

1 AN ACT concerning regulation.

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

4 Section 5. The Illinois Act on the Aging is amended by  
5 changing Section 4.04 as follows:

6 (20 ILCS 105/4.04) (from Ch. 23, par. 6104.04)

7 Sec. 4.04. Long Term Care Ombudsman Program.

8 (a) Long Term Care Ombudsman Program. The Department shall  
9 establish a Long Term Care Ombudsman Program, through the  
10 Office of State Long Term Care Ombudsman ("the Office"), in  
11 accordance with the provisions of the Older Americans Act of  
12 1965, as now or hereafter amended.

13 (b) Definitions. As used in this Section, unless the  
14 context requires otherwise:

15 (1) "Access" has the same meaning as in Section 1-104  
16 of the Nursing Home Care Act, as now or hereafter amended;  
17 that is, it means the right to:

18 (i) Enter any long term care facility or assisted  
19 living or shared housing establishment or supportive  
20 living facility;

21 (ii) Communicate privately and without restriction  
22 with any resident, regardless of age, who consents to  
23 the communication;

1           (iii) Seek consent to communicate privately and  
2           without restriction with any resident, regardless of  
3           age;

4           (iv) Inspect the clinical and other records of a  
5           resident, regardless of age, with the express written  
6           consent of the resident;

7           (v) Observe all areas of the long term care  
8           facility or supportive living facilities, assisted  
9           living or shared housing establishment except the  
10          living area of any resident who protests the  
11          observation.

12          (2) "Long Term Care Facility" means (i) any facility as  
13          defined by Section 1-113 of the Nursing Home Care Act, as  
14          now or hereafter amended; and (ii) any skilled nursing  
15          facility or a nursing facility which meets the requirements  
16          of Section 1819(a), (b), (c), and (d) or Section 1919(a),  
17          (b), (c), and (d) of the Social Security Act, as now or  
18          hereafter amended (42 U.S.C. 1395i-3(a), (b), (c), and (d)  
19          and 42 U.S.C. 1396r(a), (b), (c), and (d)).

20          (2.5) "Assisted living establishment" and "shared  
21          housing establishment" have the meanings given those terms  
22          in Section 10 of the Assisted Living and Shared Housing  
23          Act.

24          (2.7) "Supportive living facility" means a facility  
25          established under Section 5-5.01a of the Illinois Public  
26          Aid Code.

1           (3) "State Long Term Care Ombudsman" means any person  
2 employed by the Department to fulfill the requirements of  
3 the Office of State Long Term Care Ombudsman as required  
4 under the Older Americans Act of 1965, as now or hereafter  
5 amended, and Departmental policy.

6           (3.1) "Ombudsman" means any designated representative  
7 of a regional long term care ombudsman program; provided  
8 that the representative, whether he is paid for or  
9 volunteers his ombudsman services, shall be qualified and  
10 designated by the Office to perform the duties of an  
11 ombudsman as specified by the Department in rules and in  
12 accordance with the provisions of the Older Americans Act  
13 of 1965, as now or hereafter amended.

14           (c) Ombudsman; rules. The Office of State Long Term Care  
15 Ombudsman shall be composed of at least one full-time ombudsman  
16 and shall include a system of designated regional long term  
17 care ombudsman programs. Each regional program shall be  
18 designated by the State Long Term Care Ombudsman as a  
19 subdivision of the Office and any representative of a regional  
20 program shall be treated as a representative of the Office.

21           The Department, in consultation with the Office, shall  
22 promulgate administrative rules in accordance with the  
23 provisions of the Older Americans Act of 1965, as now or  
24 hereafter amended, to establish the responsibilities of the  
25 Department and the Office of State Long Term Care Ombudsman and  
26 the designated regional Ombudsman programs. The administrative

