

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 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. The purpose  
8 of the Long Term Care Ombudsman Program is to ensure that older  
9 persons and persons with disabilities receive quality  
10 services. This is accomplished by providing advocacy services  
11 for residents of long term care facilities and participants  
12 receiving home care and community-based care. Managed care is  
13 increasingly becoming the vehicle for delivering health and  
14 long-term services and supports to seniors and persons with  
15 disabilities, including dual eligible participants. The  
16 additional ombudsman authority will allow advocacy services to  
17 be provided to Illinois participants for the first time and  
18 will produce a cost savings for the State of Illinois by  
19 supporting the rebalancing efforts of the Patient Protection  
20 and Affordable Care Act.

21 (a) Long Term Care Ombudsman Program. The Department shall  
22 establish a Long Term Care Ombudsman Program, through the  
23 Office of State Long Term Care Ombudsman ("the Office"), in

1 accordance with the provisions of the Older Americans Act of  
2 1965, as now or hereafter amended. The Long Term Care  
3 Ombudsman Program is authorized, subject to sufficient  
4 appropriations, to advocate on behalf of older persons and  
5 persons with disabilities residing in their own homes or  
6 community-based settings, relating to matters which may  
7 adversely affect the health, safety, welfare, or rights of  
8 such individuals.

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

11 (1) "Access" means the right to:

12 (i) Enter any long term care facility or assisted  
13 living or shared housing establishment or supportive  
14 living facility;

15 (ii) Communicate privately and without restriction  
16 with any resident, regardless of age, who consents to  
17 the communication;

18 (iii) Seek consent to communicate privately and  
19 without restriction with any participant or resident,  
20 regardless of age;

21 (iv) Inspect and copy the clinical and other  
22 records of a participant or resident, regardless of  
23 age, with the express written consent of the  
24 participant or resident;

25 (v) Observe all areas of the long term care  
26 facility or supportive living facilities, assisted

1 living or shared housing establishment except the  
2 living area of any resident who protests the  
3 observation; and

4 (vi) Subject to permission of the participant or  
5 resident requesting services or his or her  
6 representative, enter a home or community-based  
7 setting.

8 (2) "Long Term Care Facility" means (i) any facility  
9 as defined by Section 1-113 of the Nursing Home Care Act,  
10 as now or hereafter amended; (ii) any skilled nursing  
11 facility or a nursing facility which meets the  
12 requirements of Section 1819(a), (b), (c), and (d) or  
13 Section 1919(a), (b), (c), and (d) of the Social Security  
14 Act, as now or hereafter amended (42 U.S.C. 1395i-3(a),  
15 (b), (c), and (d) and 42 U.S.C. 1396r(a), (b), (c), and  
16 (d)); (iii) any facility as defined by Section 1-113 of  
17 the ID/DD Community Care Act, as now or hereafter amended;  
18 (iv) any facility as defined by Section 1-113 of MC/DD  
19 Act, as now or hereafter amended; and (v) any facility  
20 licensed under Section 4-105 or 4-201 of the Specialized  
21 Mental Health Rehabilitation Act of 2013, as now or  
22 hereafter amended.

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

1           (2.7) "Supportive living facility" means a facility  
2 established under Section 5-5.01a of the Illinois Public  
3 Aid Code.

4           (2.8) "Community-based setting" means any place of  
5 abode other than an individual's private home.

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

11           (3.1) "Ombudsman" means any designated representative  
12 of the State Long Term Care Ombudsman Program; provided  
13 that the representative, whether he is paid for or  
14 volunteers his ombudsman services, shall be qualified and  
15 designated by the Office to perform the duties of an  
16 ombudsman as specified by the Department in rules and in  
17 accordance with the provisions of the Older Americans Act  
18 of 1965, as now or hereafter amended.

19           (4) "Participant" means an older person aged 60 or  
20 over or an adult with a disability aged 18 through 59 who  
21 is eligible for services under any of the following:

22           (i) A medical assistance waiver administered by  
23 the State.

24           (ii) A managed care organization providing care  
25 coordination and other services to seniors and persons  
26 with disabilities.

1           (5) "Resident" means an older person aged 60 or over  
2           or an adult with a disability aged 18 through 59 who  
3           resides in a long-term care facility.

4           (c) Ombudsman; rules. The Office of State Long Term Care  
5           Ombudsman shall be composed of at least one full-time  
6           ombudsman and shall include a system of designated regional  
7           long term care ombudsman programs. Each regional program shall  
8           be designated by the State Long Term Care Ombudsman as a  
9           subdivision of the Office and any representative of a regional  
10          program shall be treated as a representative of the Office.

11          The Department, in consultation with the Office, shall  
12          promulgate administrative rules in accordance with the  
13          provisions of the Older Americans Act of 1965, as now or  
14          hereafter amended, to establish the responsibilities of the  
15          Department and the Office of State Long Term Care Ombudsman  
16          and the designated regional Ombudsman programs. The  
17          administrative rules shall include the responsibility of the  
18          Office and designated regional programs to investigate and  
19          resolve complaints made by or on behalf of residents of long  
20          term care facilities, supportive living facilities, and  
21          assisted living and shared housing establishments, and  
22          participants residing in their own homes or community-based  
23          settings, including the option to serve residents and  
24          participants under the age of 60, relating to actions,  
25          inaction, or decisions of providers, or their representatives,  
26          of such facilities and establishments, of public agencies, or

1 of social services agencies, which may adversely affect the  
2 health, safety, welfare, or rights of such residents and  
3 participants. The Office and designated regional programs may  
4 represent all residents and participants, but are not required  
5 by this Act to represent persons under 60 years of age, except  
6 to the extent required by federal law. When necessary and  
7 appropriate, representatives of the Office shall refer  
8 complaints to the appropriate regulatory State agency. The  
9 Department, in consultation with the Office, shall cooperate  
10 with the Department of Human Services and other State agencies  
11 in providing information and training to designated regional  
12 long term care ombudsman programs about the appropriate  
13 assessment and treatment (including information about  
14 appropriate supportive services, treatment options, and  
15 assessment of rehabilitation potential) of the participants  
16 they serve.

