



101ST GENERAL ASSEMBLY

State of Illinois

2019 and 2020

HB5272

by Rep. Sonya M. Harper

SYNOPSIS AS INTRODUCED:

20 ILCS 105/4.01	from Ch. 23, par. 6104.01
20 ILCS 105/4.02	from Ch. 23, par. 6104.02
20 ILCS 105/4.06	

Amends the Illinois Act on the Aging. In provisions concerning the powers and duties of the Department on Aging under the Act, requires the Department to work with workforce development providers through the federal Workforce Innovation and Opportunity Act to establish and implement an affirmative action employment plan for the recruitment, hiring, training, and retraining of persons 60 or more years old for jobs for which their employment would not be precluded by law (rather than requiring the Department to make a grant to an institution of higher learning to study the feasibility of establishing and implementing an affirmative action employment plan for the recruitment, hiring, training, and retraining of persons 60 or more years old for jobs for which their employment would not be precluded by law). Requires the Department to conduct demonstration projects to identify additional ways to assist aging and minority senior citizens throughout the State (rather than requiring the Department to conduct a study of the feasibility of implementing the Senior Companion Program throughout the State). In a provision requiring the Department on Aging and the Department of Human Services to file a joint report with the Governor and the General Assembly, removes the requirement that the report be filed on or before September 30 of each year. Requires the Department on Aging and other specified agencies to submit an annual report on program and services for minority senior citizens in the State to be filed with the Governor and the General Assembly within 12 months of the closing of the lapse period for the fiscal year included in the report.

LRB101 18390 KTG 67837 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning State government.

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

4 Section 5. The Illinois Act on the Aging is amended by
5 changing Sections 4.01, 4.02, and 4.06 as follows:

6 (20 ILCS 105/4.01) (from Ch. 23, par. 6104.01)

7 Sec. 4.01. Additional powers and duties of the Department.
8 In addition to powers and duties otherwise provided by law, the
9 Department shall have the following powers and duties:

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

14 (2) To coordinate and evaluate all programs, services, and
15 facilities for the Aging and for minority senior citizens
16 presently furnished by State agencies and make appropriate
17 recommendations regarding such services, programs and
18 facilities to the Governor and/or the General Assembly.

19 (2-a) To request, receive, and share information
20 electronically through the use of data-sharing agreements for
21 the purpose of (i) establishing and verifying the initial and
22 continuing eligibility of older adults to participate in
23 programs administered by the Department; (ii) maximizing

1 federal financial participation in State assistance
2 expenditures; and (iii) investigating allegations of fraud or
3 other abuse of publicly funded benefits. Notwithstanding any
4 other law to the contrary, but only for the limited purposes
5 identified in the preceding sentence, this paragraph (2-a)
6 expressly authorizes the exchanges of income, identification,
7 and other pertinent eligibility information by and among the
8 Department and the Social Security Administration, the
9 Department of Employment Security, the Department of
10 Healthcare and Family Services, the Department of Human
11 Services, the Department of Revenue, the Secretary of State,
12 the U.S. Department of Veterans Affairs, and any other
13 governmental entity. The confidentiality of information
14 otherwise shall be maintained as required by law. In addition,
15 the Department on Aging shall verify employment information at
16 the request of a community care provider for the purpose of
17 ensuring program integrity under the Community Care Program.

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

21 (4) To receive and disburse State and federal funds made
22 available directly to the Department including those funds made
23 available under the Older Americans Act and the Senior
24 Community Service Employment Program for providing services
25 for senior citizens and minority senior citizens or for
26 purposes related thereto, and shall develop and administer any

1 State Plan for the Aging required by federal law.

2 (5) To solicit, accept, hold, and administer in behalf of
3 the State any grants or legacies of money, securities, or
4 property to the State of Illinois for services to senior
5 citizens and minority senior citizens or purposes related
6 thereto.

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

10 (7) To promote community education regarding the problems
11 of senior citizens and minority senior citizens through
12 institutes, publications, radio, television and the local
13 press.

14 (8) To cooperate with agencies of the federal government in
15 studies and conferences designed to examine the needs of senior
16 citizens and minority senior citizens and to prepare programs
17 and facilities to meet those needs.

18 (9) To establish and maintain information and referral
19 sources throughout the State when not provided by other
20 agencies.