1 rules shall include the responsibility of the Office and  
2 designated regional programs to investigate and resolve  
3 complaints made by or on behalf of residents of long term care  
4 facilities, supportive living facilities, and assisted living  
5 and shared housing establishments, including the option to  
6 serve residents under the age of 60, relating to actions,  
7 inaction, or decisions of providers, or their representatives,  
8 of long term care facilities, of supported living facilities,  
9 of assisted living and shared housing establishments, of public  
10 agencies, or of social services agencies, which may adversely  
11 affect the health, safety, welfare, or rights of such  
12 residents. The Office and designated regional programs may  
13 represent all residents, but are not required by this Act to  
14 represent persons under 60 years of age, except to the extent  
15 required by federal law. When necessary and appropriate,  
16 representatives of the Office shall refer complaints to the  
17 appropriate regulatory State agency. The Department, in  
18 consultation with the Office, shall cooperate with the  
19 Department of Human Services and other State agencies in  
20 providing information and training to designated regional long  
21 term care ombudsman programs about the appropriate assessment  
22 and treatment (including information about appropriate  
23 supportive services, treatment options, and assessment of  
24 rehabilitation potential) of the residents they serve,  
25 including children, persons with mental illness (other than  
26 Alzheimer's disease and related disorders), and persons with

1 developmental disabilities.

2 The State Long Term Care Ombudsman and all other ombudsmen,  
3 as defined in paragraph (3.1) of subsection (b) must submit to  
4 background checks under the Health Care Worker Background Check  
5 Act and receive training, as prescribed by the Illinois  
6 Department on Aging, before visiting facilities. The training  
7 must include information specific to assisted living  
8 establishments, supportive living facilities, and shared  
9 housing establishments and to the rights of residents  
10 guaranteed under the corresponding Acts and administrative  
11 rules.

12 (c-5) Consumer Choice Information Reports. The Office  
13 shall:

14 (1) In collaboration with the Attorney General, create  
15 a Consumer Choice Information Report form to be completed  
16 by all licensed long term care facilities to aid  
17 Illinoisans and their families in making informed choices  
18 about long term care. The Office shall create a Consumer  
19 Choice Information Report for each type of licensed long  
20 term care facility.

21 (2) Develop a database of Consumer Choice Information  
22 Reports completed by licensed long term care facilities  
23 that includes information in the following consumer  
24 categories:

25 (A) Medical Care, Services, and Treatment.

26 (B) Special Services and Amenities.

- 1 (C) Staffing.
- 2 (D) Facility Statistics and Resident Demographics.
- 3 (E) Ownership and Administration.
- 4 (F) Safety and Security.
- 5 (G) Meals and Nutrition.
- 6 (H) Rooms, Furnishings, and Equipment.
- 7 (I) Family, Volunteer, and Visitation Provisions.

8 (3) Make this information accessible to the public,  
9 including on the Internet by means of a hyperlink labeled  
10 "Resident's Right to Know" on the Office's World Wide Web  
11 home page.

12 (4) Have the authority, with the Attorney General, to  
13 verify that information provided by a facility is accurate.

14 (5) Request a new report from any licensed facility  
15 whenever it deems necessary.

16 (d) Access and visitation rights.

17 (1) In accordance with subparagraphs (A) and (E) of  
18 paragraph (3) of subsection (c) of Section 1819 and  
19 subparagraphs (A) and (E) of paragraph (3) of subsection  
20 (c) of Section 1919 of the Social Security Act, as now or  
21 hereafter amended (42 U.S.C. 1395i-3 (c) (3) (A) and (E) and  
22 42 U.S.C. 1396r (c) (3) (A) and (E)), and Section 712 of the  
23 Older Americans Act of 1965, as now or hereafter amended  
24 (42 U.S.C. 3058f), a long term care facility, supportive  
25 living facility, assisted living establishment, and shared  
26 housing establishment must:

1 (i) permit immediate access to any resident,  
2 regardless of age, by a designated ombudsman; and

3 (ii) permit representatives of the Office, with  
4 the permission of the resident's legal representative  
5 or legal guardian, to examine a resident's clinical and  
6 other records, regardless of the age of the resident,  
7 and if a resident is unable to consent to such review,  
8 and has no legal guardian, permit representatives of  
9 the Office appropriate access, as defined by the  
10 Department, in consultation with the Office, in  
11 administrative rules, to the resident's records.

12 (2) Each long term care facility, supportive living  
13 facility, assisted living establishment, and shared  
14 housing establishment shall display, in multiple,  
15 conspicuous public places within the facility accessible  
16 to both visitors and residents and in an easily readable  
17 format, the address and phone number of the Office of the  
18 Long Term Care Ombudsman, in a manner prescribed by the  
19 Office.

20 (e) Immunity. An ombudsman or any representative of the  
21 Office participating in the good faith performance of his or  
22 her official duties shall have immunity from any liability  
23 (civil, criminal or otherwise) in any proceedings (civil,  
24 criminal or otherwise) brought as a consequence of the  
25 performance of his official duties.