17 The State Long Term Care Ombudsman and all other  
18 ombudsmen, as defined in paragraph (3.1) of subsection (b)  
19 must submit to background checks under the Health Care Worker  
20 Background Check Act and receive training, as prescribed by  
21 the Illinois Department on Aging, before visiting facilities,  
22 private homes, or community-based settings. The training must  
23 include information specific to assisted living  
24 establishments, supportive living facilities, shared housing  
25 establishments, private homes, and community-based settings  
26 and to the rights of residents and participants guaranteed

1 under the corresponding Acts and administrative rules.

2 (c-5) Consumer Choice Information Reports. The Office  
3 shall:

4 (1) In collaboration with the Attorney General, create  
5 a Consumer Choice Information Report form to be completed  
6 by all licensed long term care facilities to aid  
7 Illinoisans and their families in making informed choices  
8 about long term care. The Office shall create a Consumer  
9 Choice Information Report for each type of licensed long  
10 term care facility. The Office shall collaborate with the  
11 Attorney General and the Department of Human Services to  
12 create a Consumer Choice Information Report form for  
13 facilities licensed under the ID/DD Community Care Act or  
14 the MC/DD Act.

15 (2) Develop a database of Consumer Choice Information  
16 Reports completed by licensed long term care facilities  
17 that includes information in the following consumer  
18 categories:

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

20 (B) Special Services and Amenities.

21 (C) Staffing.

22 (D) Facility Statistics and Resident Demographics.

23 (E) Ownership and Administration.

24 (F) Safety and Security.

25 (G) Meals and Nutrition.

26 (H) Rooms, Furnishings, and Equipment.

1 (I) Family, Volunteer, and Visitation Provisions.

2 (3) Make this information accessible to the public,  
3 including on the Internet by means of a hyperlink on the  
4 Office's World Wide Web home page. Information about  
5 facilities licensed under the ID/DD Community Care Act or  
6 the MC/DD Act shall be made accessible to the public by the  
7 Department of Human Services, including on the Internet by  
8 means of a hyperlink on the Department of Human Services'  
9 "For Customers" website.

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

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

15 (6) Include in the Office's Consumer Choice  
16 Information Report for each type of licensed long term  
17 care facility additional information on each licensed long  
18 term care facility in the State of Illinois, including  
19 information regarding each facility's compliance with the  
20 relevant State and federal statutes, rules, and standards;  
21 customer satisfaction surveys; and information generated  
22 from quality measures developed by the Centers for  
23 Medicare and Medicaid Services.

24 (d) Access and visitation rights.

25 (1) In accordance with subparagraphs (A) and (E) of  
26 paragraph (3) of subsection (c) of Section 1819 and



1           subparagraphs (A) and (E) of paragraph (3) of subsection  
2           (c) of Section 1919 of the Social Security Act, as now or  
3           hereafter amended (42 U.S.C. 1395i-3 (c) (3) (A) and (E) and  
4           42 U.S.C. 1396r (c) (3) (A) and (E)), and Section 712 of the  
5           Older Americans Act of 1965, as now or hereafter amended  
6           (42 U.S.C. 3058f), a long term care facility, supportive  
7           living facility, assisted living establishment, and shared  
8           housing establishment must:

9           (i) permit immediate access to any resident,  
10           regardless of age, by a designated ombudsman;

11           (ii) permit representatives of the Office, with  
12           the permission of the resident, the resident's legal  
13           representative, or the resident's legal guardian, to  
14           examine and copy a resident's clinical and other  
15           records, regardless of the age of the resident, and if  
16           a resident is unable to consent to such review, and has  
17           no legal guardian, permit representatives of the  
18           Office appropriate access, as defined by the  
19           Department, in consultation with the Office, in  
20           administrative rules, to the resident's records; and

21           (iii) permit a representative of the Program to  
22           communicate privately and without restriction with any  
23           participant who consents to the communication  
24           regardless of the consent of, or withholding of  
25           consent by, a legal guardian or an agent named in a  
26           power of attorney executed by the participant.

1           (2) Each long term care facility, supportive living  
2           facility, assisted living establishment, and shared  
3           housing establishment shall display, in multiple,  
4           conspicuous public places within the facility accessible  
5           to both visitors and residents and in an easily readable  
6           format, the address and phone number of the Office of the  
7           Long Term Care Ombudsman, in a manner prescribed by the  
8           Office.

9           (e) Immunity. An ombudsman or any representative of the  
10          Office participating in the good faith performance of his or  
11          her official duties shall have immunity from any liability  
12          (civil, criminal or otherwise) in any proceedings (civil,  
13          criminal or otherwise) brought as a consequence of the  
14          performance of his official duties.

15          (f) Business offenses.