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

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

25 (12) To establish and fund programs or projects or
26 experimental facilities that are specially designed as

1 alternatives to institutional care.

2 (13) To develop a training program to train the counselors
3 presently employed by the Department's aging network to provide
4 Medicare beneficiaries with counseling and advocacy in
5 Medicare, private health insurance, and related health care
6 coverage plans. The Department shall report to the General
7 Assembly on the implementation of the training program on or
8 before December 1, 1986.

9 (14) To work with workforce development providers through
10 the federal Workforce Innovation and Opportunity Act to
11 establish and implement ~~make a grant to an institution of~~
12 ~~higher learning to study the feasibility of establishing and~~
13 ~~implementing~~ an affirmative action employment plan for the
14 recruitment, hiring, training and retraining of persons 60 or
15 more years old for jobs for which their employment would not be
16 precluded by law.

17 (15) To present one award annually in each of the
18 categories of community service, education, the performance
19 and graphic arts, and the labor force to outstanding Illinois
20 senior citizens and minority senior citizens in recognition of
21 their individual contributions to either community service,
22 education, the performance and graphic arts, or the labor
23 force. The awards shall be presented to 4 senior citizens and
24 minority senior citizens selected from a list of 44 nominees
25 compiled annually by the Department. Nominations shall be
26 solicited from senior citizens' service providers, area

1 agencies on aging, senior citizens' centers, and senior
2 citizens' organizations. The Department shall establish a
3 central location within the State to be designated as the
4 Senior Illinoisans Hall of Fame for the public display of all
5 the annual awards, or replicas thereof.

6 (16) To establish multipurpose senior centers through area
7 agencies on aging and to fund those new and existing
8 multipurpose senior centers through area agencies on aging, the
9 establishment and funding to begin in such areas of the State
10 as the Department shall designate by rule and as specifically
11 appropriated funds become available.

12 (17) (Blank).

13 (18) To develop a pamphlet in English and Spanish which may
14 be used by physicians licensed to practice medicine in all of
15 its branches pursuant to the Medical Practice Act of 1987,
16 pharmacists licensed pursuant to the Pharmacy Practice Act, and
17 Illinois residents 65 years of age or older for the purpose of
18 assisting physicians, pharmacists, and patients in monitoring
19 prescriptions provided by various physicians and to aid persons
20 65 years of age or older in complying with directions for
21 proper use of pharmaceutical prescriptions. The pamphlet may
22 provide space for recording information including but not
23 limited to the following:

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

25 (b) name and telephone number of the prescribing
26 physician;

- 1 (c) date of prescription;
2 (d) name of drug prescribed;
3 (e) directions for patient compliance; and
4 (f) name and telephone number of dispensing pharmacy.

5 In developing the pamphlet, the Department shall consult
6 with the Illinois State Medical Society, the Center for
7 Minority Health Services, the Illinois Pharmacists Association
8 and senior citizens organizations. The Department shall
9 distribute the pamphlets to physicians, pharmacists and
10 persons 65 years of age or older or various senior citizen
11 organizations throughout the State.

12 (19) To conduct demonstration projects to identify
13 additional ways to assist aging and minority senior citizens a
14 ~~study of the feasibility of implementing the Senior Companion~~
15 ~~Program~~ throughout the State.

16 (20) The reimbursement rates paid through the community
17 care program for chore housekeeping services and home care
18 aides shall be the same.

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

26 (22) To distribute, through its area agencies on aging,

1 information alerting seniors on safety issues regarding
2 emergency weather conditions, including extreme heat and cold,
3 flooding, tornadoes, electrical storms, and other severe storm
4 weather. The information shall include all necessary
5 instructions for safety and all emergency telephone numbers of
6 organizations that will provide additional information and
7 assistance.

