



Sen. Louis S. Viverito

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09500SB0591sam001

LRB095 10550 CMK 33400 a

1 AMENDMENT TO SENATE BILL 591

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 591 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Act on the Aging is amended by  
5 changing Sections 4.02 and 4.12 as follows:

6 (20 ILCS 105/4.02) (from Ch. 23, par. 6104.02)

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

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

18 The Department shall establish eligibility standards for  
19 such services taking into consideration the unique economic and  
20 social needs of the target population for whom they are to be  
21 provided. Such eligibility standards shall be based on the  
22 recipient's ability to pay for services; provided, however,  
23 that in determining the amount and nature of services for which  
24 a person may qualify, consideration shall not be given to the  
25 value of cash, property or other assets held in the name of the  
26 person's spouse pursuant to a written agreement dividing

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

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

10 The Department shall, in conjunction with the Department of  
11 Public Aid (now Department of Healthcare and Family Services),  
12 seek appropriate amendments under Sections 1915 and 1924 of the  
13 Social Security Act. The purpose of the amendments shall be to  
14 extend eligibility for home and community based services under  
15 Sections 1915 and 1924 of the Social Security Act to persons  
16 who transfer to or for the benefit of a spouse those amounts of  
17 income and resources allowed under Section 1924 of the Social  
18 Security Act. Subject to the approval of such amendments, the  
19 Department shall extend the provisions of Section 5-4 of the  
20 Illinois Public Aid Code to persons who, but for the provision  
21 of home or community-based services, would require the level of  
22 care provided in an institution, as is provided for in federal  
23 law. Those persons no longer found to be eligible for receiving  
24 noninstitutional services due to changes in the eligibility  
25 criteria shall be given 60 days notice prior to actual  
26 termination. Those persons receiving notice of termination may

1 contact the Department and request the determination be  
2 appealed at any time during the 60 day notice period. With the  
3 exception of the lengthened notice and time frame for the  
4 appeal request, the appeal process shall follow the normal  
5 procedure. In addition, each person affected regardless of the  
6 circumstances for discontinued eligibility shall be given  
7 notice and the opportunity to purchase the necessary services  
8 through the Community Care Program. If the individual does not  
9 elect to purchase services, the Department shall advise the  
10 individual of alternative services. The target population  
11 identified for the purposes of this Section are persons age 60  
12 and older with an identified service need. Priority shall be  
13 given to those who are at imminent risk of  
14 institutionalization. The services shall be provided to  
15 eligible persons age 60 and older to the extent that the cost  
16 of the services together with the other personal maintenance  
17 expenses of the persons are reasonably related to the standards  
18 established for care in a group facility appropriate to the  
19 person's condition. These non-institutional services, pilot  
20 projects or experimental facilities may be provided as part of  
21 or in addition to those authorized by federal law or those  
22 funded and administered by the Department of Human Services.  
23 The Departments of Human Services, Healthcare and Family  
24 Services, Public Health, Veterans' Affairs, and Commerce and  
25 Economic Opportunity and other appropriate agencies of State,  
26 federal and local governments shall cooperate with the

1 Department on Aging in the establishment and development of the  
2 non-institutional services. The Department shall require an  
3 annual audit from all chore/housekeeping and homemaker vendors  
4 contracting with the Department under this Section. The annual  
5 audit shall assure that each audited vendor's procedures are in  
6 compliance with Department's financial reporting guidelines  
7 requiring an administrative and employee wage and benefits cost  
8 split as defined in administrative rules. The audit is a public  
9 record under the Freedom of Information Act. The Department  
10 shall execute, relative to the nursing home prescreening  
11 project, written inter-agency agreements with the Department  
12 of Human Services and the Department of Healthcare and Family  
13 Services, to effect the following: (1) intake procedures and  
14 common eligibility criteria for those persons who are receiving  
15 non-institutional services; and (2) the establishment and  
16 development of non-institutional services in areas of the State  
17 where they are not currently available or are undeveloped. On  
18 and after July 1, 1996, all nursing home prescreenings for  
19 individuals 60 years of age or older shall be conducted by the  
20 Department.

