; and the address and personal description
19 as reflected on said driver's record.

20 6. Any certified abstract issued by the Secretary of
21 State or transmitted electronically by the Secretary of
22 State pursuant to this Section, to a court or on request of
23 a law enforcement agency, for the record of a named person
24 as to the status of the person's driver's license shall be
25 prima facie evidence of the facts therein stated and if the
26 name appearing in such abstract is the same as that of a
27 person named in an information or warrant, such abstract
28 shall be prima facie evidence that the person named in such
29 information or warrant is the same person as the person
30 named in such abstract and shall be admissible for any
31 prosecution under this Code and be admitted as proof of any
32 prior conviction or proof of records, notices, or orders
33 recorded on individual driving records maintained by the
34 Secretary of State.

35 7. Subject to any restrictions contained in the
36 Juvenile Court Act of 1987, and upon receipt of a proper

1 request and a fee of \$6 before October 1, 2003 and a fee of
2 \$12 on or after October 1, 2003, the Secretary of State
3 shall provide a driver's record to the affected driver, or
4 the affected driver's attorney, upon verification. Such
5 record shall contain all the information referred to in
6 paragraph 1 of this subsection (g) plus: any recorded
7 accident involvement as a driver; information recorded
8 pursuant to subsection (e) of Section 6-117 and paragraph
9 (4) of subsection (a) of Section 6-204 of this Code. All
10 other information, unless otherwise permitted by this
11 Code, shall remain confidential.

12 (h) The Secretary shall not disclose social security
13 numbers or any associated information obtained from the Social
14 Security Administration except pursuant to a written request
15 by, or with the prior written consent of, the individual
16 except: (1) to officers and employees of the Secretary who have
17 a need to know the social security numbers in performance of
18 their official duties, (2) to law enforcement officials for a
19 lawful, civil or criminal law enforcement investigation, and if
20 the head of the law enforcement agency has made a written
21 request to the Secretary specifying the law enforcement
22 investigation for which the social security numbers are being
23 sought, (3) to the United States Department of Transportation,
24 or any other State, pursuant to the administration and
25 enforcement of the Commercial Motor Vehicle Safety Act of 1986,
26 (4) pursuant to the order of a court of competent jurisdiction,
27 or (5) to the Department of Healthcare and Family Services
28 (formerly Department of Public Aid) for utilization in the
29 child support enforcement duties assigned to that Department
30 under provisions of the Illinois Public Aid Code after the
31 individual has received advanced meaningful notification of
32 what redisclosure is sought by the Secretary in accordance with
33 the federal Privacy Act.

34 (i) (Blank).

35 (j) Medical statements or medical reports received in the
36 Secretary of State's Office shall be confidential. No

1 confidential information may be open to public inspection or
2 the contents disclosed to anyone, except officers and employees
3 of the Secretary who have a need to know the information
4 contained in the medical reports and the Driver License Medical
5 Advisory Board, unless so directed by an order of a court of
6 competent jurisdiction.

7 (k) All fees collected under this Section shall be paid
8 into the Road Fund of the State Treasury, except that (i) for
9 fees collected before October 1, 2003, \$3 of the \$6 fee for a
10 driver's record shall be paid into the Secretary of State
11 Special Services Fund, (ii) for fees collected on and after
12 October 1, 2003, of the \$12 fee for a driver's record, \$3 shall
13 be paid into the Secretary of State Special Services Fund and
14 \$6 shall be paid into the General Revenue Fund, and (iii) for
15 fees collected on and after October 1, 2003, 50% of the amounts
16 collected pursuant to subsection (b) shall be paid into the
17 General Revenue Fund.

18 (l) (Blank).

19 (m) Notations of accident involvement that may be disclosed
20 under this Section shall not include notations relating to
21 damage to a vehicle or other property being transported by a
22 tow truck. This information shall remain confidential,
23 provided that nothing in this subsection (m) shall limit
24 disclosure of any notification of accident involvement to any
25 law enforcement agency or official.

26 (n) Requests made by the news media for driver's license,
27 vehicle, or title registration information may be furnished
28 without charge or at a reduced charge, as determined by the
29 Secretary, when the specific purpose for requesting the
30 documents is deemed to be in the public interest. Waiver or
31 reduction of the fee is in the public interest if the principal
32 purpose of the request is to access and disseminate information
33 regarding the health, safety, and welfare or the legal rights
34 of the general public and is not for the principal purpose of
35 gaining a personal or commercial benefit. The information
36 provided pursuant to this subsection shall not contain

1 personally identifying information unless the information is
2 to be used for one of the purposes identified in subsection
3 (f-5) of this Section.

4 (o) The redisclosure of personally identifying information
5 obtained pursuant to this Section is prohibited, except to the
6 extent necessary to effectuate the purpose for which the
7 original disclosure of the information was permitted.

8 (p) The Secretary of State is empowered to adopt rules to
9 effectuate this Section.

10 (Source: P.A. 93-32, eff. 7-1-03; 93-438, eff. 8-5-03; 93-895,
11 eff. 1-1-05; 94-56, eff. 6-17-05.)

12 (625 ILCS 5/3-412) (from Ch. 95 1/2, par. 3-412)

13 Sec. 3-412. Registration plates and registration stickers
14 to be furnished by the Secretary of State.

15 (a) The Secretary of State upon registering a vehicle
16 subject to annual registration for the first time shall issue
17 or shall cause to be issued to the owner one registration plate
18 for a motorcycle, trailer, semitrailer, motorized pedalcycle
19 or truck-tractor, 2 registration plates for other motor
20 vehicles and, where applicable, current registration stickers
21 for motor vehicles of the first division. The provisions of
22 this Section may be made applicable to such vehicles of the
23 second division, as the Secretary of State may, from time to
24 time, in his discretion designate. On subsequent annual
25 registrations during the term of the registration plate as
26 provided in Section 3-414.1, the Secretary shall issue or cause
27 to be issued registration stickers as evidence of current
28 registration. However, the issuance of annual registration
29 stickers to vehicles registered under the provisions of
30 Sections 3-402.1 and 3-405.3 of this Code may not be required
31 if the Secretary deems the issuance unnecessary.

32 (b) Every registration plate shall have displayed upon it
33 the registration number assigned to the vehicle for which it is
34 issued, the name of this State, which may be abbreviated, the
35 year number for which it was issued, which may be abbreviated,

1 the phrase "Land of Lincoln" (except as otherwise provided in
2 this Code), and such other letters or numbers as the Secretary
3 may prescribe. However, for apportionment plates issued to
4 vehicles registered under Section 3-402.1 and fleet plates
5 issued to vehicles registered under Section 3-405.3, the phrase
6 "Land of Lincoln" may be omitted to allow for the word
7 "apportioned", the word "fleet", or other similar language to
8 be displayed. Registration plates issued to a vehicle
9 registered as a fleet vehicle may display a designation
10 determined by the Secretary.

11 The Secretary may in his discretion prescribe that letters
12 be used as prefixes only on registration plates issued to
13 vehicles of the first division which are registered under this
14 Code and only as suffixes on registration plates issued to
15 other vehicles. Every registration sticker issued as evidence
16 of current registration shall designate the year number for
17 which it is issued and such other letters or numbers as the
18 Secretary may prescribe and shall be of a contrasting color
19 with the registration plates and registration stickers of the
20 previous year.

21 (c) Each registration plate and the required letters and
22 numerals thereon, except the year number for which issued,
23 shall be of sufficient size to be plainly readable from a
24 distance of 100 feet during daylight, and shall be coated with
25 reflectorizing material. The dimensions of the plate issued to
26 vehicles of the first division shall be 6 by 12 inches.

27 (d) The Secretary of State shall issue for every passenger
28 motor vehicle rented without a driver the same type of
29 registration plates as the type of plates issued for a private
30 passenger vehicle.

31 (e) The Secretary of State shall issue for every passenger
32 car used as a taxicab or livery, distinctive registration
33 plates.

34 (f) The Secretary of State shall issue for every motorcycle
35 distinctive registration plates distinguishing between
36 motorcycles having 150 or more cubic centimeters piston

1 displacement, or having less than 150 cubic centimeter piston
2 displacement.

3 (g) Registration plates issued to vehicles for-hire may
4 display a designation as determined by the Secretary that such
5 vehicles are for-hire.

6 (h) The Secretary of State shall issue distinctive
7 registration plates for electric vehicles.

8 (i) The Secretary of State shall issue for every public and
9 private ambulance registration plates identifying the vehicle
10 as an ambulance. The Secretary shall forward to the Department
11 of Healthcare and Family Services ~~Public Aid~~ registration
12 information for the purpose of verification of claims filed
13 with the Department by ambulance owners for payment for
14 services to public assistance recipients.

15 (j) The Secretary of State shall issue for every public and
16 private medical carrier or rescue vehicle livery registration
17 plates displaying numbers within ranges of numbers reserved
18 respectively for medical carriers and rescue vehicles. The
19 Secretary shall forward to the Department of Healthcare and
20 Family Services ~~Public Aid~~ registration information for the
21 purpose of verification of claims filed with the Department by
22 owners of medical carriers or rescue vehicles for payment for
23 services to public assistance recipients.

24 (k) The Secretary of State shall issue distinctive license
25 plates or distinctive license plate stickers for every vehicle
26 exempted from subsection (a) of Section 12-503 by subsection
27 (g-5) of that Section.

28 (Source: P.A. 94-239, eff. 1-1-06; 94-564, eff. 8-12-05;
29 revised 8-19-05.)

30 (625 ILCS 5/16-104b)

31 Sec. 16-104b. Amounts for Trauma Center Fund. In counties
32 that have elected not to distribute moneys under the
33 disbursement formulas in Sections 27.5 and 27.6 of the Clerks
34 of Courts Act, the Circuit Clerk of the County, when collecting
35 fees, fines, costs, additional penalties, bail balances

1 assessed or forfeited, and any other amount imposed upon a
2 conviction of or an order of supervision for a violation of
3 laws or ordinances regulating the movement of traffic that
4 amounts to \$55 or more, shall remit \$5 of the total amount
5 collected, less 2 1/2% of the \$5 to help defray the
6 administrative costs incurred by the Clerk, except that upon a
7 conviction or order of supervision for driving under the
8 influence of alcohol or drugs the Clerk shall remit \$105 of the
9 total amount collected (\$5 for a traffic violation that amounts
10 to \$55 or more and an additional fee of \$100 to be collected by
11 the Circuit Clerk for a conviction or order of supervision for
12 driving under the influence of alcohol or drugs), less the 2
13 1/2%, within 60 days to the State Treasurer to be deposited
14 into the Trauma Center Fund. Of the amounts deposited into the
15 Trauma Center Fund under this Section, 50% shall be disbursed
16 to the Department of Public Health and 50% shall be disbursed
17 to the Department of Healthcare and Family Services ~~Public Aid~~.
18 Not later than March 1 of each year the Circuit Clerk shall
19 submit a report of the amount of funds remitted to the State
20 Treasurer under this Section during the preceding calendar
21 year.

22 (Source: P.A. 92-431, eff. 1-1-02.)

23 Section 9520. The Clerks of Courts Act is amended by
24 changing Section 27.6 as follows:

25 (705 ILCS 105/27.6)

26 Sec. 27.6. (a) All fees, fines, costs, additional
27 penalties, bail balances assessed or forfeited, and any other
28 amount paid by a person to the circuit clerk equalling an
29 amount of \$55 or more, except the additional fee required by
30 subsections (b) and (c), restitution under Section 5-5-6 of the
31 Unified Code of Corrections, reimbursement for the costs of an
32 emergency response as provided under Section 11-501 of the
33 Illinois Vehicle Code, any fees collected for attending a
34 traffic safety program under paragraph (c) of Supreme Court

1 Rule 529, any fee collected on behalf of a State's Attorney
2 under Section 4-2002 of the Counties Code or a sheriff under
3 Section 4-5001 of the Counties Code, or any cost imposed under
4 Section 124A-5 of the Code of Criminal Procedure of 1963, for
5 convictions, orders of supervision, or any other disposition
6 for a violation of Chapters 3, 4, 6, 11, and 12 of the Illinois
7 Vehicle Code, or a similar provision of a local ordinance, and
8 any violation of the Child Passenger Protection Act, or a
9 similar provision of a local ordinance, and except as provided
10 in subsection (d) shall be disbursed within 60 days after
11 receipt by the circuit clerk as follows: 44.5% shall be
12 disbursed to the entity authorized by law to receive the fine
13 imposed in the case; 16.825% shall be disbursed to the State
14 Treasurer; and 38.675% shall be disbursed to the county's
15 general corporate fund. Of the 16.825% disbursed to the State
16 Treasurer, 2/17 shall be deposited by the State Treasurer into
17 the Violent Crime Victims Assistance Fund, 5.052/17 shall be
18 deposited into the Traffic and Criminal Conviction Surcharge
19 Fund, 3/17 shall be deposited into the Drivers Education Fund,
20 and 6.948/17 shall be deposited into the Trauma Center Fund. Of
21 the 6.948/17 deposited into the Trauma Center Fund from the
22 16.825% disbursed to the State Treasurer, 50% shall be
23 disbursed to the Department of Public Health and 50% shall be
24 disbursed to the Department of Healthcare and Family Services
25 ~~Public Aid~~. For fiscal year 1993, amounts deposited into the
26 Violent Crime Victims Assistance Fund, the Traffic and Criminal
27 Conviction Surcharge Fund, or the Drivers Education Fund shall
28 not exceed 110% of the amounts deposited into those funds in
29 fiscal year 1991. Any amount that exceeds the 110% limit shall
30 be distributed as follows: 50% shall be disbursed to the
31 county's general corporate fund and 50% shall be disbursed to
32 the entity authorized by law to receive the fine imposed in the
33 case. Not later than March 1 of each year the circuit clerk
34 shall submit a report of the amount of funds remitted to the
35 State Treasurer under this Section during the preceding year
36 based upon independent verification of fines and fees. All

1 counties shall be subject to this Section, except that counties
2 with a population under 2,000,000 may, by ordinance, elect not
3 to be subject to this Section. For offenses subject to this
4 Section, judges shall impose one total sum of money payable for
5 violations. The circuit clerk may add on no additional amounts
6 except for amounts that are required by Sections 27.3a and
7 27.3c of this Act, unless those amounts are specifically waived
8 by the judge. With respect to money collected by the circuit
9 clerk as a result of forfeiture of bail, ex parte judgment or
10 guilty plea pursuant to Supreme Court Rule 529, the circuit
11 clerk shall first deduct and pay amounts required by Sections
12 27.3a and 27.3c of this Act. This Section is a denial and
13 limitation of home rule powers and functions under subsection
14 (h) of Section 6 of Article VII of the Illinois Constitution.

15 (b) In addition to any other fines and court costs assessed
16 by the courts, any person convicted or receiving an order of
17 supervision for driving under the influence of alcohol or drugs
18 shall pay an additional fee of \$100 to the clerk of the circuit
19 court. This amount, less 2 1/2% that shall be used to defray
20 administrative costs incurred by the clerk, shall be remitted
21 by the clerk to the Treasurer within 60 days after receipt for
22 deposit into the Trauma Center Fund. This additional fee of
23 \$100 shall not be considered a part of the fine for purposes of
24 any reduction in the fine for time served either before or
25 after sentencing. Not later than March 1 of each year the
26 Circuit Clerk shall submit a report of the amount of funds
27 remitted to the State Treasurer under this subsection during
28 the preceding calendar year.

29 (b-1) In addition to any other fines and court costs
30 assessed by the courts, any person convicted or receiving an
31 order of supervision for driving under the influence of alcohol
32 or drugs shall pay an additional fee of \$5 to the clerk of the
33 circuit court. This amount, less 2 1/2% that shall be used to
34 defray administrative costs incurred by the clerk, shall be
35 remitted by the clerk to the Treasurer within 60 days after
36 receipt for deposit into the Spinal Cord Injury Paralysis Cure

1 Research Trust Fund. This additional fee of \$5 shall not be
2 considered a part of the fine for purposes of any reduction in
3 the fine for time served either before or after sentencing. Not
4 later than March 1 of each year the Circuit Clerk shall submit
5 a report of the amount of funds remitted to the State Treasurer
6 under this subsection during the preceding calendar year.

7 (c) In addition to any other fines and court costs assessed
8 by the courts, any person convicted for a violation of Sections
9 24-1.1, 24-1.2, or 24-1.5 of the Criminal Code of 1961 or a
10 person sentenced for a violation of the Cannabis Control Act,
11 the Illinois Controlled Substances Act, or the Methamphetamine
12 Control and Community Protection Act shall pay an additional
13 fee of \$100 to the clerk of the circuit court. This amount,
14 less 2 1/2% that shall be used to defray administrative costs
15 incurred by the clerk, shall be remitted by the clerk to the
16 Treasurer within 60 days after receipt for deposit into the
17 Trauma Center Fund. This additional fee of \$100 shall not be
18 considered a part of the fine for purposes of any reduction in
19 the fine for time served either before or after sentencing. Not
20 later than March 1 of each year the Circuit Clerk shall submit
21 a report of the amount of funds remitted to the State Treasurer
22 under this subsection during the preceding calendar year.

23 (c-1) In addition to any other fines and court costs
24 assessed by the courts, any person sentenced for a violation of
25 the Cannabis Control Act, the Illinois Controlled Substances
26 Act, or the Methamphetamine Control and Community Protection
27 Act shall pay an additional fee of \$5 to the clerk of the
28 circuit court. This amount, less 2 1/2% that shall be used to
29 defray administrative costs incurred by the clerk, shall be
30 remitted by the clerk to the Treasurer within 60 days after
31 receipt for deposit into the Spinal Cord Injury Paralysis Cure
32 Research Trust Fund. This additional fee of \$5 shall not be
33 considered a part of the fine for purposes of any reduction in
34 the fine for time served either before or after sentencing. Not
35 later than March 1 of each year the Circuit Clerk shall submit
36 a report of the amount of funds remitted to the State Treasurer

1 under this subsection during the preceding calendar year.

2 (d) The following amounts must be remitted to the State
3 Treasurer for deposit into the Illinois Animal Abuse Fund:

4 (1) 50% of the amounts collected for felony offenses
5 under Sections 3, 3.01, 3.02, 3.03, 4, 4.01, 4.03, 4.04, 5,
6 5.01, 6, 7, 7.5, 7.15, and 16 of the Humane Care for
7 Animals Act and Section 26-5 of the Criminal Code of 1961;

8 (2) 20% of the amounts collected for Class A and Class
9 B misdemeanors under Sections 3, 3.01, 4, 4.01, 4.03, 4.04,
10 5, 5.01, 6, 7, 7.1, 7.5, 7.15, and 16 of the Humane Care
11 for Animals Act and Section 26-5 of the Criminal Code of
12 1961; and

13 (3) 50% of the amounts collected for Class C
14 misdemeanors under Sections 4.01 and 7.1 of the Humane Care
15 for Animals Act and Section 26-5 of the Criminal Code of
16 1961.

17 (Source: P.A. 93-800, eff. 1-1-05; 94-556, eff. 9-11-05.)

18 Section 9525. The Attorney Act is amended by changing
19 Section 1 as follows:

20 (705 ILCS 205/1) (from Ch. 13, par. 1)

21 Sec. 1. No person shall be permitted to practice as an
22 attorney or counselor at law within this State without having
23 previously obtained a license for that purpose from the Supreme
24 Court of this State.

25 No person shall receive any compensation directly or
26 indirectly for any legal services other than a regularly
27 licensed attorney, nor may an unlicensed person advertise or
28 hold himself or herself out to provide legal services.

29 A license, as provided for herein, constitutes the person
30 receiving the same an attorney and counselor at law, according
31 to the law and customs thereof, for and during his good
32 behavior in the practice and authorizes him to demand and
33 receive fees for any services which he may render as an
34 attorney and counselor at law in this State. No person shall be

1 granted a license or renewal authorized by this Act who has
2 defaulted on an educational loan guaranteed by the Illinois
3 Student Assistance Commission; however, a license or renewal
4 may be issued to the aforementioned persons who have
5 established a satisfactory repayment record as determined by
6 the Illinois Student Assistance Commission. No person shall be
7 granted a license or renewal authorized by this Act who is more
8 than 30 days delinquent in complying with a child support
9 order; a license or renewal may be issued, however, if the
10 person has established a satisfactory repayment record as
11 determined (i) by the Department of Healthcare and Family
12 Services (formerly Illinois Department of Public Aid) for cases
13 being enforced under Article X of the Illinois Public Aid Code
14 or (ii) in all other cases by order of court or by written
15 agreement between the custodial parent and non-custodial
16 parent. No person shall be refused a license under this Act on
17 account of sex.

18 Any person practicing, charging or receiving fees for legal
19 services or advertising or holding himself or herself out to
20 provide legal services within this State, either directly or
21 indirectly, without being licensed to practice as herein
22 required, is guilty of contempt of court and shall be punished
23 accordingly, upon complaint being filed in any Circuit Court of
24 this State. Such proceedings shall be conducted in the Courts
25 of the respective counties where the alleged contempt has been
26 committed in the same manner as in cases of indirect contempt
27 and with the right of review by the parties thereto.

28 The provisions of this Act shall be in addition to other
29 remedies permitted by law and shall not be construed to deprive
30 courts of this State of their inherent right to punish for
31 contempt or to restrain the unauthorized practice of law.

32 Nothing in this Act shall be construed to conflict with,
33 amend, or modify Section 5 of the Corporation Practice of Law
34 Prohibition Act or prohibit representation of a party by a
35 person who is not an attorney in a proceeding before either
36 panel of the Illinois Labor Relations Board under the Illinois

1 Public Labor Relations Act, as now or hereafter amended, the
2 Illinois Educational Labor Relations Board under the Illinois
3 Educational Labor Relations Act, as now or hereafter amended,
4 the State Civil Service Commission, the local Civil Service
5 Commissions, or the University Civil Service Merit Board, to
6 the extent allowed pursuant to rules and regulations
7 promulgated by those Boards and Commissions or the giving of
8 information, training, or advocacy or assistance in any
9 meetings or administrative proceedings held pursuant to the
10 federal Individuals with Disabilities Education Act, the
11 federal Rehabilitation Act of 1973, the federal Americans with
12 Disabilities Act of 1990, or the federal Social Security Act,
13 to the extent allowed by those laws or the federal regulations
14 or State statutes implementing those laws.

15 (Source: P.A. 94-659, eff. 1-1-06.)

16 Section 9530. The Juvenile Court Act of 1987 is amended by
17 changing Section 6-9 as follows:

18 (705 ILCS 405/6-9) (from Ch. 37, par. 806-9)

19 Sec. 6-9. Enforcement of liability of parents and others.

20 (1) If parentage is at issue in any proceeding under this
21 Act, the Illinois Parentage Act of 1984 shall apply and the
22 court shall enter orders consistent with that Act. If it
23 appears at any hearing that a parent or any other person named
24 in the petition, liable under the law for the support of the
25 minor, is able to contribute to his or her support, the court
26 shall enter an order requiring that parent or other person to
27 pay the clerk of the court, or to the guardian or custodian
28 appointed under Sections 2-27, 3-28, 4-25 or 5-740, a
29 reasonable sum from time to time for the care, support and
30 necessary special care or treatment, of the minor. If the court
31 determines at any hearing that a parent or any other person
32 named in the petition, liable under the law for the support of
33 the minor, is able to contribute to help defray the costs
34 associated with the minor's detention in a county or regional

1 detention center, the court shall enter an order requiring that
2 parent or other person to pay the clerk of the court a
3 reasonable sum for the care and support of the minor. The court
4 may require reasonable security for the payments. Upon failure
5 to pay, the court may enforce obedience to the order by a
6 proceeding as for contempt of court.

7 If it appears that the person liable for the support of the
8 minor is able to contribute to legal fees for representation of
9 the minor, the court shall enter an order requiring that person
10 to pay a reasonable sum for the representation, to the attorney
11 providing the representation or to the clerk of the court for
12 deposit in the appropriate account or fund. The sum may be paid
13 as the court directs, and the payment thereof secured and
14 enforced as provided in this Section for support.

15 If it appears at the detention or shelter care hearing of a
16 minor before the court under Section 5-501 that a parent or any
17 other person liable for support of the minor is able to
18 contribute to his or her support, that parent or other person
19 shall be required to pay a fee for room and board at a rate not
20 to exceed \$10 per day established, with the concurrence of the
21 chief judge of the judicial circuit, by the county board of the
22 county in which the minor is detained unless the court
23 determines that it is in the best interest and welfare of the
24 minor to waive the fee. The concurrence of the chief judge
25 shall be in the form of an administrative order. Each week, on
26 a day designated by the clerk of the circuit court, that parent
27 or other person shall pay the clerk for the minor's room and
28 board. All fees for room and board collected by the circuit
29 court clerk shall be disbursed into the separate county fund
30 under Section 6-7.

31 Upon application, the court shall waive liability for
32 support or legal fees under this Section if the parent or other
33 person establishes that he or she is indigent and unable to pay
34 the incurred liability, and the court may reduce or waive
35 liability if the parent or other person establishes
36 circumstances showing that full payment of support or legal

1 fees would result in financial hardship to the person or his or
2 her family.

3 (2) When a person so ordered to pay for the care and
4 support of a minor is employed for wages, salary or commission,
5 the court may order him to make the support payments for which
6 he is liable under this Act out of his wages, salary or
7 commission and to assign so much thereof as will pay the
8 support. The court may also order him to make discovery to the
9 court as to his place of employment and the amounts earned by
10 him. Upon his failure to obey the orders of court he may be
11 punished as for contempt of court.

12 (3) If the minor is a recipient of public aid under the
13 Illinois Public Aid Code, the court shall order that payments
14 made by a parent or through assignment of his wages, salary or
15 commission be made directly to (a) the ~~Illinois~~ Department of
16 Healthcare and Family Services Public Aid if the minor is a
17 recipient of aid under Article V of the Code, (b) the
18 Department of Human Services if the minor is a recipient of aid
19 under Article IV of the Code, or (c) the local governmental
20 unit responsible for the support of the minor if he is a
21 recipient under Articles VI or VII of the Code. The order shall
22 permit the ~~Illinois~~ Department of Healthcare and Family
23 Services Public Aid, the Department of Human Services, or the
24 local governmental unit, as the case may be, to direct that
25 subsequent payments be made directly to the guardian or
26 custodian of the minor, or to some other person or agency in
27 the minor's behalf, upon removal of the minor from the public
28 aid rolls; and upon such direction and removal of the minor
29 from the public aid rolls, the ~~Illinois~~ Department of
30 Healthcare and Family Services Public Aid, Department of Human
31 Services, or local governmental unit, as the case requires,
32 shall give written notice of such action to the court. Payments
33 received by the ~~Illinois~~ Department of Healthcare and Family
34 Services Public Aid, Department of Human Services, or local
35 governmental unit are to be covered, respectively, into the
36 General Revenue Fund of the State Treasury or General

1 Assistance Fund of the governmental unit, as provided in
2 Section 10-19 of the Illinois Public Aid Code.

3 (Source: P.A. 90-157, eff. 1-1-98; 90-483, eff. 1-1-98; 90-590,
4 eff. 1-1-99; 90-655, eff. 7-30-98; 91-357, eff. 7-29-99.)

5 Section 9535. The Court of Claims Act is amended by
6 changing Section 21 as follows:

7 (705 ILCS 505/21) (from Ch. 37, par. 439.21)

8 Sec. 21. The court is authorized to impose, by uniform
9 rules, a fee of \$15 for the filing of a petition in any case in
10 which the award sought is more than \$50 and less than \$1,000
11 and \$35 in any case in which the award sought is \$1,000 or
12 more; and to charge and collect for copies of opinions or other
13 documents filed in the Court of Claims such fees as may be
14 prescribed by the rules of the Court. All fees and charges so
15 collected shall be forthwith paid into the State Treasury.

16 A petitioner who is a prisoner in an Illinois Department of
17 Corrections facility who files a pleading, motion, or other
18 filing that purports to be a legal document against the State,
19 the Illinois Department of Corrections, the Prisoner Review
20 Board, or any of their officers or employees in which the court
21 makes a specific finding that it is frivolous shall pay all
22 filing fees and court costs in the manner provided in Article
23 XXII of the Code of Civil Procedure.

24 In claims based upon lapsed appropriations or lost warrant
25 or in claims filed under the Line of Duty Compensation Act, the
26 Illinois National Guardsman's Compensation Act, or the Crime
27 Victims Compensation Act or in claims filed by medical vendors
28 for medical services rendered by the claimant to persons
29 eligible for Medical Assistance under programs administered by
30 the ~~Illinois~~ Department of Healthcare and Family Services
31 ~~Public Aid~~, no filing fee shall be required.

32 (Source: P.A. 93-1047, eff. 10-18-04.)