16                (1) No person shall:

17                   (i) Intentionally prevent, interfere with, or  
18                   attempt to impede in any way any representative of the  
19                   Office in the performance of his official duties under  
20                   this Act and the Older Americans Act of 1965; or

21                   (ii) Intentionally retaliate, discriminate  
22                   against, or effect reprisals against any long term  
23                   care facility resident or employee for contacting or  
24                   providing information to any representative of the  
25                   Office.

26                (2) A violation of this Section is a business offense,

1 punishable by a fine not to exceed \$501.

2 (3) The State Long Term Care Ombudsman shall notify  
3 the State's Attorney of the county in which the long term  
4 care facility, supportive living facility, or assisted  
5 living or shared housing establishment is located, or the  
6 Attorney General, of any violations of this Section.

7 (g) Confidentiality of records and identities. The  
8 Department shall establish procedures for the disclosure by  
9 the State Ombudsman or the regional ombudsmen entities of  
10 files maintained by the program. The procedures shall provide  
11 that the files and records may be disclosed only at the  
12 discretion of the State Long Term Care Ombudsman or the person  
13 designated by the State Ombudsman to disclose the files and  
14 records, and the procedures shall prohibit the disclosure of  
15 the identity of any complainant, resident, participant,  
16 witness, or employee of a long term care provider unless:

17 (1) the complainant, resident, participant, witness,  
18 or employee of a long term care provider or his or her  
19 legal representative consents to the disclosure and the  
20 consent is in writing;

21 (2) the complainant, resident, participant, witness,  
22 or employee of a long term care provider gives consent  
23 orally; and the consent is documented contemporaneously in  
24 writing in accordance with such requirements as the  
25 Department shall establish; or

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

1           (h) Legal representation. The Attorney General shall  
2 provide legal representation to any representative of the  
3 Office against whom suit or other legal action is brought in  
4 connection with the performance of the representative's  
5 official duties, in accordance with the State Employee  
6 Indemnification Act.

7           (i) Treatment by prayer and spiritual means. Nothing in  
8 this Act shall be construed to authorize or require the  
9 medical supervision, regulation or control of remedial care or  
10 treatment of any resident in a long term care facility  
11 operated exclusively by and for members or adherents of any  
12 church or religious denomination the tenets and practices of  
13 which include reliance solely upon spiritual means through  
14 prayer for healing.

15           (j) The Long Term Care Ombudsman Fund is created as a  
16 special fund in the State treasury to receive moneys for the  
17 express purposes of this Section. All interest earned on  
18 moneys in the fund shall be credited to the fund. Moneys  
19 contained in the fund shall be used to support the purposes of  
20 this Section.

21           (k) Each Regional Ombudsman may, in accordance with rules  
22 promulgated by the Office, establish a multi-disciplinary team  
23 to act in an advisory role for the purpose of providing  
24 professional knowledge and expertise in handling complex  
25 abuse, neglect, and advocacy issues involving participants.  
26 Each multi-disciplinary team may consist of one or more

1 volunteer representatives from any combination of at least 7  
2 members from the following professions: banking or finance;  
3 disability care; health care; pharmacology; law; law  
4 enforcement; emergency responder; mental health care; clergy;  
5 coroner or medical examiner; substance abuse; domestic  
6 violence; sexual assault; or other related fields. To support  
7 multi-disciplinary teams in this role, law enforcement  
8 agencies and coroners or medical examiners shall supply  
9 records as may be requested in particular cases. The Regional  
10 Ombudsman, or his or her designee, of the area in which the  
11 multi-disciplinary team is created shall be the facilitator of  
12 the multi-disciplinary team.

13 (Source: P.A. 102-1033, eff. 1-1-23.)

14 Section 10. The Adult Protective Services Act is amended  
15 by changing Sections 2, 4, 4.1, 4.2, 5, and 8 as follows:

16 (320 ILCS 20/2) (from Ch. 23, par. 6602)

17 Sec. 2. Definitions. As used in this Act, unless the  
18 context requires otherwise:

19 (a) "Abandonment" means the desertion or willful forsaking  
20 of an eligible adult by an individual responsible for the care  
21 and custody of that eligible adult under circumstances in  
22 which a reasonable person would continue to provide care and  
23 custody. Nothing in this Act shall be construed to mean that an  
24 eligible adult is a victim of abandonment because of health

1 care services provided or not provided by licensed health care  
2 professionals.

3 (a-1) "Abuse" means causing any physical, mental or sexual  
4 injury to an eligible adult, including exploitation of such  
5 adult's financial resources, and abandonment.

6 Nothing in this Act shall be construed to mean that an  
7 eligible adult is a victim of abuse, abandonment, neglect, or  
8 self-neglect for the sole reason that he or she is being  
9 furnished with or relies upon treatment by spiritual means  
10 through prayer alone, in accordance with the tenets and  
11 practices of a recognized church or religious denomination.

12 Nothing in this Act shall be construed to mean that an  
13 eligible adult is a victim of abuse because of health care  
14 services provided or not provided by licensed health care  
15 professionals.

16 Nothing in this Act shall be construed to mean that an  
17 eligible adult is a victim of abuse in cases of criminal  
18 activity by strangers, telemarketing scams, consumer fraud,  
19 internet fraud, home repair disputes, complaints against a  
20 homeowners' association, or complaints between landlords and  
21 tenants.

22 (a-5) "Abuser" means a person who is a family member,  
23 caregiver, or another person who has a continuing relationship  
24 with the eligible adult and abuses, abandons, neglects, or  
25 financially exploits an eligible adult.