8 (23) To develop guidelines for the organization and
9 implementation of Volunteer Services Credit Programs to be
10 administered by Area Agencies on Aging or community based
11 senior service organizations. The Department shall hold public
12 hearings on the proposed guidelines for public comment,
13 suggestion, and determination of public interest. The
14 guidelines shall be based on the findings of other states and
15 of community organizations in Illinois that are currently
16 operating volunteer services credit programs or demonstration
17 volunteer services credit programs. The Department shall offer
18 guidelines for all aspects of the programs including, but not
19 limited to, the following:

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

21 (b) types of services to be received upon the
22 redemption of service credits;

23 (c) issues of liability for the volunteers and the
24 administering organizations;

25 (d) methods of tracking service credits earned and
26 service credits redeemed;

1 (e) issues of time limits for redemption of service
2 credits;

3 (f) methods of recruitment of volunteers;

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

7 (h) accountability and assurance that services will be
8 available to individuals who have earned service credits;
9 and

10 (i) volunteer screening and qualifications.

11 The Department shall submit a written copy of the guidelines to
12 the General Assembly by July 1, 1998.

13 (24) To function as the sole State agency to receive and
14 disburse State and federal funds for providing adult protective
15 services in a domestic living situation in accordance with the
16 Adult Protective Services Act.

17 (25) To hold conferences, trainings, and other programs for
18 which the Department shall determine by rule a reasonable fee
19 to cover related administrative costs. Rules to implement the
20 fee authority granted by this paragraph (25) must be adopted in
21 accordance with all provisions of the Illinois Administrative
22 Procedure Act and all rules and procedures of the Joint
23 Committee on Administrative Rules; any purported rule not so
24 adopted, for whatever reason, is unauthorized.

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

1 (20 ILCS 105/4.02) (from Ch. 23, par. 6104.02)

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

- 13 (a) (blank);
- 14 (b) (blank);
- 15 (c) home care aide services;
- 16 (d) personal assistant services;
- 17 (e) adult day services;
- 18 (f) home-delivered meals;
- 19 (g) education in self-care;
- 20 (h) personal care services;
- 21 (i) adult day health services;
- 22 (j) habilitation services;
- 23 (k) respite care;
- 24 (k-5) community reintegration services;
- 25 (k-6) flexible senior services;

1 (k-7) medication management;

2 (k-8) emergency home response;

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

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

8 The Department shall establish eligibility standards for
9 such services. In determining the amount and nature of services
10 for which a person may qualify, consideration shall not be
11 given to the value of cash, property or other assets held in
12 the name of the person's spouse pursuant to a written agreement
13 dividing marital property into equal but separate shares or
14 pursuant to a transfer of the person's interest in a home to
15 his spouse, provided that the spouse's share of the marital
16 property is not made available to the person seeking such
17 services.

18 Beginning January 1, 2008, the Department shall require as
19 a condition of eligibility that all new financially eligible
20 applicants apply for and enroll in medical assistance under
21 Article V of the Illinois Public Aid Code in accordance with
22 rules promulgated by the Department.

23 The Department shall, in conjunction with the Department of
24 Public Aid (now Department of Healthcare and Family Services),
25 seek appropriate amendments under Sections 1915 and 1924 of the
26 Social Security Act. The purpose of the amendments shall be to

1 extend eligibility for home and community based services under
2 Sections 1915 and 1924 of the Social Security Act to persons
3 who transfer to or for the benefit of a spouse those amounts of
4 income and resources allowed under Section 1924 of the Social
5 Security Act. Subject to the approval of such amendments, the
6 Department shall extend the provisions of Section 5-4 of the
7 Illinois Public Aid Code to persons who, but for the provision
8 of home or community-based services, would require the level of
9 care provided in an institution, as is provided for in federal
10 law. Those persons no longer found to be eligible for receiving
11 noninstitutional services due to changes in the eligibility
12 criteria shall be given 45 days notice prior to actual
13 termination. Those persons receiving notice of termination may
14 contact the Department and request the determination be
15 appealed at any time during the 45 day notice period. The
16 target population identified for the purposes of this Section
17 are persons age 60 and older with an identified service need.
18 Priority shall be given to those who are at imminent risk of
19 institutionalization. The services shall be provided to
20 eligible persons age 60 and older to the extent that the cost
21 of the services together with the other personal maintenance
22 expenses of the persons are reasonably related to the standards
23 established for care in a group facility appropriate to the
24 person's condition. These non-institutional services, pilot
25 projects or experimental facilities may be provided as part of
26 or in addition to those authorized by federal law or those

