



102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

HB4578

Introduced 1/21/2022, by Rep. Camille Y. Lilly

SYNOPSIS AS INTRODUCED:

New Act

Creates the Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act. Requires the Director on Aging, in consultation with the heads of other appropriate State agencies, to develop jointly with the Family Caregiving Advisory Council (Advisory Council) a Family Caregiving Strategy (Strategy). Requires the Director to submit the Strategy to the Senate Subcommittee on Long-Term Care and Aging and to the House Workforce Development Subcommittee, and to other State agencies responsible for carrying out family caregiver programs, and to make the Strategy publicly available on the Department on Aging's website. Provides that the Strategy shall identify recommended actions that State agencies, units of local government, communities, health care providers, long-term services and supports providers, and others are taking, or may take, to recognize and support family caregivers in a manner that reflects their diverse needs, including with respect to promoting greater adoption of person-centered and family-centered care in all health and long-term services and supports settings. Requires the Director on Aging to: (1) oversee the collection and public dissemination of certain information submitted by the Advisory Council in its initial report concerning the development, maintenance, and updating of the Strategy; (2) oversee the coordination and assessment of existing State programs and activities to recognize and support family caregivers while ensuring maximum effectiveness and avoiding unnecessary duplication; (3) develop, publish, and submit to specified committees and other State agencies, an initial Strategy that incorporates the items addressed in the Advisory Council's initial report; and other duties. Requires the Director to convene the Advisory Council to advise and provide recommendations to the Director on recognizing and supporting family caregivers. Contains provisions concerning the Advisory Council's membership, meetings, and annual reports. Provides that no additional funds are authorized to be appropriated to carry out the Act. Provides that the authority and obligations established under the Act shall terminate on the date that is 3 years after the effective date of the Act. Provides that the Act is repealed 4 years after its effective date.

LRB102 22495 KTG 31636 b

A BILL FOR

1 AN ACT concerning aging.

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

4 Section 1. Short title. This Act may be cited as the
5 Recognize, Assist, Include, Support, and Engage (RAISE) Family
6 Caregivers Act.

7 Section 5. Definitions. As used in this Act:

8 (1) "Advisory Council" means the Family Caregiving
9 Advisory Council.

10 (2) "Family caregiver" means an adult family member or
11 other individual who has a significant relationship with, and
12 who provides a broad range of assistance to, an individual
13 with a chronic or other health condition, disability, or
14 functional limitation.

15 (3) "Director" means the Director on Aging.

16 (4) "Strategy" means the Family Caregiving Strategy.

17 Section 10. Family Caregiving Strategy.

18 (a) In general. The Director, in consultation with the
19 heads of other appropriate State agencies, shall develop
20 jointly with the Advisory Council and submit to the Senate
21 Subcommittee on Long-Term Care and Aging and to the House
22 Workforce Development Subcommittee, and to any other State

1 agencies responsible for carrying out family caregiver
2 programs, and make publicly available on the website of the
3 Department on Aging, a Family Caregiving Strategy.

4 (b) Contents. The Strategy shall identify recommended
5 actions that State agencies, units of local government,
6 communities, health care providers, long-term services and
7 supports providers, and others are taking, or may take, to
8 recognize and support family caregivers in a manner that
9 reflects their diverse needs, including with respect to the
10 following:

11 (1) Promoting greater adoption of person-centered and
12 family-centered care in all health and long-term services
13 and supports settings, with the person receiving services
14 and supports and the family caregiver (as appropriate) at
15 the center of care teams.

16 (2) Assessment and service planning (including care
17 transitions and coordination) involving family caregivers
18 and care recipients.

19 (3) Information, education and training supports,
20 referral, and care coordination, including with respect to
21 hospice care, palliative care, and advance planning
22 services.

23 (4) Respite options.

24 (5) Financial security and workplace issues.

25 (6) Delivering services based on the performance,
26 mission, and purpose of a program while eliminating

1 redundancies.

2 (c) Duties of the Director. The Director, in carrying out
3 subsection (a), shall oversee the following:

4 (1) Collecting and making publicly available
5 information submitted by the Advisory Council under
6 subsection (d) of Section 15 to the Senate Subcommittee on
7 Long-Term Care and Aging and to the House Workforce
8 Development Subcommittee, including evidence-based or
9 promising practices and innovative models (both domestic
10 and foreign) regarding the provision of care by family
11 caregivers or support for family caregivers.

12 (2) Coordinating and assessing existing State programs
13 and activities to recognize and support family caregivers
14 while ensuring maximum effectiveness and avoiding
15 unnecessary duplication.

16 (3) Providing technical assistance, as appropriate,
17 such as disseminating identified best practices and
18 information sharing based on reports provided under
19 subsection (d) of Section 15, to State or local efforts to
20 support family caregivers.

21 (d) Initial strategy; updates. The Director shall:

22 (1) not later than 18 months after the effective date
23 of this Act, develop, publish, and submit to the Senate
24 Subcommittee on Long-Term Care and Aging and to the House
25 Workforce Development Subcommittee, an initial Strategy
26 incorporating the items addressed in the Advisory

1 Council's initial report under subsection (d) of Section
2 15 and other relevant information, including best
3 practices, for recognizing and supporting family
4 caregivers; and

5 (2) biennially update, republish, and submit to the
6 Senate Subcommittee on Long-Term Care and Aging and to the
7 House Workforce Development Subcommittee the Strategy,
8 taking into account the most recent annual report
9 submitted under paragraph (1) of subsection (d) of Section
10 15:

11 (A) to reflect new developments, challenges,
12 opportunities, and solutions; and

13 (B) to review progress based on recommendations
14 for recognizing and supporting family caregivers in
15 the Strategy and, based on the results of such review,
16 recommend priority actions for improving the
17 implementation of such recommendations, as
18 appropriate.