26 (a-6) "Adult with disabilities" means a person aged 18

1 through 59 who resides in a domestic living situation and  
2 whose disability as defined in subsection (c-5) impairs his or  
3 her ability to seek or obtain protection from abuse,  
4 abandonment, neglect, or exploitation.

5 (a-7) "Caregiver" means a person who either as a result of  
6 a family relationship, voluntarily, or in exchange for  
7 compensation has assumed responsibility for all or a portion  
8 of the care of an eligible adult who needs assistance with  
9 activities of daily living or instrumental activities of daily  
10 living.

11 (b) "Department" means the Department on Aging of the  
12 State of Illinois.

13 (c) "Director" means the Director of the Department.

14 (c-5) "Disability" means a physical or mental disability,  
15 including, but not limited to, a developmental disability, an  
16 intellectual disability, a mental illness as defined under the  
17 Mental Health and Developmental Disabilities Code, or dementia  
18 as defined under the Alzheimer's Disease Assistance Act.

19 (d) "Domestic living situation" means a residence where  
20 the eligible adult at the time of the report lives alone or  
21 with his or her family or a caregiver, or others, or other  
22 community-based unlicensed facility, but is not:

23 (1) A licensed facility as defined in Section 1-113 of  
24 the Nursing Home Care Act;

25 (1.5) A facility licensed under the ID/DD Community  
26 Care Act;

- 1 (1.6) A facility licensed under the MC/DD Act;
- 2 (1.7) A facility licensed under the Specialized Mental  
3 Health Rehabilitation Act of 2013;
- 4 (2) A "life care facility" as defined in the Life Care  
5 Facilities Act;
- 6 (3) A home, institution, or other place operated by  
7 the federal government or agency thereof or by the State  
8 of Illinois;
- 9 (4) A hospital, sanitarium, or other institution, the  
10 principal activity or business of which is the diagnosis,  
11 care, and treatment of human illness through the  
12 maintenance and operation of organized facilities  
13 therefor, which is required to be licensed under the  
14 Hospital Licensing Act;
- 15 (5) A "community living facility" as defined in the  
16 Community Living Facilities Licensing Act;
- 17 (6) (Blank);
- 18 (7) A "community-integrated living arrangement" as  
19 defined in the Community-Integrated Living Arrangements  
20 Licensure and Certification Act or a "community  
21 residential alternative" as licensed under that Act;
- 22 (8) An assisted living or shared housing establishment  
23 as defined in the Assisted Living and Shared Housing Act;  
24 or
- 25 (9) A supportive living facility as described in  
26 Section 5-5.01a of the Illinois Public Aid Code.



1           (e) "Eligible adult" means either an adult with  
2 disabilities aged 18 through 59 or a person aged 60 or older  
3 who resides in a domestic living situation and is, or is  
4 alleged to be, abused, abandoned, neglected, or financially  
5 exploited by another individual or who neglects himself or  
6 herself. "Eligible adult" also includes an adult who resides  
7 in any of the facilities that are excluded from the definition  
8 of "domestic living situation" under paragraphs (1) through  
9 (9) of subsection (d), if either: (i) the alleged abuse,  
10 abandonment, or neglect occurs outside of the facility and not  
11 under facility supervision and the alleged abuser is a family  
12 member, caregiver, or another person who has a continuing  
13 relationship with the adult; or (ii) the alleged financial  
14 exploitation is perpetrated by a family member, caregiver, or  
15 another person who has a continuing relationship with the  
16 adult, but who is not an employee of the facility where the  
17 adult resides.

18           (f) "Emergency" means a situation in which an eligible  
19 adult is living in conditions presenting a risk of death or  
20 physical, mental or sexual injury and the provider agency has  
21 reason to believe the eligible adult is unable to consent to  
22 services which would alleviate that risk.

23           (f-1) "Financial exploitation" means the use of an  
24 eligible adult's resources by another to the disadvantage of  
25 that adult or the profit or advantage of a person other than  
26 that adult.

1       (f-3) "Investment advisor" means any person required to  
2 register as an investment adviser or investment adviser  
3 representative under Section 8 of the Illinois Securities Law  
4 of 1953, which for purposes of this Act excludes any bank,  
5 trust company, savings bank, or credit union, or their  
6 respective employees.

7       (f-5) "Mandated reporter" means any of the following  
8 persons while engaged in carrying out their professional  
9 duties:

10           (1) a professional or professional's delegate while  
11 engaged in: (i) social services, (ii) law enforcement,  
12 (iii) education, (iv) the care of an eligible adult or  
13 eligible adults, or (v) any of the occupations required to  
14 be licensed under the Behavior Analyst Licensing Act, the  
15 Clinical Psychologist Licensing Act, the Clinical Social  
16 Work and Social Work Practice Act, the Illinois Dental  
17 Practice Act, the Dietitian Nutritionist Practice Act, the  
18 Marriage and Family Therapy Licensing Act, the Medical  
19 Practice Act of 1987, the Naprapathic Practice Act, the  
20 Nurse Practice Act, the Nursing Home Administrators  
21 Licensing and Disciplinary Act, the Illinois Occupational  
22 Therapy Practice Act, the Illinois Optometric Practice Act  
23 of 1987, the Pharmacy Practice Act, the Illinois Physical  
24 Therapy Act, the Physician Assistant Practice Act of 1987,  
25 the Podiatric Medical Practice Act of 1987, the  
26 Respiratory Care Practice Act, the Professional Counselor