21 As part of the Department on Aging's routine training of  
22 care coordinators ~~case managers~~ and care coordinator ~~case~~  
23 ~~manager~~ supervisors, the Department may include information on  
24 family futures planning for persons who are age 60 or older and  
25 who are caregivers of their adult children with developmental  
26 disabilities. The content of the training shall be at the

1 Department's discretion.

2 No later than July 1, 2008, the Department's case  
3 management program shall be transitioned to a fully integrated  
4 care coordination program. The care coordination program shall  
5 incorporate the concepts of client direction and consumer focus  
6 and shall take into account the client's needs and preferences.  
7 On an individual client basis, duties of the care coordinators  
8 may include any combination of the following:

9 (A) intake;

10 (B) assessment;

11 (C) eligibility determination;

12 (D) care plan development;

13 (E) case work to implement care plan;

14 (F) follow-up;

15 (G) assistance with completion of applications for  
16 services;

17 (H) re-evaluation;

18 (I) referrals to non-government funded services;

19 (J) resource development;

20 (K) prevention;

21 (L) case closure;

22 (M) ensuring continuity of care across care settings;

23 (N) identification of gaps in services;

24 (O) monitoring; and

25 (P) other tasks as needed.

26 At the discretion of the care coordinators, a comprehensive

1 assessment shall be performed, using a tool identified by the  
2 Department. The comprehensive assessment process shall include  
3 a face to face interview in the client's home or temporary  
4 abode. Assessment interviews shall accommodate the scheduling  
5 needs of the client and the client's representative or  
6 representatives, who shall participate at the discretion of the  
7 client. The Department shall provide, by administrative rule,  
8 guidelines for determining the intensity of care coordination  
9 offered to each care recipient. Services contained in the care  
10 plan shall be menu driven and the client shall be given, to the  
11 extent practicable, the ability to choose, in collaboration  
12 with his or her care coordinator, the services that best  
13 reflect his or her needs and preferences. Care plans shall  
14 include all services needed by the recipient regardless of his  
15 or her funding source and delineate between services provided,  
16 services unavailable, and services refused by the client. The  
17 Department shall develop a process for the collection of unmet  
18 needs and the identification of priority service areas, as  
19 directed by the Older Adult Services Act. Case coordination  
20 units shall be reimbursed for care coordination in a just and  
21 equitable manner reflective of the actual cost of providing  
22 care coordination. By January 1, 2008, the Department shall  
23 develop a rate structure, in collaboration with case  
24 coordination units and advocates for care recipients, that  
25 reflects the intensity of coordination provided. The  
26 Department shall reevaluate the rate structure, each January

1 thereafter, to determine if the rate structure reflects the  
2 current costs of doing business.

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

13 The Department, or the Department's authorized  
14 representative, shall recover the amount of moneys expended for  
15 services provided to or in behalf of a person under this  
16 Section by a claim against the person's estate or against the  
17 estate of the person's surviving spouse, but no recovery may be  
18 had until after the death of the surviving spouse, if any, and  
19 then only at such time when there is no surviving child who is  
20 under age 21, blind, or permanently and totally disabled. This  
21 paragraph, however, shall not bar recovery, at the death of the  
22 person, of moneys for services provided to the person or in  
23 behalf of the person under this Section to which the person was  
24 not entitled; provided that such recovery shall not be enforced  
25 against any real estate while it is occupied as a homestead by  
26 the surviving spouse or other dependent, if no claims by other



1 creditors have been filed against the estate, or, if such  
2 claims have been filed, they remain dormant for failure of  
3 prosecution or failure of the claimant to compel administration  
4 of the estate for the purpose of payment. This paragraph shall  
5 not bar recovery from the estate of a spouse, under Sections  
6 1915 and 1924 of the Social Security Act and Section 5-4 of the  
7 Illinois Public Aid Code, who precedes a person receiving  
8 services under this Section in death. All moneys for services  
9 paid to or in behalf of the person under this Section shall be  
10 claimed for recovery from the deceased spouse's estate.  
11 "Homestead", as used in this paragraph, means the dwelling  
12 house and contiguous real estate occupied by a surviving spouse  
13 or relative, as defined by the rules and regulations of the  
14 Department of Healthcare and Family Services, regardless of the  
15 value of the property.

16 The Department shall develop procedures to enhance  
17 availability of services on evenings, weekends, and on an  
18 emergency basis to meet the respite needs of caregivers.  
19 Procedures shall be developed to permit the utilization of  
20 services in successive blocks of 24 hours up to the monthly  
21 maximum established by the Department. Workers providing these  
22 services shall be appropriately trained.

23 Beginning on the effective date of this Amendatory Act of  
24 1991, no person may perform chore/housekeeping and homemaker  
25 services under a program authorized by this Section unless that  
26 person has been issued a certificate of pre-service to do so by

1 his or her employing agency. Information gathered to effect  
2 such certification shall include (i) the person's name, (ii)  
3 the date the person was hired by his or her current employer,  
4 and (iii) the training, including dates and levels. Persons  
5 engaged in the program authorized by this Section before the  
6 effective date of this amendatory Act of 1991 shall be issued a  
7 certificate of all pre- and in-service training from his or her  
8 employer upon submitting the necessary information. The  
9 employing agency shall be required to retain records of all  
10 staff pre- and in-service training, and shall provide such  
11 records to the Department upon request and upon termination of  
12 the employer's contract with the Department. In addition, the  
13 employing agency is responsible for the issuance of  
14 certifications of in-service training completed to their  
15 employees.