33 Section 9540. The Criminal Code of 1961 is amended by

1 changing Section 12-2 as follows:

2 (720 ILCS 5/12-2) (from Ch. 38, par. 12-2)

3 Sec. 12-2. Aggravated assault.

4 (a) A person commits an aggravated assault, when, in
5 committing an assault, he:

6 (1) Uses a deadly weapon or any device manufactured and
7 designed to be substantially similar in appearance to a
8 firearm, other than by discharging a firearm in the
9 direction of another person, a peace officer, a person
10 summoned or directed by a peace officer, a correctional
11 officer or a fireman or in the direction of a vehicle
12 occupied by another person, a peace officer, a person
13 summoned or directed by a peace officer, a correctional
14 officer or a fireman while the officer or fireman is
15 engaged in the execution of any of his official duties, or
16 to prevent the officer or fireman from performing his
17 official duties, or in retaliation for the officer or
18 fireman performing his official duties;

19 (2) Is hooded, robed or masked in such manner as to
20 conceal his identity or any device manufactured and
21 designed to be substantially similar in appearance to a
22 firearm;

23 (3) Knows the individual assaulted to be a teacher or
24 other person employed in any school and such teacher or
25 other employee is upon the grounds of a school or grounds
26 adjacent thereto, or is in any part of a building used for
27 school purposes;

28 (4) Knows the individual assaulted to be a supervisor,
29 director, instructor or other person employed in any park
30 district and such supervisor, director, instructor or
31 other employee is upon the grounds of the park or grounds
32 adjacent thereto, or is in any part of a building used for
33 park purposes;

34 (5) Knows the individual assaulted to be a caseworker,
35 investigator, or other person employed by the Department of

1 Healthcare and Family Services (formerly State Department
2 of Public Aid), a County Department of Public Aid, or the
3 Department of Human Services (acting as successor to the
4 Illinois Department of Public Aid under the Department of
5 Human Services Act) and such caseworker, investigator, or
6 other person is upon the grounds of a public aid office or
7 grounds adjacent thereto, or is in any part of a building
8 used for public aid purposes, or upon the grounds of a home
9 of a public aid applicant, recipient or any other person
10 being interviewed or investigated in the employees'
11 discharge of his duties, or on grounds adjacent thereto, or
12 is in any part of a building in which the applicant,
13 recipient, or other such person resides or is located;

14 (6) Knows the individual assaulted to be a peace
15 officer, or a community policing volunteer, or a fireman
16 while the officer or fireman is engaged in the execution of
17 any of his official duties, or to prevent the officer,
18 community policing volunteer, or fireman from performing
19 his official duties, or in retaliation for the officer,
20 community policing volunteer, or fireman performing his
21 official duties, and the assault is committed other than by
22 the discharge of a firearm in the direction of the officer
23 or fireman or in the direction of a vehicle occupied by the
24 officer or fireman;

25 (7) Knows the individual assaulted to be an emergency
26 medical technician - ambulance, emergency medical
27 technician - intermediate, emergency medical technician -
28 paramedic, ambulance driver or other medical assistance or
29 first aid personnel engaged in the execution of any of his
30 official duties, or to prevent the emergency medical
31 technician - ambulance, emergency medical technician -
32 intermediate, emergency medical technician - paramedic,
33 ambulance driver, or other medical assistance or first aid
34 personnel from performing his official duties, or in
35 retaliation for the emergency medical technician -
36 ambulance, emergency medical technician - intermediate,

1 emergency medical technician - paramedic, ambulance
2 driver, or other medical assistance or first aid personnel
3 performing his official duties;

4 (8) Knows the individual assaulted to be the driver,
5 operator, employee or passenger of any transportation
6 facility or system engaged in the business of
7 transportation of the public for hire and the individual
8 assaulted is then performing in such capacity or then using
9 such public transportation as a passenger or using any area
10 of any description designated by the transportation
11 facility or system as a vehicle boarding, departure, or
12 transfer location;

13 (9) Or the individual assaulted is on or about a public
14 way, public property, or public place of accommodation or
15 amusement;

16 (9.5) Is, or the individual assaulted is, in or about a
17 publicly or privately owned sports or entertainment arena,
18 stadium, community or convention hall, special event
19 center, amusement facility, or a special event center in a
20 public park during any 24-hour period when a professional
21 sporting event, National Collegiate Athletic Association
22 (NCAA)-sanctioned sporting event, United States Olympic
23 Committee-sanctioned sporting event, or International
24 Olympic Committee-sanctioned sporting event is taking
25 place in this venue;

26 (10) Knows the individual assaulted to be an employee
27 of the State of Illinois, a municipal corporation therein
28 or a political subdivision thereof, engaged in the
29 performance of his authorized duties as such employee;

30 (11) Knowingly and without legal justification,
31 commits an assault on a physically handicapped person;

32 (12) Knowingly and without legal justification,
33 commits an assault on a person 60 years of age or older;

34 (13) Discharges a firearm;

35 (14) Knows the individual assaulted to be a
36 correctional officer, while the officer is engaged in the

1 execution of any of his or her official duties, or to
2 prevent the officer from performing his or her official
3 duties, or in retaliation for the officer performing his or
4 her official duties;

5 (15) Knows the individual assaulted to be a
6 correctional employee or an employee of the Department of
7 Human Services supervising or controlling sexually
8 dangerous persons or sexually violent persons, while the
9 employee is engaged in the execution of any of his or her
10 official duties, or to prevent the employee from performing
11 his or her official duties, or in retaliation for the
12 employee performing his or her official duties, and the
13 assault is committed other than by the discharge of a
14 firearm in the direction of the employee or in the
15 direction of a vehicle occupied by the employee;

16 (16) Knows the individual assaulted to be an employee
17 of a police or sheriff's department engaged in the
18 performance of his or her official duties as such employee;
19 ~~or~~

20 (17) Knows the individual assaulted to be a sports
21 official or coach at any level of competition and the act
22 causing the assault to the sports official or coach
23 occurred within an athletic facility or an indoor or
24 outdoor playing field or within the immediate vicinity of
25 the athletic facility or an indoor or outdoor playing field
26 at which the sports official or coach was an active
27 participant in the athletic contest held at the athletic
28 facility. For the purposes of this paragraph (17), "sports
29 official" means a person at an athletic contest who
30 enforces the rules of the contest, such as an umpire or
31 referee; and "coach" means a person recognized as a coach
32 by the sanctioning authority that conducted the athletic
33 contest; or

34 (18) Knows the individual assaulted to be an emergency
35 management worker, while the emergency management worker
36 is engaged in the execution of any of his or her official

1 duties, or to prevent the emergency management worker from
2 performing his or her official duties, or in retaliation
3 for the emergency management worker performing his or her
4 official duties, and the assault is committed other than by
5 the discharge of a firearm in the direction of the
6 emergency management worker or in the direction of a
7 vehicle occupied by the emergency management worker.

8 (a-5) A person commits an aggravated assault when he or she
9 knowingly and without lawful justification shines or flashes a
10 laser gunsight or other laser device that is attached or
11 affixed to a firearm, or used in concert with a firearm, so
12 that the laser beam strikes near or in the immediate vicinity
13 of any person.

14 (b) Sentence.

15 Aggravated assault as defined in paragraphs (1) through (5)
16 and (8) through (12) and (17) of subsection (a) of this Section
17 is a Class A misdemeanor. Aggravated assault as defined in
18 paragraphs (13), (14), and (15) of subsection (a) of this
19 Section and as defined in subsection (a-5) of this Section is a
20 Class 4 felony. Aggravated assault as defined in paragraphs
21 (6), (7), (16), and (18) of subsection (a) of this Section is a
22 Class A misdemeanor if a firearm is not used in the commission
23 of the assault. Aggravated assault as defined in paragraphs
24 (6), (7), (16), and (18) of subsection (a) of this Section is a
25 Class 4 felony if a firearm is used in the commission of the
26 assault.

27 (Source: P.A. 93-692, eff. 1-1-05; 94-243, eff. 1-1-06; 94-482,
28 eff. 1-1-06; revised 8-19-05.)

29 Section 9545. The Sexually Violent Persons Commitment Act
30 is amended by changing Section 90 as follows:

31 (725 ILCS 207/90)

32 Sec. 90. Committed persons ability to pay for services.
33 Each person committed or detained under this Act who receives
34 services provided directly or funded by the Department and the

1 estate of that person is liable for the payment of sums
2 representing charges for services to the person at a rate to be
3 determined by the Department. Services charges against that
4 person take effect on the date of admission or the effective
5 date of this Section. The Department in its rules may establish
6 a maximum rate for the cost of services. In the case of any
7 person who has received residential services from the
8 Department, whether directly from the Department or through a
9 public or private agency or entity funded by the Department,
10 the liability shall be the same regardless of the source of
11 services. When the person is placed in a facility outside the
12 Department, the facility shall collect reimbursement from the
13 person. The Department may supplement the contribution of the
14 person to private facilities after all other sources of income
15 have been utilized; however the supplement shall not exceed the
16 allowable rate under Title XVIII or Title XIX of the Federal
17 Social Security Act for those persons eligible for those
18 respective programs. The Department may pay the actual costs of
19 services or maintenance in the facility and may collect
20 reimbursement for the entire amount paid from the person or an
21 amount not to exceed the maximum. Lesser or greater amounts may
22 be accepted by the Department when conditions warrant that
23 action or when offered by persons not liable under this Act.
24 Nothing in this Section shall preclude the Department from
25 applying federal benefits that are specifically provided for
26 the care and treatment of a disabled person toward the cost of
27 care provided by a State facility or private agency. The
28 Department may investigate the financial condition of each
29 person committed under this Act, may make determinations of the
30 ability of each such person to pay sums representing services
31 charges, and for those purposes may set a standard as a basis
32 of judgment of ability to pay. The Department shall by rule
33 make provisions for unusual and exceptional circumstances in
34 the application of that standard. The Department may issue to
35 any person liable under this Act a statement of amount due as
36 treatment charges requiring him or her to pay monthly,

1 quarterly, or otherwise as may be arranged, an amount not
2 exceeding that required under this Act, plus fees to which the
3 Department may be entitled under this Act.

4 (a) Whenever an individual is covered, in part or in whole,
5 under any type of insurance arrangement, private or public, for
6 services provided by the Department, the proceeds from the
7 insurance shall be considered as part of the individual's
8 ability to pay notwithstanding that the insurance contract was
9 entered into by a person other than the individual or that the
10 premiums for the insurance were paid for by a person other than
11 the individual. Remittances from intermediary agencies under
12 Title XVIII of the Federal Social Security Act for services to
13 committed persons shall be deposited with the State Treasurer
14 and placed in the Mental Health Fund. Payments received from
15 the Department of Healthcare and Family Services ~~Public Aid~~
16 under Title XIX of the Federal Social Security Act for services
17 to those persons shall be deposited with the State Treasurer
18 and shall be placed in the General Revenue Fund.

19 (b) Any person who has been issued a Notice of
20 Determination of sums due as services charges may petition the
21 Department for a review of that determination. The petition
22 must be in writing and filed with the Department within 90 days
23 from the date of the Notice of Determination. The Department
24 shall provide for a hearing to be held on the charges for the
25 period covered by the petition. The Department may after the
26 hearing, cancel, modify, or increase the former determination
27 to an amount not to exceed the maximum provided for the person
28 by this Act. The Department at its expense shall take testimony
29 and preserve a record of all proceedings at the hearing upon
30 any petition for a release from or modification of the
31 determination. The petition and other documents in the nature
32 of pleadings and motions filed in the case, a transcript of
33 testimony, findings of the Department, and orders of the
34 Secretary constitute the record. The Secretary shall furnish a
35 transcript of the record to any person upon payment of 75¢ per
36 page for each original transcript and 25¢ per page for each

1 copy of the transcript. Any person aggrieved by the decision of
2 the Department upon a hearing may, within 30 days thereafter,
3 file a petition with the Department for review of the decision
4 by the Board of Reimbursement Appeals established in the Mental
5 Health and Developmental Disabilities Code. The Board of
6 Reimbursement Appeals may approve action taken by the
7 Department or may remand the case to the Secretary with
8 recommendation for redetermination of charges.

9 (c) Upon receiving a petition for review under subsection
10 (b) of this Section, the Department shall thereupon notify the
11 Board of Reimbursement Appeals which shall render its decision
12 thereon within 30 days after the petition is filed and certify
13 such decision to the Department. Concurrence of a majority of
14 the Board is necessary in any such decision. Upon request of
15 the Department, the State's Attorney of the county in which a
16 client who is liable under this Act for payment of sums
17 representing services charges resides, shall institute
18 appropriate legal action against any such client, or within the
19 time provided by law shall file a claim against the estate of
20 the client who fails or refuses to pay those charges. The court
21 shall order the payment of sums due for services charges for
22 such period or periods of time as the circumstances require.
23 The order may be entered against any defendant and may be based
24 upon the proportionate ability of each defendant to contribute
25 to the payment of sums representing services charges including
26 the actual charges for services in facilities outside the
27 Department where the Department has paid those charges. Orders
28 for the payment of money may be enforced by attachment as for
29 contempt against the persons of the defendants and, in
30 addition, as other judgments for the payment of money, and
31 costs may be adjudged against the defendants and apportioned
32 among them.

33 (d) The money collected shall be deposited into the Mental
34 Health Fund.

35 (Source: P.A. 90-793, eff. 8-14-98.)

1 Section 9550. The Unified Code of Corrections is amended by
2 changing Sections 3-2-2 and 3-5-4 as follows:

3 (730 ILCS 5/3-2-2) (from Ch. 38, par. 1003-2-2)

4 Sec. 3-2-2. Powers and Duties of the Department.

5 (1) In addition to the powers, duties and responsibilities
6 which are otherwise provided by law, the Department shall have
7 the following powers:

8 (a) To accept persons committed to it by the courts of
9 this State for care, custody, treatment and
10 rehabilitation, and to accept federal prisoners and aliens
11 over whom the Office of the Federal Detention Trustee is
12 authorized to exercise the federal detention function for
13 limited purposes and periods of time.

14 (b) To develop and maintain reception and evaluation
15 units for purposes of analyzing the custody and
16 rehabilitation needs of persons committed to it and to
17 assign such persons to institutions and programs under its
18 control or transfer them to other appropriate agencies. In
19 consultation with the Department of Alcoholism and
20 Substance Abuse (now the Department of Human Services), the
21 Department of Corrections shall develop a master plan for
22 the screening and evaluation of persons committed to its
23 custody who have alcohol or drug abuse problems, and for
24 making appropriate treatment available to such persons;
25 the Department shall report to the General Assembly on such
26 plan not later than April 1, 1987. The maintenance and
27 implementation of such plan shall be contingent upon the
28 availability of funds.

29 (b-1) To create and implement, on January 1, 2002, a
30 pilot program to establish the effectiveness of
31 pupillometer technology (the measurement of the pupil's
32 reaction to light) as an alternative to a urine test for
33 purposes of screening and evaluating persons committed to
34 its custody who have alcohol or drug problems. The pilot
35 program shall require the pupillometer technology to be

1 used in at least one Department of Corrections facility.
2 The Director may expand the pilot program to include an
3 additional facility or facilities as he or she deems
4 appropriate. A minimum of 4,000 tests shall be included in
5 the pilot program. The Department must report to the
6 General Assembly on the effectiveness of the program by
7 January 1, 2003.

8 (b-5) To develop, in consultation with the Department
9 of State Police, a program for tracking and evaluating each
10 inmate from commitment through release for recording his or
11 her gang affiliations, activities, or ranks.

12 (c) To maintain and administer all State correctional
13 institutions and facilities under its control and to
14 establish new ones as needed. Pursuant to its power to
15 establish new institutions and facilities, the Department
16 may, with the written approval of the Governor, authorize
17 the Department of Central Management Services to enter into
18 an agreement of the type described in subsection (d) of
19 Section 405-300 of the Department of Central Management
20 Services Law (20 ILCS 405/405-300). The Department shall
21 designate those institutions which shall constitute the
22 State Penitentiary System.

23 Pursuant to its power to establish new institutions and
24 facilities, the Department may authorize the Department of
25 Central Management Services to accept bids from counties
26 and municipalities for the construction, remodeling or
27 conversion of a structure to be leased to the Department of
28 Corrections for the purposes of its serving as a
29 correctional institution or facility. Such construction,
30 remodeling or conversion may be financed with revenue bonds
31 issued pursuant to the Industrial Building Revenue Bond Act
32 by the municipality or county. The lease specified in a bid
33 shall be for a term of not less than the time needed to
34 retire any revenue bonds used to finance the project, but
35 not to exceed 40 years. The lease may grant to the State
36 the option to purchase the structure outright.

1 Upon receipt of the bids, the Department may certify
2 one or more of the bids and shall submit any such bids to
3 the General Assembly for approval. Upon approval of a bid
4 by a constitutional majority of both houses of the General
5 Assembly, pursuant to joint resolution, the Department of
6 Central Management Services may enter into an agreement
7 with the county or municipality pursuant to such bid.

8 (c-5) To build and maintain regional juvenile
9 detention centers and to charge a per diem to the counties
10 as established by the Department to defray the costs of
11 housing each minor in a center. In this subsection (c-5),
12 "juvenile detention center" means a facility to house
13 minors during pendency of trial who have been transferred
14 from proceedings under the Juvenile Court Act of 1987 to
15 prosecutions under the criminal laws of this State in
16 accordance with Section 5-805 of the Juvenile Court Act of
17 1987, whether the transfer was by operation of law or
18 permissive under that Section. The Department shall
19 designate the counties to be served by each regional
20 juvenile detention center.

21 (d) To develop and maintain programs of control,
22 rehabilitation and employment of committed persons within
23 its institutions.

24 (e) To establish a system of supervision and guidance
25 of committed persons in the community.

26 (f) To establish in cooperation with the Department of
27 Transportation to supply a sufficient number of prisoners
28 for use by the Department of Transportation to clean up the
29 trash and garbage along State, county, township, or
30 municipal highways as designated by the Department of
31 Transportation. The Department of Corrections, at the
32 request of the Department of Transportation, shall furnish
33 such prisoners at least annually for a period to be agreed
34 upon between the Director of Corrections and the Director
35 of Transportation. The prisoners used on this program shall
36 be selected by the Director of Corrections on whatever

1 basis he deems proper in consideration of their term,
2 behavior and earned eligibility to participate in such
3 program - where they will be outside of the prison facility
4 but still in the custody of the Department of Corrections.
5 Prisoners convicted of first degree murder, or a Class X
6 felony, or armed violence, or aggravated kidnapping, or
7 criminal sexual assault, aggravated criminal sexual abuse
8 or a subsequent conviction for criminal sexual abuse, or
9 forcible detention, or arson, or a prisoner adjudged a
10 Habitual Criminal shall not be eligible for selection to
11 participate in such program. The prisoners shall remain as
12 prisoners in the custody of the Department of Corrections
13 and such Department shall furnish whatever security is
14 necessary. The Department of Transportation shall furnish
15 trucks and equipment for the highway cleanup program and
16 personnel to supervise and direct the program. Neither the
17 Department of Corrections nor the Department of
18 Transportation shall replace any regular employee with a
19 prisoner.

20 (g) To maintain records of persons committed to it and
21 to establish programs of research, statistics and
22 planning.

23 (h) To investigate the grievances of any person
24 committed to the Department, to inquire into any alleged
25 misconduct by employees or committed persons, and to
26 investigate the assets of committed persons to implement
27 Section 3-7-6 of this Code; and for these purposes it may
28 issue subpoenas and compel the attendance of witnesses and
29 the production of writings and papers, and may examine
30 under oath any witnesses who may appear before it; to also
31 investigate alleged violations of a parolee's or
32 releasee's conditions of parole or release; and for this
33 purpose it may issue subpoenas and compel the attendance of
34 witnesses and the production of documents only if there is
35 reason to believe that such procedures would provide
36 evidence that such violations have occurred.

1 If any person fails to obey a subpoena issued under
2 this subsection, the Director may apply to any circuit
3 court to secure compliance with the subpoena. The failure
4 to comply with the order of the court issued in response
5 thereto shall be punishable as contempt of court.

6 (i) To appoint and remove the chief administrative
7 officers, and administer programs of training and
8 development of personnel of the Department. Personnel
9 assigned by the Department to be responsible for the
10 custody and control of committed persons or to investigate
11 the alleged misconduct of committed persons or employees or
12 alleged violations of a parolee's or releasee's conditions
13 of parole shall be conservators of the peace for those
14 purposes, and shall have the full power of peace officers
15 outside of the facilities of the Department in the
16 protection, arrest, retaking and reconfining of committed
17 persons or where the exercise of such power is necessary to
18 the investigation of such misconduct or violations.

19 (j) To cooperate with other departments and agencies
20 and with local communities for the development of standards
21 and programs for better correctional services in this
22 State.

23 (k) To administer all moneys and properties of the
24 Department.

25 (l) To report annually to the Governor on the committed
26 persons, institutions and programs of the Department.

27 (1-5) In a confidential annual report to the Governor,
28 the Department shall identify all inmate gangs by
29 specifying each current gang's name, population and allied
30 gangs. The Department shall further specify the number of
31 top leaders identified by the Department for each gang
32 during the past year, and the measures taken by the
33 Department to segregate each leader from his or her gang
34 and allied gangs. The Department shall further report the
35 current status of leaders identified and segregated in
36 previous years. All leaders described in the report shall

1 be identified by inmate number or other designation to
2 enable tracking, auditing, and verification without
3 revealing the names of the leaders. Because this report
4 contains law enforcement intelligence information
5 collected by the Department, the report is confidential and
6 not subject to public disclosure.

7 (m) To make all rules and regulations and exercise all
8 powers and duties vested by law in the Department.

9 (n) To establish rules and regulations for
10 administering a system of good conduct credits,
11 established in accordance with Section 3-6-3, subject to
12 review by the Prisoner Review Board.

13 (o) To administer the distribution of funds from the
14 State Treasury to reimburse counties where State penal
15 institutions are located for the payment of assistant
16 state's attorneys' salaries under Section 4-2001 of the
17 Counties Code.

18 (p) To exchange information with the Department of
19 Human Services and the ~~Illinois~~ Department of Healthcare
20 and Family Services ~~Public Aid~~ for the purpose of verifying
21 living arrangements and for other purposes directly
22 connected with the administration of this Code and the
23 Illinois Public Aid Code.

24 (q) To establish a diversion program.

25 The program shall provide a structured environment for
26 selected technical parole or mandatory supervised release
27 violators and committed persons who have violated the rules
28 governing their conduct while in work release. This program
29 shall not apply to those persons who have committed a new
30 offense while serving on parole or mandatory supervised
31 release or while committed to work release.

32 Elements of the program shall include, but shall not be
33 limited to, the following:

34 (1) The staff of a diversion facility shall provide
35 supervision in accordance with required objectives set
36 by the facility.

1 (2) Participants shall be required to maintain
2 employment.

3 (3) Each participant shall pay for room and board
4 at the facility on a sliding-scale basis according to
5 the participant's income.

6 (4) Each participant shall:

7 (A) provide restitution to victims in
8 accordance with any court order;

9 (B) provide financial support to his
10 dependents; and

11 (C) make appropriate payments toward any other
12 court-ordered obligations.

13 (5) Each participant shall complete community
14 service in addition to employment.

15 (6) Participants shall take part in such
16 counseling, educational and other programs as the
17 Department may deem appropriate.

18 (7) Participants shall submit to drug and alcohol
19 screening.

20 (8) The Department shall promulgate rules
21 governing the administration of the program.

22 (r) To enter into intergovernmental cooperation
23 agreements under which persons in the custody of the
24 Department may participate in a county impact
25 incarceration program established under Section 3-6038 or
26 3-15003.5 of the Counties Code.

27 (r-5) To enter into intergovernmental cooperation
28 agreements under which minors adjudicated delinquent and
29 committed to the Department of Corrections, Juvenile
30 Division, may participate in a county juvenile impact
31 incarceration program established under Section 3-6039 of
32 the Counties Code.

33 (r-10) To systematically and routinely identify with
34 respect to each streetgang active within the correctional
35 system: (1) each active gang; (2) every existing inter-gang
36 affiliation or alliance; and (3) the current leaders in

1 each gang. The Department shall promptly segregate leaders
2 from inmates who belong to their gangs and allied gangs.
3 "Segregate" means no physical contact and, to the extent
4 possible under the conditions and space available at the
5 correctional facility, prohibition of visual and sound
6 communication. For the purposes of this paragraph (r-10),
7 "leaders" means persons who:

8 (i) are members of a criminal streetgang;

9 (ii) with respect to other individuals within the
10 streetgang, occupy a position of organizer,
11 supervisor, or other position of management or
12 leadership; and

13 (iii) are actively and personally engaged in
14 directing, ordering, authorizing, or requesting
15 commission of criminal acts by others, which are
16 punishable as a felony, in furtherance of streetgang
17 related activity both within and outside of the
18 Department of Corrections.

19 "Streetgang", "gang", and "streetgang related" have the
20 meanings ascribed to them in Section 10 of the Illinois
21 Streetgang Terrorism Omnibus Prevention Act.

22 (s) To operate a super-maximum security institution,
23 in order to manage and supervise inmates who are disruptive
24 or dangerous and provide for the safety and security of the
25 staff and the other inmates.

26 (t) To monitor any unprivileged conversation or any
27 unprivileged communication, whether in person or by mail,
28 telephone, or other means, between an inmate who, before
29 commitment to the Department, was a member of an organized
30 gang and any other person without the need to show cause or
31 satisfy any other requirement of law before beginning the
32 monitoring, except as constitutionally required. The
33 monitoring may be by video, voice, or other method of
34 recording or by any other means. As used in this
35 subdivision (1)(t), "organized gang" has the meaning
36 ascribed to it in Section 10 of the Illinois Streetgang

1 Terrorism Omnibus Prevention Act.

2 As used in this subdivision (1)(t), "unprivileged
3 conversation" or "unprivileged communication" means a
4 conversation or communication that is not protected by any
5 privilege recognized by law or by decision, rule, or order
6 of the Illinois Supreme Court.

7 (u) To establish a Women's and Children's Pre-release
8 Community Supervision Program for the purpose of providing
9 housing and services to eligible female inmates, as
10 determined by the Department, and their newborn and young
11 children.

12 (v) To do all other acts necessary to carry out the
13 provisions of this Chapter.

14 (2) The Department of Corrections shall by January 1, 1998,
15 consider building and operating a correctional facility within
16 100 miles of a county of over 2,000,000 inhabitants, especially
17 a facility designed to house juvenile participants in the
18 impact incarceration program.

19 (3) On and after the effective date of this amendatory Act
20 of the 94th General Assembly, as provided in the Executive
21 Order 3 (2005) Implementation Act:

22 (1) The Department of Healthcare and Family Services
23 shall perform all State healthcare purchasing functions
24 under this Code in connection with medical services to be
25 provided to persons committed to the Department of
26 Corrections.

27 (2) The Department of Corrections shall perform all
28 functions under this Code with respect to the
29 administration and management of medical services to be
30 provided to persons committed to Department.

31 When the Department of Healthcare and Family Services lets
32 bids for contracts for medical services to be provided to
33 persons committed to Department of Corrections facilities by a
34 health maintenance organization, medical service corporation,
35 or other health care provider, the bid may only be let to a
36 health care provider that has obtained an irrevocable letter of

1 credit or performance bond issued by a company whose bonds are
2 rated AAA by a bond rating organization.

3 (4) When the Department lets bids for contracts for food or
4 commissary services to be provided to Department facilities,
5 the bid may only be let to a food or commissary services
6 provider that has obtained an irrevocable letter of credit or
7 performance bond issued by a company whose bonds are rated AAA
8 by a bond rating organization.

9 (Source: P.A. 92-444, eff. 1-1-02; 92-712, eff. 1-1-03; 93-839,
10 eff. 7-30-04.)

11 (730 ILCS 5/3-5-4)

12 Sec. 3-5-4. Exchange of information for child support
13 enforcement.

14 (a) The Department shall exchange with the ~~Illinois~~
15 Department of Healthcare and Family Services ~~Public Aid~~
16 information that may be necessary for the enforcement of child
17 support orders entered pursuant to the Illinois Public Aid
18 Code, the Illinois Marriage and Dissolution of Marriage Act,
19 the Non-Support of Spouse and Children Act, the Non-Support
20 Punishment Act, the Revised Uniform Reciprocal Enforcement of
21 Support Act, the Uniform Interstate Family Support Act, or the
22 Illinois Parentage Act of 1984.

23 (b) Notwithstanding any provisions in this Code to the
24 contrary, the Department shall not be liable to any person for
25 any disclosure of information to the Department of Healthcare
26 and Family Services (formerly Illinois Department of Public
27 Aid) under subsection (a) or for any other action taken in good
28 faith to comply with the requirements of subsection (a).

29 (Source: P.A. 90-18, eff. 1-1-97; 91-613, eff. 10-1-99.)

30 Section 9555. The County Jail Act is amended by changing
31 Section 17 as follows:

32 (730 ILCS 125/17) (from Ch. 75, par. 117)

33 Sec. 17. Bedding, clothing, fuel, and medical aid;

1 reimbursement for medical or hospital expenses. The Warden of
2 the jail shall furnish necessary bedding, clothing, fuel and
3 medical aid for all prisoners under his charge, and keep an
4 accurate account of the same. When medical or hospital services
5 are required by any person held in custody, the county, private
6 hospital, physician or any public agency which provides such
7 services shall be entitled to obtain reimbursement from the
8 county or from the Arrestee's Medical Costs Fund to the extent
9 that moneys in the Fund are available for the cost of such
10 services. The county board of a county may adopt an ordinance
11 or resolution providing for reimbursement for the cost of those
12 services at the Department of Healthcare and Family Services'
13 ~~Public Aid's~~ rates for medical assistance. To the extent that
14 such person is reasonably able to pay for such care, including
15 reimbursement from any insurance program or from other medical
16 benefit programs available to such person, he or she shall
17 reimburse the county or arresting authority. If such person has
18 already been determined eligible for medical assistance under
19 the Illinois Public Aid Code at the time the person is
20 initially detained pending trial, the cost of such services, to
21 the extent such cost exceeds \$500, shall be reimbursed by the
22 Department of Healthcare and Family Services ~~Public Aid~~ under
23 that Code. A reimbursement under any public or private program
24 authorized by this Section shall be paid to the county or
25 arresting authority to the same extent as would have been
26 obtained had the services been rendered in a non-custodial
27 environment.

28 An arresting authority shall be responsible for any
29 incurred medical expenses relating to the arrestee until such
30 time as the arrestee is placed in the custody of the sheriff.
31 However, the arresting authority shall not be so responsible if
32 the arrest was made pursuant to a request by the sheriff. When
33 medical or hospital services are required by any person held in
34 custody, the county or arresting authority shall be entitled to
35 obtain reimbursement from the Arrestee's Medical Costs Fund to
36 the extent moneys are available from the Fund. To the extent

1 that the person is reasonably able to pay for that care,
2 including reimbursement from any insurance program or from
3 other medical benefit programs available to the person, he or
4 she shall reimburse the county.