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

26 As part of the Department on Aging's routine training of

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

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

16 The Department, or the Department's authorized
17 representative, may recover the amount of moneys expended for
18 services provided to or in behalf of a person under this
19 Section by a claim against the person's estate or against the
20 estate of the person's surviving spouse, but no recovery may be
21 had until after the death of the surviving spouse, if any, and
22 then only at such time when there is no surviving child who is
23 under age 21 or blind or who has a permanent and total
24 disability. This paragraph, however, shall not bar recovery, at
25 the death of the person, of moneys for services provided to the
26 person or in behalf of the person under this Section to which

1 the person was not entitled; provided that such recovery shall
2 not be enforced against any real estate while it is occupied as
3 a homestead by the surviving spouse or other dependent, if no
4 claims by other creditors have been filed against the estate,
5 or, if such claims have been filed, they remain dormant for
6 failure of prosecution or failure of the claimant to compel
7 administration of the estate for the purpose of payment. This
8 paragraph shall not bar recovery from the estate of a spouse,
9 under Sections 1915 and 1924 of the Social Security Act and
10 Section 5-4 of the Illinois Public Aid Code, who precedes a
11 person receiving services under this Section in death. All
12 moneys for services paid to or in behalf of the person under
13 this Section shall be claimed for recovery from the deceased
14 spouse's estate. "Homestead", as used in this paragraph, means
15 the dwelling house and contiguous real estate occupied by a
16 surviving spouse or relative, as defined by the rules and
17 regulations of the Department of Healthcare and Family
18 Services, regardless of the value of the property.

19 The Department shall increase the effectiveness of the
20 existing Community Care Program by:

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

23 (2) ensuring that care plans contain the services that
24 eligible participants need based on the number of days in a
25 month, not limited to specific blocks of time, as
26 identified by the comprehensive assessment tool selected

1 by the Department for use statewide, not to exceed the
2 total monthly service cost maximum allowed for each
3 service; the Department shall develop administrative rules
4 to implement this item (2);

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

9 (4) ensuring that the determination of need tool is
10 accurate in determining the participants' level of need; to
11 achieve this, the Department, in conjunction with the Older
12 Adult Services Advisory Committee, shall institute a study
13 of the relationship between the Determination of Need
14 scores, level of need, service cost maximums, and the
15 development and utilization of service plans no later than
16 May 1, 2008; findings and recommendations shall be
17 presented to the Governor and the General Assembly no later
18 than January 1, 2009; recommendations shall include all
19 needed changes to the service cost maximums schedule and
20 additional covered services;

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

24 (A) bathing;

25 (B) grooming;

26 (C) toileting;

- 1 (D) nail care;
- 2 (E) transferring;
- 3 (F) respiratory services;
- 4 (G) exercise; or
- 5 (H) positioning;

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

12 (7) ensuring that the State may access maximum federal
13 matching funds by seeking approval for the Centers for
14 Medicare and Medicaid Services for modifications to the
15 State's home and community based services waiver and
16 additional waiver opportunities, including applying for
17 enrollment in the Balance Incentive Payment Program by May
18 1, 2013, in order to maximize federal matching funds; this
19 shall include, but not be limited to, modification that
20 reflects all changes in the Community Care Program services
21 and all increases in the services cost maximum;

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

25 (9) ensuring that services are authorized accurately
26 and consistently for the Community Care Program (CCP); the

1 Department shall implement a Service Authorization policy
2 directive; the purpose shall be to ensure that eligibility
3 and services are authorized accurately and consistently in
4 the CCP program; the policy directive shall clarify service
5 authorization guidelines to Care Coordination Units and
6 Community Care Program providers no later than May 1, 2013;

7 (10) working in conjunction with Care Coordination
8 Units, the Department of Healthcare and Family Services,
9 the Department of Human Services, Community Care Program
10 providers, and other stakeholders to make improvements to
11 the Medicaid claiming processes and the Medicaid
12 enrollment procedures or requirements as needed,
13 including, but not limited to, specific policy changes or
14 rules to improve the up-front enrollment of participants in
15 the Medicaid program and specific policy changes or rules
16 to insure more prompt submission of bills to the federal
17 government to secure maximum federal matching dollars as
18 promptly as possible; the Department on Aging shall have at
19 least 3 meetings with stakeholders by January 1, 2014 in
20 order to address these improvements;

21 (11) requiring home care service providers to comply
22 with the rounding of hours worked provisions under the
23 federal Fair Labor Standards Act (FLSA) and as set forth in
24 29 CFR 785.48(b) by May 1, 2013;

25 (12) implementing any necessary policy changes or
26 promulgating any rules, no later than January 1, 2014, to

1 assist the Department of Healthcare and Family Services in
2 moving as many participants as possible, consistent with
3 federal regulations, into coordinated care plans if a care
4 coordination plan that covers long term care is available
5 in the recipient's area; and

6 (13) maintaining fiscal year 2014 rates at the same
7 level established on January 1, 2013.