1 and Clinical Professional Counselor Licensing and Practice  
2 Act, the Illinois Speech-Language Pathology and Audiology  
3 Practice Act, the Veterinary Medicine and Surgery Practice  
4 Act of 2004, and the Illinois Public Accounting Act;

5 (1.5) an employee of an entity providing developmental  
6 disabilities services or service coordination funded by  
7 the Department of Human Services;

8 (2) an employee of a vocational rehabilitation  
9 facility prescribed or supervised by the Department of  
10 Human Services;

11 (3) an administrator, employee, or person providing  
12 services in or through an unlicensed community based  
13 facility;

14 (4) any religious practitioner who provides treatment  
15 by prayer or spiritual means alone in accordance with the  
16 tenets and practices of a recognized church or religious  
17 denomination, except as to information received in any  
18 confession or sacred communication enjoined by the  
19 discipline of the religious denomination to be held  
20 confidential;

21 (5) field personnel of the Department of Healthcare  
22 and Family Services, Department of Public Health, and  
23 Department of Human Services, and any county or municipal  
24 health department;

25 (6) personnel of the Department of Human Services, the  
26 Guardianship and Advocacy Commission, the State Fire

1 Marshal, local fire departments, the Department on Aging  
2 and its subsidiary Area Agencies on Aging and provider  
3 agencies, except the State Long Term Care Ombudsman and  
4 any of his or her representatives or volunteers where  
5 prohibited from making such a report pursuant to 45 CFR  
6 1324.11(e)(3)(iv); and the Office of State Long Term Care  
7 Ombudsman;

8 (7) any employee of the State of Illinois not  
9 otherwise specified herein who is involved in providing  
10 services to eligible adults, including professionals  
11 providing medical or rehabilitation services and all other  
12 persons having direct contact with eligible adults;

13 (8) a person who performs the duties of a coroner or  
14 medical examiner; ~~or~~

15 (9) a person who performs the duties of a paramedic or  
16 an emergency medical technician; or -

17 (10) a person who performs the duties of an investment  
18 advisor.

19 (g) "Neglect" means another individual's failure to  
20 provide an eligible adult with or willful withholding from an  
21 eligible adult the necessities of life including, but not  
22 limited to, food, clothing, shelter or health care. This  
23 subsection does not create any new affirmative duty to provide  
24 support to eligible adults. Nothing in this Act shall be  
25 construed to mean that an eligible adult is a victim of neglect  
26 because of health care services provided or not provided by

1 licensed health care professionals.

2 (h) "Provider agency" means any public or nonprofit agency  
3 in a planning and service area that is selected by the  
4 Department or appointed by the regional administrative agency  
5 with prior approval by the Department on Aging to receive and  
6 assess reports of alleged or suspected abuse, abandonment,  
7 neglect, or financial exploitation. A provider agency is also  
8 referenced as a "designated agency" in this Act.

9 (i) "Regional administrative agency" means any public or  
10 nonprofit agency in a planning and service area that provides  
11 regional oversight and performs functions as set forth in  
12 subsection (b) of Section 3 of this Act. The Department shall  
13 designate an Area Agency on Aging as the regional  
14 administrative agency or, in the event the Area Agency on  
15 Aging in that planning and service area is deemed by the  
16 Department to be unwilling or unable to provide those  
17 functions, the Department may serve as the regional  
18 administrative agency or designate another qualified entity to  
19 serve as the regional administrative agency; any such  
20 designation shall be subject to terms set forth by the  
21 Department.

22 (i-5) "Self-neglect" means a condition that is the result  
23 of an eligible adult's inability, due to physical or mental  
24 impairments, or both, or a diminished capacity, to perform  
25 essential self-care tasks that substantially threaten his or  
26 her own health, including: providing essential food, clothing,

1 shelter, and health care; and obtaining goods and services  
2 necessary to maintain physical health, mental health,  
3 emotional well-being, and general safety. The term includes  
4 compulsive hoarding, which is characterized by the acquisition  
5 and retention of large quantities of items and materials that  
6 produce an extensively cluttered living space, which  
7 significantly impairs the performance of essential self-care  
8 tasks or otherwise substantially threatens life or safety.

9 (j) "Substantiated case" means a reported case of alleged  
10 or suspected abuse, abandonment, neglect, financial  
11 exploitation, or self-neglect in which a provider agency,  
12 after assessment, determines that there is reason to believe  
13 abuse, abandonment, neglect, or financial exploitation has  
14 occurred.

15 (k) "Verified" means a determination that there is "clear  
16 and convincing evidence" that the specific injury or harm  
17 alleged was the result of abuse, abandonment, neglect, or  
18 financial exploitation.

19 (Source: P.A. 102-244, eff. 1-1-22; 102-953, eff. 5-27-22.)

20 (320 ILCS 20/4) (from Ch. 23, par. 6604)

21 Sec. 4. Reports of abuse, abandonment, or neglect.

22 (a) Any person who suspects the abuse, abandonment,  
23 neglect, financial exploitation, or self-neglect of an  
24 eligible adult may report this suspicion or information about  
25 the suspicious death of an eligible adult to an agency

1 designated to receive such reports under this Act or to the  
2 Department.