16 The Department is required to develop a system to ensure  
17 that persons working as homemakers and chore housekeepers  
18 receive increases in their wages when the federal minimum wage  
19 is increased by requiring vendors to certify that they are  
20 meeting the federal minimum wage statute for homemakers and  
21 chore housekeepers. An employer that cannot ensure that the  
22 minimum wage increase is being given to homemakers and chore  
23 housekeepers shall be denied any increase in reimbursement  
24 costs.

25 The Community Care Program Advisory Committee is created in  
26 the Department on Aging. The Director shall appoint individuals

1 to serve in the Committee, who shall serve at their own  
2 expense. Members of the Committee must abide by all applicable  
3 ethics laws. The Committee shall advise the Department on  
4 issues related to the Department's program of services to  
5 prevent unnecessary institutionalization. The Committee shall  
6 meet on a bi-monthly basis and shall serve to identify and  
7 advise the Department on present and potential issues affecting  
8 the service delivery network, the program's clients, and the  
9 Department and to recommend solution strategies. Persons  
10 appointed to the Committee shall be appointed on, but not  
11 limited to, their own and their agency's experience with the  
12 program, geographic representation, and willingness to serve.  
13 The Committee shall include, but not be limited to,  
14 representatives from the following agencies and organizations:

15 (a) at least 4 adult day service representatives;

16 (b) at least 4 care ~~case~~ coordination unit  
17 representatives;

18 (c) at least 4 representatives from in-home direct care  
19 service agencies;

20 (d) at least 2 representatives of statewide trade or  
21 labor unions that represent in-home direct care service  
22 staff;

23 (e) at least 2 representatives of Area Agencies on  
24 Aging;

25 (f) at least 2 non-provider representatives from a  
26 policy, advocacy, research, or other service organization;

1 (g) at least 2 representatives from a statewide  
2 membership organization for senior citizens; and

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

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

24 The Department on Aging and the Department of Human  
25 Services shall cooperate in the development and submission of  
26 an annual report on programs and services provided under this

1 Section. Such joint report shall be filed with the Governor and  
2 the General Assembly on or before September 30 each year.

3 The requirement for reporting to the General Assembly shall  
4 be satisfied by filing copies of the report with the Speaker,  
5 the Minority Leader and the Clerk of the House of  
6 Representatives and the President, the Minority Leader and the  
7 Secretary of the Senate and the Legislative Research Unit, as  
8 required by Section 3.1 of the General Assembly Organization  
9 Act and filing such additional copies with the State Government  
10 Report Distribution Center for the General Assembly as is  
11 required under paragraph (t) of Section 7 of the State Library  
12 Act.

13 Those persons previously found eligible for receiving  
14 non-institutional services whose services were discontinued  
15 under the Emergency Budget Act of Fiscal Year 1992, and who do  
16 not meet the eligibility standards in effect on or after July  
17 1, 1992, shall remain ineligible on and after July 1, 1992.  
18 Those persons previously not required to cost-share and who  
19 were required to cost-share effective March 1, 1992, shall  
20 continue to meet cost-share requirements on and after July 1,  
21 1992. Beginning July 1, 1992, all clients will be required to  
22 meet eligibility, cost-share, and other requirements and will  
23 have services discontinued or altered when they fail to meet  
24 these requirements.

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

1 94-954, eff. 6-27-06.)

2 (20 ILCS 105/4.12)

3 Sec. 4.12. Assistance to nursing home residents.

4 (a) The Department on Aging shall assist eligible nursing  
5 home residents and their families to select long-term care  
6 options that meet their needs and reflect their preferences. At  
7 any time during the process, the resident or his or her  
8 representative may decline further assistance.

9 (b) To provide assistance, the Department shall develop a  
10 program of transition services with follow-up in selected areas  
11 of the State, to be expanded statewide as funding becomes  
12 available. The program shall be developed in consultation with  
13 nursing homes, care coordinators ~~case managers~~, Area Agencies  
14 on Aging, and others interested in the well-being of frail  
15 elderly Illinois residents. The Department shall establish  
16 administrative rules pursuant to the Illinois Administrative  
17 Procedure Act with respect to resident eligibility, assessment  
18 of the resident's health, cognitive, social, and financial  
19 needs, development of comprehensive service transition plans,  
20 and the level of services that must be available prior to  
21 transition of a resident into the community.

22 (Source: P.A. 93-902, eff. 8-10-04.)

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