8 By January 1, 2009 or as soon after the end of the Cash and
9 Counseling Demonstration Project as is practicable, the
10 Department may, based on its evaluation of the demonstration
11 project, promulgate rules concerning personal assistant
12 services, to include, but need not be limited to,
13 qualifications, employment screening, rights under fair labor
14 standards, training, fiduciary agent, and supervision
15 requirements. All applicants shall be subject to the provisions
16 of the Health Care Worker Background Check Act.

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

24 Beginning on the effective date of this amendatory Act of
25 1991, no person may perform chore/housekeeping and home care
26 aide services under a program authorized by this Section unless

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

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

26 The Community Care Program Advisory Committee is created in

1 the Department on Aging. The Director shall appoint individuals
2 to serve in the Committee, who shall serve at their own
3 expense. Members of the Committee must abide by all applicable
4 ethics laws. The Committee shall advise the Department on
5 issues related to the Department's program of services to
6 prevent unnecessary institutionalization. The Committee shall
7 meet on a bi-monthly basis and shall serve to identify and
8 advise the Department on present and potential issues affecting
9 the service delivery network, the program's clients, and the
10 Department and to recommend solution strategies. Persons
11 appointed to the Committee shall be appointed on, but not
12 limited to, their own and their agency's experience with the
13 program, geographic representation, and willingness to serve.
14 The Director shall appoint members to the Committee to
15 represent provider, advocacy, policy research, and other
16 constituencies committed to the delivery of high quality home
17 and community-based services to older adults. Representatives
18 shall be appointed to ensure representation from community care
19 providers including, but not limited to, adult day service
20 providers, homemaker providers, case coordination and case
21 management units, emergency home response providers, statewide
22 trade or labor unions that represent home care aides and direct
23 care staff, area agencies on aging, adults over age 60,
24 membership organizations representing older adults, and other
25 organizational entities, providers of care, or individuals
26 with demonstrated interest and expertise in the field of home

1 and community care as determined by the Director.

2 Nominations may be presented from any agency or State
3 association with interest in the program. The Director, or his
4 or her designee, shall serve as the permanent co-chair of the
5 advisory committee. One other co-chair shall be nominated and
6 approved by the members of the committee on an annual basis.
7 Committee members' terms of appointment shall be for 4 years
8 with one-quarter of the appointees' terms expiring each year. A
9 member shall continue to serve until his or her replacement is
10 named. The Department shall fill vacancies that have a
11 remaining term of over one year, and this replacement shall
12 occur through the annual replacement of expiring terms. The
13 Director shall designate Department staff to provide technical
14 assistance and staff support to the committee. Department
15 representation shall not constitute membership of the
16 committee. All Committee papers, issues, recommendations,
17 reports, and meeting memoranda are advisory only. The Director,
18 or his or her designee, shall make a written report, as
19 requested by the Committee, regarding issues before the
20 Committee.

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

26 The requirement for reporting to the General Assembly shall

1 be satisfied by filing copies of the report as required by
2 Section 3.1 of the General Assembly Organization Act and filing
3 such additional copies with the State Government Report
4 Distribution Center for the General Assembly as is required
5 under paragraph (t) of Section 7 of the State Library Act.

6 Those persons previously found eligible for receiving
7 non-institutional services whose services were discontinued
8 under the Emergency Budget Act of Fiscal Year 1992, and who do
9 not meet the eligibility standards in effect on or after July
10 1, 1992, shall remain ineligible on and after July 1, 1992.
11 Those persons previously not required to cost-share and who
12 were required to cost-share effective March 1, 1992, shall
13 continue to meet cost-share requirements on and after July 1,
14 1992. Beginning July 1, 1992, all clients will be required to
15 meet eligibility, cost-share, and other requirements and will
16 have services discontinued or altered when they fail to meet
17 these requirements.