3 (a-5) If any mandated reporter has reason to believe that  
4 an eligible adult, who because of a disability or other  
5 condition or impairment is unable to seek assistance for  
6 himself or herself, has, within the previous 12 months, been  
7 subjected to abuse, abandonment, neglect, or financial  
8 exploitation, the mandated reporter shall, within 24 hours  
9 after developing such belief, report this suspicion to an  
10 agency designated to receive such reports under this Act or to  
11 the Department. The agency designated to receive such reports  
12 under this Act or the Department may establish a manner in  
13 which a mandated reporter can make the required report through  
14 an Internet reporting tool. Information sent and received  
15 through the Internet reporting tool is subject to the same  
16 rules in this Act as other types of confidential reporting  
17 established by the designated agency or the Department.  
18 Whenever a mandated reporter is required to report under this  
19 Act in his or her capacity as a member of the staff of a  
20 medical or other public or private institution, facility, or  
21 agency, he or she shall make a report to an agency designated  
22 to receive such reports under this Act or to the Department in  
23 accordance with the provisions of this Act and may also notify  
24 the person in charge of the institution, facility, or agency  
25 or his or her designated agent that the report has been made.  
26 Under no circumstances shall any person in charge of such

1 institution, facility, or agency, or his or her designated  
2 agent to whom the notification has been made, exercise any  
3 control, restraint, modification, or other change in the  
4 report or the forwarding of the report to an agency designated  
5 to receive such reports under this Act or to the Department.  
6 The privileged quality of communication between any  
7 professional person required to report and his or her patient  
8 or client shall not apply to situations involving abused,  
9 abandoned, neglected, or financially exploited eligible adults  
10 and shall not constitute grounds for failure to report as  
11 required by this Act.

12 (a-6) If a mandated reporter has reason to believe that  
13 the death of an eligible adult may be the result of abuse or  
14 neglect, the matter shall be reported to an agency designated  
15 to receive such reports under this Act or to the Department for  
16 subsequent referral to the appropriate law enforcement agency  
17 and the coroner or medical examiner in accordance with  
18 subsection (c-5) of Section 3 of this Act.

19 (a-7) A person making a report under this Act in the belief  
20 that it is in the alleged victim's best interest shall be  
21 immune from criminal or civil liability or professional  
22 disciplinary action on account of making the report,  
23 notwithstanding any requirements concerning the  
24 confidentiality of information with respect to such eligible  
25 adult which might otherwise be applicable.

26 (a-9) Law enforcement officers shall continue to report



1 incidents of alleged abuse pursuant to the Illinois Domestic  
2 Violence Act of 1986, notwithstanding any requirements under  
3 this Act.

4 (b) Any person, institution or agency participating in the  
5 making of a report, providing information or records related  
6 to a report, assessment, or services, or participating in the  
7 investigation of a report under this Act in good faith, or  
8 taking photographs or x-rays as a result of an authorized  
9 assessment, shall have immunity from any civil, criminal or  
10 other liability in any civil, criminal or other proceeding  
11 brought in consequence of making such report or assessment or  
12 on account of submitting or otherwise disclosing such  
13 photographs or x-rays to any agency designated to receive  
14 reports of alleged or suspected abuse, abandonment, or  
15 neglect. Any person, institution or agency authorized by the  
16 Department to provide assessment, intervention, or  
17 administrative services under this Act shall, in the good  
18 faith performance of those services, have immunity from any  
19 civil, criminal or other liability in any civil, criminal, or  
20 other proceeding brought as a consequence of the performance  
21 of those services. For the purposes of any civil, criminal, or  
22 other proceeding, the good faith of any person required to  
23 report, permitted to report, or participating in an  
24 investigation of a report of alleged or suspected abuse,  
25 abandonment, neglect, financial exploitation, or self-neglect  
26 shall be presumed.

1           (c) The identity of a person making a report of alleged or  
2 suspected abuse, abandonment, neglect, financial exploitation,  
3 or self-neglect or a report concerning information about the  
4 suspicious death of an eligible adult under this Act may be  
5 disclosed by the Department or other agency provided for in  
6 this Act only with such person's written consent or by court  
7 order, but is otherwise confidential.

8           (d) The Department shall by rule establish a system for  
9 filing and compiling reports made under this Act.

10          (e) Any physician who willfully fails to report as  
11 required by this Act shall be referred to the Illinois State  
12 Medical Disciplinary Board for action in accordance with  
13 subdivision (A) (22) of Section 22 of the Medical Practice Act  
14 of 1987. Any dentist or dental hygienist who willfully fails  
15 to report as required by this Act shall be referred to the  
16 Department of Professional Regulation for action in accordance  
17 with paragraph 19 of Section 23 of the Illinois Dental  
18 Practice Act. Any optometrist who willfully fails to report as  
19 required by this Act shall be referred to the Department of  
20 Financial and Professional Regulation for action in accordance  
21 with paragraph (15) of subsection (a) of Section 24 of the  
22 Illinois Optometric Practice Act of 1987. Any other mandated  
23 reporter required by this Act to report suspected abuse,  
24 abandonment, neglect, or financial exploitation who willfully  
25 fails to report the same is guilty of a Class A misdemeanor.

26          (Source: P.A. 102-244, eff. 1-1-22.)