5 The county shall be entitled to a \$10 fee for each
6 conviction or order of supervision for a criminal violation,
7 other than a petty offense or business offense. The fee shall
8 be taxed as costs to be collected from the defendant, if
9 possible, upon conviction or entry of an order of supervision.
10 The fee shall not be considered a part of the fine for purposes
11 of any reduction in the fine.

12 All such fees collected shall be deposited by the county in
13 a fund to be established and known as the Arrestee's Medical
14 Costs Fund. Moneys in the Fund shall be used solely for
15 reimbursement of costs for medical expenses relating to the
16 arrestee while he or she is in the custody of the sheriff and
17 administration of the Fund.

18 For the purposes of this Section, "arresting authority"
19 means a unit of local government, other than a county, which
20 employs peace officers and whose peace officers have made the
21 arrest of a person. For the purposes of this Section, "medical
22 expenses relating to the arrestee" means only those expenses
23 incurred for medical care or treatment provided to an arrestee
24 on account of an injury suffered by the arrestee during the
25 course of his arrest; the term does not include any expenses
26 incurred for medical care or treatment provided to an arrestee
27 on account of a health condition of the arrestee which existed
28 prior to the time of his arrest.

29 (Source: P.A. 94-494, eff. 8-8-05.)

30 Section 9560. The Code of Civil Procedure is amended by
31 changing Section 12-710 as follows:

32 (735 ILCS 5/12-710) (from Ch. 110, par. 12-710)

33 Sec. 12-710. Adverse claims; Trial.

34 (a) In the event any indebtedness or other property due

1 from or in the possession of a garnishee is claimed by any
2 other person, the court shall permit the claimant to appear and
3 maintain his or her claim. A claimant not voluntarily appearing
4 shall be served with notice as the court shall direct. If a
5 claimant fails to appear after being served with notice in the
6 manner directed, he or she shall be concluded by the judgment
7 entered in the garnishment proceeding.

8 (b) If the adverse claimant appears and, within the time
9 the court allows, files his or her claim and serves a copy
10 thereof upon the judgment creditor, the judgment debtor, and
11 the garnishee, he or she is then a party to the garnishment
12 proceeding; and his or her claim shall be tried and determined
13 with the other issues in the garnishment action. Upon
14 certification by the Department of Healthcare and Family
15 Services (formerly Illinois Department of Public Aid) that a
16 person who is receiving support payments under this Section is
17 a public aid recipient, any support payments subsequently
18 received by the clerk of the court shall be transmitted to the
19 ~~Illinois Department of Public Aid~~ until the Department gives
20 notice to cease such transmittal. If the adverse claimant is
21 entitled to all or part of the indebtedness or other property,
22 the court shall enter judgment in accordance with the interests
23 of the parties.

24 (c) Claims for the support of a spouse or dependent
25 children shall be superior to all other claims for garnishment
26 of property.

27 (Source: P.A. 87-1252.)

28 Section 9565. The Mental Health and Developmental
29 Disabilities Confidentiality Act is amended by changing
30 Section 7.1 as follows:

31 (740 ILCS 110/7.1)

32 Sec. 7.1. Interagency disclosures.

33 (a) Nothing in this Act shall be construed to prevent the
34 interagency disclosure of the name, social security number, and

1 information concerning services rendered, currently being
2 rendered, or proposed to be rendered regarding a recipient of
3 services. This disclosure may be made only between agencies or
4 departments of the State including, but not limited to: (i) the
5 Department of Human Services, (ii) the Department of Healthcare
6 and Family Services ~~Public Aid~~, (iii) the Department of Public
7 Health, (iv) the State Board of Education, and (v) the
8 Department of Children and Family Services for the purpose of a
9 diligent search for a missing parent pursuant to Sections 2-15
10 and 2-16 of the Juvenile Court Act of 1987 if the Department of
11 Children and Family Services has reason to believe the parent
12 is residing in a mental health facility, when one or more
13 agencies or departments of the State have entered into a prior
14 interagency agreement, memorandum of understanding, or similar
15 agreement to jointly provide or cooperate in the provision of
16 or funding of mental health or developmental disabilities
17 services.

18 The Department of Children and Family Services shall not
19 redisclose the information received under this Section other
20 than for purposes of service provision or as necessary for
21 proceedings under the Juvenile Court Act of 1987.

22 (b) This Section applies to, but is not limited to,
23 interagency disclosures under interagency agreements entered
24 into in compliance with the Early Intervention Services System
25 Act.

26 (c) Information disclosed under this Section shall be for
27 the limited purpose of coordinating State efforts in providing
28 efficient interagency service systems and avoiding duplication
29 of interagency services.

30 (d) Information disclosed under this Section shall be
31 limited to the recipient's name, address, social security
32 number or other individually assigned identifying number, or
33 information generally descriptive of services rendered or to be
34 rendered. The disclosure of individual clinical or treatment
35 records or other confidential information is not authorized by
36 this Section.

1 (Source: P.A. 89-507, eff. 7-1-97; 90-608, eff. 6-30-98.)

2 Section 9570. The Good Samaritan Act is amended by changing
3 Section 20 as follows:

4 (745 ILCS 49/20)

5 Sec. 20. Free dental clinic; exemption from civil liability
6 for services performed without compensation. Any person
7 licensed under the Illinois Dental Practice Act to practice
8 dentistry or to practice as a dental hygienist who, in good
9 faith, provides dental treatment, dental services, diagnoses,
10 or advice as part of the services of an established free dental
11 clinic providing care to medically indigent patients which is
12 limited to care which does not require the services of a
13 licensed hospital or ambulatory surgical treatment center, and
14 who receives no fee or compensation from that source shall not,
15 as a result of any acts or omissions, except for willful or
16 wanton misconduct on the part of the licensee, in providing
17 dental treatment, dental services, diagnoses or advice, be
18 liable for civil damages. For purposes of this Section, a "free
19 dental clinic" is an organized program providing, without
20 charge, dental care to individuals unable to pay for their
21 care. For purposes of this Section, an "organized program" is a
22 program sponsored by a community, public health, charitable,
23 voluntary, or organized dental organization. Free dental
24 services provided under this Section may be provided at a
25 clinic or private dental office. A free dental clinic may
26 receive reimbursement from the ~~Illinois~~ Department of
27 Healthcare and Family Services ~~Public Aid~~ or may receive
28 partial reimbursement from a patient based upon ability to pay,
29 provided any such reimbursements shall be used only to pay
30 overhead expenses of operating the free dental clinic and may
31 not be used, in whole or in part, to provide a fee,
32 reimbursement, or other compensation to any person licensed
33 under the Illinois Dental Practice Act who is receiving an
34 exemption under this Section or to any entity that the person

1 owns or controls or in which the person has an ownership
2 interest or from which the person receives a fee,
3 reimbursement, or compensation of any kind. Dental care shall
4 not include the use of general anesthesia or require an
5 overnight stay in a health care facility.

6 The provisions of this Section shall not apply in any case
7 unless the free dental clinic has posted in a conspicuous place
8 on its premises an explanation of the immunity from civil
9 liability provided in this Section.

10 (Source: P.A. 94-83, eff. 1-1-06.)

11 Section 9575. The Illinois Marriage and Dissolution of
12 Marriage Act is amended by changing Sections 505, 505.1, 505.2,
13 505.3, 506, 507, 507.1, 510, 516, 517, 704, 705, 709, and 712
14 as follows:

15 (750 ILCS 5/505) (from Ch. 40, par. 505)

16 Sec. 505. Child support; contempt; penalties.

17 (a) In a proceeding for dissolution of marriage, legal
18 separation, declaration of invalidity of marriage, a
19 proceeding for child support following dissolution of the
20 marriage by a court which lacked personal jurisdiction over the
21 absent spouse, a proceeding for modification of a previous
22 order for child support under Section 510 of this Act, or any
23 proceeding authorized under Section 501 or 601 of this Act, the
24 court may order either or both parents owing a duty of support
25 to a child of the marriage to pay an amount reasonable and
26 necessary for his support, without regard to marital
27 misconduct. The duty of support owed to a child includes the
28 obligation to provide for the reasonable and necessary
29 physical, mental and emotional health needs of the child. For
30 purposes of this Section, the term "child" shall include any
31 child under age 18 and any child under age 19 who is still
32 attending high school.

33 (1) The Court shall determine the minimum amount of
34 support by using the following guidelines:

1	Number of Children	Percent of Supporting Party's
2		Net Income
3	1	20%
4	2	28%
5	3	32%
6	4	40%
7	5	45%
8	6 or more	50%

9 (2) The above guidelines shall be applied in each case
10 unless the court makes a finding that application of the
11 guidelines would be inappropriate, after considering the
12 best interests of the child in light of evidence including
13 but not limited to one or more of the following relevant
14 factors:

15 (a) the financial resources and needs of the child;

16 (b) the financial resources and needs of the
17 custodial parent;

18 (c) the standard of living the child would have
19 enjoyed had the marriage not been dissolved;

20 (d) the physical and emotional condition of the
21 child, and his educational needs; and

22 (e) the financial resources and needs of the
23 non-custodial parent.

24 If the court deviates from the guidelines, the court's
25 finding shall state the amount of support that would have
26 been required under the guidelines, if determinable. The
27 court shall include the reason or reasons for the variance
28 from the guidelines.

29 (3) "Net income" is defined as the total of all income
30 from all sources, minus the following deductions:

31 (a) Federal income tax (properly calculated
32 withholding or estimated payments);

33 (b) State income tax (properly calculated
34 withholding or estimated payments);

35 (c) Social Security (FICA payments);

36 (d) Mandatory retirement contributions required by

1 law or as a condition of employment;

2 (e) Union dues;

3 (f) Dependent and individual
4 health/hospitalization insurance premiums;

5 (g) Prior obligations of support or maintenance
6 actually paid pursuant to a court order;

7 (h) Expenditures for repayment of debts that
8 represent reasonable and necessary expenses for the
9 production of income, medical expenditures necessary
10 to preserve life or health, reasonable expenditures
11 for the benefit of the child and the other parent,
12 exclusive of gifts. The court shall reduce net income
13 in determining the minimum amount of support to be
14 ordered only for the period that such payments are due
15 and shall enter an order containing provisions for its
16 self-executing modification upon termination of such
17 payment period.

18 (4) In cases where the court order provides for
19 health/hospitalization insurance coverage pursuant to
20 Section 505.2 of this Act, the premiums for that insurance,
21 or that portion of the premiums for which the supporting
22 party is responsible in the case of insurance provided
23 through an employer's health insurance plan where the
24 employer pays a portion of the premiums, shall be
25 subtracted from net income in determining the minimum
26 amount of support to be ordered.

27 (4.5) In a proceeding for child support following
28 dissolution of the marriage by a court that lacked personal
29 jurisdiction over the absent spouse, and in which the court
30 is requiring payment of support for the period before the
31 date an order for current support is entered, there is a
32 rebuttable presumption that the supporting party's net
33 income for the prior period was the same as his or her net
34 income at the time the order for current support is
35 entered.

36 (5) If the net income cannot be determined because of

1 default or any other reason, the court shall order support
2 in an amount considered reasonable in the particular case.
3 The final order in all cases shall state the support level
4 in dollar amounts. However, if the court finds that the
5 child support amount cannot be expressed exclusively as a
6 dollar amount because all or a portion of the payor's net
7 income is uncertain as to source, time of payment, or
8 amount, the court may order a percentage amount of support
9 in addition to a specific dollar amount and enter such
10 other orders as may be necessary to determine and enforce,
11 on a timely basis, the applicable support ordered.

12 (6) If (i) the non-custodial parent was properly served
13 with a request for discovery of financial information
14 relating to the non-custodial parent's ability to provide
15 child support, (ii) the non-custodial parent failed to
16 comply with the request, despite having been ordered to do
17 so by the court, and (iii) the non-custodial parent is not
18 present at the hearing to determine support despite having
19 received proper notice, then any relevant financial
20 information concerning the non-custodial parent's ability
21 to provide child support that was obtained pursuant to
22 subpoena and proper notice shall be admitted into evidence
23 without the need to establish any further foundation for
24 its admission.

25 (a-5) In an action to enforce an order for support based on
26 the respondent's failure to make support payments as required
27 by the order, notice of proceedings to hold the respondent in
28 contempt for that failure may be served on the respondent by
29 personal service or by regular mail addressed to the
30 respondent's last known address. The respondent's last known
31 address may be determined from records of the clerk of the
32 court, from the Federal Case Registry of Child Support Orders,
33 or by any other reasonable means.

34 (b) Failure of either parent to comply with an order to pay
35 support shall be punishable as in other cases of contempt. In
36 addition to other penalties provided by law the Court may,

1 after finding the parent guilty of contempt, order that the
2 parent be:

3 (1) placed on probation with such conditions of
4 probation as the Court deems advisable;

5 (2) sentenced to periodic imprisonment for a period not
6 to exceed 6 months; provided, however, that the Court may
7 permit the parent to be released for periods of time during
8 the day or night to:

9 (A) work; or

10 (B) conduct a business or other self-employed
11 occupation.

12 The Court may further order any part or all of the earnings
13 of a parent during a sentence of periodic imprisonment paid to
14 the Clerk of the Circuit Court or to the parent having custody
15 or to the guardian having custody of the children of the
16 sentenced parent for the support of said children until further
17 order of the Court.

18 If there is a unity of interest and ownership sufficient to
19 render no financial separation between a non-custodial parent
20 and another person or persons or business entity, the court may
21 pierce the ownership veil of the person, persons, or business
22 entity to discover assets of the non-custodial parent held in
23 the name of that person, those persons, or that business
24 entity. The following circumstances are sufficient to
25 authorize a court to order discovery of the assets of a person,
26 persons, or business entity and to compel the application of
27 any discovered assets toward payment on the judgment for
28 support:

29 (1) the non-custodial parent and the person, persons,
30 or business entity maintain records together.

31 (2) the non-custodial parent and the person, persons,
32 or business entity fail to maintain an arms length
33 relationship between themselves with regard to any assets.

34 (3) the non-custodial parent transfers assets to the
35 person, persons, or business entity with the intent to
36 perpetrate a fraud on the custodial parent.

1 With respect to assets which are real property, no order
2 entered under this paragraph shall affect the rights of bona
3 fide purchasers, mortgagees, judgment creditors, or other lien
4 holders who acquire their interests in the property prior to
5 the time a notice of lis pendens pursuant to the Code of Civil
6 Procedure or a copy of the order is placed of record in the
7 office of the recorder of deeds for the county in which the
8 real property is located.

9 The court may also order in cases where the parent is 90
10 days or more delinquent in payment of support or has been
11 adjudicated in arrears in an amount equal to 90 days obligation
12 or more, that the parent's Illinois driving privileges be
13 suspended until the court determines that the parent is in
14 compliance with the order of support. The court may also order
15 that the parent be issued a family financial responsibility
16 driving permit that would allow limited driving privileges for
17 employment and medical purposes in accordance with Section
18 7-702.1 of the Illinois Vehicle Code. The clerk of the circuit
19 court shall certify the order suspending the driving privileges
20 of the parent or granting the issuance of a family financial
21 responsibility driving permit to the Secretary of State on
22 forms prescribed by the Secretary. Upon receipt of the
23 authenticated documents, the Secretary of State shall suspend
24 the parent's driving privileges until further order of the
25 court and shall, if ordered by the court, subject to the
26 provisions of Section 7-702.1 of the Illinois Vehicle Code,
27 issue a family financial responsibility driving permit to the
28 parent.

29 In addition to the penalties or punishment that may be
30 imposed under this Section, any person whose conduct
31 constitutes a violation of Section 15 of the Non-Support
32 Punishment Act may be prosecuted under that Act, and a person
33 convicted under that Act may be sentenced in accordance with
34 that Act. The sentence may include but need not be limited to a
35 requirement that the person perform community service under
36 Section 50 of that Act or participate in a work alternative

1 program under Section 50 of that Act. A person may not be
2 required to participate in a work alternative program under
3 Section 50 of that Act if the person is currently participating
4 in a work program pursuant to Section 505.1 of this Act.

5 A support obligation, or any portion of a support
6 obligation, which becomes due and remains unpaid as of the end
7 of each month, excluding the child support that was due for
8 that month to the extent that it was not paid in that month,
9 shall accrue simple interest as set forth in Section 12-109 of
10 the Code of Civil Procedure. An order for support entered or
11 modified on or after January 1, 2006 shall contain a statement
12 that a support obligation required under the order, or any
13 portion of a support obligation required under the order, that
14 becomes due and remains unpaid as of the end of each month,
15 excluding the child support that was due for that month to the
16 extent that it was not paid in that month, shall accrue simple
17 interest as set forth in Section 12-109 of the Code of Civil
18 Procedure. Failure to include the statement in the order for
19 support does not affect the validity of the order or the
20 accrual of interest as provided in this Section.

21 (c) A one-time charge of 20% is imposable upon the amount
22 of past-due child support owed on July 1, 1988 which has
23 accrued under a support order entered by the court. The charge
24 shall be imposed in accordance with the provisions of Section
25 10-21 of the Illinois Public Aid Code and shall be enforced by
26 the court upon petition.

27 (d) Any new or existing support order entered by the court
28 under this Section shall be deemed to be a series of judgments
29 against the person obligated to pay support thereunder, each
30 such judgment to be in the amount of each payment or
31 installment of support and each such judgment to be deemed
32 entered as of the date the corresponding payment or installment
33 becomes due under the terms of the support order. Each such
34 judgment shall have the full force, effect and attributes of
35 any other judgment of this State, including the ability to be
36 enforced. A lien arises by operation of law against the real

1 and personal property of the noncustodial parent for each
2 installment of overdue support owed by the noncustodial parent.

3 (e) When child support is to be paid through the clerk of
4 the court in a county of 1,000,000 inhabitants or less, the
5 order shall direct the obligor to pay to the clerk, in addition
6 to the child support payments, all fees imposed by the county
7 board under paragraph (3) of subsection (u) of Section 27.1 of
8 the Clerks of Courts Act. Unless paid in cash or pursuant to an
9 order for withholding, the payment of the fee shall be by a
10 separate instrument from the support payment and shall be made
11 to the order of the Clerk.

12 (f) All orders for support, when entered or modified, shall
13 include a provision requiring the obligor to notify the court
14 and, in cases in which a party is receiving child and spouse
15 services under Article X of the Illinois Public Aid Code, the
16 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
17 ~~Aid~~, within 7 days, (i) of the name and address of any new
18 employer of the obligor, (ii) whether the obligor has access to
19 health insurance coverage through the employer or other group
20 coverage and, if so, the policy name and number and the names
21 of persons covered under the policy, and (iii) of any new
22 residential or mailing address or telephone number of the
23 non-custodial parent. In any subsequent action to enforce a
24 support order, upon a sufficient showing that a diligent effort
25 has been made to ascertain the location of the non-custodial
26 parent, service of process or provision of notice necessary in
27 the case may be made at the last known address of the
28 non-custodial parent in any manner expressly provided by the
29 Code of Civil Procedure or this Act, which service shall be
30 sufficient for purposes of due process.

31 (g) An order for support shall include a date on which the
32 current support obligation terminates. The termination date
33 shall be no earlier than the date on which the child covered by
34 the order will attain the age of 18. However, if the child will
35 not graduate from high school until after attaining the age of
36 18, then the termination date shall be no earlier than the

1 earlier of the date on which the child's high school graduation
2 will occur or the date on which the child will attain the age
3 of 19. The order for support shall state that the termination
4 date does not apply to any arrearage that may remain unpaid on
5 that date. Nothing in this subsection shall be construed to
6 prevent the court from modifying the order or terminating the
7 order in the event the child is otherwise emancipated.

8 (g-5) If there is an unpaid arrearage or delinquency (as
9 those terms are defined in the Income Withholding for Support
10 Act) equal to at least one month's support obligation on the
11 termination date stated in the order for support or, if there
12 is no termination date stated in the order, on the date the
13 child attains the age of majority or is otherwise emancipated,
14 the periodic amount required to be paid for current support of
15 that child immediately prior to that date shall automatically
16 continue to be an obligation, not as current support but as
17 periodic payment toward satisfaction of the unpaid arrearage or
18 delinquency. That periodic payment shall be in addition to any
19 periodic payment previously required for satisfaction of the
20 arrearage or delinquency. The total periodic amount to be paid
21 toward satisfaction of the arrearage or delinquency may be
22 enforced and collected by any method provided by law for
23 enforcement and collection of child support, including but not
24 limited to income withholding under the Income Withholding for
25 Support Act. Each order for support entered or modified on or
26 after the effective date of this amendatory Act of the 93rd
27 General Assembly must contain a statement notifying the parties
28 of the requirements of this subsection. Failure to include the
29 statement in the order for support does not affect the validity
30 of the order or the operation of the provisions of this
31 subsection with regard to the order. This subsection shall not
32 be construed to prevent or affect the establishment or
33 modification of an order for support of a minor child or the
34 establishment or modification of an order for support of a
35 non-minor child or educational expenses under Section 513 of
36 this Act.

1 (h) An order entered under this Section shall include a
2 provision requiring the obligor to report to the obligee and to
3 the clerk of court within 10 days each time the obligor obtains
4 new employment, and each time the obligor's employment is
5 terminated for any reason. The report shall be in writing and
6 shall, in the case of new employment, include the name and
7 address of the new employer. Failure to report new employment
8 or the termination of current employment, if coupled with
9 nonpayment of support for a period in excess of 60 days, is
10 indirect criminal contempt. For any obligor arrested for
11 failure to report new employment bond shall be set in the
12 amount of the child support that should have been paid during
13 the period of unreported employment. An order entered under
14 this Section shall also include a provision requiring the
15 obligor and obligee parents to advise each other of a change in
16 residence within 5 days of the change except when the court
17 finds that the physical, mental, or emotional health of a party
18 or that of a child, or both, would be seriously endangered by
19 disclosure of the party's address.

20 (i) The court does not lose the powers of contempt,
21 driver's license suspension, or other child support
22 enforcement mechanisms, including, but not limited to,
23 criminal prosecution as set forth in this Act, upon the
24 emancipation of the minor child or children.

25 (Source: P.A. 93-148, eff. 7-10-03; 93-1061, eff. 1-1-05;
26 94-90, eff. 1-1-06.)

27 (750 ILCS 5/505.1) (from Ch. 40, par. 505.1)

28 Sec. 505.1. (a) Whenever it is determined in a proceeding
29 to establish or enforce a child support or maintenance
30 obligation that the person owing a duty of support is
31 unemployed, the court may order the person to seek employment
32 and report periodically to the court with a diary, listing or
33 other memorandum of his or her efforts in accordance with such
34 order. Additionally, the court may order the unemployed person
35 to report to the Department of Employment Security for job

1 search services or to make application with the local Job
2 Training Partnership Act provider for participation in job
3 search, training or work programs and where the duty of support
4 is owed to a child receiving child support enforcement services
5 under Article X of the Illinois Public Aid Code, as amended,
6 the court may order the unemployed person to report to the
7 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
8 ~~Aid~~ for participation in job search, training or work programs
9 established under Section 9-6 and Article IXA of that Code.

10 (b) Whenever it is determined that a person owes past-due
11 support for a child or for a child and the parent with whom the
12 child is living, and the child is receiving assistance under
13 the Illinois Public Aid Code, the court shall order at the
14 request of the ~~Illinois~~ Department of Healthcare and Family
15 Services ~~Public Aid~~:

16 (1) that the person pay the past-due support in
17 accordance with a plan approved by the court; or

18 (2) if the person owing past-due support is unemployed,
19 is subject to such a plan, and is not incapacitated, that
20 the person participate in such job search, training, or
21 work programs established under Section 9-6 and Article IXA
22 of the Illinois Public Aid Code as the court deems
23 appropriate.

24 (Source: P.A. 91-357, eff. 7-29-99; 92-590, eff. 7-1-02.)

25 (750 ILCS 5/505.2) (from Ch. 40, par. 505.2)

26 Sec. 505.2. Health insurance.

27 (a) Definitions. As used in this Section:

28 (1) "Obligee" means the individual to whom the duty of
29 support is owed or the individual's legal representative.

30 (2) "Obligor" means the individual who owes a duty of
31 support pursuant to an order for support.

32 (3) "Public office" means any elected official or any
33 State or local agency which is or may become responsible by
34 law for enforcement of, or which is or may become
35 authorized to enforce, an order for support, including, but

1 not limited to: the Attorney General, the Illinois
2 Department of Healthcare and Family Services ~~Public Aid~~,
3 the Illinois Department of Human Services, the Illinois
4 Department of Children and Family Services, and the various
5 State's Attorneys, Clerks of the Circuit Court and
6 supervisors of general assistance.

7 (4) "Child" shall have the meaning ascribed to it in
8 Section 505.

9 (b) Order.

10 (1) Whenever the court establishes, modifies or
11 enforces an order for child support or for child support
12 and maintenance the court shall include in the order a
13 provision for the health care coverage of the child which
14 shall, upon request of the obligee or Public Office,
15 require that any child covered by the order be named as a
16 beneficiary of any health insurance plan that is available
17 to the obligor through an employer or labor union or trade
18 union. If the court finds that such a plan is not available
19 to the obligor, or that the plan is not accessible to the
20 obligee, the court may, upon request of the obligee or
21 Public Office, order the obligor to name the child covered
22 by the order as a beneficiary of any health insurance plan
23 that is available to the obligor on a group basis, or as a
24 beneficiary of an independent health insurance plan to be
25 obtained by the obligor, after considering the following
26 factors:

27 (A) the medical needs of the child;

28 (B) the availability of a plan to meet those needs;

29 and

30 (C) the cost of such a plan to the obligor.

31 (2) If the employer or labor union or trade union
32 offers more than one plan, the order shall require the
33 obligor to name the child as a beneficiary of the plan in
34 which the obligor is enrolled.

35 (3) Nothing in this Section shall be construed to limit
36 the authority of the court to establish or modify a support

1 order to provide for payment of expenses, including
2 deductibles, copayments and any other health expenses,
3 which are in addition to expenses covered by an insurance
4 plan of which a child is ordered to be named a beneficiary
5 pursuant to this Section.

6 (c) Implementation and enforcement.

7 (1) When the court order requires that a minor child be
8 named as a beneficiary of a health insurance plan, other
9 than a health insurance plan available through an employer
10 or labor union or trade union, the obligor shall provide
11 written proof to the obligee or Public Office that the
12 required insurance has been obtained, or that application
13 for insurability has been made, within 30 days of receiving
14 notice of the court order. Unless the obligor was present
15 in court when the order was issued, notice of the order
16 shall be given pursuant to Illinois Supreme Court Rules. If
17 an obligor fails to provide the required proof, he may be
18 held in contempt of court.

19 (2) When the court requires that a child be named as a
20 beneficiary of a health insurance plan available through an
21 employer or labor union or trade union, the court's order
22 shall be implemented in accordance with the Income
23 Withholding for Support Act.

24 (d) Failure to maintain insurance. The dollar amount of the
25 premiums for court-ordered health insurance, or that portion of
26 the premiums for which the obligor is responsible in the case
27 of insurance provided under a group health insurance plan
28 through an employer or labor union or trade union where the
29 employer or labor union or trade union pays a portion of the
30 premiums, shall be considered an additional child support
31 obligation owed by the obligor. Whenever the obligor fails to
32 provide or maintain health insurance pursuant to an order for
33 support, the obligor shall be liable to the obligee for the
34 dollar amount of the premiums which were not paid, and shall
35 also be liable for all medical expenses incurred by the child
36 which would have been paid or reimbursed by the health

1 insurance which the obligor was ordered to provide or maintain.
2 In addition, the obligee may petition the court to modify the
3 order based solely on the obligor's failure to pay the premiums
4 for court-ordered health insurance.

5 (e) Authorization for payment. The signature of the obligee
6 is a valid authorization to the insurer to process a claim for
7 payment under the insurance plan to the provider of the health
8 care services or to the obligee.

9 (f) Disclosure of information. The obligor's employer or
10 labor union or trade union shall disclose to the obligee or
11 Public Office, upon request, information concerning any
12 dependent coverage plans which would be made available to a new
13 employee or labor union member or trade union member. The
14 employer or labor union or trade union shall disclose such
15 information whether or not a court order for medical support
16 has been entered.

17 (g) Employer obligations. If a parent is required by an
18 order for support to provide coverage for a child's health care
19 expenses and if that coverage is available to the parent
20 through an employer who does business in this State, the
21 employer must do all of the following upon receipt of a copy of
22 the order of support or order for withholding:

23 (1) The employer shall, upon the parent's request,
24 permit the parent to include in that coverage a child who
25 is otherwise eligible for that coverage, without regard to
26 any enrollment season restrictions that might otherwise be
27 applicable as to the time period within which the child may
28 be added to that coverage.

29 (2) If the parent has health care coverage through the
30 employer but fails to apply for coverage of the child, the
31 employer shall include the child in the parent's coverage
32 upon application by the child's other parent or the
33 ~~Illinois~~ Department of Healthcare and Family Services
34 ~~Public Aid~~.

35 (3) The employer may not eliminate any child from the
36 parent's health care coverage unless the employee is no

1 longer employed by the employer and no longer covered under
2 the employer's group health plan or unless the employer is
3 provided with satisfactory written evidence of either of
4 the following:

5 (A) The order for support is no longer in effect.

6 (B) The child is or will be included in a
7 comparable health care plan obtained by the parent
8 under such order that is currently in effect or will
9 take effect no later than the date the prior coverage
10 is terminated.

11 The employer may eliminate a child from a parent's
12 health care plan obtained by the parent under such order if
13 the employer has eliminated dependent health care coverage
14 for all of its employees.

15 (Source: P.A. 92-16, eff. 6-28-01; 92-876, eff. 6-1-03.)