26 (f) Business offenses.

1 (1) No person shall:

2 (i) Intentionally prevent, interfere with, or  
3 attempt to impede in any way any representative of the  
4 Office in the performance of his official duties under  
5 this Act and the Older Americans Act of 1965; or

6 (ii) Intentionally retaliate, discriminate  
7 against, or effect reprisals against any long term care  
8 facility resident or employee for contacting or  
9 providing information to any representative of the  
10 Office.

11 (2) A violation of this Section is a business offense,  
12 punishable by a fine not to exceed \$501.

13 (3) The Director of Aging, in consultation with the  
14 Office, shall notify the State's Attorney of the county in  
15 which the long term care facility, supportive living  
16 facility, or assisted living or shared housing  
17 establishment is located, or the Attorney General, of any  
18 violations of this Section.

19 (g) Confidentiality of records and identities. The  
20 Department shall establish procedures for the disclosure by the  
21 State Ombudsman or the regional ombudsmen entities of files  
22 maintained by the program. The procedures shall provide that  
23 the files and records may be disclosed only at the discretion  
24 of the State Long Term Care Ombudsman or the person designated  
25 by the State Ombudsman to disclose the files and records, and  
26 the procedures shall prohibit the disclosure of the identity of



1 any complainant, resident, witness, or employee of a long term  
2 care provider unless:

3 (1) the complainant, resident, witness, or employee of  
4 a long term care provider or his or her legal  
5 representative consents to the disclosure and the consent  
6 is in writing;

7 (2) the complainant, resident, witness, or employee of  
8 a long term care provider gives consent orally; and the  
9 consent is documented contemporaneously in writing in  
10 accordance with such requirements as the Department shall  
11 establish; or

12 (3) the disclosure is required by court order.

13 (h) Legal representation. The Attorney General shall  
14 provide legal representation to any representative of the  
15 Office against whom suit or other legal action is brought in  
16 connection with the performance of the representative's  
17 official duties, in accordance with the State Employee  
18 Indemnification Act.

19 (i) Treatment by prayer and spiritual means. Nothing in  
20 this Act shall be construed to authorize or require the medical  
21 supervision, regulation or control of remedial care or  
22 treatment of any resident in a long term care facility operated  
23 exclusively by and for members or adherents of any church or  
24 religious denomination the tenets and practices of which  
25 include reliance solely upon spiritual means through prayer for  
26 healing.

1       (j) The Long Term Care Ombudsman Fund is created as a  
2       special fund in the State treasury to receive moneys for the  
3       express purposes of this Section. All interest earned on moneys  
4       in the fund shall be credited to the fund. Moneys contained in  
5       the fund shall be used to support the purposes of this Section.

6       (Source: P.A. 95-620, eff. 9-17-07; 95-823, eff. 1-1-09;  
7       revised 9-5-08.)

8       Section 10. The State Finance Act is amended by adding  
9       Sections 5.719 and 5.720 as follows:

10       (30 ILCS 105/5.719 new)

11       Sec. 5.719. The Long Term Care Ombudsman Fund.

12       (30 ILCS 105/5.720 new)

13       Sec. 5.720. The Nursing Home Conversion Fund.

14       Section 15. The Nursing Home Care Act is amended by  
15       changing Sections 3-103 and 3-308 as follows:

16       (210 ILCS 45/3-103) (from Ch. 111 1/2, par. 4153-103)

17       Sec. 3-103. The procedure for obtaining a valid license  
18       shall be as follows:

19               (1) Application to operate a facility shall be made to  
20       the Department on forms furnished by the Department.