1 (320 ILCS 20/4.1)

2 Sec. 4.1. Employer discrimination. No employer shall  
3 discharge, demote or suspend, or threaten to discharge, demote  
4 or suspend, or in any manner discriminate against any  
5 employee: (i) who makes any good faith oral or written report  
6 of suspected abuse, abandonment, neglect, or financial  
7 exploitation; (ii) who makes any good faith oral or written  
8 report concerning information about the suspicious death of an  
9 eligible adult; or (iii) who is or will be a witness or testify  
10 in any investigation or proceeding concerning a report of  
11 suspected abuse, abandonment, neglect, or financial  
12 exploitation.

13 (Source: P.A. 102-244, eff. 1-1-22.)

14 (320 ILCS 20/4.2)

15 Sec. 4.2. Testimony by mandated reporter and investigator.  
16 Any mandated reporter who makes a report or any person who  
17 investigates a report under this Act shall testify fully in  
18 any judicial proceeding resulting from such report, as to any  
19 evidence of abuse, abandonment, neglect, or financial  
20 exploitation or the cause thereof. Any mandated reporter who  
21 is required to report a suspected case of or a suspicious death  
22 due to abuse, abandonment, neglect, or financial exploitation  
23 under Section 4 of this Act shall testify fully in any  
24 administrative hearing resulting from such report, as to any

1 evidence of abuse, abandonment, neglect, or financial  
2 exploitation or the cause thereof. No evidence shall be  
3 excluded by reason of any common law or statutory privilege  
4 relating to communications between the alleged abuser or the  
5 eligible adult subject of the report under this Act and the  
6 person making or investigating the report.

7 (Source: P.A. 102-244, eff. 1-1-22.)

8 (320 ILCS 20/5) (from Ch. 23, par. 6605)

9 Sec. 5. Procedure.

10 (a) A provider agency designated to receive reports of  
11 alleged or suspected abuse, abandonment, neglect, financial  
12 exploitation, or self-neglect under this Act shall, upon  
13 receiving such a report, conduct a face-to-face assessment  
14 with respect to such report, in accord with established law  
15 and Department protocols, procedures, and policies.  
16 Face-to-face assessments, casework, and follow-up of reports  
17 of self-neglect by the provider agencies designated to receive  
18 reports of self-neglect shall be subject to sufficient  
19 appropriation for statewide implementation of assessments,  
20 casework, and follow-up of reports of self-neglect. In the  
21 absence of sufficient appropriation for statewide  
22 implementation of assessments, casework, and follow-up of  
23 reports of self-neglect, the designated adult protective  
24 services provider agency shall refer all reports of  
25 self-neglect to the appropriate agency or agencies as

1 designated by the Department for any follow-up. The assessment  
2 shall include, but not be limited to, a visit to the residence  
3 of the eligible adult who is the subject of the report and  
4 shall include interviews or consultations regarding the  
5 allegations with service agencies, immediate family members,  
6 and individuals who may have knowledge of the eligible adult's  
7 circumstances based on the consent of the eligible adult in  
8 all instances, except where the provider agency is acting in  
9 the best interest of an eligible adult who is unable to seek  
10 assistance for himself or herself and where there are  
11 allegations against a caregiver who has assumed  
12 responsibilities in exchange for compensation. If, after the  
13 assessment, the provider agency determines that the case is  
14 substantiated it shall develop a service care plan for the  
15 eligible adult and may report its findings at any time during  
16 the case to the appropriate law enforcement agency in accord  
17 with established law and Department protocols, procedures, and  
18 policies. In developing a case plan, the provider agency may  
19 consult with any other appropriate provider of services, and  
20 such providers shall be immune from civil or criminal  
21 liability on account of such acts. The plan shall include  
22 alternative suggested or recommended services which are  
23 appropriate to the needs of the eligible adult and which  
24 involve the least restriction of the eligible adult's  
25 activities commensurate with his or her needs. Only those  
26 services to which consent is provided in accordance with

1 Section 9 of this Act shall be provided, contingent upon the  
2 availability of such services.

3 (b) A provider agency shall refer evidence of crimes  
4 against an eligible adult to the appropriate law enforcement  
5 agency according to Department policies. A referral to law  
6 enforcement may be made at intake, at ~~or~~ any time during the  
7 case, or after a report of a suspicious death, depending upon  
8 the circumstances. Where a provider agency has reason to  
9 believe the death of an eligible adult may be the result of  
10 abuse, abandonment, or neglect, the agency shall immediately  
11 report the matter to the coroner or medical examiner and shall  
12 cooperate fully with any subsequent investigation.

13 (c) If any person other than the alleged victim refuses to  
14 allow the provider agency to begin an investigation,  
15 interferes with the provider agency's ability to conduct an  
16 investigation, or refuses to give access to an eligible adult,  
17 the appropriate law enforcement agency must be consulted  
18 regarding the investigation.

19 (Source: P.A. 101-496, eff. 1-1-20; 102-244, eff. 1-1-22.)