16 (750 ILCS 5/505.3)

17 Sec. 505.3. Information to State Case Registry.

18 (a) In this Section:

19 "Order for support", "obligor", "obligee", and "business
20 day" are defined as set forth in the Income Withholding for
21 Support Act.

22 "State Case Registry" means the State Case Registry
23 established under Section 10-27 of the Illinois Public Aid
24 Code.

25 (b) Each order for support entered or modified by the
26 circuit court under this Act shall require that the obligor and
27 obligee (i) file with the clerk of the circuit court the
28 information required by this Section (and any other information
29 required under Title IV, Part D of the Social Security Act or
30 by the federal Department of Health and Human Services) at the
31 time of entry or modification of the order for support and (ii)
32 file updated information with the clerk within 5 business days
33 of any change. Failure of the obligor or obligee to file or
34 update the required information shall be punishable as in cases
35 of contempt. The failure shall not prevent the court from

1 entering or modifying the order for support, however.

2 (c) The obligor shall file the following information: the
3 obligor's name, date of birth, social security number, and
4 mailing address.

5 If either the obligor or the obligee receives child support
6 enforcement services from the ~~Illinois~~ Department of
7 Healthcare and Family Services ~~Public Aid~~ under Article X of
8 the Illinois Public Aid Code, the obligor shall also file the
9 following information: the obligor's telephone number,
10 driver's license number, and residential address (if different
11 from the obligor's mailing address), and the name, address, and
12 telephone number of the obligor's employer or employers.

13 (d) The obligee shall file the following information:

14 (1) The names of the obligee and the child or children
15 covered by the order for support.

16 (2) The dates of birth of the obligee and the child or
17 children covered by the order for support.

18 (3) The social security numbers of the obligee and the
19 child or children covered by the order for support.

20 (4) The obligee's mailing address.

21 (e) In cases in which the obligee receives child support
22 enforcement services from the ~~Illinois~~ Department of
23 Healthcare and Family Services ~~Public Aid~~ under Article X of
24 the Illinois Public Aid Code, the order for support shall (i)
25 require that the obligee file the information required under
26 subsection (d) with the ~~Illinois~~ Department of Healthcare and
27 Family Services ~~Public Aid~~ for inclusion in the State Case
28 Registry, rather than file the information with the clerk, and
29 (ii) require that the obligee include the following additional
30 information:

31 (1) The obligee's telephone and driver's license
32 numbers.

33 (2) The obligee's residential address, if different
34 from the obligee's mailing address.

35 (3) The name, address, and telephone number of the
36 obligee's employer or employers.

1 The order for support shall also require that the obligee
2 update the information filed with the ~~Illinois~~ Department of
3 Healthcare and Family Services ~~Public Aid~~ within 5 business
4 days of any change.

5 (f) The clerk shall provide the information filed under
6 this Section, together with the court docket number and county
7 in which the order for support was entered, to the State Case
8 Registry within 5 business days after receipt of the
9 information.

10 (g) In a case in which a party is receiving child support
11 enforcement services under Article X of the Illinois Public Aid
12 Code, the clerk shall provide the following additional
13 information to the State Case Registry within 5 business days
14 after entry or modification of an order for support or request
15 from the ~~Illinois~~ Department of Healthcare and Family Services
16 ~~Public Aid~~:

17 (1) The amount of monthly or other periodic support
18 owed under the order for support and other amounts,
19 including arrearage, interest, or late payment penalties
20 and fees, due or overdue under the order.

21 (2) Any such amounts that have been received by the
22 clerk, and the distribution of those amounts by the clerk.

23 (h) Information filed by the obligor and obligee under this
24 Section that is not specifically required to be included in the
25 body of an order for support under other laws is not a public
26 record and shall be treated as confidential and subject to
27 disclosure only in accordance with the provisions of this
28 Section, Section 10-27 of the Illinois Public Aid Code, and
29 Title IV, Part D of the Social Security Act.

30 (Source: P.A. 91-212, eff. 7-20-99; 92-16, eff. 6-28-01;
31 92-463, eff. 8-22-01; 92-651, eff. 7-11-02.)

32 (750 ILCS 5/506) (from Ch. 40, par. 506)

33 Sec. 506. Representation of child.

34 (a) Duties. In any proceedings involving the support,
35 custody, visitation, education, parentage, property interest,

1 or general welfare of a minor or dependent child, the court
2 may, on its own motion or that of any party, appoint an
3 attorney to serve in one of the following capacities to address
4 the issues the court delineates:

5 (1) Attorney. The attorney shall provide independent
6 legal counsel for the child and shall owe the same duties
7 of undivided loyalty, confidentiality, and competent
8 representation as are due an adult client.

9 (2) Guardian ad litem. The guardian ad litem shall
10 testify or submit a written report to the court regarding
11 his or her recommendations in accordance with the best
12 interest of the child. The report shall be made available
13 to all parties. The guardian ad litem may be called as a
14 witness for purposes of cross-examination regarding the
15 guardian ad litem's report or recommendations. The
16 guardian ad litem shall investigate the facts of the case
17 and interview the child and the parties.

18 (3) Child representative. The child representative
19 shall advocate what the child representative finds to be in
20 the best interests of the child after reviewing the facts
21 and circumstances of the case. The child representative
22 shall meet with the child and the parties, investigate the
23 facts of the case, and encourage settlement and the use of
24 alternative forms of dispute resolution. The child
25 representative shall have the same authority and
26 obligation to participate in the litigation as does an
27 attorney for a party and shall possess all the powers of
28 investigation as does a guardian ad litem. The child
29 representative shall consider, but not be bound by, the
30 expressed wishes of the child. A child representative shall
31 have received training in child advocacy or shall possess
32 such experience as determined to be equivalent to such
33 training by the chief judge of the circuit where the child
34 representative has been appointed. The child
35 representative shall not disclose confidential
36 communications made by the child, except as required by law

1 or by the Rules of Professional Conduct. The child
2 representative shall not render an opinion,
3 recommendation, or report to the court and shall not be
4 called as a witness, but shall offer evidence-based legal
5 arguments. The child representative shall disclose the
6 position as to what the child representative intends to
7 advocate in a pre-trial memorandum that shall be served
8 upon all counsel of record prior to the trial. The position
9 disclosed in the pre-trial memorandum shall not be
10 considered evidence. The court and the parties may consider
11 the position of the child representative for purposes of a
12 settlement conference.

13 (a-3) Additional appointments. During the proceedings the
14 court may appoint an additional attorney to serve in the
15 capacity described in subdivision (a)(1) or an additional
16 attorney to serve in another of the capacities described in
17 subdivision (a)(2) or (a)(3) on the court's own motion or that
18 of a party only for good cause shown and when the reasons for
19 the additional appointment are set forth in specific findings.

20 (a-5) Appointment considerations. In deciding whether to
21 make an appointment of an attorney for the minor child, a
22 guardian ad litem, or a child representative, the court shall
23 consider the nature and adequacy of the evidence to be
24 presented by the parties and the availability of other methods
25 of obtaining information, including social service
26 organizations and evaluations by mental health professions, as
27 well as resources for payment.

28 In no event is this Section intended to or designed to
29 abrogate the decision making power of the trier of fact. Any
30 appointment made under this Section is not intended to nor
31 should it serve to place any appointed individual in the role
32 of a surrogate judge.

33 (b) Fees and costs. The court shall enter an order as
34 appropriate for costs, fees, and disbursements, including a
35 retainer, when the attorney, guardian ad litem, or child's
36 representative is appointed. Any person appointed under this

1 Section shall file with the court within 90 days of his or her
2 appointment, and every subsequent 90-day period thereafter
3 during the course of his or her representation, a detailed
4 invoice for services rendered with a copy being sent to each
5 party. The court shall review the invoice submitted and approve
6 the fees, if they are reasonable and necessary. Any order
7 approving the fees shall require payment by either or both
8 parents, by any other party or source, or from the marital
9 estate or the child's separate estate. The court may not order
10 payment by the ~~Illinois~~ Department of Healthcare and Family
11 Services ~~Public Aid~~ in cases in which the Department is
12 providing child support enforcement services under Article X of
13 the Illinois Public Aid Code. Unless otherwise ordered by the
14 court at the time fees and costs are approved, all fees and
15 costs payable to an attorney, guardian ad litem, or child
16 representative under this Section are by implication deemed to
17 be in the nature of support of the child and are within the
18 exceptions to discharge in bankruptcy under 11 U.S.C.A. 523.
19 The provisions of Sections 501 and 508 of this Act shall apply
20 to fees and costs for attorneys appointed under this Section.

21 (Source: P.A. 94-640, eff. 1-1-06.)

22 (750 ILCS 5/507) (from Ch. 40, par. 507)

23 Sec. 507. Payment of maintenance or support to court.

24 (a) In actions instituted under this Act, the court shall
25 order that maintenance and support payments be made to the
26 clerk of court as trustee for remittance to the person entitled
27 to receive the payments. However, the court in its discretion
28 may direct otherwise where circumstances so warrant.

29 (b) The clerk of court shall maintain records listing the
30 amount of payments, the date payments are required to be made
31 and the names and addresses of the parties affected by the
32 order. For those cases in which support is payable to the clerk
33 of the circuit court for transmittal to the Department of
34 Healthcare and Family Services (formerly Illinois Department
35 of Public Aid) by order of the court or upon notification of

1 the Department of Healthcare and Family Services (formerly
2 Illinois Department of Public Aid), and the ~~Illinois~~ Department
3 ~~of Public Aid~~ collects support by assignment, offset,
4 withholding, deduction or other process permitted by law, the
5 ~~Illinois~~ Department shall notify the clerk of the date and
6 amount of such collection. Upon notification, the clerk shall
7 record the collection on the payment record for the case.

8 (c) The parties affected by the order shall inform the
9 clerk of court of any change of address or of other condition
10 that may affect the administration of the order.

11 (d) The provisions of this Section shall not apply to cases
12 that come under the provisions of Sections 709 through 712.

13 (e) To the extent the provisions of this Section are
14 inconsistent with the requirements pertaining to the State
15 Disbursement Unit under Section 507.1 of this Act and Section
16 10-26 of the Illinois Public Aid Code, the requirements
17 pertaining to the State Disbursement Unit shall apply.

18 (Source: P.A. 94-88, eff. 1-1-06.)

19 (750 ILCS 5/507.1)

20 Sec. 507.1. Payment of Support to State Disbursement Unit.

21 (a) As used in this Section:

22 "Order for support", "obligor", "obligee", and "payor"
23 mean those terms as defined in the Income Withholding for
24 Support Act, except that "order for support" shall not mean
25 orders providing for spousal maintenance under which there is
26 no child support obligation.

27 (b) Notwithstanding any other provision of this Act to the
28 contrary, each order for support entered or modified on or
29 after October 1, 1999 shall require that support payments be
30 made to the State Disbursement Unit established under Section
31 10-26 of the Illinois Public Aid Code if:

32 (1) a party to the order is receiving child support
33 enforcement services under Article X of the Illinois Public
34 Aid Code; or

35 (2) no party to the order is receiving child support

1 enforcement services, but the support payments are made
2 through income withholding.

3 (c) Support payments shall be made to the State
4 Disbursement Unit if:

5 (1) the order for support was entered before October 1,
6 1999, and a party to the order is receiving child support
7 enforcement services under Article X of the Illinois Public
8 Aid Code; or

9 (2) no party to the order is receiving child support
10 enforcement services, and the support payments are being
11 made through income withholding.

12 (c-5) If no party to the order is receiving child support
13 enforcement services under Article X of the Illinois Public Aid
14 Code, and the support payments are not made through income
15 withholding, then support payments shall be made as directed by
16 the order for support.

17 (c-10) At any time, and notwithstanding the existence of an
18 order directing payments to be made elsewhere, the Department
19 of Healthcare and Family Services ~~Public Aid~~ may provide notice
20 to the obligor and, where applicable, to the obligor's payor:

21 (1) to make support payments to the State Disbursement
22 Unit if:

23 (A) a party to the order for support is receiving
24 child support enforcement services under Article X of
25 the Illinois Public Aid Code; or

26 (B) no party to the order for support is receiving
27 child support enforcement services under Article X of
28 the Illinois Public Aid Code, but the support payments
29 are made through income withholding; or

30 (2) to make support payments to the State Disbursement
31 Unit of another state upon request of another state's Title
32 IV-D child support enforcement agency, in accordance with
33 the requirements of Title IV, Part D of the Social Security
34 Act and regulations promulgated under that Part D.

35 The Department of Healthcare and Family Services ~~Public Aid~~
36 shall provide a copy of the notice to the obligee and to the

1 clerk of the circuit court.

2 (c-15) Within 15 days after the effective date of this
3 amendatory Act of the 91st General Assembly, the clerk of the
4 circuit court shall provide written notice to the obligor to
5 make payments directly to the clerk of the circuit court if no
6 party to the order is receiving child support enforcement
7 services under Article X of the Illinois Public Aid Code, the
8 support payments are not made through income withholding, and
9 the order for support requires support payments to be made
10 directly to the clerk of the circuit court. The clerk shall
11 provide a copy of the notice to the obligee.

12 (c-20) If the State Disbursement Unit receives a support
13 payment that was not appropriately made to the Unit under this
14 Section, the Unit shall immediately return the payment to the
15 sender, including, if possible, instructions detailing where
16 to send the support payment.

17 (d) The notices under subsections (c-10) and (c-15) may be
18 sent by ordinary mail, certified mail, return receipt
19 requested, facsimile transmission, or other electronic
20 process, or may be served upon the obligor or payor using any
21 method provided by law for service of a summons.

22 (Source: P.A. 91-212, eff. 7-20-99; 91-677, eff. 1-5-00;
23 92-590, eff. 7-1-02.)

24 (750 ILCS 5/510) (from Ch. 40, par. 510)

25 Sec. 510. Modification and termination of provisions for
26 maintenance, support, educational expenses, and property
27 disposition.

28 (a) Except as otherwise provided in paragraph (f) of
29 Section 502 and in subsection (b), clause (3) of Section 505.2,
30 the provisions of any judgment respecting maintenance or
31 support may be modified only as to installments accruing
32 subsequent to due notice by the moving party of the filing of
33 the motion for modification. An order for child support may be
34 modified as follows:

35 (1) upon a showing of a substantial change in

1 circumstances; and

2 (2) without the necessity of showing a substantial
3 change in circumstances, as follows:

4 (A) upon a showing of an inconsistency of at least
5 20%, but no less than \$10 per month, between the amount
6 of the existing order and the amount of child support
7 that results from application of the guidelines
8 specified in Section 505 of this Act unless the
9 inconsistency is due to the fact that the amount of the
10 existing order resulted from a deviation from the
11 guideline amount and there has not been a change in the
12 circumstances that resulted in that deviation; or

13 (B) Upon a showing of a need to provide for the
14 health care needs of the child under the order through
15 health insurance or other means. In no event shall the
16 eligibility for or receipt of medical assistance be
17 considered to meet the need to provide for the child's
18 health care needs.

19 The provisions of subparagraph (a)(2)(A) shall apply only
20 in cases in which a party is receiving child support
21 enforcement services from the ~~Illinois~~ Department of
22 Healthcare and Family Services ~~Public Aid~~ under Article X of
23 the Illinois Public Aid Code, and only when at least 36 months
24 have elapsed since the order for child support was entered or
25 last modified.

26 (a-5) An order for maintenance may be modified or
27 terminated only upon a showing of a substantial change in
28 circumstances. In all such proceedings, as well as in
29 proceedings in which maintenance is being reviewed, the court
30 shall consider the applicable factors set forth in subsection
31 (a) of Section 504 and the following factors:

32 (1) any change in the employment status of either party
33 and whether the change has been made in good faith;

34 (2) the efforts, if any, made by the party receiving
35 maintenance to become self-supporting, and the
36 reasonableness of the efforts where they are appropriate;

1 (3) any impairment of the present and future earning
2 capacity of either party;

3 (4) the tax consequences of the maintenance payments
4 upon the respective economic circumstances of the parties;

5 (5) the duration of the maintenance payments
6 previously paid (and remaining to be paid) relative to the
7 length of the marriage;

8 (6) the property, including retirement benefits,
9 awarded to each party under the judgment of dissolution of
10 marriage, judgment of legal separation, or judgment of
11 declaration of invalidity of marriage and the present
12 status of the property;

13 (7) the increase or decrease in each party's income
14 since the prior judgment or order from which a review,
15 modification, or termination is being sought;

16 (8) the property acquired and currently owned by each
17 party after the entry of the judgment of dissolution of
18 marriage, judgment of legal separation, or judgment of
19 declaration of invalidity of marriage; and

20 (9) any other factor that the court expressly finds to
21 be just and equitable.

22 (b) The provisions as to property disposition may not be
23 revoked or modified, unless the court finds the existence of
24 conditions that justify the reopening of a judgment under the
25 laws of this State.

26 (c) Unless otherwise agreed by the parties in a written
27 agreement set forth in the judgment or otherwise approved by
28 the court, the obligation to pay future maintenance is
29 terminated upon the death of either party, or the remarriage of
30 the party receiving maintenance, or if the party receiving
31 maintenance cohabits with another person on a resident,
32 continuing conjugal basis.

33 (d) Unless otherwise provided in this Act, or as agreed in
34 writing or expressly provided in the judgment, provisions for
35 the support of a child are terminated by emancipation of the
36 child, or if the child has attained the age of 18 and is still

1 attending high school, provisions for the support of the child
2 are terminated upon the date that the child graduates from high
3 school or the date the child attains the age of 19, whichever
4 is earlier, but not by the death of a parent obligated to
5 support or educate the child. An existing obligation to pay for
6 support or educational expenses, or both, is not terminated by
7 the death of a parent. When a parent obligated to pay support
8 or educational expenses, or both, dies, the amount of support
9 or educational expenses, or both, may be enforced, modified,
10 revoked or commuted to a lump sum payment, as equity may
11 require, and that determination may be provided for at the time
12 of the dissolution of the marriage or thereafter.

13 (e) The right to petition for support or educational
14 expenses, or both, under Sections 505 and 513 is not
15 extinguished by the death of a parent. Upon a petition filed
16 before or after a parent's death, the court may award sums of
17 money out of the decedent's estate for the child's support or
18 educational expenses, or both, as equity may require. The time
19 within which a claim may be filed against the estate of a
20 decedent under Sections 505 and 513 and subsection (d) and this
21 subsection shall be governed by the provisions of the Probate
22 Act of 1975, as a barrable, noncontingent claim.

23 (f) A petition to modify or terminate child support,
24 custody, or visitation shall not delay any child support
25 enforcement litigation or supplementary proceeding on behalf
26 of the obligee, including, but not limited to, a petition for a
27 rule to show cause, for non-wage garnishment, or for a
28 restraining order.

29 (Source: P.A. 92-289, eff. 8-9-01; 92-590, eff. 7-1-02; 92-651,
30 eff. 7-11-02; 92-876, eff. 6-1-03; 93-353, eff. 1-1-04.)

31 (750 ILCS 5/516) (from Ch. 40, par. 516)

32 Sec. 516. Public Aid collection fee. In all cases
33 instituted by the Department of Healthcare and Family Services
34 (formerly Illinois Department of Public Aid) on behalf of a
35 child or spouse, other than one receiving a grant of financial

1 aid under Article IV of The Illinois Public Aid Code, on whose
2 behalf an application has been made and approved for child
3 support enforcement services as provided by Section 10-1 of
4 that Code, the court shall impose a collection fee on the
5 individual who owes a child or spouse support obligation in an
6 amount equal to 10% of the amount so owed as long as such
7 collection is required by federal law, which fee shall be in
8 addition to the support obligation. The imposition of such fee
9 shall be in accordance with provisions of Title IV, Part D, of
10 the Social Security Act and regulations duly promulgated
11 thereunder. The fee shall be payable to the clerk of the
12 circuit court for transmittal to the ~~Illinois~~ Department of
13 Healthcare and Family Services ~~Public Aid~~ and shall continue
14 until child support enforcement services are terminated by that
15 Department.

16 (Source: P.A. 92-590, eff. 7-1-02.)

17 (750 ILCS 5/517)

18 Sec. 517. Notice of child support enforcement services. The
19 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
20 ~~Aid~~ may provide notice at any time to the parties to an action
21 filed under this Act that child support enforcement services
22 are being provided by the ~~Illinois~~ Department under Article X
23 of the Illinois Public Aid Code. The notice shall be sent by
24 regular mail to the party's last known address on file with the
25 clerk of the court or the State Case Registry established under
26 Section 10-27 of the Illinois Public Aid Code. After notice is
27 provided pursuant to this Section, the ~~Illinois~~ Department
28 shall be entitled, as if it were a party, to notice of any
29 further proceedings brought in the case. The ~~Illinois~~
30 Department shall provide the clerk of the court with copies of
31 the notices sent to the parties. The clerk shall file the
32 copies in the court file.

33 (Source: P.A. 94-88, eff. 1-1-06.)

34 (750 ILCS 5/704) (from Ch. 40, par. 704)

1 Sec. 704. Public Aid Provisions.) Except as provided in
2 Sections 709 through 712, if maintenance, child support or
3 both, is awarded to persons who are recipients of aid under
4 "The Illinois Public Aid Code", the court shall direct the
5 husband or wife, as the case may be, to make the payments to
6 (1) the ~~Illinois~~ Department of Healthcare and Family Services
7 ~~Public Aid~~ if the persons are recipients under Articles III, IV
8 or V of the Code, or (2) the local governmental unit
9 responsible for their support if they are recipients under
10 Article VI or VII of the Code. The order shall permit the
11 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
12 ~~Aid~~ or the local governmental unit, as the case may be, to
13 direct that subsequent payments be made directly to the former
14 spouse, the children, or both, or to some person or agency in
15 their behalf, upon removal of the former spouse or children
16 from the public aid rolls; and upon such direction and removal
17 of the recipients from the public aid rolls, the ~~Illinois~~
18 Department or local governmental unit, as the case requires,
19 shall give written notice of such action to the court.

20 (Source: P.A. 81-1474.)

21 (750 ILCS 5/705) (from Ch. 40, par. 705)

22 Sec. 705. Support payments; receiving and disbursing
23 agents.

24 (1) The provisions of this Section shall apply, except as
25 provided in Sections 709 through 712.

26 (2) In a dissolution of marriage action filed in a county
27 of less than 3 million population in which an order or judgment
28 for child support is entered, and in supplementary proceedings
29 in any such county to enforce or vary the terms of such order
30 or judgment arising out of an action for dissolution of
31 marriage filed in such county, the court, except as it
32 otherwise orders, under subsection (4) of this Section, may
33 direct that child support payments be made to the clerk of the
34 court.

35 (3) In a dissolution of marriage action filed in any county

1 of 3 million or more population in which an order or judgment
2 for child support is entered, and in supplementary proceedings
3 in any such county to enforce or vary the terms of such order
4 or judgment arising out of an action for dissolution of
5 marriage filed in such county, the court, except as it
6 otherwise orders under subsection (4) of this Section, may
7 direct that child support payments be made either to the clerk
8 of the court or to the Court Service Division of the County
9 Department of Public Aid. After the effective date of this Act,
10 the court, except as it otherwise orders under subsection (4)
11 of this Section, may direct that child support payments be made
12 either to the clerk of the court or to the ~~Illinois~~ Department
13 of Healthcare and Family Services ~~Public Aid~~.

14 (4) In a dissolution of marriage action or supplementary
15 proceedings involving maintenance or child support payments,
16 or both, to persons who are recipients of aid under the
17 Illinois Public Aid Code, the court shall direct that such
18 payments be made to (a) the ~~Illinois~~ Department of Healthcare
19 and Family Services ~~Public Aid~~ if the persons are recipients
20 under Articles III, IV, or V of the Code, or (b) the local
21 governmental unit responsible for their support if they are
22 recipients under Articles VI or VII of the Code. In accordance
23 with federal law and regulations, the ~~Illinois~~ Department of
24 Healthcare and Family Services ~~Public Aid~~ may continue to
25 collect current maintenance payments or child support
26 payments, or both, after those persons cease to receive public
27 assistance and until termination of services under Article X of
28 the Illinois Public Aid Code. The ~~Illinois~~ Department of
29 Healthcare and Family Services ~~Public Aid~~ shall pay the net
30 amount collected to those persons after deducting any costs
31 incurred in making the collection or any collection fee from
32 the amount of any recovery made. The order shall permit the
33 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
34 ~~Aid~~ or the local governmental unit, as the case may be, to
35 direct that payments be made directly to the former spouse, the
36 children, or both, or to some person or agency in their behalf,

1 upon removal of the former spouse or children from the public
2 aid rolls or upon termination of services under Article X of
3 the Illinois Public Aid Code; and upon such direction, the
4 ~~Illinois~~ Department or local governmental unit, as the case
5 requires, shall give notice of such action to the court in
6 writing or by electronic transmission.

7 (5) All clerks of the court and the Court Service Division
8 of a County Department of Public Aid and, after the effective
9 date of this Act, all clerks of the court and the ~~Illinois~~
10 Department of Healthcare and Family Services ~~Public Aid~~,
11 receiving child support payments under subsections (2) and (3)
12 of this Section shall disburse the payments to the person or
13 persons entitled thereto under the terms of the order or
14 judgment. They shall establish and maintain current records of
15 all moneys received and disbursed and of defaults and
16 delinquencies in required payments. The court, by order or
17 rule, shall make provision for the carrying out of these
18 duties.

19 Payments under this Section to the ~~Illinois~~ Department of
20 Healthcare and Family Services ~~Public Aid~~ pursuant to the Child
21 Support Enforcement Program established by Title IV-D of the
22 Social Security Act shall be paid into the Child Support
23 Enforcement Trust Fund. All payments under this Section to the
24 Illinois Department of Human Services shall be deposited in the
25 DHS Recoveries Trust Fund. Disbursements from these funds shall
26 be as provided in the Illinois Public Aid Code. Payments
27 received by a local governmental unit shall be deposited in
28 that unit's General Assistance Fund. Any order of court
29 directing payment of child support to a clerk of court or the
30 Court Service Division of a County Department of Public Aid,
31 which order has been entered on or after August 14, 1961, and
32 prior to the effective date of this Act, may be amended by the
33 court in line with this Act; and orders involving payments of
34 maintenance or child support to recipients of public aid may in
35 like manner be amended to conform to this Act.

36 (6) No filing fee or costs will be required in any action

1 brought at the request of the ~~Illinois~~ Department of Healthcare
2 and Family Services ~~Public Aid~~ in any proceeding under this
3 Act. However, any such fees or costs may be assessed by the
4 court against the respondent in the court's order of support or
5 any modification thereof in a proceeding under this Act.

6 (7) For those cases in which child support is payable to
7 the clerk of the circuit court for transmittal to the
8 Department of Healthcare and Family Services (formerly
9 Illinois Department of Public Aid) by order of court or upon
10 notification by the Department of Healthcare and Family
11 Services (formerly Illinois Department of Public Aid), the
12 clerk shall transmit all such payments, within 4 working days
13 of receipt, to insure that funds are available for immediate
14 distribution by the Department to the person or entity entitled
15 thereto in accordance with standards of the Child Support
16 Enforcement Program established under Title IV-D of the Social
17 Security Act. The clerk shall notify the Department of the date
18 of receipt and amount thereof at the time of transmittal. Where
19 the clerk has entered into an agreement of cooperation with the
20 Department to record the terms of child support orders and
21 payments made thereunder directly into the Department's
22 automated data processing system, the clerk shall account for,
23 transmit and otherwise distribute child support payments in
24 accordance with such agreement in lieu of the requirements
25 contained herein.

26 In any action filed in a county with a population of
27 1,000,000 or less, the court shall assess against the
28 respondent in any order of maintenance or child support any sum
29 up to \$36 annually authorized by ordinance of the county board
30 to be collected by the clerk of the court as costs for
31 administering the collection and disbursement of maintenance
32 and child support payments. Such sum shall be in addition to
33 and separate from amounts ordered to be paid as maintenance or
34 child support.

35 (8) To the extent the provisions of this Section are
36 inconsistent with the requirements pertaining to the State

1 Disbursement Unit under Section 507.1 of this Act and Section
2 10-26 of the Illinois Public Aid Code, the requirements
3 pertaining to the State Disbursement Unit shall apply.

4 (Source: P.A. 94-88, eff. 1-1-06.)

5 (750 ILCS 5/709) (from Ch. 40, par. 709)

6 Sec. 709. Mandatory child support payments to clerk.

7 (a) As of January 1, 1982, child support orders entered in
8 any county covered by this subsection shall be made pursuant to
9 the provisions of Sections 709 through 712 of this Act. For
10 purposes of these Sections, the term "child support payment" or
11 "payment" shall include any payment ordered to be made solely
12 for the purpose of the support of a child or children or any
13 payment ordered for general support which includes any amount
14 for support of any child or children.

15 The provisions of Sections 709 through 712 shall be
16 applicable to any county with a population of 2 million or more
17 and to any other county which notifies the Supreme Court of its
18 desire to be included within the coverage of these Sections and
19 is certified pursuant to Supreme Court Rules.

20 The effective date of inclusion, however, shall be subject
21 to approval of the application for reimbursement of the costs
22 of the support program by the Department of Healthcare and
23 Family Services ~~Public Aid~~ as provided in Section 712.

24 (b) In any proceeding for a dissolution of marriage, legal
25 separation, or declaration of invalidity of marriage, or in any
26 supplementary proceedings in which a judgment or modification
27 thereof for the payment of child support is entered on or after
28 January 1, 1982, in any county covered by Sections 709 through
29 712, and the person entitled to payment is receiving a grant of
30 financial aid under Article IV of the Illinois Public Aid Code
31 or has applied and qualified for child support enforcement
32 services under Section 10-1 of that Code, the court shall
33 direct: (1) that such payments be made to the clerk of the
34 court and (2) that the parties affected shall each thereafter
35 notify the clerk of any change of address or change in other

1 conditions that may affect the administration of the order,
2 including the fact that a party who was previously not on
3 public aid has become a recipient of public aid, within 10 days
4 of such change. All notices sent to the obligor's last known
5 address on file with the clerk shall be deemed sufficient to
6 proceed with enforcement pursuant to the provisions of Sections
7 709 through 712.