21               (2) All license applications shall be accompanied with

1 an application fee. The fee for an annual license shall be  
2 \$995. Facilities that pay a fee or assessment pursuant to  
3 Article V-C of the Illinois Public Aid Code shall be exempt  
4 from the license fee imposed under this item (2). The fee  
5 for a 2-year license shall be double the fee for the annual  
6 license set forth in the preceding sentence. The fees  
7 collected shall be deposited with the State Treasurer into  
8 the Long Term Care Monitor/Receiver Fund, which has been  
9 created as a special fund in the State treasury. This  
10 special fund is to be used by the Department for expenses  
11 related to the appointment of monitors and receivers as  
12 contained in Sections 3-501 through 3-517 of this Act, for  
13 the enforcement of this Act, and for implementation of the  
14 Abuse Prevention Review Team Act. At the end of each fiscal  
15 year, any funds in excess of \$1,250,000 ~~\$1,000,000~~ held in  
16 the Long Term Care Monitor/Receiver Fund shall be  
17 distributed in the following manner: (i) an amount not to  
18 exceed \$250,000 shall be deposited into the Long Term Care  
19 Ombudsman Fund; (ii) from the remainder, if any, an amount  
20 not to exceed \$250,000 shall be deposited into the Nursing  
21 Home Conversion Fund; and (iii) the remainder, if any,  
22 shall be deposited in the State's General Revenue Fund. The  
23 application shall be under oath and the submission of false  
24 or misleading information shall be a Class A misdemeanor.  
25 The application shall contain the following information:

26 (a) The name and address of the applicant if an

1 individual, and if a firm, partnership, or  
2 association, of every member thereof, and in the case  
3 of a corporation, the name and address thereof and of  
4 its officers and its registered agent, and in the case  
5 of a unit of local government, the name and address of  
6 its chief executive officer;

7 (b) The name and location of the facility for which  
8 a license is sought;

9 (c) The name of the person or persons under whose  
10 management or supervision the facility will be  
11 conducted;

12 (d) The number and type of residents for which  
13 maintenance, personal care, or nursing is to be  
14 provided; and

15 (e) Such information relating to the number,  
16 experience, and training of the employees of the  
17 facility, any management agreements for the operation  
18 of the facility, and of the moral character of the  
19 applicant and employees as the Department may deem  
20 necessary.

21 (3) Each initial application shall be accompanied by a  
22 financial statement setting forth the financial condition  
23 of the applicant and by a statement from the unit of local  
24 government having zoning jurisdiction over the facility's  
25 location stating that the location of the facility is not  
26 in violation of a zoning ordinance. An initial application

1 for a new facility shall be accompanied by a permit as  
2 required by the "Illinois Health Facilities Planning Act".  
3 After the application is approved, the applicant shall  
4 advise the Department every 6 months of any changes in the  
5 information originally provided in the application.

6 (4) Other information necessary to determine the  
7 identity and qualifications of an applicant to operate a  
8 facility in accordance with this Act shall be included in  
9 the application as required by the Department in  
10 regulations.

11 (Source: P.A. 93-32, eff. 7-1-03; 93-841, eff. 7-30-04; 94-931,  
12 eff. 6-26-06.)

13 (210 ILCS 45/3-308) (from Ch. 111 1/2, par. 4153-308)

14 Sec. 3-308. In the case of a Type "A" violation, a penalty  
15 may be assessed from the date on which the violation is  
16 discovered. In the case of a Type "B" or Type "C" violation or  
17 an administrative warning issued pursuant to Sections 3-401  
18 through 3-413 or the rules promulgated thereunder, the facility  
19 shall submit a plan of correction as provided in Section 3-303.

20 In the case of a Type "B" violation or an administrative  
21 warning issued pursuant to Sections 3-401 through 3-413 or the  
22 rules promulgated thereunder, a penalty shall be assessed on  
23 the date of notice of the violation, but the Director may  
24 reduce the amount or waive such payment for any of the  
25 following reasons:

1 (a) The facility submits a true report of correction  
2 within 10 days;

3 (b) The facility submits a plan of correction within 10  
4 days and subsequently submits a true report of correction  
5 within 15 days thereafter;

6 (c) The facility submits a plan of correction within 10  
7 days which provides for a correction time that is less than  
8 or equal to 30 days and the Department approves such plan;  
9 or

10 (d) The facility submits a plan of correction for  
11 violations involving substantial capital improvements  
12 which provides for correction within the initial 90 day  
13 limit provided under Section 3-303.