18 For the purposes of this Section, "flexible senior
19 services" refers to services that require one-time or periodic
20 expenditures including, but not limited to, respite care, home
21 modification, assistive technology, housing assistance, and
22 transportation.

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

1 The Department shall require, as a condition of
2 eligibility, enrollment in the medical assistance program
3 under Article V of the Illinois Public Aid Code (i) beginning
4 August 1, 2013, if the Auditor General has reported that the
5 Department has failed to comply with the reporting requirements
6 of Section 2-27 of the Illinois State Auditing Act; or (ii)
7 beginning June 1, 2014, if the Auditor General has reported
8 that the Department has not undertaken the required actions
9 listed in the report required by subsection (a) of Section 2-27
10 of the Illinois State Auditing Act.

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

21 The Department shall implement co-payments for the
22 Community Care Program at the federally allowable maximum level
23 (i) beginning August 1, 2013, if the Auditor General has
24 reported that the Department has failed to comply with the
25 reporting requirements of Section 2-27 of the Illinois State
26 Auditing Act; or (ii) beginning June 1, 2014, if the Auditor

1 General has reported that the Department has not undertaken the
2 required actions listed in the report required by subsection
3 (a) of Section 2-27 of the Illinois State Auditing Act.

4 The Department shall provide a bi-monthly report on the
5 progress of the Community Care Program reforms set forth in
6 this amendatory Act of the 98th General Assembly to the
7 Governor, the Speaker of the House of Representatives, the
8 Minority Leader of the House of Representatives, the President
9 of the Senate, and the Minority Leader of the Senate.

10 The Department shall conduct a quarterly review of Care
11 Coordination Unit performance and adherence to service
12 guidelines. The quarterly review shall be reported to the
13 Speaker of the House of Representatives, the Minority Leader of
14 the House of Representatives, the President of the Senate, and
15 the Minority Leader of the Senate. The Department shall collect
16 and report longitudinal data on the performance of each care
17 coordination unit. Nothing in this paragraph shall be construed
18 to require the Department to identify specific care
19 coordination units.

20 In regard to community care providers, failure to comply
21 with Department on Aging policies shall be cause for
22 disciplinary action, including, but not limited to,
23 disqualification from serving Community Care Program clients.
24 Each provider, upon submission of any bill or invoice to the
25 Department for payment for services rendered, shall include a
26 notarized statement, under penalty of perjury pursuant to

1 Section 1-109 of the Code of Civil Procedure, that the provider
2 has complied with all Department policies.

3 The Director of the Department on Aging shall make
4 information available to the State Board of Elections as may be
5 required by an agreement the State Board of Elections has
6 entered into with a multi-state voter registration list
7 maintenance system.

8 Within 30 days after July 6, 2017 (the effective date of
9 Public Act 100-23), rates shall be increased to \$18.29 per
10 hour, for the purpose of increasing, by at least \$.72 per hour,
11 the wages paid by those vendors to their employees who provide
12 homemaker services. The Department shall pay an enhanced rate
13 under the Community Care Program to those in-home service
14 provider agencies that offer health insurance coverage as a
15 benefit to their direct service worker employees consistent
16 with the mandates of Public Act 95-713. For State fiscal years
17 2018 and 2019, the enhanced rate shall be \$1.77 per hour. The
18 rate shall be adjusted using actuarial analysis based on the
19 cost of care, but shall not be set below \$1.77 per hour. The
20 Department shall adopt rules, including emergency rules under
21 subsections (y) and (bb) of Section 5-45 of the Illinois
22 Administrative Procedure Act, to implement the provisions of
23 this paragraph.

24 The General Assembly finds it necessary to authorize an
25 aggressive Medicaid enrollment initiative designed to maximize
26 federal Medicaid funding for the Community Care Program which

1 produces significant savings for the State of Illinois. The
2 Department on Aging shall establish and implement a Community
3 Care Program Medicaid Initiative. Under the Initiative, the
4 Department on Aging shall, at a minimum: (i) provide an
5 enhanced rate to adequately compensate care coordination units
6 to enroll eligible Community Care Program clients into
7 Medicaid; (ii) use recommendations from a stakeholder
8 committee on how best to implement the Initiative; and (iii)
9 establish requirements for State agencies to make enrollment in
10 the State's Medical Assistance program easier for seniors.