8 In all other cases, the court may direct that payments be
9 made to the clerk of the court.

10 (c) Except as provided in subsection (d) of this Section,
11 the clerk shall disburse the payments to the person or persons
12 entitled thereto under the terms of the order or judgment.

13 (d) The court shall determine, prior to the entry of the
14 support order, if the party who is to receive the support is
15 presently receiving public aid or has a current application for
16 public aid pending and shall enter the finding on the record.

17 If the person entitled to payment is a recipient of aid
18 under the Illinois Public Aid Code, the clerk, upon being
19 informed of this fact by finding of the court, by notification
20 by the party entitled to payment, by the Department of
21 Healthcare and Family Services (formerly Illinois Department
22 of Public Aid) or by the local governmental unit, shall make
23 all payments to: (1) the ~~Illinois~~ Department of Healthcare and
24 Family Services ~~Public Aid~~ if the person is a recipient under
25 Article III, IV, or V of the Code or (2) the local governmental
26 unit responsible for his or her support if the person is a
27 recipient under Article VI or VII of the Code. In accordance
28 with federal law and regulations, the ~~Illinois~~ Department of
29 Healthcare and Family Services ~~Public Aid~~ may continue to
30 collect current maintenance payments or child support
31 payments, or both, after those persons cease to receive public
32 assistance and until termination of services under Article X of
33 the Illinois Public Aid Code. The ~~Illinois~~ Department of
34 Healthcare and Family Services ~~Public Aid~~ shall pay the net
35 amount collected to those persons after deducting any costs
36 incurred in making the collection or any collection fee from

1 the amount of any recovery made. Upon termination of public aid
2 payments to such a recipient or termination of services under
3 Article X of the Illinois Public Aid Code, the ~~Illinois~~
4 Department of Healthcare and Family Services ~~Public Aid~~ or the
5 appropriate local governmental unit shall notify the clerk in
6 writing or by electronic transmission that all subsequent
7 payments are to be sent directly to the person entitled
8 thereto.

9 Payments under this Section to the ~~Illinois~~ Department of
10 Healthcare and Family Services ~~Public Aid~~ pursuant to the Child
11 Support Enforcement Program established by Title IV-D of the
12 Social Security Act shall be paid into the Child Support
13 Enforcement Trust Fund. All payments under this Section to the
14 Illinois Department of Human Services shall be deposited in the
15 DHS Recoveries Trust Fund. Disbursements from these funds shall
16 be as provided in the Illinois Public Aid Code. Payments
17 received by a local governmental unit shall be deposited in
18 that unit's General Assistance Fund.

19 (e) Any order or judgment may be amended by the court, upon
20 its own motion or upon the motion of either party, to conform
21 with the provisions of Sections 709 through 712, either as to
22 the requirement of making payments to the clerk or, where
23 payments are already being made to the clerk, as to the
24 statutory fees provided for under Section 711.

25 (f) The clerk may invest in any interest bearing account or
26 in any securities, monies collected for the benefit of a payee,
27 where such payee cannot be found; however, the investment may
28 be only for the period until the clerk is able to locate and
29 present the payee with such monies. The clerk may invest in any
30 interest bearing account, or in any securities, monies
31 collected for the benefit of any other payee; however, this
32 does not alter the clerk's obligation to make payments to the
33 payee in a timely manner. Any interest or capital gains accrued
34 shall be for the benefit of the county and shall be paid into
35 the special fund established in subsection (b) of Section 711.

36 (g) The clerk shall establish and maintain a payment record

1 of all monies received and disbursed and such record shall
2 constitute prima facie evidence of such payment and
3 non-payment, as the case may be.

4 (h) For those cases in which child support is payable to
5 the clerk of the circuit court for transmittal to the
6 Department of Healthcare and Family Services (formerly
7 Illinois Department of Public Aid) by order of court or upon
8 notification by the Department of Healthcare and Family
9 Services (formerly Illinois Department of Public Aid), the
10 clerk shall transmit all such payments, within 4 working days
11 of receipt, to insure that funds are available for immediate
12 distribution by the Department to the person or entity entitled
13 thereto in accordance with standards of the Child Support
14 Enforcement Program established under Title IV-D of the Social
15 Security Act. The clerk shall notify the Department of the date
16 of receipt and amount thereof at the time of transmittal. Where
17 the clerk has entered into an agreement of cooperation with the
18 Department to record the terms of child support orders and
19 payments made thereunder directly into the Department's
20 automated data processing system, the clerk shall account for,
21 transmit and otherwise distribute child support payments in
22 accordance with such agreement in lieu of the requirements
23 contained herein.

24 (i) To the extent the provisions of this Section are
25 inconsistent with the requirements pertaining to the State
26 Disbursement Unit under Section 507.1 of this Act and Section
27 10-26 of the Illinois Public Aid Code, the requirements
28 pertaining to the State Disbursement Unit shall apply.

29 (Source: P.A. 94-88, eff. 1-1-06.)

30 (750 ILCS 5/712) (from Ch. 40, par. 712)

31 Sec. 712. (a) The Supreme Court may make Rules concerning
32 the certification of counties for inclusion in the child
33 support enforcement program and the application of the
34 procedures created by Sections 709 through 712 in the various
35 counties.

1 The Supreme Court shall inform each circuit court and clerk
2 of the court of the availability of the program to reimburse
3 counties desiring to participate in the program of enforcement
4 of child support payments.

5 The Supreme Court shall also distribute to each circuit
6 court and clerk of the court any materials prepared by the
7 Child and Spouse Support Unit comparing child support
8 enforcement in counties included and not included in this
9 program.

10 (b) The ~~Illinois~~ Department of Healthcare and Family
11 Services ~~Public Aid~~, through the Child and Spouse Support Unit
12 provided for by Section 10-3.1 of The Illinois Public Aid Code,
13 shall have general supervision of the child support programs
14 created by Sections 709 through 712 and shall have the powers
15 and duties provided in this Section, including the following:

16 (1) to make advance payments to any county included in the
17 program for expenses in preparing programs to enforce payment
18 of child support to the clerk from appropriations made for such
19 purposes by the General Assembly;

20 (2) to make payments to each covered county to pay for its
21 reasonable expenses actually necessary to maintain a
22 continuing program not paid for by fees, penalties, or other
23 monies; provided that, with respect to that portion of the
24 program on behalf of dependent children included in a grant of
25 financial aid under Article IV of The Illinois Public Aid Code
26 the Unit shall pay only such expenses as is its current
27 practice or as it may deem appropriate; provided further that
28 the Unit shall only pay expenses of the entire program subject
29 to the availability of federal monies to pay the majority of
30 expenses of the entire child support enforcement program;
31 provided further that the Unit or Department may set standards
32 relating to enforcement which have to be met by any county
33 seeking to enter a contract with the Department for
34 reimbursement of expenses of the entire enforcement program
35 prior to an application for reimbursement being approved and
36 the contract granted; and provided further that such standards

1 may relate to, but are not limited to the following factors:
2 maintenance of the payment record, the definition of
3 delinquency; the period of time in which a delinquency must be
4 determined, the payor notified, the remittance received, the
5 referral to the state's attorney made, and the payment remitted
6 by the clerk to the payee or other party entitled to the
7 payment; the conditions under which referral will not be made
8 to the state's attorney; and the definitions and procedures for
9 other matters necessary for the conduct and operation of the
10 program;

11 (3) to monitor the various local programs for enforcement
12 of child support payments to the clerk;

13 (4) to act to encourage enforcement whenever local
14 enforcement procedures are inadequate;

15 (5) to receive monies from any source for assistance in
16 enforcement of child support; and

17 (6) to assist any county desirous of assistance in
18 establishing and maintaining a child support enforcement
19 program.

20 (c) Any county may apply for financial assistance to the
21 Unit to initiate or maintain a program of child support
22 enforcement. Every county which desires such assistance shall
23 apply according to procedures established by the Unit. In its
24 application, it shall state the following: financial needs,
25 personnel requirements, anticipated caseloads, any amounts
26 collected or anticipated in fees or penalties, and any other
27 information required by the Unit.

28 (d) In the case that any advance money is given to any
29 county under this Section to initiate an enforcement system,
30 the county shall reimburse the state within 2 years from the
31 date such monies are given to it. The Unit may establish an
32 appropriate schedule of reimbursement for any county.

33 (e) In the event of the unavailability of federal monies to
34 pay for the greater part of the costs to a county of the child
35 support enforcement program under Sections 709 through 712 and
36 the resulting cessation of state participation, the operation

1 of the child support enforcement program under Sections 709
2 through 712 shall terminate. The date and the method of
3 termination shall be determined by Supreme Court Rule.

4 (Source: P.A. 84-1395.)

5 Section 9580. The Non-Support Punishment Act is amended by
6 changing Sections 7, 20, 25, 30, 35, and 60 as follows:

7 (750 ILCS 16/7)

8 Sec. 7. Prosecutions by Attorney General. In addition to
9 enforcement proceedings by the several State's Attorneys, a
10 proceeding for the enforcement of this Act may be instituted
11 and prosecuted by the Attorney General in cases referred by the
12 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
13 ~~Aid~~ involving persons receiving child support enforcement
14 services under Article X of the Illinois Public Aid Code.
15 Before referring a case to the Attorney General for enforcement
16 under this Act, the Department of Healthcare and Family
17 Services ~~Public Aid~~ shall notify the person receiving child
18 support enforcement services under Article X of the Illinois
19 Public Aid Code of the Department's intent to refer the case to
20 the Attorney General under this Section for prosecution.

21 (Source: P.A. 91-613, eff. 10-1-99; 92-590, eff. 7-1-02.)

22 (750 ILCS 16/20)

23 Sec. 20. Entry of order for support; income withholding.

24 (a) In a case in which no court or administrative order for
25 support is in effect against the defendant:

26 (1) at any time before the trial, upon motion of the
27 State's Attorney, or of the Attorney General if the action
28 has been instituted by his office, and upon notice to the
29 defendant, or at the time of arraignment or as a condition
30 of postponement of arraignment, the court may enter such
31 temporary order for support as may seem just, providing for
32 the support or maintenance of the spouse or child or
33 children of the defendant, or both, pendente lite; or

1 (2) before trial with the consent of the defendant, or
2 at the trial on entry of a plea of guilty, or after
3 conviction, instead of imposing the penalty provided in
4 this Act, or in addition thereto, the court may enter an
5 order for support, subject to modification by the court
6 from time to time as circumstances may require, directing
7 the defendant to pay a certain sum for maintenance of the
8 spouse, or for support of the child or children, or both.

9 (b) The court shall determine the amount of child support
10 by using the guidelines and standards set forth in subsection
11 (a) of Section 505 and in Section 505.2 of the Illinois
12 Marriage and Dissolution of Marriage Act.

13 If (i) the non-custodial parent was properly served with a
14 request for discovery of financial information relating to the
15 non-custodial parent's ability to provide child support, (ii)
16 the non-custodial parent failed to comply with the request,
17 despite having been ordered to do so by the court, and (iii)
18 the non-custodial parent is not present at the hearing to
19 determine support despite having received proper notice, then
20 any relevant financial information concerning the
21 non-custodial parent's ability to provide support that was
22 obtained pursuant to subpoena and proper notice shall be
23 admitted into evidence without the need to establish any
24 further foundation for its admission.

25 (c) The court shall determine the amount of maintenance
26 using the standards set forth in Section 504 of the Illinois
27 Marriage and Dissolution of Marriage Act.

28 (d) The court may, for violation of any order under this
29 Section, punish the offender as for a contempt of court, but no
30 pendente lite order shall remain in effect longer than 4
31 months, or after the discharge of any panel of jurors summoned
32 for service thereafter in such court, whichever is sooner.

33 (e) Any order for support entered by the court under this
34 Section shall be deemed to be a series of judgments against the
35 person obligated to pay support under the judgments, each such
36 judgment to be in the amount of each payment or installment of

1 support and each judgment to be deemed entered as of the date
2 the corresponding payment or installment becomes due under the
3 terms of the support order. Each judgment shall have the full
4 force, effect, and attributes of any other judgment of this
5 State, including the ability to be enforced. Each judgment is
6 subject to modification or termination only in accordance with
7 Section 510 of the Illinois Marriage and Dissolution of
8 Marriage Act. A lien arises by operation of law against the
9 real and personal property of the noncustodial parent for each
10 installment of overdue support owed by the noncustodial parent.

11 (f) An order for support entered under this Section shall
12 include a provision requiring the obligor to report to the
13 obligee and to the clerk of the court within 10 days each time
14 the obligor obtains new employment, and each time the obligor's
15 employment is terminated for any reason. The report shall be in
16 writing and shall, in the case of new employment, include the
17 name and address of the new employer.

18 Failure to report new employment or the termination of
19 current employment, if coupled with nonpayment of support for a
20 period in excess of 60 days, is indirect criminal contempt. For
21 any obligor arrested for failure to report new employment, bond
22 shall be set in the amount of the child support that should
23 have been paid during the period of unreported employment.

24 An order for support entered under this Section shall also
25 include a provision requiring the obligor and obligee parents
26 to advise each other of a change in residence within 5 days of
27 the change except when the court finds that the physical,
28 mental, or emotional health of a party or of a minor child, or
29 both, would be seriously endangered by disclosure of the
30 party's address.

31 (g) An order for support entered or modified in a case in
32 which a party is receiving child support enforcement services
33 under Article X of the Illinois Public Aid Code shall include a
34 provision requiring the noncustodial parent to notify the
35 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
36 ~~Aid~~, within 7 days, of the name and address of any new employer

1 of the noncustodial parent, whether the noncustodial parent has
2 access to health insurance coverage through the employer or
3 other group coverage and, if so, the policy name and number and
4 the names of persons covered under the policy.

5 (h) In any subsequent action to enforce an order for
6 support entered under this Act, upon sufficient showing that
7 diligent effort has been made to ascertain the location of the
8 noncustodial parent, service of process or provision of notice
9 necessary in that action may be made at the last known address
10 of the noncustodial parent, in any manner expressly provided by
11 the Code of Civil Procedure or in this Act, which service shall
12 be sufficient for purposes of due process.

13 (i) An order for support shall include a date on which the
14 current support obligation terminates. The termination date
15 shall be no earlier than the date on which the child covered by
16 the order will attain the age of 18. However, if the child will
17 not graduate from high school until after attaining the age of
18 18, then the termination date shall be no earlier than the
19 earlier of the date on which the child's high school graduation
20 will occur or the date on which the child will attain the age
21 of 19. The order for support shall state that the termination
22 date does not apply to any arrearage that may remain unpaid on
23 that date. Nothing in this subsection shall be construed to
24 prevent the court from modifying the order or terminating the
25 order in the event the child is otherwise emancipated.

26 (i-5) If there is an unpaid arrearage or delinquency (as
27 those terms are defined in the Income Withholding for Support
28 Act) equal to at least one month's support obligation on the
29 termination date stated in the order for support or, if there
30 is no termination date stated in the order, on the date the
31 child attains the age of majority or is otherwise emancipated,
32 the periodic amount required to be paid for current support of
33 that child immediately prior to that date shall automatically
34 continue to be an obligation, not as current support but as
35 periodic payment toward satisfaction of the unpaid arrearage or
36 delinquency. That periodic payment shall be in addition to any

1 periodic payment previously required for satisfaction of the
2 arrearage or delinquency. The total periodic amount to be paid
3 toward satisfaction of the arrearage or delinquency may be
4 enforced and collected by any method provided by law for
5 enforcement and collection of child support, including but not
6 limited to income withholding under the Income Withholding for
7 Support Act. Each order for support entered or modified on or
8 after the effective date of this amendatory Act of the 93rd
9 General Assembly must contain a statement notifying the parties
10 of the requirements of this subsection. Failure to include the
11 statement in the order for support does not affect the validity
12 of the order or the operation of the provisions of this
13 subsection with regard to the order. This subsection shall not
14 be construed to prevent or affect the establishment or
15 modification of an order for support of a minor child or the
16 establishment or modification of an order for support of a
17 non-minor child or educational expenses under Section 513 of
18 the Illinois Marriage and Dissolution of Marriage Act.

19 (j) A support obligation, or any portion of a support
20 obligation, which becomes due and remains unpaid as of the end
21 of each month, excluding the child support that was due for
22 that month to the extent that it was not paid in that month,
23 shall accrue simple interest as set forth in Section 12-109 of
24 the Code of Civil Procedure. An order for support entered or
25 modified on or after January 1, 2006 shall contain a statement
26 that a support obligation required under the order, or any
27 portion of a support obligation required under the order, that
28 becomes due and remains unpaid as of the end of each month,
29 excluding the child support that was due for that month to the
30 extent that it was not paid in that month, shall accrue simple
31 interest as set forth in Section 12-109 of the Code of Civil
32 Procedure. Failure to include the statement in the order for
33 support does not affect the validity of the order or the
34 accrual of interest as provided in this Section.

35 (Source: P.A. 93-1061, eff. 1-1-05; 94-90, eff. 1-1-06.)

1 (750 ILCS 16/25)

2 Sec. 25. Payment of support to State Disbursement Unit;
3 clerk of the court.

4 (a) As used in this Section, "order for support",
5 "obligor", "obligee", and "payor" mean those terms as defined
6 in the Income Withholding for Support Act.

7 (b) Each order for support entered or modified under
8 Section 20 of this Act shall require that support payments be
9 made to the State Disbursement Unit established under the
10 Illinois Public Aid Code, under the following circumstances:

11 (1) when a party to the order is receiving child
12 support enforcement services under Article X of the
13 Illinois Public Aid Code; or

14 (2) when no party to the order is receiving child
15 support enforcement services, but the support payments are
16 made through income withholding.

17 (c) When no party to the order is receiving child support
18 enforcement services, and payments are not being made through
19 income withholding, the court shall order the obligor to make
20 support payments to the clerk of the court.

21 (d) At any time, and notwithstanding the existence of an
22 order directing payments to be made elsewhere, the Department
23 of Healthcare and Family Services ~~Public Aid~~ may provide notice
24 to the obligor and, where applicable, to the obligor's payor:

25 (1) to make support payments to the State Disbursement
26 Unit if:

27 (A) a party to the order for support is receiving
28 child support enforcement services under Article X of
29 the Illinois Public Aid Code; or

30 (B) no party to the order for support is receiving
31 child support enforcement services under Article X of
32 the Illinois Public Aid Code, but the support payments
33 are made through income withholding; or

34 (2) to make support payments to the State Disbursement
35 Unit of another state upon request of another state's Title
36 IV-D child support enforcement agency, in accordance with

1 the requirements of Title IV, Part D of the Social Security
2 Act and regulations promulgated under that Part D.

3 The Department of Healthcare and Family Services ~~Public Aid~~
4 shall provide a copy of the notice to the obligee and to the
5 clerk of the circuit court.

6 (e) If a State Disbursement Unit as specified by federal
7 law has not been created in Illinois upon the effective date of
8 this Act, then, until the creation of a State Disbursement Unit
9 as specified by federal law, the following provisions regarding
10 payment and disbursement of support payments shall control and
11 the provisions in subsections (a), (b), (c), and (d) shall be
12 inoperative. Upon the creation of a State Disbursement Unit as
13 specified by federal law, the payment and disbursement
14 provisions of subsections (a), (b), (c), and (d) shall control,
15 and this subsection (e) shall be inoperative to the extent that
16 it conflicts with those subsections.

17 (1) In cases in which an order for support is entered
18 under Section 20 of this Act, the court shall order that
19 maintenance and support payments be made to the clerk of
20 the court for remittance to the person or agency entitled
21 to receive the payments. However, the court in its
22 discretion may direct otherwise where exceptional
23 circumstances so warrant.

24 (2) The court shall direct that support payments be
25 sent by the clerk to (i) the ~~Illinois~~ Department of
26 Healthcare and Family Services ~~Public Aid~~ if the person in
27 whose behalf payments are made is receiving aid under
28 Articles III, IV, or V of the Illinois Public Aid Code, or
29 child support enforcement services under Article X of the
30 Code, or (ii) to the local governmental unit responsible
31 for the support of the person if he or she is a recipient
32 under Article VI of the Code. In accordance with federal
33 law and regulations, the ~~Illinois~~ Department of Healthcare
34 and Family Services ~~Public Aid~~ may continue to collect
35 current maintenance payments or child support payments, or
36 both, after those persons cease to receive public

1 assistance and until termination of services under Article
2 X of the Illinois Public Aid Code. The ~~Illinois~~ Department
3 shall pay the net amount collected to those persons after
4 deducting any costs incurred in making the collection or
5 any collection fee from the amount of any recovery made.
6 The order shall permit the ~~Illinois~~ Department of
7 Healthcare and Family Services ~~Public Aid~~ or the local
8 governmental unit, as the case may be, to direct that
9 support payments be made directly to the spouse, children,
10 or both, or to some person or agency in their behalf, upon
11 removal of the spouse or children from the public aid rolls
12 or upon termination of services under Article X of the
13 Illinois Public Aid Code; and upon such direction, the
14 ~~Illinois~~ Department or the local governmental unit, as the
15 case requires, shall give notice of such action to the
16 court in writing or by electronic transmission.

17 (3) The clerk of the court shall establish and maintain
18 current records of all moneys received and disbursed and of
19 delinquencies and defaults in required payments. The
20 court, by order or rule, shall make provision for the
21 carrying out of these duties.

22 (4) (Blank).

23 (5) Payments under this Section to the ~~Illinois~~
24 Department of Healthcare and Family Services ~~Public Aid~~
25 pursuant to the Child Support Enforcement Program
26 established by Title IV-D of the Social Security Act shall
27 be paid into the Child Support Enforcement Trust Fund. All
28 other payments under this Section to the ~~Illinois~~
29 Department of Healthcare and Family Services ~~Public Aid~~
30 shall be deposited in the Public Assistance Recoveries
31 Trust Fund. Disbursements from these funds shall be as
32 provided in the Illinois Public Aid Code. Payments received
33 by a local governmental unit shall be deposited in that
34 unit's General Assistance Fund.

35 (6) For those cases in which child support is payable
36 to the clerk of the circuit court for transmittal to the

1 Department of Healthcare and Family Services (formerly
2 Illinois Department of Public Aid) by order of court or
3 upon notification by the Department of Healthcare and
4 Family Services (formerly Illinois Department of Public
5 Aid), the clerk shall transmit all such payments, within 4
6 working days of receipt, to insure that funds are available
7 for immediate distribution by the Department to the person
8 or entity entitled thereto in accordance with standards of
9 the Child Support Enforcement Program established under
10 Title IV-D of the Social Security Act. The clerk shall
11 notify the Department of the date of receipt and amount
12 thereof at the time of transmittal. Where the clerk has
13 entered into an agreement of cooperation with the
14 Department to record the terms of child support orders and
15 payments made thereunder directly into the Department's
16 automated data processing system, the clerk shall account
17 for, transmit and otherwise distribute child support
18 payments in accordance with such agreement in lieu of the
19 requirements contained herein.

20 (Source: P.A. 94-88, eff. 1-1-06.)

21 (750 ILCS 16/30)

22 Sec. 30. Information to State Case Registry.

23 (a) In this Section:

24 "Order for support", "obligor", "obligee", and "business
25 day" are defined as set forth in the Income Withholding for
26 Support Act.

27 "State Case Registry" means the State Case Registry
28 established under Section 10-27 of the Illinois Public Aid
29 Code.

30 (b) Each order for support entered or modified by the
31 circuit court under this Act shall require that the obligor and
32 obligee (i) file with the clerk of the circuit court the
33 information required by this Section (and any other information
34 required under Title IV, Part D of the Social Security Act or
35 by the federal Department of Health and Human Services) at the

1 time of entry or modification of the order for support and (ii)
2 file updated information with the clerk within 5 business days
3 of any change. Failure of the obligor or obligee to file or
4 update the required information shall be punishable as in cases
5 of contempt. The failure shall not prevent the court from
6 entering or modifying the order for support, however.

7 (c) The obligor shall file the following information: the
8 obligor's name, date of birth, social security number, and
9 mailing address.

10 If either the obligor or the obligee receives child support
11 enforcement services from the ~~Illinois~~ Department of
12 Healthcare and Family Services ~~Public Aid~~ under Article X of
13 the Illinois Public Aid Code, the obligor shall also file the
14 following information: the obligor's telephone number,
15 driver's license number, and residential address (if different
16 from the obligor's mailing address), and the name, address, and
17 telephone number of the obligor's employer or employers.

18 (d) The obligee shall file the following information:

19 (1) The names of the obligee and the child or children
20 covered by the order for support.

21 (2) The dates of birth of the obligee and the child or
22 children covered by the order for support.

23 (3) The social security numbers of the obligee and the
24 child or children covered by the order for support.

25 (4) The obligee's mailing address.

26 (e) In cases in which the obligee receives child support
27 enforcement services from the ~~Illinois~~ Department of
28 Healthcare and Family Services ~~Public Aid~~ under Article X of
29 the Illinois Public Aid Code, the order for support shall (i)
30 require that the obligee file the information required under
31 subsection (d) with the ~~Illinois~~ Department of Healthcare and
32 Family Services ~~Public Aid~~ for inclusion in the State Case
33 Registry, rather than file the information with the clerk, and
34 (ii) require that the obligee include the following additional
35 information:

36 (1) The obligee's telephone and driver's license

1 numbers.

2 (2) The obligee's residential address, if different
3 from the obligee's mailing address.

4 (3) The name, address, and telephone number of the
5 obligee's employer or employers.

6 The order for support shall also require that the obligee
7 update the information filed with the ~~Illinois~~ Department of
8 Healthcare and Family Services ~~Public Aid~~ within 5 business
9 days of any change.

10 (f) The clerk shall provide the information filed under
11 this Section, together with the court docket number and county
12 in which the order for support was entered, to the State Case
13 Registry within 5 business days after receipt of the
14 information.

15 (g) In a case in which a party is receiving child support
16 enforcement services under Article X of the Illinois Public Aid
17 Code, the clerk shall provide the following additional
18 information to the State Case Registry within 5 business days
19 after entry or modification of an order for support or request
20 from the ~~Illinois~~ Department of Healthcare and Family Services
21 ~~Public Aid~~:

22 (1) The amount of monthly or other periodic support
23 owed under the order for support and other amounts,
24 including arrearage, interest, or late payment penalties
25 and fees, due or overdue under the order.

26 (2) Any such amounts that have been received by the
27 clerk, and the distribution of those amounts by the clerk.

28 (h) Information filed by the obligor and obligee under this
29 Section that is not specifically required to be included in the
30 body of an order for support under other laws is not a public
31 record and shall be treated as confidential and subject to
32 disclosure only in accordance with the provisions of this
33 Section, Section 10-27 of the Illinois Public Aid Code, and
34 Title IV, Part D of the Social Security Act.

35 (Source: P.A. 91-613, eff. 10-1-99; 92-463, eff. 8-22-01.)

1 (750 ILCS 16/35)

2 Sec. 35. Fine; release of defendant on probation; violation
3 of order for support; forfeiture of recognizance.

4 (a) Whenever a fine is imposed it may be directed by the
5 court to be paid, in whole or in part, to the spouse,
6 ex-spouse, or if the support of a child or children is
7 involved, to the custodial parent, to the clerk, probation
8 officer, or to the ~~Illinois~~ Department of Healthcare and Family
9 Services ~~Public Aid~~ if a recipient of child support enforcement
10 services under Article X of the Illinois Public Aid Code is
11 involved as the case requires, to be disbursed by such officers
12 or agency under the terms of the order.

13 (b) The court may also relieve the defendant from custody
14 on probation for the period fixed in the order or judgment upon
15 his or her entering into a recognizance, with or without
16 surety, in the sum as the court orders and approves. The
17 condition of the recognizance shall be such that if the
18 defendant makes his or her personal appearance in court
19 whenever ordered to do so by the court, during such period as
20 may be so fixed, and further complies with the terms of the
21 order for support, or any subsequent modification of the order,
22 then the recognizance shall be void; otherwise it will remain
23 in full force and effect.

24 (c) If the court is satisfied by testimony in open court,
25 that at any time during the period of one year the defendant
26 has violated the terms of the order for support, it may proceed
27 with the trial of the defendant under the original charge, or
28 sentence him or her under the original conviction, or enforce
29 the suspended sentence, as the case may be. In case of
30 forfeiture of recognizance, and enforcement of recognizance by
31 execution, the sum so recovered may, in the discretion of the
32 court, be paid, in whole or in part, to the spouse, ex-spouse,
33 or if the support of a child or children is involved, to the
34 custodial parent, to the clerk, or to the ~~Illinois~~ Department
35 of Healthcare and Family Services ~~Public Aid~~ if a recipient of
36 child support enforcement services under Article X of the

1 Illinois Public Aid Code is involved as the case requires, to
2 be disbursed by the clerk or the Department under the terms of
3 the order.

4 (Source: P.A. 91-613, eff. 10-1-99; 92-590, eff. 7-1-02.)

5 (750 ILCS 16/60)

6 Sec. 60. Unemployed persons owing duty of support.

7 (a) Whenever it is determined in a proceeding to establish
8 or enforce a child support or maintenance obligation that the
9 person owing a duty of support is unemployed, the court may
10 order the person to seek employment and report periodically to
11 the court with a diary, listing or other memorandum of his or
12 her efforts in accordance with such order. Additionally, the
13 court may order the unemployed person to report to the
14 Department of Employment Security for job search services or to
15 make application with the local Job Training Partnership Act
16 provider for participation in job search, training, or work
17 programs and where the duty of support is owed to a child
18 receiving child support enforcement services under Article X of
19 the Illinois Public Aid Code the court may order the unemployed
20 person to report to the ~~Illinois~~ Department of Healthcare and
21 Family Services ~~Public Aid~~ for participation in job search,
22 training, or work programs established under Section 9-6 and
23 Article IXA of that Code.