20 (320 ILCS 20/8) (from Ch. 23, par. 6608)

21 Sec. 8. Access to records. All records concerning reports  
22 of abuse, abandonment, neglect, financial exploitation, or  
23 self-neglect or reports of suspicious deaths due to abuse,  
24 neglect, or financial exploitation and all records generated  
25 as a result of such reports shall be confidential and shall not

1 be disclosed except as specifically authorized by this Act or  
2 other applicable law. In accord with established law and  
3 Department protocols, procedures, and policies, access to such  
4 records, but not access to the identity of the person or  
5 persons making a report of alleged abuse, abandonment,  
6 neglect, financial exploitation, or self-neglect as contained  
7 in such records, shall be provided, upon request, to the  
8 following persons and for the following persons:

9 (1) Department staff, provider agency staff, other  
10 aging network staff, and regional administrative agency  
11 staff, including staff of the Chicago Department on Aging  
12 while that agency is designated as a regional  
13 administrative agency, in the furtherance of their  
14 responsibilities under this Act;

15 (1.5) A representative of the public guardian acting  
16 in the course of investigating the appropriateness of  
17 guardianship for the eligible adult or while pursuing a  
18 petition for guardianship of the eligible adult pursuant  
19 to the Probate Act of 1975;

20 (2) A law enforcement agency or State's Attorney's  
21 office investigating known or suspected abuse,  
22 abandonment, neglect, financial exploitation, or  
23 self-neglect. Where a provider agency has reason to  
24 believe that the death of an eligible adult may be the  
25 result of abuse, abandonment, or neglect, including any  
26 reports made after death, the agency shall immediately

1 provide the appropriate law enforcement agency with all  
2 records pertaining to the eligible adult;

3 (2.5) A law enforcement agency, fire department  
4 agency, or fire protection district having proper  
5 jurisdiction pursuant to a written agreement between a  
6 provider agency and the law enforcement agency, fire  
7 department agency, or fire protection district under which  
8 the provider agency may furnish to the law enforcement  
9 agency, fire department agency, or fire protection  
10 district a list of all eligible adults who may be at  
11 imminent risk of abuse, abandonment, neglect, financial  
12 exploitation, or self-neglect;

13 (3) A physician who has before him or her or who is  
14 involved in the treatment of an eligible adult whom he or  
15 she reasonably suspects may be abused, abandoned,  
16 neglected, financially exploited, or self-neglected or who  
17 has been referred to the Adult Protective Services  
18 Program;

19 (4) An eligible adult reported to be abused,  
20 abandoned, neglected, financially exploited, or  
21 self-neglected, or such adult's authorized guardian or  
22 agent, unless such guardian or agent is the abuser or the  
23 alleged abuser;

24 (4.5) An executor or administrator of the estate of an  
25 eligible adult who is deceased;

26 (5) A probate court with jurisdiction over the



1 guardianship of an alleged victim for an in camera  
2 inspection ~~In cases regarding abuse, abandonment, neglect,~~  
3 ~~or financial exploitation, a court or a guardian ad litem,~~  
4 ~~upon its or his or her finding that access to such records~~  
5 ~~may be necessary for the determination of an issue before~~  
6 ~~the court. However, such access shall be limited to an in~~  
7 ~~camera inspection of the records, unless the court~~  
8 ~~determines that disclosure of the information contained~~  
9 ~~therein is necessary for the resolution of an issue then~~  
10 ~~pending before it;~~

11 (5.5) A ~~In cases regarding self-neglect, a guardian ad~~  
12 ~~litem, unless such guardian ad litem is the abuser or~~  
13 ~~alleged abuser;~~

14 (6) A grand jury, upon its determination that access  
15 to such records is necessary in the conduct of its  
16 official business;

17 (7) Any person authorized by the Director, in writing,  
18 for audit or bona fide research purposes;

19 (8) A coroner or medical examiner who has reason to  
20 believe that an eligible adult has died as the result of  
21 abuse, abandonment, neglect, financial exploitation, or  
22 self-neglect. The provider agency shall immediately  
23 provide the coroner or medical examiner with all records  
24 pertaining to the eligible adult;

25 (8.5) A coroner or medical examiner having proper  
26 jurisdiction, pursuant to a written agreement between a

1 provider agency and the coroner or medical examiner, under  
2 which the provider agency may furnish to the office of the  
3 coroner or medical examiner a list of all eligible adults  
4 who may be at imminent risk of death as a result of abuse,  
5 abandonment, neglect, financial exploitation, or  
6 self-neglect;

7 (9) Department of Financial and Professional  
8 Regulation staff and members of the Illinois Medical  
9 Disciplinary Board or the Social Work Examining and  
10 Disciplinary Board in the course of investigating alleged  
11 violations of the Clinical Social Work and Social Work  
12 Practice Act by provider agency staff or other licensing  
13 bodies at the discretion of the Director of the Department  
14 on Aging;

15 (9-a) Department of Healthcare and Family Services  
16 staff and provider agency staff when that Department is  
17 funding services to the eligible adult, including access  
18 to the identity of the eligible adult;

19 (9-b) Department of Human Services staff and provider  
20 agency staff when that Department is funding services to  
21 the eligible adult or is providing reimbursement for  
22 services provided by the abuser or alleged abuser,  
23 including access to the identity of the eligible adult;

24 (10) Hearing officers in the course of conducting an  
25 administrative hearing under this Act; parties to such  
26 hearing shall be entitled to discovery as established by

1 rule;

2 (11) A caregiver who challenges placement on the  
3 Registry shall be given the statement of allegations in  
4 the abuse report and the substantiation decision in the  
5 final investigative report; and

6 (12) The Illinois Guardianship and Advocacy Commission  
7 and the agency designated by the Governor under Section 1  
8 of the Protection and Advocacy for Persons with  
9 Developmental Disabilities Act shall have access, through  
10 the Department, to records, including the findings,  
11 pertaining to a completed or closed investigation of a  
12 report of suspected abuse, abandonment, neglect, financial  
13 exploitation, or self-neglect of an eligible adult.

14 (Source: P.A. 102-244, eff. 1-1-22.)

15 Section 99. Effective date. This Act takes effect January  
16 1, 2024.