14 The Director or his or her designee may reduce the amount  
15 of a penalty assessed pursuant to Section 3-305. A facility  
16 shall submit to the Director a written request for a penalty  
17 reduction, in a form prescribed by the Department, which  
18 includes an accounting of all costs for goods and services  
19 purchased in correcting the violation. A facility that accepts  
20 a penalty reduction under this Section waives its right to  
21 dispute a notice of violation and any remaining fine or penalty  
22 in an administrative hearing. The Director shall consider the  
23 following factors ~~in determinations to reduce or waive such~~  
24 ~~penalties:~~

25 (1) The gravity of the violation, including the  
26 probability that death or serious physical or mental harm

1 to a resident will result or has resulted, the severity of  
2 the actual or potential harm, and the extent to which the  
3 provisions of the applicable statutes or regulations were  
4 violated. The violation has not caused actual harm to a  
5 resident;

6 (2) The reasonable diligence exercised by the licensee  
7 and efforts to correct violations. The facility has made a  
8 diligent effort to correct the violation and to prevent its  
9 recurrence;

10 (3) Any previous violations committed by the licensee.  
11 The facility has no record of a pervasive pattern of the  
12 same or similar violations; and

13 (4) The financial benefit to the facility of committing  
14 or continuing the violation. The facility has a record of  
15 substantial compliance with this Act and the regulations  
16 promulgated hereunder.

17 (5) Facility remediation of the problem beyond the  
18 minimum requirements established by the applicable  
19 regulations.

20 (6) Any other factors deemed important by the Director.

21 In all determinations which result in reduction of a  
22 penalty, the Department shall make available to the public,  
23 upon request, information detailing those determinations.

24 If a plan of correction is approved and carried out for a  
25 Type "C" violation, the fine provided under Section 3-305 shall  
26 be suspended for the time period specified in the approved plan

1 of correction. If a plan of correction is approved and carried  
2 out for a Type "B" violation or an administrative warning  
3 issued pursuant to Sections 3-401 through 3-413 or the rules  
4 promulgated thereunder, with respect to a violation that  
5 continues after the date of notice of violation, the fine  
6 provided under Section 3-305 shall be suspended for the time  
7 period specified in the approved plan of correction.

8 If a good faith plan of correction is not received within  
9 the time provided by Section 3-303, a penalty may be assessed  
10 from the date of the notice of the Type "B" or "C" violation or  
11 an administrative warning issued pursuant to Sections 3-401  
12 through 3-413 or the rules promulgated thereunder served under  
13 Section 3-301 until the date of the receipt of a good faith  
14 plan of correction, or until the date the violation is  
15 corrected, whichever is earlier. If a violation is not  
16 corrected within the time specified by an approved plan of  
17 correction or any lawful extension thereof, a penalty may be  
18 assessed from the date of notice of the violation, until the  
19 date the violation is corrected.

20 (Source: P.A. 87-549.)

21 Section 20. The Older Adult Services Act is amended by  
22 changing Section 30 as follows:

23 (320 ILCS 42/30)

24 Sec. 30. Nursing home conversion program.



1           (a) The Department of Public Health, in collaboration with  
2 the Department on Aging and the Department of Healthcare and  
3 Family Services, shall establish a nursing home conversion  
4 program. Start-up grants, pursuant to subsections (l) and (m)  
5 of this Section, shall be made available to nursing homes as  
6 appropriations permit as an incentive to reduce certified beds,  
7 retrofit, and retool operations to meet new service delivery  
8 expectations and demands.

9           (b) Grant moneys shall be made available for capital and  
10 other costs related to: (1) the conversion of all or a part of  
11 a nursing home to an assisted living establishment or a special  
12 program or unit for persons with Alzheimer's disease or related  
13 disorders licensed under the Assisted Living and Shared Housing  
14 Act or a supportive living facility established under Section  
15 5-5.01a of the Illinois Public Aid Code; (2) the conversion of  
16 multi-resident bedrooms in the facility into single-occupancy  
17 rooms; and (3) the development of any of the services  
18 identified in a priority service plan that can be provided by a  
19 nursing home within the confines of a nursing home or  
20 transportation services. Grantees shall be required to provide  
21 a minimum of a 20% match toward the total cost of the project.

22           (c) Nothing in this Act shall prohibit the co-location of  
23 services or the development of multifunctional centers under  
24 subsection (f) of Section 20, including a nursing home offering  
25 community-based services or a community provider establishing  
26 a residential facility.

1 (d) A certified nursing home with at least 50% of its  
2 resident population having their care paid for by the Medicaid  
3 program is eligible to apply for a grant under this Section.