24 (b) Whenever it is determined that a person owes past due
25 support for a child or for a child and the parent with whom the
26 child is living, and the child is receiving assistance under
27 the Illinois Public Aid Code, the court shall order at the
28 request of the ~~Illinois~~ Department of Healthcare and Family
29 Services ~~Public Aid~~:

30 (1) that the person pay the past-due support in
31 accordance with a plan approved by the court; or

32 (2) if the person owing past-due support is unemployed,
33 is subject to such a plan, and is not incapacitated, that
34 the person participate in such job search, training, or
35 work programs established under Section 9-6 and Article IXA

1 of the Illinois Public Aid Code as the court deems
2 appropriate.

3 (Source: P.A. 91-613, eff. 10-1-99; 92-16, eff. 6-28-01;
4 92-590, eff. 7-1-02.)

5 Section 9585. The Uniform Interstate Family Support Act is
6 amended by changing Sections 103, 310, and 320 as follows:

7 (750 ILCS 22/103) (was 750 ILCS 22/102)

8 Sec. 103. Tribunal of State. The circuit court is a
9 tribunal of this State. The ~~Illinois~~ Department of Healthcare
10 and Family Services ~~Public Aid~~ is an initiating tribunal. The
11 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
12 ~~Aid~~ is also a responding tribunal of this State to the extent
13 that it can administratively establish paternity and
14 establish, modify, and enforce an administrative child-support
15 order under authority of Article X of the Illinois Public Aid
16 Code.

17 (Source: P.A. 93-479, eff. 1-1-04, operative 7-1-04.)

18 (750 ILCS 22/310)

19 Sec. 310. Duties of the ~~Illinois~~ Department of Healthcare
20 and Family Services ~~Public Aid~~.

21 (a) The ~~Illinois~~ Department of Healthcare and Family
22 Services ~~Public Aid~~ is the state information agency under this
23 Act.

24 (b) The state information agency shall:

25 (1) compile and maintain a current list, including
26 addresses, of the tribunals in this State which have
27 jurisdiction under this Act and any support enforcement
28 agencies in this State and transmit a copy to the state
29 information agency of every other state;

30 (2) maintain a register of names and addresses of
31 tribunals and support enforcement agencies received from
32 other states;

33 (3) forward to the appropriate tribunal in the county

1 in this State in which the obligee who is an individual or
2 the obligor resides, or in which the obligor's property is
3 believed to be located, all documents concerning a
4 proceeding under this Act received from an initiating
5 tribunal or the state information agency of the initiating
6 state; and

7 (4) obtain information concerning the location of the
8 obligor and the obligor's property within this State not
9 exempt from execution, by such means as postal verification
10 and federal or state locator services, examination of
11 telephone directories, requests for the obligor's address
12 from employers, and examination of governmental records,
13 including, to the extent not prohibited by other law, those
14 relating to real property, vital statistics, law
15 enforcement, taxation, motor vehicles, driver's licenses,
16 and social security.

17 (c) The ~~Illinois~~ Department of Healthcare and Family
18 Services ~~Public Aid~~ may determine that a foreign country or
19 political subdivision has established a reciprocal arrangement
20 for child support with Illinois and take appropriate action for
21 notification of this determination.

22 (Source: P.A. 93-479, eff. 1-1-04, operative 7-1-04.)

23 (750 ILCS 22/320)

24 Sec. 320. Payment of Support to State Disbursement Unit.

25 (a) As used in this Section:

26 "Order for support", "obligor", "obligee", and "payor"
27 mean those terms as defined in the Income Withholding for
28 Support Act, except that "order for support" means an order
29 entered by any tribunal of this State but shall not mean orders
30 providing for spousal maintenance under which there is no child
31 support obligation.

32 (b) Notwithstanding any other provision of this Act to the
33 contrary, each order for support entered or modified on or
34 after October 1, 1999 shall require that support payments be
35 made to the State Disbursement Unit established under Section

1 10-26 of the Illinois Public Aid Code if:

2 (1) a party to the order is receiving child support
3 enforcement services under Article X of the Illinois Public
4 Aid Code; or

5 (2) no party to the order is receiving child support
6 enforcement services, but the support payments are made
7 through income withholding.

8 (c) Support payments shall be made to the State
9 Disbursement Unit if:

10 (1) the order for support was entered before October 1,
11 1999, and a party to the order is receiving child support
12 enforcement services under Article X of the Illinois Public
13 Aid Code; or

14 (2) no party to the order is receiving child support
15 enforcement services, and the support payments are being
16 made through income withholding.

17 (c-5) If no party to the order is receiving child support
18 enforcement services under Article X of the Illinois Public Aid
19 Code, and the support payments are not made through income
20 withholding, then support payments shall be made as directed by
21 the order for support.

22 (c-10) At any time, and notwithstanding the existence of an
23 order directing payments to be made elsewhere, the Department
24 of Healthcare and Family Services ~~Public Aid~~ may provide notice
25 to the obligor and, where applicable, to the obligor's payor:

26 (1) to make support payments to the State Disbursement
27 Unit if:

28 (A) a party to the order for support is receiving
29 child support enforcement services under Article X of
30 the Illinois Public Aid Code; or

31 (B) no party to the order for support is receiving
32 child support enforcement services under Article X of
33 the Illinois Public Aid Code, but the support payments
34 are made through income withholding; or

35 (2) to make support payments to the State Disbursement
36 Unit of another state upon request of another state's Title

1 IV-D child support enforcement agency, in accordance with
2 the requirements of Title IV, Part D of the Social Security
3 Act and regulations promulgated under that Part D.

4 The Department of Healthcare and Family Services ~~Public Aid~~
5 shall provide a copy of the notice to the obligee and to the
6 clerk of the circuit court.

7 (c-15) Within 15 days after the effective date of this
8 amendatory Act of the 91st General Assembly, the clerk of the
9 circuit court shall provide written notice to the obligor to
10 make payments directly to the clerk of the circuit court if no
11 party to the order is receiving child support enforcement
12 services under Article X of the Illinois Public Aid Code, the
13 support payments are not made through income withholding, and
14 the order for support requires support payments to be made
15 directly to the clerk of the circuit court. The clerk shall
16 provide a copy of the notice to the obligee.

17 (c-20) If the State Disbursement Unit receives a support
18 payment that was not appropriately made to the Unit under this
19 Section, the Unit shall immediately return the payment to the
20 sender, including, if possible, instructions detailing where
21 to send the support payments.

22 (d) The notices under subsections (c-10) and (c-15) may be
23 sent by ordinary mail, certified mail, return receipt
24 requested, facsimile transmission, or other electronic
25 process, or may be served upon the obligor or payor using any
26 method provided by law for service of a summons.

27 (Source: P.A. 91-677, eff. 1-5-00; 92-590, eff. 7-1-02.)

28 Section 9590. The Unified Child Support Services Act is
29 amended by changing Section 5 as follows:

30 (750 ILCS 24/5)

31 Sec. 5. Definitions. In this Act:

32 "Child support services" mean any services provided with
33 respect to parentage establishment, support establishment,
34 medical support establishment, support modification, or

1 support enforcement.

2 "Child support specialist" means a paralegal, attorney, or
3 other staff member with specialized training in child support
4 services.

5 "Current child support case" means a case that is pending
6 in the IV-D Child Support Program for which any action is being
7 taken by a Unified Child Support Services Program.

8 "Department" means the ~~Illinois~~ Department of Healthcare
9 and Family Services Public Aid.

10 "IV-D Child Support Program" means the child support
11 enforcement program established pursuant to Title IV, Part D of
12 the federal Social Security Act and Article X of the Illinois
13 Public Aid Code.

14 "KIDS" means the Key Information Delivery System that
15 includes a statewide database of all cases in the IV-D Child
16 Support Program.

17 "Medicaid" means the medical assistance program under
18 Article V of the Illinois Public Aid Code.

19 "Obligor" and "obligee" mean those terms as defined in the
20 Income Withholding for Support Act.

21 "Plan" means a plan for a Unified Child Support Services
22 Program.

23 "Program" means the Unified Child Support Services Program
24 in a county or group of counties.

25 "State Disbursement Unit" means the State Disbursement
26 Unit established under Section 10-26 of the Illinois Public Aid
27 Code.

28 "State's Attorney" means the duly elected State's Attorney
29 of an Illinois county or 2 or more State's Attorneys who have
30 formed a consortium for purposes of managing a Unified Child
31 Support Services Program within a specific region of the State.

32 "Temporary Assistance for Needy Families" means the
33 Temporary Assistance for Needy Families (TANF) program under
34 Article IV of the Illinois Public Aid Code.

35 (Source: P.A. 92-876, eff. 6-1-03.)

1 Section 9595. The Expedited Child Support Act of 1990 is
2 amended by changing Sections 3 and 6 as follows:

3 (750 ILCS 25/3) (from Ch. 40, par. 2703)

4 Sec. 3. Definitions. For the purposes of this Act, the
5 following terms shall have the following meaning:

6 (a) "Administrative Hearing Officer" shall mean the person
7 employed by the Chief Judge of the Circuit Court of each county
8 establishing an Expedited Child Support System for the purpose
9 of hearing child support and parentage matters and making
10 recommendations.

11 (b) "Administrative expenses" shall mean, but not be
12 limited to, the costs of personnel, travel, equipment,
13 telecommunications, postage, space, contractual services, and
14 other related costs necessary to implement the provisions of
15 this Act.

16 (c) "Arrearage" shall mean the total amount of unpaid child
17 support obligations.

18 (d) "Department" shall mean the ~~Illinois~~ Department of
19 Healthcare and Family Services ~~Public Aid~~.

20 (e) "Expedited child support hearing" shall mean a hearing
21 before an Administrative Hearing Officer pursuant to this Act.

22 (f) "Federal time frames" shall mean the time frames
23 established for the IV-D program in regulations promulgated by
24 the United States Department of Health and Human Services,
25 Office of Child Support Enforcement, (codified at 45 C.F.R.
26 303), for the disposition of parentage and child support cases
27 and shall, for purposes of this Act, apply to all parentage and
28 child support matters, whether IV-D or non-IV-D.

29 (g) "System" shall mean the procedures and personnel
30 created by this Act for the expedited establishment,
31 modification, and enforcement of child support orders, and for
32 the expedited establishment of parentage.

33 (h) "IV-D program" shall mean the Child Support Enforcement
34 Program established pursuant to Title IV, Part D of the Social
35 Security Act, (42 U.S.C. 651 et seq.) as administered by the

1 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
2 ~~Aid~~.

3 (i) "Medical support" shall mean support provided pursuant
4 to Section 505.2 of the Illinois Marriage and Dissolution of
5 Marriage Act.

6 (j) "Obligee" shall mean the individual to whom a duty of
7 support is owed or that individual's legal representative.

8 (k) "Obligor" shall mean the individual who owes a duty to
9 make payments under an order of support.

10 (l) "Plan" shall mean the plan submitted by the Chief Judge
11 of a Judicial Circuit to the Supreme Court for the creation of
12 an Expedited Child Support System in such circuit pursuant to
13 this Act.

14 (m) "Pre-hearing motions" shall mean all motions, the
15 disposition of which requires a court order, except motions for
16 the ultimate relief requested in the petition to commence the
17 action.

18 (n) "Recommendations" shall mean the Administrative
19 Hearing Officer's proposed findings of fact, recommended
20 orders and any other recommendations made by the Administrative
21 Hearing Officer.

22 (Source: P.A. 86-1401.)

23 (750 ILCS 25/6) (from Ch. 40, par. 2706)

24 Sec. 6. Authority of hearing officers.

25 (a) With the exception of judicial functions exclusively
26 retained by the court in Section 8 of this Act and in
27 accordance with Supreme Court rules promulgated pursuant to
28 this Act, Administrative Hearing Officers shall be authorized
29 to:

30 (1) Accept voluntary agreements reached by the parties
31 setting the amount of child support to be paid and medical
32 support liability and recommend the entry of orders
33 incorporating such agreements.

34 (2) Accept voluntary acknowledgments of parentage and
35 recommend entry of an order establishing parentage based on

1 such acknowledgement. Prior to accepting such
2 acknowledgement, the Administrative Hearing Officer shall
3 advise the putative father of his rights and obligations in
4 accordance with Supreme Court rules promulgated pursuant
5 to this Act.

6 (3) Manage all stages of discovery, including setting
7 deadlines by which discovery must be completed; and
8 directing the parties to submit to appropriate tests
9 pursuant to Section 11 of the Illinois Parentage Act of
10 1984.

11 (4) Cause notices to be issued requiring the Obligor to
12 appear either before the Administrative Hearing Officer or
13 in court.

14 (5) Administer the oath or affirmation and take
15 testimony under oath or affirmation.

16 (6) Analyze the evidence and prepare written
17 recommendations based on such evidence, including but not
18 limited to: (i) proposed findings as to the amount of the
19 Obligor's income; (ii) proposed findings as to the amount
20 and nature of appropriate deductions from the Obligor's
21 income to determine the Obligor's net income; (iii)
22 proposed findings as to the existence of relevant factors
23 as set forth in subsection (a)(2) of Section 505 of the
24 Illinois Marriage and Dissolution of Marriage Act, which
25 justify setting child support payment levels above or below
26 the guidelines; (iv) recommended orders for temporary
27 child support; (v) recommended orders setting the amount of
28 current child support to be paid; (vi) proposed findings as
29 to the existence and amount of any arrearages; (vii)
30 recommended orders reducing any arrearages to judgement
31 and for the payment of amounts towards such arrearages;
32 (viii) proposed findings as to whether there has been a
33 substantial change of circumstances since the entry of the
34 last child support order, or other circumstances
35 justifying a modification of the child support order; and
36 (ix) proposed findings as to whether the Obligor is

1 employed.

2 (7) With respect to any unemployed Obligor who is not
3 making child support payments or is otherwise unable to
4 provide support, recommend that the Obligor be ordered to
5 seek employment and report periodically of his or her
6 efforts in accordance with such order. Additionally, the
7 Administrative Hearing Officer may recommend that the
8 Obligor be ordered to report to the Department of
9 Employment Security for job search services or to make
10 application with the local Job Training Partnership Act
11 provider for participation in job search, training or work
12 programs and, where the duty of support is owed to a child
13 receiving child support enforcement services under Article
14 X of the Illinois Public Aid Code, the Administrative
15 Hearing Officer may recommend that the Obligor be ordered
16 to report to the ~~Illinois~~ Department of Healthcare and
17 Family Services ~~Public Aid~~ for participation in the job
18 search, training or work programs established under
19 Section 9-6 of the Illinois Public Aid Code.

20 (8) Recommend the registration of any foreign support
21 judgments or orders as the judgments or orders of Illinois.

22 (b) In any case in which the Obligee is not participating
23 in the IV-D program or has not applied to participate in the
24 IV-D program, the Administrative Hearing Officer shall:

25 (1) inform the Obligee of the existence of the IV-D
26 program and provide applications on request; and

27 (2) inform the Obligee and the Obligor of the option of
28 requesting payment to be made through the Clerk of the
29 Circuit Court.

30 If a request for payment through the Clerk is made, the
31 Administrative Hearing Officer shall note this fact in the
32 recommendations to the court.

33 (c) The Administrative Hearing Officer may make
34 recommendations in addition to the proposed findings of fact
35 and recommended order to which the parties have agreed.

36 (Source: P.A. 92-16, eff. 6-28-01; 92-590, eff. 7-1-02.)

1 Section 9600. The Income Withholding for Support Act is
2 amended by changing Sections 15, 22, and 45 as follows:

3 (750 ILCS 28/15)

4 Sec. 15. Definitions.

5 (a) "Order for support" means any order of the court which
6 provides for periodic payment of funds for the support of a
7 child or maintenance of a spouse, whether temporary or final,
8 and includes any such order which provides for:

9 (1) modification or resumption of, or payment of
10 arrearage, including interest, accrued under, a previously
11 existing order;

12 (2) reimbursement of support;

13 (3) payment or reimbursement of the expenses of
14 pregnancy and delivery (for orders for support entered
15 under the Illinois Parentage Act of 1984 or its predecessor
16 the Paternity Act); or

17 (4) enrollment in a health insurance plan that is
18 available to the obligor through an employer or labor union
19 or trade union.

20 (b) "Arrearage" means the total amount of unpaid support
21 obligations, including interest, as determined by the court and
22 incorporated into an order for support.

23 (b-5) "Business day" means a day on which State offices are
24 open for regular business.

25 (c) "Delinquency" means any payment, including a payment of
26 interest, under an order for support which becomes due and
27 remains unpaid after entry of the order for support.

28 (d) "Income" means any form of periodic payment to an
29 individual, regardless of source, including, but not limited
30 to: wages, salary, commission, compensation as an independent
31 contractor, workers' compensation, disability, annuity,
32 pension, and retirement benefits, lottery prize awards,
33 insurance proceeds, vacation pay, bonuses, profit-sharing
34 payments, interest, and any other payments, made by any person,

1 private entity, federal or state government, any unit of local
2 government, school district or any entity created by Public
3 Act; however, "income" excludes:

4 (1) any amounts required by law to be withheld, other
5 than creditor claims, including, but not limited to,
6 federal, State and local taxes, Social Security and other
7 retirement and disability contributions;

8 (2) union dues;

9 (3) any amounts exempted by the federal Consumer Credit
10 Protection Act;

11 (4) public assistance payments; and

12 (5) unemployment insurance benefits except as provided
13 by law.

14 Any other State or local laws which limit or exempt income
15 or the amount or percentage of income that can be withheld
16 shall not apply.

17 (e) "Obligor" means the individual who owes a duty to make
18 payments under an order for support.

19 (f) "Obligee" means the individual to whom a duty of
20 support is owed or the individual's legal representative.

21 (g) "Payor" means any payor of income to an obligor.

22 (h) "Public office" means any elected official or any State
23 or local agency which is or may become responsible by law for
24 enforcement of, or which is or may become authorized to
25 enforce, an order for support, including, but not limited to:
26 the Attorney General, the Illinois Department of Healthcare and
27 Family Services ~~Public Aid~~, the Illinois Department of Human
28 Services, the Illinois Department of Children and Family
29 Services, and the various State's Attorneys, Clerks of the
30 Circuit Court and supervisors of general assistance.

31 (i) "Premium" means the dollar amount for which the obligor
32 is liable to his employer or labor union or trade union and
33 which must be paid to enroll or maintain a child in a health
34 insurance plan that is available to the obligor through an
35 employer or labor union or trade union.

36 (j) "State Disbursement Unit" means the unit established to

1 collect and disburse support payments in accordance with the
2 provisions of Section 10-26 of the Illinois Public Aid Code.

3 (k) "Title IV-D Agency" means the agency of this State
4 charged by law with the duty to administer the child support
5 enforcement program established under Title IV, Part D of the
6 Social Security Act and Article X of the Illinois Public Aid
7 Code.

8 (l) "Title IV-D case" means a case in which an obligee or
9 obligor is receiving child support enforcement services under
10 Title IV, Part D of the Social Security Act and Article X of
11 the Illinois Public Aid Code.

12 (m) "National Medical Support Notice" means the notice
13 required for enforcement of orders for support providing for
14 health insurance coverage of a child under Title IV, Part D of
15 the Social Security Act, the Employee Retirement Income
16 Security Act of 1974, and federal regulations promulgated under
17 those Acts.

18 (n) "Employer" means a payor or labor union or trade union
19 with an employee group health insurance plan and, for purposes
20 of the National Medical Support Notice, also includes but is
21 not limited to:

22 (1) any State or local governmental agency with a group
23 health plan; and

24 (2) any payor with a group health plan or "church plan"
25 covered under the Employee Retirement Income Security Act
26 of 1974.

27 (Source: P.A. 94-90, eff. 1-1-06.)

28 (750 ILCS 28/22)

29 Sec. 22. Use of National Medical Support Notice to enforce
30 health insurance coverage.

31 (a) Notwithstanding the provisions of subdivision (c)(4)
32 of Section 20, when an order for support is being enforced by
33 the Title IV-D Agency under this Act, any requirement for
34 health insurance coverage to be provided through an employer,
35 including withholding of premiums from the income of the

1 obligor, shall be enforced through use of a National Medical
2 Support Notice instead of through provisions in an income
3 withholding notice.

4 (b) A National Medical Support Notice may be served on the
5 employer in the manner and under the circumstances provided for
6 serving an income withholding notice under this Act, except
7 that an order for support that conditions service of an income
8 withholding notice on the obligor becoming delinquent in paying
9 the order for support, as provided under subdivision (a)(1) of
10 Section 20, shall not prevent immediate service of a National
11 Medical Support Notice by the Title IV-D Agency. The Title IV-D
12 Agency may serve a National Medical Support Notice on an
13 employer in conjunction with service of an income withholding
14 notice. Service of an income withholding notice is not a
15 condition for service of a National Medical Support Notice,
16 however.

17 (c) At the time of service of a National Medical Support
18 Notice on the employer, the Title IV-D Agency shall serve a
19 copy of the Notice on the obligor by ordinary mail addressed to
20 the obligor's last known address. The Title IV-D Agency shall
21 file a copy of the National Medical Support Notice, together
22 with proofs of service on the employer and the obligor, with
23 the clerk of the circuit court.

24 (d) Within 20 business days after the date of a National
25 Medical Support Notice, an employer served with the Notice
26 shall transfer the severable notice to plan administrator to
27 the appropriate group health plan providing any health
28 insurance coverage for which the child is eligible. As required
29 in the part of the National Medical Support Notice directed to
30 the employer, the employer shall withhold any employee premium
31 necessary for coverage of the child and shall send any amount
32 withheld directly to the plan. The employer shall commence the
33 withholding no later than the next payment of income that
34 occurs 14 days following the date the National Medical Support
35 Notice was mailed, sent by facsimile or other electronic means,
36 or placed for personal delivery to or service on the employer.

1 Notwithstanding the requirement to withhold premiums from
2 the obligor's income, if the plan administrator informs the
3 employer that the child is enrolled in an option under the plan
4 for which the employer has determined that the obligor's
5 premium exceeds the amount that may be withheld from the
6 obligor's income due to the withholding limitation or
7 prioritization contained in Section 35 of this Act, the
8 employer shall complete the appropriate item in the part of the
9 National Medical Support Notice directed to the employer
10 according to the instructions in the Notice and shall return
11 that part to the Title IV-D Agency.

12 (e) If one of the following circumstances exists, an
13 employer served with a National Medical Support Notice shall
14 complete the part of the Notice directed to the employer in
15 accordance with the instructions in the Notice and shall return
16 that part to the Title IV-D Agency within 20 business days
17 after the date of the Notice:

18 (1) The employer does not maintain or contribute to
19 plans providing dependent or family health insurance
20 coverage.

21 (2) The obligor is among a class of employees that is
22 not eligible for family health insurance coverage under any
23 group health plan maintained by the employer or to which
24 the employer contributes.

25 (3) Health insurance coverage is not available because
26 the obligor is no longer employed by the employer.

27 (f) The administrator of a health insurance plan to whom an
28 employer has transferred the severable notice to plan
29 administrator part of a National Medical Support Notice shall
30 complete that part with the health insurance coverage
31 information required under the instructions in the Notice and
32 shall return that part to the Title IV-D Agency within 40
33 business days after the date of the Notice.

34 (g) The obligor may contest withholding under this Section
35 based only on a mistake of fact and may contest withholding by
36 filing a petition with the clerk of the circuit court within 20

1 days after service of a copy of the National Medical Support
2 Notice on the obligor. The obligor must serve a copy of the
3 petition on the Title IV-D Agency at the address stated in the
4 National Medical Support Notice. The National Medical Support
5 Notice, including the requirement to withhold any required
6 premium, shall continue to be binding on the employer until the
7 employer is served with a court order resolving the contest or
8 until notified by the Title IV-D Agency.

9 (h) Whenever the obligor is no longer receiving income from
10 the employer, the employer shall return a copy of the National
11 Medical Support Notice to the Title IV-D Agency and shall
12 provide information for the purpose of enforcing health
13 insurance coverage under this Section.

14 (i) The Title IV-D Agency shall promptly notify the
15 employer when there is no longer a current order for health
16 insurance coverage in effect which the Title IV-D Agency is
17 responsible for enforcing.

18 (j) Unless stated otherwise in this Section, all of the
19 provisions of this Act relating to income withholding for
20 support shall pertain to income withholding for health
21 insurance coverage under a National Medical Support Notice,
22 including but not limited to the duties of the employer and
23 obligor, and the penalties contained in Section 35 and Section
24 50. In addition, an employer who willfully fails to transfer
25 the severable notice to plan administrator part of a National
26 Medical Support Notice to the appropriate group health plan
27 providing health insurance coverage for which the child is
28 eligible, within 20 business days after the date of the Notice,
29 is liable for the full amount of medical expenses incurred by
30 or on behalf of the child which would have been paid or
31 reimbursed by the health insurance coverage had the severable
32 notice to plan administrator part of the Notice been timely
33 transferred to the group health insurance plan. This penalty
34 may be collected in a civil action that may be brought against
35 the employer in favor of the obligee or the Title IV-D Agency.

36 (k) To the extent that any other State or local law may be

1 construed to limit or prevent compliance by an employer or
2 health insurance plan administrator with the requirements of
3 this Section and federal law and regulations pertaining to the
4 National Medical Support Notice, that State or local law shall
5 not apply.

6 (l) As the Title IV-D Agency, the Department of Healthcare
7 and Family Services ~~Public Aid~~ shall adopt any rules necessary
8 for use of and compliance with the National Medical Support
9 Notice.

10 (Source: P.A. 92-590, eff. 7-1-02.)

11 (750 ILCS 28/45)

12 Sec. 45. Additional duties.

13 (a) An obligee who is receiving income withholding payments
14 under this Act shall notify the State Disbursement Unit and the
15 Clerk of the Circuit Court of any change of address within 7
16 days of such change.

17 (b) An obligee who is a recipient of public aid shall send
18 a copy of any income withholding notice served by the obligee
19 to the Division of Child Support Enforcement of the ~~Illinois~~
20 Department of Healthcare and Family Services ~~Public Aid~~.

21 (c) Each obligor shall notify the obligee, the public
22 office, and the Clerk of the Circuit Court of any change of
23 address within 7 days.

24 (d) An obligor whose income is being withheld pursuant to
25 this Act shall notify the obligee, the public office, and the
26 Clerk of the Circuit Court of any new payor, within 7 days.

27 (e) (Blank.)

28 (f) The obligee or public office shall provide notice to
29 the payor and Clerk of the Circuit Court of any other support
30 payment made, including but not limited to, a set-off under
31 federal and State law or partial payment of the delinquency or
32 arrearage, or both.

33 (g) The State Disbursement Unit shall maintain complete,
34 accurate, and clear records of all income withholding payments
35 and their disbursements. Certified copies of payment records

1 maintained by the State Disbursement Unit, a public office, or
2 the Clerk of the Circuit Court shall, without further proof, be
3 admitted into evidence in any legal proceedings under this Act.

4 (h) The ~~Illinois~~ Department of Healthcare and Family
5 Services ~~Public Aid~~ shall design suggested legal forms for
6 proceeding under this Act and shall make available to the
7 courts such forms and informational materials which describe
8 the procedures and remedies set forth herein for distribution
9 to all parties in support actions.

10 (i) At the time of transmitting each support payment, the
11 State Disbursement Unit shall provide the obligee or public
12 office, as appropriate, with any information furnished by the
13 payor as to the date the amount would (but for the duty to
14 withhold income) have been paid or credited to the obligor.

15 (Source: P.A. 90-673, eff. 1-1-99; incorporates P.A. 90-790,
16 eff. 8-14-98; 91-212, eff. 7-20-99; 91-357, eff. 7-29-99.)

17 Section 9605. The Illinois Parentage Act of 1984 is amended
18 by changing Sections 4.1, 5, 7, 8, 13.1, 14, 14.1, 15.1, 18,
19 21, 21.1, 22, 23, and 28 as follows:

20 (750 ILCS 45/4.1)

21 Sec. 4.1. Administrative paternity determinations.
22 Notwithstanding any other provision of this Act, the ~~Illinois~~
23 Department of Healthcare and Family Services ~~Public Aid~~ may
24 make administrative determinations of paternity and
25 nonpaternity in accordance with Section 10-17.7 of the Illinois
26 Public Aid Code. These determinations of paternity or
27 nonpaternity shall have the full force and effect of judgments
28 entered under this Act.

29 (Source: P.A. 88-687, eff. 1-24-95.)

30 (750 ILCS 45/5) (from Ch. 40, par. 2505)

31 Sec. 5. Presumption of Paternity.

32 (a) A man is presumed to be the natural father of a child
33 if:

1 (1) he and the child's natural mother are or have been
2 married to each other, even though the marriage is or could
3 be declared invalid, and the child is born or conceived
4 during such marriage;

5 (2) after the child's birth, he and the child's natural
6 mother have married each other, even though the marriage is
7 or could be declared invalid, and he is named, with his
8 written consent, as the child's father on the child's birth
9 certificate;

10 (3) he and the child's natural mother have signed an
11 acknowledgment of paternity in accordance with rules
12 adopted by the ~~Illinois~~ Department of Healthcare and Family
13 Services ~~Public Aid~~ under Section 10-17.7 of the Illinois
14 Public Aid Code; or

15 (4) he and the child's natural mother have signed an
16 acknowledgment of parentage or, if the natural father is
17 someone other than one presumed to be the father under this
18 Section, an acknowledgment of parentage and denial of
19 paternity in accordance with Section 12 of the Vital
20 Records Act.