19 (e) Process for public input. The Director shall establish
20 a process for public input to inform the development of, and
21 updates to, the Strategy, including a process for the public
22 to submit recommendations to the Advisory Council and an
23 opportunity for public comment on the proposed Strategy.

24 (f) No preemption. Nothing in this Act preempts any
25 authority of a unit of local government to recognize or
26 support family caregivers.

1 (g) Rule of construction. Nothing in this Act shall be
2 construed to permit the Director (through rule, guidance,
3 grant criteria, or otherwise) to:

4 (1) mandate, direct, or control the allocation of
5 State or local resources;

6 (2) mandate the use of any of the best practices
7 identified in the reports required under this Act; or

8 (3) otherwise expand the authority of the Director
9 beyond that expressly provided to the Director in this
10 Act.

11 Section 15. Family Caregiving Advisory Council.

12 (a) Convening. The Director shall convene a Family
13 Caregiving Advisory Council to advise and provide
14 recommendations, including identified best practices, to the
15 Director on recognizing and supporting family caregivers.

16 (b) Membership.

17 (1) In general. The members of the Advisory Council
18 shall consist of:

19 (A) the appointed members under paragraph (2); and

20 (B) the State members under paragraph (3).

21 (2) Appointed members. In addition to the State
22 members under paragraph (3), the Director shall appoint
23 not more than 15 voting members of the Advisory Council
24 who are not representatives of State departments or
25 agencies and who shall include at least one representative

1 of each of the following:

2 (A) Family caregivers.

3 (B) Older adults with long-term services and
4 supports needs.

5 (C) Individuals with disabilities.

6 (D) Health care and social service providers.

7 (E) Long-term services and supports providers.

8 (F) Employers.

9 (G) Paraprofessional workers.

10 (H) State and local officials.

11 (I) Accreditation bodies.

12 (J) Veterans.

13 (K) As appropriate, other experts and advocacy
14 organizations engaged in family caregiving.

15 (3) State members. The State members of the Advisory
16 Council, who shall be nonvoting members, shall consist of
17 the following:

18 (A) The Director of Healthcare and Family Services
19 or his or her designee.

20 (B) The Secretary of Human Services or his or her
21 designee who has experience in both aging and
22 disability.

23 (C) The Director of Veterans' Affairs or his or
24 her designee.

25 (D) The heads of other State departments or
26 agencies (or their designees), including relevant

1 departments or agencies that oversee labor and
2 workforce, economic, government financial policies,
3 community service, and other impacted populations, as
4 appointed by the Director or the Chair of the Advisory
5 Council.

6 (4) Diverse representation. The Director shall ensure
7 that the membership of the Advisory Council reflects the
8 diversity of family caregivers and individuals receiving
9 services and supports.

10 (c) Meetings. The Advisory Council shall meet quarterly
11 during the one-year period beginning on the effective date of
12 this Act and at least 3 times during each year thereafter.
13 Meetings of the Advisory Council shall be open to the public.

14 (d) Advisory Council annual reports.

15 (1) In general. Not later than 12 months after the
16 effective date of this Act, and annually thereafter, the
17 Advisory Council shall submit to the Senate Subcommittee
18 on Long-Term Care and Aging and to the House Workforce
19 Development Subcommittee, and make publicly available on
20 the website of the Department on Aging, a report
21 concerning the development, maintenance, and updating of
22 the Strategy, including a description of the outcomes of
23 the recommendations and any priorities included in the
24 initial report in accordance with paragraph (2), as
25 appropriate.

26 (2) Initial report. The Advisory Council's initial

1 report under paragraph (1) shall include:

2 (A) an inventory and assessment of all
3 State-funded efforts to recognize and support family
4 caregivers and the outcomes of such efforts, including
5 analyses of the extent to which State-funded efforts
6 are reaching family caregivers and gaps in such
7 efforts;

8 (B) recommendations:

9 (i) to improve and better coordinate State
10 programs and activities to recognize and support
11 family caregivers, as well as opportunities to
12 improve the coordination of such State programs
13 and activities with programs administered by units
14 of local government; and

15 (ii) to effectively deliver services based on
16 the performance, mission, and purpose of a program
17 while eliminating redundancies, avoiding
18 unnecessary duplication and overlap, and ensuring
19 the needs of family caregivers are met;

20 (C) the identification of challenges faced by
21 family caregivers, including financial, health, and
22 other challenges, and existing approaches to address
23 such challenges; and

24 (D) an evaluation of how family caregiving impacts
25 the Medicare program, the Medical Assistance program
26 under Article V of the Illinois Public Aid Code, and

1 other State programs.

2 Section 20. Funding. No additional funds are authorized to
3 be appropriated to carry out this Act. This Act shall be
4 carried out using funds otherwise authorized.

5 Section 25. Termination. The authority and obligations
6 established by this Act shall terminate on the date that is 3
7 years after the effective date of this Act.

8 Section 30. Repealer. This Act is repealed 4 years after
9 the effective date of this Act.