4 (e) Any nursing home receiving a grant under this Section  
5 shall reduce the number of certified nursing home beds by a  
6 number equal to or greater than the number of beds being  
7 converted for one or more of the permitted uses under item (1)  
8 or (2) of subsection (b). The nursing home shall retain the  
9 Certificate of Need for its nursing and sheltered care beds  
10 that were converted for 15 years. If the beds are reinstated by  
11 the provider or its successor in interest, the provider shall  
12 pay to the fund from which the grant was awarded, on an  
13 amortized basis, the amount of the grant. The Department shall  
14 establish, by rule, the bed reduction methodology for nursing  
15 homes that receive a grant pursuant to item (3) of subsection  
16 (b).

17 (f) Any nursing home receiving a grant under this Section  
18 shall agree that, for a minimum of 10 years after the date that  
19 the grant is awarded, a minimum of 50% of the nursing home's  
20 resident population shall have their care paid for by the  
21 Medicaid program. If the nursing home provider or its successor  
22 in interest ceases to comply with the requirement set forth in  
23 this subsection, the provider shall pay to the fund from which  
24 the grant was awarded, on an amortized basis, the amount of the  
25 grant.

26 (g) Before awarding grants, the Department of Public Health

1 shall seek recommendations from the Department on Aging and the  
2 Department of Healthcare and Family Services. The Department of  
3 Public Health shall attempt to balance the distribution of  
4 grants among geographic regions, and among small and large  
5 nursing homes. The Department of Public Health shall develop,  
6 by rule, the criteria for the award of grants based upon the  
7 following factors:

8 (1) the unique needs of older adults (including those  
9 with moderate and low incomes), caregivers, and providers  
10 in the geographic area of the State the grantee seeks to  
11 serve;

12 (2) whether the grantee proposes to provide services in  
13 a priority service area;

14 (3) the extent to which the conversion or transition  
15 will result in the reduction of certified nursing home beds  
16 in an area with excess beds;

17 (4) the compliance history of the nursing home; and

18 (5) any other relevant factors identified by the  
19 Department, including standards of need.

20 (h) A conversion funded in whole or in part by a grant  
21 under this Section must not:

22 (1) diminish or reduce the quality of services  
23 available to nursing home residents;

24 (2) force any nursing home resident to involuntarily  
25 accept home-based or community-based services instead of  
26 nursing home services;

1           (3) diminish or reduce the supply and distribution of  
2           nursing home services in any community below the level of  
3           need, as defined by the Department by rule; or

4           (4) cause undue hardship on any person who requires  
5           nursing home care.

6           (i) The Department shall prescribe, by rule, the grant  
7           application process. At a minimum, every application must  
8           include:

9           (1) the type of grant sought;

10          (2) a description of the project;

11          (3) the objective of the project;

12          (4) the likelihood of the project meeting identified  
13          needs;

14          (5) the plan for financing, administration, and  
15          evaluation of the project;

16          (6) the timetable for implementation;

17          (7) the roles and capabilities of responsible  
18          individuals and organizations;

19          (8) documentation of collaboration with other service  
20          providers, local community government leaders, and other  
21          stakeholders, other providers, and any other stakeholders  
22          in the community;

23          (9) documentation of community support for the  
24          project, including support by other service providers,  
25          local community government leaders, and other  
26          stakeholders;

- 1           (10) the total budget for the project;
- 2           (11) the financial condition of the applicant; and
- 3           (12) any other application requirements that may be
- 4           established by the Department by rule.

5           (j) A conversion project funded in whole or in part by a

6           grant under this Section is exempt from the requirements of the

7           Illinois Health Facilities Planning Act. The Department of

8           Public Health, however, shall send to the Health Facilities

9           Planning Board a copy of each grant award made under this

10          Section.

11          (k) Applications for grants are public information, except

12          that nursing home financial condition and any proprietary data

13          shall be classified as nonpublic data.

14          (l) The Department of Public Health may award grants from

15          the Long Term Care Civil Money Penalties Fund established under

16          Section 1919(h) (2) (A) (ii) of the Social Security Act and 42 CFR

17          488.422(g) if the award meets federal requirements.

18          (m) The Nursing Home Conversion Fund is created as a

19          special fund in the State treasury. Moneys appropriated by the

20          General Assembly or transferred from other sources for the

21          purposes of this Section shall be deposited into the Fund. All

22          interest earned on moneys in the fund shall be credited to the

23          fund. Moneys contained in the fund shall be used to support the

24          purposes of this Section.

25          (Source: P.A. 95-331, eff. 8-21-07.)

26          Section 99. Effective date. This Act takes effect upon

1 becoming law.