21 (b) A presumption under subdivision (a)(1) or (a)(2) of
22 this Section may be rebutted only by clear and convincing
23 evidence. A presumption under subdivision (a)(3) or (a)(4) is
24 conclusive, unless the acknowledgment of parentage is
25 rescinded under the process provided in Section 12 of the Vital
26 Records Act, upon the earlier of:

27 (1) 60 days after the date the acknowledgment of
28 parentage is signed, or

29 (2) the date of an administrative or judicial
30 proceeding relating to the child (including a proceeding to
31 establish a support order) in which the signatory is a
32 party;

33 except that if a minor has signed the acknowledgment of
34 paternity or acknowledgment of parentage and denial of
35 paternity, the presumption becomes conclusive 6 months after
36 the minor reaches majority or is otherwise emancipated.

1 (Source: P.A. 89-641, eff. 8-9-96; 90-18, eff. 7-1-97.)

2 (750 ILCS 45/7) (from Ch. 40, par. 2507)

3 Sec. 7. Determination of Father and Child Relationship; Who
4 May Bring Action; Parties.

5 (a) An action to determine the existence of the father and
6 child relationship, whether or not such a relationship is
7 already presumed under Section 5 of this Act, may be brought by
8 the child; the mother; a pregnant woman; any person or public
9 agency who has custody of, or is providing or has provided
10 financial support to, the child; the ~~Illinois~~ Department of
11 Healthcare and Family Services ~~Public Aid~~ if it is providing or
12 has provided financial support to the child or if it is
13 assisting with child support collection services; or a man
14 presumed or alleging himself to be the father of the child or
15 expected child. The complaint shall be verified and shall name
16 the person or persons alleged to be the father of the child.

17 (b) An action to declare the non-existence of the parent
18 and child relationship may be brought by the child, the natural
19 mother, or a man presumed to be the father under subdivision
20 (a)(1) or (a)(2) of Section 5 of this Act. Actions brought by
21 the child, the natural mother or a presumed father shall be
22 brought by verified complaint.

23 After the presumption that a man presumed to be the father
24 under subdivision (a)(1) or (a)(2) of Section 5 has been
25 rebutted, paternity of the child by another man may be
26 determined in the same action, if he has been made a party.

27 (b-5) An action to declare the non-existence of the parent
28 and child relationship may be brought subsequent to an
29 adjudication of paternity in any judgment by the man
30 adjudicated to be the father pursuant to the presumptions in
31 Section 5 of this Act if, as a result of deoxyribonucleic acid
32 (DNA) tests, it is discovered that the man adjudicated to be
33 the father is not the natural father of the child. Actions
34 brought by the adjudicated father shall be brought by verified
35 complaint. If, as a result of the deoxyribonucleic acid (DNA)

1 tests, the plaintiff is determined not to be the father of the
2 child, the adjudication of paternity and any orders regarding
3 custody, visitation, and future payments of support may be
4 vacated.

5 (c) If any party is a minor, he or she may be represented
6 by his or her general guardian or a guardian ad litem appointed
7 by the court, which may include an appropriate agency. The
8 court may align the parties.

9 (d) Regardless of its terms, an agreement, other than a
10 settlement approved by the court, between an alleged or
11 presumed father and the mother or child, does not bar an action
12 under this Section.

13 (e) If an action under this Section is brought before the
14 birth of the child, all proceedings shall be stayed until after
15 the birth, except for service or process, the taking of
16 depositions to perpetuate testimony, and the ordering of blood
17 tests under appropriate circumstances.

18 (Source: P.A. 89-674, eff. 8-14-96; 90-18, eff. 7-1-97; 90-715,
19 eff. 8-7-98.)

20 (750 ILCS 45/8) (from Ch. 40, par. 2508)

21 Sec. 8. Statute of limitations.

22 (a) (1) An action brought by or on behalf of a child, an
23 action brought by a party alleging that he or she is the
24 child's natural parent, or an action brought by the
25 Department of Healthcare and Family Services (formerly
26 Illinois Department of Public Aid), if it is providing or
27 has provided financial support to the child or if it is
28 assisting with child support collection services, shall be
29 barred if brought later than 2 years after the child
30 reaches the age of majority; however, if the action on
31 behalf of the child is brought by a public agency, other
32 than the Department of Healthcare and Family Services
33 (formerly Illinois Department of Public Aid) if it is
34 providing or has provided financial support to the child or
35 if it is assisting with child support collection services,

1 it shall be barred 2 years after the agency has ceased to
2 provide assistance to the child.

3 (2) Failure to bring an action within 2 years shall not
4 bar any party from asserting a defense in any action to
5 declare the non-existence of the parent and child
6 relationship.

7 (3) An action to declare the non-existence of the
8 parent and child relationship brought under subsection (b)
9 of Section 7 of this Act shall be barred if brought later
10 than 2 years after the petitioner obtains knowledge of
11 relevant facts. The 2-year period for bringing an action to
12 declare the nonexistence of the parent and child
13 relationship shall not extend beyond the date on which the
14 child reaches the age of 18 years. Failure to bring an
15 action within 2 years shall not bar any party from
16 asserting a defense in any action to declare the existence
17 of the parent and child relationship.

18 (4) An action to declare the non-existence of the
19 parent and child relationship brought under subsection
20 (b-5) of Section 7 of this Act shall be barred if brought
21 more than 6 months after the effective date of this
22 amendatory Act of 1998 or more than 2 years after the
23 petitioner obtains actual knowledge of relevant facts,
24 whichever is later. The 2-year period shall not apply to
25 periods of time where the natural mother or the child
26 refuses to submit to deoxyribonucleic acid (DNA) tests. The
27 2-year period for bringing an action to declare the
28 nonexistence of the parent and child relationship shall not
29 extend beyond the date on which the child reaches the age
30 of 18 years. Failure to bring an action within 2 years
31 shall not bar any party from asserting a defense in any
32 action to declare the existence of the parent and child
33 relationship.

34 (b) The time during which any party is not subject to
35 service of process or is otherwise not subject to the
36 jurisdiction of the courts of this State shall toll the

1 aforementioned periods.

2 (c) This Act does not affect the time within which any
3 rights under the Probate Act of 1975 may be asserted beyond the
4 time provided by law relating to distribution and closing of
5 decedent's estates or to the determination of heirship, or
6 otherwise.

7 (Source: P.A. 89-674, eff. 8-14-96; 90-18, eff. 7-1-97; 90-715,
8 eff. 8-7-98.)

9 (750 ILCS 45/13.1)

10 Sec. 13.1. Temporary order for child support.
11 Notwithstanding any other law to the contrary, pending the
12 outcome of a judicial determination of parentage, the court
13 shall issue a temporary order for child support, upon motion by
14 a party and a showing of clear and convincing evidence of
15 paternity. In determining the amount of the temporary child
16 support award, the court shall use the guidelines and standards
17 set forth in subsection (a) of Section 505 and in Section 505.2
18 of the Illinois Marriage and Dissolution of Marriage Act.

19 Any new or existing support order entered by the court
20 under this Section shall be deemed to be a series of judgments
21 against the person obligated to pay support thereunder, each
22 such judgment to be in the amount of each payment or
23 installment of support and each judgment to be deemed entered
24 as of the date the corresponding payment or installment becomes
25 due under the terms of the support order. Each such judgment
26 shall have the full force, effect, and attributes of any other
27 judgment of this State, including the ability to be enforced.
28 Any such judgment is subject to modification or termination
29 only in accordance with Section 510 of the Illinois Marriage
30 and Dissolution of Marriage Act. A lien arises by operation of
31 law against the real and personal property of the noncustodial
32 parent for each installment of overdue support owed by the
33 noncustodial parent.

34 All orders for support, when entered or modified, shall
35 include a provision requiring the non-custodial parent to

1 notify the court, and in cases in which a party is receiving
2 child support enforcement services under Article X of the
3 Illinois Public Aid Code, the ~~Illinois~~ Department of Healthcare
4 and Family Services ~~Public Aid~~, within 7 days, (i) of the name,
5 address, and telephone number of any new employer of the
6 non-custodial parent, (ii) whether the non-custodial parent
7 has access to health insurance coverage through the employer or
8 other group coverage, and, if so, the policy name and number
9 and the names of persons covered under the policy, and (iii) of
10 any new residential or mailing address or telephone number of
11 the non-custodial parent.

12 In any subsequent action to enforce a support order, upon
13 sufficient showing that diligent effort has been made to
14 ascertain the location of the non-custodial parent, service of
15 process or provision of notice necessary in that action may be
16 made at the last known address of the non-custodial parent, in
17 any manner expressly provided by the Code of Civil Procedure or
18 in this Act, which service shall be sufficient for purposes of
19 due process.

20 An order for support shall include a date on which the
21 current support obligation terminates. The termination date
22 shall be no earlier than the date on which the child covered by
23 the order will attain the age of majority or is otherwise
24 emancipated. The order for support shall state that the
25 termination date does not apply to any arrearage that may
26 remain unpaid on that date. Nothing in this paragraph shall be
27 construed to prevent the court from modifying the order.

28 If there is an unpaid arrearage or delinquency (as those
29 terms are defined in the Income Withholding for Support Act)
30 equal to at least one month's support obligation on the
31 termination date stated in the order for support or, if there
32 is no termination date stated in the order, on the date the
33 child attains the age of majority or is otherwise emancipated,
34 then the periodic amount required to be paid for current
35 support of that child immediately prior to that date shall
36 automatically continue to be an obligation, not as current

1 support but as periodic payment toward satisfaction of the
2 unpaid arrearage or delinquency. That periodic payment shall be
3 in addition to any periodic payment previously required for
4 satisfaction of the arrearage or delinquency. The total
5 periodic amount to be paid toward satisfaction of the arrearage
6 or delinquency may be enforced and collected by any method
7 provided by law for the enforcement and collection of child
8 support, including but not limited to income withholding under
9 the Income Withholding for Support Act. Each order for support
10 entered or modified on or after the effective date of this
11 amendatory Act of the 93rd General Assembly must contain a
12 statement notifying the parties of the requirements of this
13 paragraph. Failure to include the statement in the order for
14 support does not affect the validity of the order or the
15 operation of the provisions of this paragraph with regard to
16 the order. This paragraph shall not be construed to prevent or
17 affect the establishment or modification of an order for the
18 support of a minor child or the establishment or modification
19 of an order for the support of a non-minor child or educational
20 expenses under Section 513 of the Illinois Marriage and
21 Dissolution of Marriage Act.

22 (Source: P.A. 92-590, eff. 7-1-02; 93-1061, eff. 1-1-05.)

23 (750 ILCS 45/14) (from Ch. 40, par. 2514)

24 Sec. 14. Judgment.

25 (a) (1) The judgment shall contain or explicitly reserve
26 provisions concerning any duty and amount of child support and
27 may contain provisions concerning the custody and guardianship
28 of the child, visitation privileges with the child, the
29 furnishing of bond or other security for the payment of the
30 judgment, which the court shall determine in accordance with
31 the relevant factors set forth in the Illinois Marriage and
32 Dissolution of Marriage Act and any other applicable law of
33 Illinois, to guide the court in a finding in the best interests
34 of the child. In determining custody, joint custody, removal,
35 or visitation, the court shall apply the relevant standards of

1 the Illinois Marriage and Dissolution of Marriage Act,
2 including Section 609. Specifically, in determining the amount
3 of any child support award, the court shall use the guidelines
4 and standards set forth in subsection (a) of Section 505 and in
5 Section 505.2 of the Illinois Marriage and Dissolution of
6 Marriage Act. For purposes of Section 505 of the Illinois
7 Marriage and Dissolution of Marriage Act, "net income" of the
8 non-custodial parent shall include any benefits available to
9 that person under the Illinois Public Aid Code or from other
10 federal, State or local government-funded programs. The court
11 shall, in any event and regardless of the amount of the
12 non-custodial parent's net income, in its judgment order the
13 non-custodial parent to pay child support to the custodial
14 parent in a minimum amount of not less than \$10 per month. In
15 an action brought within 2 years after a child's birth, the
16 judgment or order may direct either parent to pay the
17 reasonable expenses incurred by either parent related to the
18 mother's pregnancy and the delivery of the child. The judgment
19 or order shall contain the father's social security number,
20 which the father shall disclose to the court; however, failure
21 to include the father's social security number on the judgment
22 or order does not invalidate the judgment or order.

23 (2) If a judgment of parentage contains no explicit award
24 of custody, the establishment of a support obligation or of
25 visitation rights in one parent shall be considered a judgment
26 granting custody to the other parent. If the parentage judgment
27 contains no such provisions, custody shall be presumed to be
28 with the mother; however, the presumption shall not apply if
29 the father has had physical custody for at least 6 months prior
30 to the date that the mother seeks to enforce custodial rights.

31 (b) The court shall order all child support payments,
32 determined in accordance with such guidelines, to commence with
33 the date summons is served. The level of current periodic
34 support payments shall not be reduced because of payments set
35 for the period prior to the date of entry of the support order.
36 The Court may order any child support payments to be made for a

1 period prior to the commencement of the action. In determining
2 whether and the extent to which the payments shall be made for
3 any prior period, the court shall consider all relevant facts,
4 including the factors for determining the amount of support
5 specified in the Illinois Marriage and Dissolution of Marriage
6 Act and other equitable factors including but not limited to:

7 (1) The father's prior knowledge of the fact and
8 circumstances of the child's birth.

9 (2) The father's prior willingness or refusal to help
10 raise or support the child.

11 (3) The extent to which the mother or the public agency
12 bringing the action previously informed the father of the
13 child's needs or attempted to seek or require his help in
14 raising or supporting the child.

15 (4) The reasons the mother or the public agency did not
16 file the action earlier.

17 (5) The extent to which the father would be prejudiced
18 by the delay in bringing the action.

19 For purposes of determining the amount of child support to
20 be paid for any period before the date the order for current
21 child support is entered, there is a rebuttable presumption
22 that the father's net income for the prior period was the same
23 as his net income at the time the order for current child
24 support is entered.

25 If (i) the non-custodial parent was properly served with a
26 request for discovery of financial information relating to the
27 non-custodial parent's ability to provide child support, (ii)
28 the non-custodial parent failed to comply with the request,
29 despite having been ordered to do so by the court, and (iii)
30 the non-custodial parent is not present at the hearing to
31 determine support despite having received proper notice, then
32 any relevant financial information concerning the
33 non-custodial parent's ability to provide child support that
34 was obtained pursuant to subpoena and proper notice shall be
35 admitted into evidence without the need to establish any
36 further foundation for its admission.

1 (c) Any new or existing support order entered by the court
2 under this Section shall be deemed to be a series of judgments
3 against the person obligated to pay support thereunder, each
4 judgment to be in the amount of each payment or installment of
5 support and each such judgment to be deemed entered as of the
6 date the corresponding payment or installment becomes due under
7 the terms of the support order. Each judgment shall have the
8 full force, effect and attributes of any other judgment of this
9 State, including the ability to be enforced. A lien arises by
10 operation of law against the real and personal property of the
11 noncustodial parent for each installment of overdue support
12 owed by the noncustodial parent.

13 (d) If the judgment or order of the court is at variance
14 with the child's birth certificate, the court shall order that
15 a new birth certificate be issued under the Vital Records Act.

16 (e) On request of the mother and the father, the court
17 shall order a change in the child's name. After hearing
18 evidence the court may stay payment of support during the
19 period of the father's minority or period of disability.

20 (f) If, upon a showing of proper service, the father fails
21 to appear in court, or otherwise appear as provided by law, the
22 court may proceed to hear the cause upon testimony of the
23 mother or other parties taken in open court and shall enter a
24 judgment by default. The court may reserve any order as to the
25 amount of child support until the father has received notice,
26 by regular mail, of a hearing on the matter.

27 (g) A one-time charge of 20% is imposable upon the amount
28 of past-due child support owed on July 1, 1988 which has
29 accrued under a support order entered by the court. The charge
30 shall be imposed in accordance with the provisions of Section
31 10-21 of the Illinois Public Aid Code and shall be enforced by
32 the court upon petition.

33 (h) All orders for support, when entered or modified, shall
34 include a provision requiring the non-custodial parent to
35 notify the court and, in cases in which party is receiving
36 child support enforcement services under Article X of the

1 Illinois Public Aid Code, the ~~Illinois~~ Department of Healthcare
2 and Family Services ~~Public Aid~~, within 7 days, (i) of the name
3 and address of any new employer of the non-custodial parent,
4 (ii) whether the non-custodial parent has access to health
5 insurance coverage through the employer or other group coverage
6 and, if so, the policy name and number and the names of persons
7 covered under the policy, and (iii) of any new residential or
8 mailing address or telephone number of the non-custodial
9 parent. In any subsequent action to enforce a support order,
10 upon a sufficient showing that a diligent effort has been made
11 to ascertain the location of the non-custodial parent, service
12 of process or provision of notice necessary in the case may be
13 made at the last known address of the non-custodial parent in
14 any manner expressly provided by the Code of Civil Procedure or
15 this Act, which service shall be sufficient for purposes of due
16 process.

17 (i) An order for support shall include a date on which the
18 current support obligation terminates. The termination date
19 shall be no earlier than the date on which the child covered by
20 the order will attain the age of 18. However, if the child will
21 not graduate from high school until after attaining the age of
22 18, then the termination date shall be no earlier than the
23 earlier of the date on which the child's high school graduation
24 will occur or the date on which the child will attain the age
25 of 19. The order for support shall state that the termination
26 date does not apply to any arrearage that may remain unpaid on
27 that date. Nothing in this subsection shall be construed to
28 prevent the court from modifying the order or terminating the
29 order in the event the child is otherwise emancipated.

30 (i-5) If there is an unpaid arrearage or delinquency (as
31 those terms are defined in the Income Withholding for Support
32 Act) equal to at least one month's support obligation on the
33 termination date stated in the order for support or, if there
34 is no termination date stated in the order, on the date the
35 child attains the age of majority or is otherwise emancipated,
36 the periodic amount required to be paid for current support of

1 that child immediately prior to that date shall automatically
2 continue to be an obligation, not as current support but as
3 periodic payment toward satisfaction of the unpaid arrearage or
4 delinquency. That periodic payment shall be in addition to any
5 periodic payment previously required for satisfaction of the
6 arrearage or delinquency. The total periodic amount to be paid
7 toward satisfaction of the arrearage or delinquency may be
8 enforced and collected by any method provided by law for
9 enforcement and collection of child support, including but not
10 limited to income withholding under the Income Withholding for
11 Support Act. Each order for support entered or modified on or
12 after the effective date of this amendatory Act of the 93rd
13 General Assembly must contain a statement notifying the parties
14 of the requirements of this subsection. Failure to include the
15 statement in the order for support does not affect the validity
16 of the order or the operation of the provisions of this
17 subsection with regard to the order. This subsection shall not
18 be construed to prevent or affect the establishment or
19 modification of an order for support of a minor child or the
20 establishment or modification of an order for support of a
21 non-minor child or educational expenses under Section 513 of
22 the Illinois Marriage and Dissolution of Marriage Act.

23 (j) An order entered under this Section shall include a
24 provision requiring the obligor to report to the obligee and to
25 the clerk of court within 10 days each time the obligor obtains
26 new employment, and each time the obligor's employment is
27 terminated for any reason. The report shall be in writing and
28 shall, in the case of new employment, include the name and
29 address of the new employer. Failure to report new employment
30 or the termination of current employment, if coupled with
31 nonpayment of support for a period in excess of 60 days, is
32 indirect criminal contempt. For any obligor arrested for
33 failure to report new employment bond shall be set in the
34 amount of the child support that should have been paid during
35 the period of unreported employment. An order entered under
36 this Section shall also include a provision requiring the

1 obligor and obligee parents to advise each other of a change in
2 residence within 5 days of the change except when the court
3 finds that the physical, mental, or emotional health of a party
4 or that of a minor child, or both, would be seriously
5 endangered by disclosure of the party's address.

6 (Source: P.A. 92-590, eff. 7-1-02; 92-876, eff. 6-1-03; 93-139,
7 eff. 7-10-03; 93-1061, eff. 1-1-05.)

8 (750 ILCS 45/14.1)

9 Sec. 14.1. Information to State Case Registry.

10 (a) In this Section:

11 "Order for support", "obligor", "obligee", and "business
12 day" are defined as set forth in the Income Withholding for
13 Support Act.

14 "State Case Registry" means the State Case Registry
15 established under Section 10-27 of the Illinois Public Aid
16 Code.

17 (b) Each order for support entered or modified by the
18 circuit court under this Act shall require that the obligor and
19 obligee (i) file with the clerk of the circuit court the
20 information required by this Section (and any other information
21 required under Title IV, Part D of the Social Security Act or
22 by the federal Department of Health and Human Services) at the
23 time of entry or modification of the order for support and (ii)
24 file updated information with the clerk within 5 business days
25 of any change. Failure of the obligor or obligee to file or
26 update the required information shall be punishable as in cases
27 of contempt. The failure shall not prevent the court from
28 entering or modifying the order for support, however.

29 (c) The obligor shall file the following information: the
30 obligor's name, date of birth, social security number, and
31 mailing address.

32 If either the obligor or the obligee receives child support
33 enforcement services from the ~~Illinois~~ Department of
34 Healthcare and Family Services ~~Public Aid~~ under Article X of
35 the Illinois Public Aid Code, the obligor shall also file the

1 following information: the obligor's telephone number,
2 driver's license number, and residential address (if different
3 from the obligor's mailing address), and the name, address, and
4 telephone number of the obligor's employer or employers.

5 (d) The obligee shall file the following information:

6 (1) The names of the obligee and the child or children
7 covered by the order for support.

8 (2) The dates of birth of the obligee and the child or
9 children covered by the order for support.

10 (3) The social security numbers of the obligee and the
11 child or children covered by the order for support.

12 (4) The obligee's mailing address.

13 (e) In cases in which the obligee receives child support
14 enforcement services from the ~~Illinois~~ Department of
15 Healthcare and Family Services ~~Public Aid~~ under Article X of
16 the Illinois Public Aid Code, the order for support shall (i)
17 require that the obligee file the information required under
18 subsection (d) with the ~~Illinois~~ Department of Healthcare and
19 Family Services ~~Public Aid~~ for inclusion in the State Case
20 Registry, rather than file the information with the clerk, and
21 (ii) require that the obligee include the following additional
22 information:

23 (1) The obligee's telephone and driver's license
24 numbers.

25 (2) The obligee's residential address, if different
26 from the obligee's mailing address.

27 (3) The name, address, and telephone number of the
28 obligee's employer or employers.

29 The order for support shall also require that the obligee
30 update the information filed with the ~~Illinois~~ Department of
31 Healthcare and Family Services ~~Public Aid~~ within 5 business
32 days of any change.

33 (f) The clerk shall provide the information filed under
34 this Section, together with the court docket number and county
35 in which the order for support was entered, to the State Case
36 Registry within 5 business days after receipt of the

1 information.

2 (g) In a case in which a party is receiving child support
3 enforcement services under Article X of the Illinois Public Aid
4 Code, the clerk shall provide the following additional
5 information to the State Case Registry within 5 business days
6 after entry or modification of an order for support or request
7 from the ~~Illinois~~ Department of Healthcare and Family Services
8 ~~Public Aid~~:

9 (1) The amount of monthly or other periodic support
10 owed under the order for support and other amounts,
11 including arrearage, interest, or late payment penalties
12 and fees, due or overdue under the order.

13 (2) Any such amounts that have been received by the
14 clerk, and the distribution of those amounts by the clerk.

15 (h) Information filed by the obligor and obligee under this
16 Section that is not specifically required to be included in the
17 body of an order for support under other laws is not a public
18 record and shall be treated as confidential and subject to
19 disclosure only in accordance with the provisions of this
20 Section, Section 10-27 of the Illinois Public Aid Code, and
21 Title IV, Part D of the Social Security Act.

22 (Source: P.A. 91-212, eff. 7-20-99; 92-463, eff. 8-22-01.)

23 (750 ILCS 45/15.1) (from Ch. 40, par. 2515.1)

24 Sec. 15.1. (a) Whenever it is determined in a proceeding to
25 establish or enforce a child support obligation that the person
26 owing a duty of support is unemployed, the court may order the
27 person to seek employment and report periodically to the court
28 with a diary, listing or other memorandum of his or her efforts
29 in accordance with such order. Additionally, the court may
30 order the unemployed person to report to the Department of
31 Employment Security for job search services or to make
32 application with the local Job Training Partnership Act
33 provider for participation in job search, training or work
34 programs and where the duty of support is owed to a child
35 receiving child support enforcement services under Article X of

1 the Illinois Public Aid Code, as amended, the court may order
2 the unemployed person to report to the ~~Illinois~~ Department of
3 Healthcare and Family Services ~~Public Aid~~ for participation in
4 job search, training or work programs established under Section
5 9-6 and Article IXA of that Code.

6 (b) Whenever it is determined that a person owes past-due
7 support for a child, and the child is receiving assistance
8 under the Illinois Public Aid Code, the court shall order the
9 following at the request of the ~~Illinois~~ Department of
10 Healthcare and Family Services ~~Public Aid~~:

11 (1) that the person pay the past-due support in
12 accordance with a plan approved by the court; or

13 (2) if the person owing past-due support is unemployed,
14 is subject to such a plan, and is not incapacitated, that
15 the person participate in such job search, training, or
16 work programs established under Section 9-6 and Article IXA
17 of the Illinois Public Aid Code as the court deems
18 appropriate.

19 (Source: P.A. 91-357, eff. 7-29-99; 92-590, eff. 7-1-02.)

20 (750 ILCS 45/18) (from Ch. 40, par. 2518)

21 Sec. 18. Right to Counsel; Free Transcript on Appeal.

22 (a) Any party may be represented by counsel at all
23 proceedings under this Act.

24 (a-5) In any proceedings involving the support, custody,
25 visitation, education, parentage, property interest, or
26 general welfare of a minor or dependent child, the court may,
27 on its own motion or that of any party, and subject to the
28 terms or specifications the court determines, appoint an
29 attorney to serve in one of the following capacities:

30 (1) as an attorney to represent the child;

31 (2) as a guardian ad litem to address issues the court
32 delineates;

33 (3) as a child's representative whose duty shall be to
34 advocate what the representative finds to be in the best
35 interests of the child after reviewing the facts and

1 circumstances of the case. The child's representative
2 shall have the same power and authority to take part in the
3 conduct of the litigation as does an attorney for a party
4 and shall possess all the powers of investigation and
5 recommendation as does a guardian ad litem. The child's
6 representative shall consider, but not be bound by, the
7 expressed wishes of the child. A child's representative
8 shall have received training in child advocacy or shall
9 possess such experience as determined to be equivalent to
10 such training by the chief judge of the circuit where the
11 child's representative has been appointed. The child's
12 representative shall not disclose confidential
13 communications made by the child, except as required by law
14 or by the Rules of Professional Conduct. The child's
15 representative shall not be called as a witness regarding
16 the issues set forth in this subsection.

17 During the proceedings the court may appoint an additional
18 attorney to serve in another of the capacities described in
19 subdivisions (1), (2), or (3) of the preceding paragraph on its
20 own motion or that of a party only for good cause shown and
21 when the reasons for the additional appointment are set forth
22 in specific findings.

23 The court shall enter an order as appropriate for costs,
24 fees, and disbursements, including a retainer, when the
25 attorney, guardian ad litem, or child's representative is
26 appointed, and thereafter as necessary. Such orders shall
27 require payment by either or both parents, by any other party
28 or source, or from the marital estate or the child's separate
29 estate. The court may not order payment by the ~~Illinois~~
30 Department of Healthcare and Family Services ~~Public Aid~~ in
31 cases in which the Department is providing child support
32 enforcement services under Article X of the Illinois Public Aid
33 Code. Unless otherwise ordered by the court at the time fees
34 and costs are approved, all fees and costs payable to an
35 attorney, guardian ad litem, or child's representative under
36 this Section are by implication deemed to be in the nature of

1 support of the child and are within the exceptions to discharge
2 in bankruptcy under 11 U.S.C.A. 523. The provisions of Sections
3 501 and 508 of this Act shall apply to fees and costs for
4 attorneys appointed under this Section.

5 (b) Upon the request of a mother or child seeking to
6 establish the existence of a father and child relationship, the
7 State's Attorney shall represent the mother or child in the
8 trial court. If the child is an applicant for or a recipient of
9 assistance as defined in Section 2-6 of "The Illinois Public
10 Aid Code", approved April 11, 1967, as amended, or has applied
11 to the Department of Healthcare and Family Services (formerly
12 Illinois Department of Public Aid) for services under Article X
13 of such Code, the Department may file a complaint in the
14 child's behalf under this Act. The Department shall refer the
15 complaint to the Public Aid Claims Enforcement Division of the
16 Office of the Attorney General as provided in Section 12-16 of
17 "The Illinois Public Aid Code" for enforcement by the Attorney
18 General. Legal representation by the State's Attorney or the
19 Attorney General shall be limited to the establishment and
20 enforcement of an order for support, and shall not extend to
21 visitation, custody, property or other matters. If visitation,
22 custody, property or other matters are raised by a party and
23 considered by the court in any proceeding under this Act, the
24 court shall provide a continuance sufficient to enable the
25 mother or child to obtain representation for such matters.

26 (c) The Court may appoint counsel to represent any indigent
27 defendant in the trial court, except that this representation
28 shall be limited to the establishment of a parent and child
29 relationship and an order for support, and shall not extend to
30 visitation, custody, property, enforcement of an order for
31 support, or other matters. If visitation, custody, property or
32 other matters are raised by a party and considered by the court
33 in any proceeding under this Act, the court shall provide a
34 continuance sufficient to enable the defendant to obtain
35 representation for such matters.

36 (d) The court shall furnish on request of any indigent

1 party a transcript for purposes of appeal.

2 (Source: P.A. 91-410, eff. 1-1-00; 92-590, eff. 7-1-02.)