11 The Community Care Program Medicaid Enrollment Oversight
12 Subcommittee is created as a subcommittee of the Older Adult
13 Services Advisory Committee established in Section 35 of the
14 Older Adult Services Act to make recommendations on how best to
15 increase the number of medical assistance recipients who are
16 enrolled in the Community Care Program. The Subcommittee shall
17 consist of all of the following persons who must be appointed
18 within 30 days after the effective date of this amendatory Act
19 of the 100th General Assembly:

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

22 (2) One representative of the Department of Healthcare
23 and Family Services, appointed by the Director of
24 Healthcare and Family Services.

25 (3) One representative of the Department of Human
26 Services, appointed by the Secretary of Human Services.

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

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

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

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

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

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

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

19 (11) One member of the Senate, who shall serve as
20 co-chairperson, appointed by the Minority Leader of the
21 Senate.

22 (12) One member of the House of Representatives, who
23 shall serve as co-chairperson, appointed by the Speaker of
24 the House of Representatives.

25 (13) One member of the House of Representatives, who
26 shall serve as co-chairperson, appointed by the Minority

1 Leader of the House of Representatives.

2 (14) One individual appointed by a labor organization
3 representing frontline employees at the Department of
4 Human Services.

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

1 and are eligible for medical assistance benefits but are not
2 enrolled in the State's Medicaid Assistance Program. The data
3 provided to the Subcommittee shall be made available to the
4 public via the Department on Aging's website.

5 The Department on Aging, with the involvement of the
6 Subcommittee, shall collaborate with the Department of Human
7 Services and the Department of Healthcare and Family Services
8 on how best to achieve the responsibilities of the Community
9 Care Program Medicaid Initiative.

10 The Department on Aging, the Department of Human Services,
11 and the Department of Healthcare and Family Services shall
12 coordinate and implement a streamlined process for seniors to
13 access benefits under the State's Medical Assistance Program.

14 The Subcommittee shall collaborate with the Department of
15 Human Services on the adoption of a uniform application
16 submission process. The Department of Human Services and any
17 other State agency involved with processing the medical
18 assistance application of any person enrolled in the Community
19 Care Program shall include the appropriate care coordination
20 unit in all communications related to the determination or
21 status of the application.

22 The Community Care Program Medicaid Initiative shall
23 provide targeted funding to care coordination units to help
24 seniors complete their applications for medical assistance
25 benefits. On and after July 1, 2019, care coordination units
26 shall receive no less than \$200 per completed application,

1 which rate may be included in a bundled rate for initial intake
2 services when Medicaid application assistance is provided in
3 conjunction with the initial intake process for new program
4 participants.

5 The Community Care Program Medicaid Initiative shall cease
6 operation 5 years after the effective date of this amendatory
7 Act of the 100th General Assembly, after which the Subcommittee
8 shall dissolve.

9 (Source: P.A. 100-23, eff. 7-6-17; 100-587, eff. 6-4-18;
10 100-1148, eff. 12-10-18; 101-10, eff. 6-5-19.)

11 (20 ILCS 105/4.06)

12 Sec. 4.06. Minority Senior Citizen Program. The Department
13 shall develop a program to identify the special needs and
14 problems of minority senior citizens and evaluate the adequacy
15 and accessibility of existing programs and information for
16 minority senior citizens. The Department shall coordinate
17 services for minority senior citizens through the Department of
18 Public Health, the Department of Healthcare and Family
19 Services, and the Department of Human Services.

20 The Department shall develop procedures to enhance and
21 identify availability of services and shall promulgate
22 administrative rules to establish the responsibilities of the
23 Department.

24 The Department on Aging, the Department of Public Health,
25 the Department of Healthcare and Family Services, and the

1 Department of Human Services shall cooperate in the development
2 and submission of an annual report on programs and services
3 provided for minority senior citizens in Illinois under this
4 Section. The joint report shall be filed with the Governor and
5 the General Assembly within 12 months of the closing of the
6 lapse period for the fiscal year included in the report ~~on or~~
7 ~~before September 30 of each year.~~

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