3 (750 ILCS 45/21) (from Ch. 40, par. 2521)

4 Sec. 21. Support payments; receiving and disbursing
5 agents.

6 (1) In an action filed in a county of less than 3 million
7 population in which an order for child support is entered, and
8 in supplementary proceedings in such a county to enforce or
9 vary the terms of such order arising out of an action filed in
10 such a county, the court, except in actions or supplementary
11 proceedings in which the pregnancy and delivery expenses of the
12 mother or the child support payments are for a recipient of aid
13 under the Illinois Public Aid Code, shall direct that child
14 support payments be made to the clerk of the court unless in
15 the discretion of the court exceptional circumstances warrant
16 otherwise. In cases where payment is to be made to persons
17 other than the clerk of the court the judgment or order of
18 support shall set forth the facts of the exceptional
19 circumstances.

20 (2) In an action filed in a county of 3 million or more
21 population in which an order for child support is entered, and
22 in supplementary proceedings in such a county to enforce or
23 vary the terms of such order arising out of an action filed in
24 such a county, the court, except in actions or supplementary
25 proceedings in which the pregnancy and delivery expenses of the
26 mother or the child support payments are for a recipient of aid
27 under the Illinois Public Aid Code, shall direct that child
28 support payments be made either to the clerk of the court or to
29 the Court Service Division of the County Department of Public
30 Aid, or to the clerk of the court or to the ~~Illinois~~ Department
31 of Healthcare and Family Services ~~Public Aid~~, unless in the
32 discretion of the court exceptional circumstances warrant
33 otherwise. In cases where payment is to be made to persons
34 other than the clerk of the court, the Court Service Division
35 of the County Department of Public Aid, or the ~~Illinois~~

1 Department of Healthcare and Family Services ~~Public Aid~~, the
2 judgment or order of support shall set forth the facts of the
3 exceptional circumstances.

4 (3) Where the action or supplementary proceeding is in
5 behalf of a mother for pregnancy and delivery expenses or for
6 child support, or both, and the mother, child, or both, are
7 recipients of aid under the Illinois Public Aid Code, the court
8 shall order that the payments be made directly to (a) the
9 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
10 ~~Aid~~ if the mother or child, or both, are recipients under
11 Articles IV or V of the Code, or (b) the local governmental
12 unit responsible for the support of the mother or child, or
13 both, if they are recipients under Articles VI or VII of the
14 Code. In accordance with federal law and regulations, the
15 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
16 ~~Aid~~ may continue to collect current maintenance payments or
17 child support payments, or both, after those persons cease to
18 receive public assistance and until termination of services
19 under Article X of the Illinois Public Aid Code. The ~~Illinois~~
20 Department of Healthcare and Family Services ~~Public Aid~~ shall
21 pay the net amount collected to those persons after deducting
22 any costs incurred in making the collection or any collection
23 fee from the amount of any recovery made. The ~~Illinois~~
24 Department of Healthcare and Family Services ~~Public Aid~~ or the
25 local governmental unit, as the case may be, may direct that
26 payments be made directly to the mother of the child, or to
27 some other person or agency in the child's behalf, upon the
28 removal of the mother and child from the public aid rolls or
29 upon termination of services under Article X of the Illinois
30 Public Aid Code; and upon such direction, the ~~Illinois~~
31 Department or the local governmental unit, as the case
32 requires, shall give notice of such action to the court in
33 writing or by electronic transmission.

34 (4) All clerks of the court and the Court Service Division
35 of a County Department of Public Aid and the ~~Illinois~~
36 Department of Healthcare and Family Services ~~Public Aid~~,

1 receiving child support payments under paragraphs (1) or (2)
2 shall disburse the same to the person or persons entitled
3 thereto under the terms of the order. They shall establish and
4 maintain clear and current records of all moneys received and
5 disbursed and of defaults and delinquencies in required
6 payments. The court, by order or rule, shall make provision for
7 the carrying out of these duties.

8 Payments under this Section to the ~~Illinois~~ Department of
9 Healthcare and Family Services Public Aid pursuant to the Child
10 Support Enforcement Program established by Title IV-D of the
11 Social Security Act shall be paid into the Child Support
12 Enforcement Trust Fund. All payments under this Section to the
13 Illinois Department of Human Services shall be deposited in the
14 DHS Recoveries Trust Fund. Disbursement from these funds shall
15 be as provided in the Illinois Public Aid Code. Payments
16 received by a local governmental unit shall be deposited in
17 that unit's General Assistance Fund.

18 (5) The moneys received by persons or agencies designated
19 by the court shall be disbursed by them in accordance with the
20 order. However, the court, on petition of the state's attorney,
21 may enter new orders designating the clerk of the court or the
22 ~~Illinois~~ Department of Healthcare and Family Services Public
23 ~~Aid~~, as the person or agency authorized to receive and disburse
24 child support payments and, in the case of recipients of public
25 aid, the court, on petition of the Attorney General or State's
26 Attorney, shall direct subsequent payments to be paid to the
27 ~~Illinois~~ Department of Healthcare and Family Services Public
28 ~~Aid~~ or to the appropriate local governmental unit, as provided
29 in paragraph (3). Payments of child support by principals or
30 sureties on bonds, or proceeds of any sale for the enforcement
31 of a judgment shall be made to the clerk of the court, the
32 ~~Illinois~~ Department of Healthcare and Family Services Public
33 ~~Aid~~ or the appropriate local governmental unit, as the
34 respective provisions of this Section require.

35 (6) For those cases in which child support is payable to
36 the clerk of the circuit court for transmittal to the

1 Department of Healthcare and Family Services (formerly
2 Illinois Department of Public Aid) by order of court or upon
3 notification by the Department of Healthcare and Family
4 Services (formerly Illinois Department of Public Aid), the
5 clerk shall transmit all such payments, within 4 working days
6 of receipt, to insure that funds are available for immediate
7 distribution by the Department to the person or entity entitled
8 thereto in accordance with standards of the Child Support
9 Enforcement Program established under Title IV-D of the Social
10 Security Act. The clerk shall notify the Department of the date
11 of receipt and amount thereof at the time of transmittal. Where
12 the clerk has entered into an agreement of cooperation with the
13 Department to record the terms of child support orders and
14 payments made thereunder directly into the Department's
15 automated data processing system, the clerk shall account for,
16 transmit and otherwise distribute child support payments in
17 accordance with such agreement in lieu of the requirements
18 contained herein.

19 (7) To the extent the provisions of this Section are
20 inconsistent with the requirements pertaining to the State
21 Disbursement Unit under Section 21.1 of this Act and Section
22 10-26 of the Illinois Public Aid Code, the requirements
23 pertaining to the State Disbursement Unit shall apply.

24 (Source: P.A. 94-88, eff. 1-1-06.)

25 (750 ILCS 45/21.1)

26 Sec. 21.1. Payment of Support to State Disbursement Unit.

27 (a) As used in this Section:

28 "Order for support", "obligor", "obligee", and "payor"
29 mean those terms as defined in the Income Withholding for
30 Support Act, except that "order for support" shall not mean
31 orders providing for spousal maintenance under which there is
32 no child support obligation.

33 (b) Notwithstanding any other provision of this Act to the
34 contrary, each order for support entered or modified on or
35 after October 1, 1999 shall require that support payments be

1 made to the State Disbursement Unit established under Section
2 10-26 of the Illinois Public Aid Code if:

3 (1) a party to the order is receiving child support
4 enforcement services under Article X of the Illinois Public
5 Aid Code; or

6 (2) no party to the order is receiving child support
7 enforcement services, but the support payments are made
8 through income withholding.

9 (c) Support payments shall be made to the State
10 Disbursement Unit if:

11 (1) the order for support was entered before October 1,
12 1999, and a party to the order is receiving child support
13 enforcement services under Article X of the Illinois Public
14 Aid Code; or

15 (2) no party to the order is receiving child support
16 enforcement services, and the support payments are being
17 made through income withholding.

18 (c-5) If no party to the order is receiving child support
19 enforcement services under Article X of the Illinois Public Aid
20 Code, and the support payments are not made through income
21 withholding, then support payments shall be made as directed by
22 the order for support.

23 (c-10) At any time, and notwithstanding the existence of an
24 order directing payments to be made elsewhere, the Department
25 of Healthcare and Family Services ~~Public Aid~~ may provide notice
26 to the obligor and, where applicable, to the obligor's payor:

27 (1) to make support payments to the State Disbursement
28 Unit if:

29 (A) a party to the order for support is receiving
30 child support enforcement services under Article X of
31 the Illinois Public Aid Code; or

32 (B) no party to the order for support is receiving
33 child support enforcement services under Article X of
34 the Illinois Public Aid Code, but the support payments
35 are made through income withholding; or

36 (2) to make support payments to the State Disbursement

1 Unit of another state upon request of another state's Title
2 IV-D child support enforcement agency, in accordance with
3 the requirements of Title IV, Part D of the Social Security
4 Act and regulations promulgated under that Part D.

5 The Department of Healthcare and Family Services ~~Public Aid~~
6 shall provide a copy of the notice to the obligee and to the
7 clerk of the circuit court.

8 (c-15) Within 15 days after the effective date of this
9 amendatory Act of the 91st General Assembly, the clerk of the
10 circuit court shall provide written notice to the obligor to
11 directly to the clerk of the circuit court if no party to the
12 order is receiving child support enforcement services under
13 Article X of the Illinois Public Aid Code, the support payments
14 are not made through income withholding, and the order for
15 support requires support payments to be made directly to the
16 clerk of the circuit court. The clerk shall provide a copy of
17 the notice to the obligee.

18 (c-20) If the State Disbursement Unit receives a support
19 payment that was not appropriately made to the Unit under this
20 Section, the Unit shall immediately return the payment to the
21 sender, including, if possible, instructions detailing where
22 to send the support payments.

23 (d) The notices under subsections (c-10) and (c-15) may be
24 sent by ordinary mail, certified mail, return receipt
25 requested, facsimile transmission, or other electronic
26 process, or may be served upon the obligor or payor using any
27 method provided by law for service of a summons.

28 (Source: P.A. 91-212, eff. 7-20-99; 91-677, eff. 1-5-00;
29 92-590, eff. 7-1-02.)

30 (750 ILCS 45/22) (from Ch. 40, par. 2522)

31 Sec. 22. In all cases instituted by the Department of
32 Healthcare and Family Services (formerly Illinois Department
33 of Public Aid) on behalf of a child or spouse, other than one
34 receiving a grant of financial aid under Article IV of The
35 Illinois Public Aid Code, on whose behalf an application has

1 been made and approved for child support enforcement services
2 as provided by Section 10-1 of that Code, the court shall
3 impose a collection fee on the individual who owes a child or
4 spouse support obligation in an amount equal to 10% of the
5 amount so owed as long as such collection is required by
6 federal law, which fee shall be in addition to the support
7 obligation. The imposition of such fee shall be in accordance
8 with provisions of Title IV, Part D, of the Social Security Act
9 and regulations duly promulgated thereunder. The fee shall be
10 payable to the clerk of the circuit court for transmittal to
11 the ~~Illinois~~ Department of Healthcare and Family Services
12 ~~Public Aid~~ and shall continue until support services are
13 terminated by that Department.

14 (Source: P.A. 92-590, eff. 7-1-02.)

15 (750 ILCS 45/23) (from Ch. 40, par. 2523)

16 Sec. 23. Notice to Clerk of Circuit Court of Payment
17 Received by ~~Illinois~~ Department of Healthcare and Family
18 Services ~~Public Aid~~ for Recording. For those cases in which
19 support is payable to the clerk of the circuit court for
20 transmittal to the Department of Healthcare and Family Services
21 (formerly Illinois Department of Public Aid) by order of court,
22 and the ~~Illinois~~ Department ~~of Public Aid~~ collects support by
23 assignment, offset, withhold, deduction or other process
24 permitted by law, the ~~Illinois~~ Department ~~of Public Aid~~ shall
25 notify the clerk of the date and amount of such collection.
26 Upon notification, the clerk shall record the collection on the
27 payment record for the case.

28 (Source: P.A. 83-1372.)

29 (750 ILCS 45/28)

30 Sec. 28. Notice of child support enforcement services. The
31 ~~Illinois~~ Department of Healthcare and Family Services ~~Public~~
32 ~~Aid~~ may provide notice at any time to the parties to an action
33 filed under this Act that child support enforcement services
34 are being provided by the ~~Illinois~~ Department under Article X

1 of the Illinois Public Aid Code. The notice shall be sent by
2 regular mail to the party's last known address on file with the
3 clerk of the court or the State Case Registry established under
4 Section 10-27 of the Illinois Public Aid Code. After notice is
5 provided pursuant to this Section, the ~~Illinois~~ Department
6 shall be entitled, as if it were a party, to notice of any
7 further proceedings brought in the case. The ~~Illinois~~
8 Department shall provide the clerk of the court with copies of
9 the notices sent to the parties. The clerk shall file the
10 copies in the court file.

11 (Source: P.A. 94-88, eff. 1-1-06.)

12 Section 9610. The Business Corporation Act of 1983 is
13 amended by changing Section 1.25 as follows:

14 (805 ILCS 5/1.25) (from Ch. 32, par. 1.25)

15 Sec. 1.25. List of corporations; exchange of information.

16 (a) The Secretary of State shall publish each year a list
17 of corporations filing an annual report for the preceding year
18 in accordance with the provisions of this Act, which report
19 shall state the name of the corporation and the respective
20 names and addresses of the president, secretary, and registered
21 agent thereof and the address of the registered office in this
22 State of each such corporation. The Secretary of State shall
23 furnish without charge a copy of such report to each recorder
24 of this State, and to each member of the General Assembly and
25 to each State agency or department requesting the same. The
26 Secretary of State shall, upon receipt of a written request and
27 a fee as determined by the Secretary, furnish such report to
28 anyone else.

29 (b) (1) The Secretary of State shall publish daily a list
30 of all newly formed corporations, business and not for profit,
31 chartered by him on that day issued after receipt of the
32 application. The daily list shall contain the same information
33 as to each corporation as is provided for the corporation list
34 published under subsection (a) of this Section. The daily list

1 may be obtained at the Secretary's office by any person,
2 newspaper, State department or agency, or local government for
3 a reasonable charge to be determined by the Secretary.
4 Inspection of the daily list may be made at the Secretary's
5 office during normal business hours without charge by any
6 person, newspaper, State department or agency, or local
7 government.

8 (2) The Secretary shall compile the daily list mentioned in
9 paragraph (1) of subsection (b) of this Section monthly, or
10 more often at the Secretary's discretion. The compilation shall
11 be immediately mailed free of charge to all local governments
12 requesting in writing receipt of such publication, or shall be
13 automatically mailed by the Secretary without charge to local
14 governments as determined by the Secretary. The Secretary shall
15 mail a copy of the compilations free of charge to all State
16 departments or agencies making a written request. A request for
17 a compilation of the daily list once made by a local government
18 or State department or agency need not be renewed. However, the
19 Secretary may request from time to time whether the local
20 governments or State departments or agencies desire to continue
21 receiving the compilation.

22 (3) The compilations of the daily list mentioned in
23 paragraph (2) of subsection (b) of this Section shall be mailed
24 to newspapers, or any other person not included as a recipient
25 in paragraph (2) of subsection (b) of this Section, upon
26 receipt of a written application signed by the applicant and
27 accompanied by the payment of a fee as determined by the
28 Secretary.

29 (c) If a domestic or foreign corporation has filed with the
30 Secretary of State an annual report for the preceding year or
31 has been newly formed or is otherwise and in any manner
32 registered with the Secretary of State, the Secretary of State
33 shall exchange with the ~~Illinois~~ Department of Healthcare and
34 Family Services ~~Public Aid~~ any information concerning that
35 corporation that may be necessary for the enforcement of child
36 support orders entered pursuant to the Illinois Public Aid

1 Code, the Illinois Marriage and Dissolution of Marriage Act,
2 the Non-Support of Spouse and Children Act, the Non-Support
3 Punishment Act, the Revised Uniform Reciprocal Enforcement of
4 Support Act, the Uniform Interstate Family Support Act, or the
5 Illinois Parentage Act of 1984.

6 Notwithstanding any provisions in this Act to the contrary,
7 the Secretary of State shall not be liable to any person for
8 any disclosure of information to the Department of Healthcare
9 and Family Services (formerly Illinois Department of Public
10 Aid) under this subsection or for any other action taken in
11 good faith to comply with the requirements of this subsection.
12 (Source: P.A. 90-18, eff. 7-1-97; 91-613, eff. 10-1-99.)

13 Section 9615. The General Not For Profit Corporation Act of
14 1986 is amended by changing Section 101.25 as follows:

15 (805 ILCS 105/101.25) (from Ch. 32, par. 101.25)

16 Sec. 101.25. Lists of corporations; exchange of
17 information.

18 (a) The Secretary of State shall include in his or her
19 daily publication lists of business corporations formed on that
20 day as provided in paragraph (1) of subsection (b) of Section
21 1.25 of the Business Corporation Act of 1983 all not-for-profit
22 corporations formed on the day of publication of such lists.

23 (b) The Secretary of State shall include among information
24 to be exchanged with the ~~Illinois~~ Department of Healthcare and
25 Family Services ~~Public Aid~~, as provided in subsection (c) of
26 Section 1.25 of the Business Corporation Act of 1983,
27 information regarding all not-for-profit corporations formed
28 pursuant to this Act.

29 (Source: P.A. 90-18, eff. 7-1-97.)

30 Section 9620. The Limited Liability Company Act is amended
31 by changing Section 50-5 as follows:

32 (805 ILCS 180/50-5)

1 Sec. 50-5. List of limited liability companies; exchange of
2 information.

3 (a) The Secretary of State may publish a list or lists of
4 limited liability companies and foreign limited liability
5 companies, as often, in the format, and for the fees as the
6 Secretary of State may in his or her discretion provide by
7 rule. The Secretary of State may disseminate information
8 concerning limited liability companies and foreign limited
9 liability companies by computer network in the format and for
10 the fees as may be determined by rule.

11 (b) Upon written request, any list published under
12 subsection (a) shall be free to each member of the General
13 Assembly, to each State agency or department, and to each
14 recorder in this State. An appropriate fee established by rule
15 to cover the cost of producing the list shall be charged to all
16 others.

17 (c) If a domestic or foreign limited liability company has
18 filed with the Secretary of State an annual report for the
19 preceding year or has been newly formed or is otherwise and in
20 any manner registered with the Secretary of State, the
21 Secretary of State shall exchange with the ~~Illinois~~ Department
22 of Healthcare and Family Services ~~Public Aid~~ any information
23 concerning that limited liability company that may be necessary
24 for the enforcement of child support orders entered pursuant to
25 the Illinois Public Aid Code, the Illinois Marriage and
26 Dissolution of Marriage Act, the Non-Support of Spouse and
27 Children Act, the Non-Support Punishment Act, the Revised
28 Uniform Reciprocal Enforcement of Support Act, the Uniform
29 Interstate Family Support Act, or the Illinois Parentage Act of
30 1984.

31 Notwithstanding any provisions in this Act to the contrary,
32 the Secretary of State shall not be liable to any person for
33 any disclosure of information to the Department of Healthcare
34 and Family Services (formerly Illinois Department of Public
35 Aid) under this subsection or for any other action taken in
36 good faith to comply with the requirements of this subsection.

1 (Source: P.A. 90-18, eff. 7-1-97; 91-613, eff. 10-1-99.)

2 Section 9625. The Unemployment Insurance Act is amended by
3 changing Section 1300 as follows:

4 (820 ILCS 405/1300) (from Ch. 48, par. 540)

5 Sec. 1300. Waiver or transfer of benefit rights - Partial
6 exemption.

7 (A) Except as otherwise provided herein any agreement by an
8 individual to waive, release or commute his rights under this
9 Act shall be void.

10 (B) Benefits due under this Act shall not be assigned,
11 pledged, encumbered, released or commuted and shall be exempt
12 from all claims of creditors and from levy, execution and
13 attachment or other remedy for recovery or collection of a
14 debt. However, nothing in this Section shall prohibit a
15 specified or agreed upon deduction from benefits by an
16 individual, or a court or administrative order for withholding
17 of income, for payment of past due child support from being
18 enforced and collected by the Department of Healthcare and
19 Family Services ~~Public Aid~~ on behalf of persons receiving a
20 grant of financial aid under Article IV of the Illinois Public
21 Aid Code, persons for whom an application has been made and
22 approved for child support enforcement services under Section
23 10-1 of such Code, or persons similarly situated and receiving
24 like services in other states. It is provided that:

25 (1) The aforementioned deduction of benefits and order
26 for withholding of income apply only if appropriate
27 arrangements have been made for reimbursement to the
28 Director by the Department of Healthcare and Family
29 Services ~~Public Aid~~ for any administrative costs incurred
30 by the Director under this Section.

31 (2) The Director shall deduct and withhold from
32 benefits payable under this Act, or under any arrangement
33 for the payment of benefits entered into by the Director
34 pursuant to the powers granted under Section 2700 of this

1 Act, the amount specified or agreed upon. In the case of a
2 court or administrative order for withholding of income,
3 the Director shall withhold the amount of the order.

4 (3) Any amount deducted and withheld by the Director
5 shall be paid to the Department of Healthcare and Family
6 Services ~~Public Aid~~ or the State Disbursement Unit
7 established under Section 10-26 of the Illinois Public Aid
8 Code, as directed by the Department of Healthcare and
9 Family Services ~~Public Aid~~, on behalf of the individual.

10 (4) Any amount deducted and withheld under subsection
11 (3) shall for all purposes be treated as if it were paid to
12 the individual as benefits and paid by such individual to
13 the Department of Healthcare and Family Services ~~Public Aid~~
14 or the State Disbursement Unit in satisfaction of the
15 individual's child support obligations.

16 (5) For the purpose of this Section, child support is
17 defined as those obligations which are being enforced
18 pursuant to a plan described in Title IV, Part D, Section
19 454 of the Social Security Act and approved by the
20 Secretary of Health and Human Services.

21 (6) The deduction of benefits and order for withholding
22 of income for child support shall be governed by Titles III
23 and IV of the Social Security Act and all regulations duly
24 promulgated thereunder.

25 (C) Nothing in this Section prohibits an individual from
26 voluntarily electing to have federal income tax deducted and
27 withheld from his or her unemployment insurance benefit
28 payments.

29 (1) The Director shall, at the time that an individual
30 files his or her claim for benefits that establishes his or
31 her benefit year, inform the individual that:

32 (a) unemployment insurance is subject to federal,
33 State, and local income taxes;

34 (b) requirements exist pertaining to estimated tax
35 payments;

36 (c) the individual may elect to have federal income

1 tax deducted and withheld from his or her payments of
2 unemployment insurance in the amount specified in the
3 federal Internal Revenue Code; and

4 (d) the individual is permitted to change a
5 previously elected withholding status.

6 (2) Amounts deducted and withheld from unemployment
7 insurance shall remain in the unemployment fund until
8 transferred to the federal taxing authority as a payment of
9 income tax.

10 (3) The Director shall follow all procedures specified
11 by the United States Department of Labor and the federal
12 Internal Revenue Service pertaining to the deducting and
13 withholding of income tax.

14 (4) Amounts shall be deducted and withheld in
15 accordance with the priorities established in rules
16 promulgated by the Director.

17 (D) Nothing in this Section prohibits an individual from
18 voluntarily electing to have State of Illinois income tax
19 deducted and withheld from his or her unemployment insurance
20 benefit payments.

21 (1) The Director shall, at the time that an individual
22 files his or her claim for benefits that establishes his or
23 her benefit year, in addition to providing the notice
24 required under subsection C, inform the individual that:

25 (a) the individual may elect to have State of
26 Illinois income tax deducted and withheld from his or
27 her payments of unemployment insurance; and

28 (b) the individual is permitted to change a
29 previously elected withholding status.

30 (2) Amounts deducted and withheld from unemployment
31 insurance shall remain in the unemployment fund until
32 transferred to the Department of Revenue as a payment of
33 State of Illinois income tax.

34 (3) Amounts shall be deducted and withheld in
35 accordance with the priorities established in rules
36 promulgated by the Director.

1 (E) Nothing in this Section prohibits the deduction and
2 withholding of an uncollected overissuance of food stamp
3 coupons from unemployment insurance benefits pursuant to this
4 subsection (E).

5 (1) At the time that an individual files a claim for
6 benefits that establishes his or her benefit year, that
7 individual must disclose whether or not he or she owes an
8 uncollected overissuance (as defined in Section 13(c)(1)
9 of the federal Food Stamp Act of 1977) of food stamp
10 coupons. The Director shall notify the State food stamp
11 agency enforcing such obligation of any individual who
12 discloses that he or she owes an uncollected overissuance
13 of food stamp coupons and who meets the monetary
14 eligibility requirements of subsection E of Section 500.

15 (2) The Director shall deduct and withhold from any
16 unemployment insurance benefits payable to an individual
17 who owes an uncollected overissuance of food stamp coupons:

18 (a) the amount specified by the individual to the
19 Director to be deducted and withheld under this
20 subsection (E);

21 (b) the amount (if any) determined pursuant to an
22 agreement submitted to the State food stamp agency
23 under Section 13(c)(3)(A) of the federal Food Stamp Act
24 of 1977; or

25 (c) any amount otherwise required to be deducted
26 and withheld from unemployment insurance benefits
27 pursuant to Section 13(c)(3)(B) of the federal Food
28 Stamp Act of 1977.

29 (3) Any amount deducted and withheld pursuant to this
30 subsection (E) shall be paid by the Director to the State
31 food stamp agency.

32 (4) Any amount deducted and withheld pursuant to this
33 subsection (E) shall for all purposes be treated as if it
34 were paid to the individual as unemployment insurance
35 benefits and paid by the individual to the State food stamp
36 agency as repayment of the individual's uncollected

1 overissuance of food stamp coupons.

2 (5) For purposes of this subsection (E), "unemployment
3 insurance benefits" means any compensation payable under
4 this Act including amounts payable by the Director pursuant
5 to an agreement under any federal law providing for
6 compensation, assistance, or allowances with respect to
7 unemployment.

8 (6) This subsection (E) applies only if arrangements
9 have been made for reimbursement by the State food stamp
10 agency for the administrative costs incurred by the
11 Director under this subsection (E) which are attributable
12 to the repayment of uncollected overissuances of food stamp
13 coupons to the State food stamp agency.

14 (Source: P.A. 94-237, eff. 1-1-06.)

15 Section 9995. No acceleration or delay. Where this Act
16 makes changes in a statute that is represented in this Act by
17 text that is not yet or no longer in effect (for example, a
18 Section represented by multiple versions), the use of that text
19 does not accelerate or delay the taking effect of (i) the
20 changes made by this Act or (ii) provisions derived from any
21 other Public Act.

22 Section 9997. Severability. The provisions of this Act are
23 severable under Section 1.31 of the Statute on Statutes.

24 Section 9999. Effective date. This Act takes effect upon
25 becoming law.

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- 8 5 ILCS 375/2.5 new
- 9 5 ILCS 375/3 from Ch. 127, par. 523
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- 16 10 ILCS 5/1A-15 from Ch. 46, par. 1A-15
- 17 10 ILCS 5/4-6.2 from Ch. 46, par. 4-6.2
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- 19 10 ILCS 5/6-50.2 from Ch. 46, par. 6-50.2
- 20 15 ILCS 405/10.05a from Ch. 15, par. 210.05a
- 21 20 ILCS 5/1-5
- 22 20 ILCS 5/5-15 was 20 ILCS 5/3
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21	735 ILCS 5/12-710	from Ch. 110, par. 12-710
22	740 ILCS 110/7.1	
23	745 ILCS 49/20	
24	750 ILCS 5/505	from Ch. 40, par. 505
25	750 ILCS 5/505.1	from Ch. 40, par. 505.1
26	750 ILCS 5/505.2	from Ch. 40, par. 505.2
27	750 ILCS 5/505.3	
28	750 ILCS 5/506	from Ch. 40, par. 506
29	750 ILCS 5/507	from Ch. 40, par. 507
30	750 ILCS 5/507.1	
31	750 ILCS 5/510	from Ch. 40, par. 510
32	750 ILCS 5/516	from Ch. 40, par. 516
33	750 ILCS 5/517	
34	750 ILCS 5/704	from Ch. 40, par. 704
35	750 ILCS 5/705	from Ch. 40, par. 705
36	750 ILCS 5/709	from Ch. 40, par. 709

1	750 ILCS 5/712	from Ch. 40, par. 712
2	750 ILCS 16/7	
3	750 ILCS 16/20	
4	750 ILCS 16/25	
5	750 ILCS 16/30	
6	750 ILCS 16/35	
7	750 ILCS 16/60	
8	750 ILCS 22/103	was 750 ILCS 22/102
9	750 ILCS 22/310	
10	750 ILCS 22/320	
11	750 ILCS 24/5	
12	750 ILCS 25/3	from Ch. 40, par. 2703
13	750 ILCS 25/6	from Ch. 40, par. 2706
14	750 ILCS 28/15	
15	750 ILCS 28/22	
16	750 ILCS 28/45	
17	750 ILCS 45/4.1	
18	750 ILCS 45/5	from Ch. 40, par. 2505
19	750 ILCS 45/7	from Ch. 40, par. 2507
20	750 ILCS 45/8	from Ch. 40, par. 2508
21	750 ILCS 45/13.1	
22	750 ILCS 45/14	from Ch. 40, par. 2514
23	750 ILCS 45/14.1	
24	750 ILCS 45/15.1	from Ch. 40, par. 2515.1
25	750 ILCS 45/18	from Ch. 40, par. 2518
26	750 ILCS 45/21	from Ch. 40, par. 2521
27	750 ILCS 45/21.1	
28	750 ILCS 45/22	from Ch. 40, par. 2522
29	750 ILCS 45/23	from Ch. 40, par. 2523
30	750 ILCS 45/28	
31	805 ILCS 5/1.25	from Ch. 32, par. 1.25
32	805 ILCS 105/101.25	from Ch. 32, par. 101.25
33	805 ILCS 180/50-5	
34	820 ILCS 405/1300	from Ch. 48, par. 540