

Sen. Jil Tracy

## Filed: 5/11/2023

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1	AMENDMENT TO HOUSE BI	LL 2858
2	AMENDMENT NO Amend House	Bill 2858 by replacing
3	everything after the enacting clause with	ith the following:
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, p	par. 6104.04)
7	Sec. 4.04. Long Term Care Ombudsm	an Program. The purpose
8	of the Long Term Care Ombudsman Program	n is to ensure that older
9	persons and persons with disabil	ities receive quality
10	services. This is accomplished by prov	viding advocacy services
11	for residents of long term care faci	lities and participants
12	receiving home care and community-base	ed care. Managed care is
13	increasingly becoming the vehicle for	r delivering health and
14	long-term services and supports to se	eniors and persons with
15	disabilities, including dual eligi	ble participants. The
16	additional ombudsman authority will al	low advocacy services to

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be provided to Illinois participants for the first time and will produce a cost savings for the State of Illinois by supporting the rebalancing efforts of the Patient Protection and Affordable Care Act.

5 (a) Long Term Care Ombudsman Program. The Department shall establish a Long Term Care Ombudsman Program, through the 6 Office of State Long Term Care Ombudsman ("the Office"), in 7 accordance with the provisions of the Older Americans Act of 8 9 1965, as now or hereafter amended. The Long Term Care 10 Ombudsman Program is authorized, subject to sufficient 11 appropriations, to advocate on behalf of older persons and persons with disabilities residing in their own homes or 12 13 community-based settings, relating to matters which may 14 adversely affect the health, safety, welfare, or rights of 15 such individuals.

16 (b) Definitions. As used in this Section, unless the 17 context requires otherwise:

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(1) "Access" means the right to:

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

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

(iii) Seek consent to communicate privately and
 without restriction with any participant or resident,

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regardless of age;

2 (iv) Inspect <u>and copy</u> the clinical and other 3 records of a participant or resident, regardless of 4 age, with the express written consent of the 5 participant or resident;

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

11 (vi) Subject to permission of the participant or 12 resident requesting services or his or her 13 representative, enter a home or community-based 14 setting.

(2) "Long Term Care Facility" means (i) any facility 15 as defined by Section 1-113 of the Nursing Home Care Act, 16 17 as now or hereafter amended; (ii) any skilled nursing facility or a nursing facility which meets 18 the 19 requirements of Section 1819(a), (b), (c), and (d) or 20 Section 1919(a), (b), (c), and (d) of the Social Security Act, as now or hereafter amended (42 U.S.C. 1395i-3(a), 21 22 (b), (c), and (d) and 42 U.S.C. 1396r(a), (b), (c), and 23 (d)); (iii) any facility as defined by Section 1-113 of 24 the ID/DD Community Care Act, as now or hereafter amended; 25 (iv) any facility as defined by Section 1-113 of MC/DD 26 Act, as now or hereafter amended; and (v) any facility

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licensed under Section 4-105 or 4-201 of the Specialized
 Mental Health Rehabilitation Act of 2013, as now or
 hereafter amended.

4 (2.5) "Assisted living establishment" and "shared 5 housing establishment" have the meanings given those terms 6 in Section 10 of the Assisted Living and Shared Housing 7 Act.

8 (2.7) "Supportive living facility" means a facility 9 established under Section 5-5.01a of the Illinois Public 10 Aid Code.

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

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

(3.1) "Ombudsman" means any designated representative 18 19 of the State Long Term Care Ombudsman Program; provided 20 that the representative, whether he is paid for or 21 volunteers his ombudsman services, shall be qualified and 22 designated by the Office to perform the duties of an 23 ombudsman as specified by the Department in rules and in 24 accordance with the provisions of the Older Americans Act 25 of 1965, as now or hereafter amended.

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(4) "Participant" means an older person aged 60 or

over or an adult with a disability aged 18 through 59 who
 is eligible for services under any of the following:

3 (i) A medical assistance waiver administered by4 the State.

5 (ii) A managed care organization providing care 6 coordination and other services to seniors and persons 7 with disabilities.

8 (5) "Resident" means an older person aged 60 or over 9 or an adult with a disability aged 18 through 59 who 10 resides in a long-term care facility.

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

The Department, in consultation with the Office, shall 18 19 promulgate administrative rules in accordance with the 20 provisions of the Older Americans Act of 1965, as now or 21 hereafter amended, to establish the responsibilities of the 22 Department and the Office of State Long Term Care Ombudsman 23 designated regional Ombudsman and the programs. The 24 administrative rules shall include the responsibility of the 25 Office and designated regional programs to investigate and 26 resolve complaints made by or on behalf of residents of long

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1 term care facilities, supportive living facilities, and living and shared housing establishments, 2 assisted and participants residing in their own homes or community-based 3 4 settings, including the option to serve residents and 5 participants under the age of 60, relating to actions, 6 inaction, or decisions of providers, or their representatives, of such facilities and establishments, of public agencies, or 7 of social services agencies, which may adversely affect the 8 9 health, safety, welfare, or rights of such residents and 10 participants. The Office and designated regional programs may 11 represent all residents and participants, but are not required by this Act to represent persons under 60 years of age, except 12 13 to the extent required by federal law. When necessary and 14 appropriate, representatives of the Office shall refer 15 complaints to the appropriate regulatory State agency. The 16 Department, in consultation with the Office, shall cooperate with the Department of Human Services and other State agencies 17 18 in providing information and training to designated regional 19 long term care ombudsman programs about the appropriate 20 assessment and treatment (including information about 21 appropriate supportive services, treatment options, and 22 assessment of rehabilitation potential) of the participants 23 they serve.

The State Long Term Care Ombudsman and all other ombudsmen, as defined in paragraph (3.1) of subsection (b) must submit to background checks under the Health Care Worker 10300HB2858sam001 -7- LRB103 26814 KTG 61732 a

Background Check Act and receive training, as prescribed by 1 the Illinois Department on Aging, before visiting facilities, 2 3 private homes, or community-based settings. The training must 4 include information specific to assisted living 5 establishments, supportive living facilities, shared housing establishments, private homes, and community-based settings 6 and to the rights of residents and participants guaranteed 7 8 under the corresponding Acts and administrative rules.

9 (c-5) Consumer Choice Information Reports. The Office 10 shall:

11 (1) In collaboration with the Attorney General, create a Consumer Choice Information Report form to be completed 12 13 by all licensed long term care facilities to aid 14 Illinoisans and their families in making informed choices 15 about long term care. The Office shall create a Consumer Choice Information Report for each type of licensed long 16 term care facility. The Office shall collaborate with the 17 Attorney General and the Department of Human Services to 18 19 create a Consumer Choice Information Report form for 20 facilities licensed under the ID/DD Community Care Act or the MC/DD Act. 21

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

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(A) Medical Care, Services, and Treatment.

(B) Special Services and Amenities. 1 2 (C) Staffing. 3 (D) Facility Statistics and Resident Demographics. (E) Ownership and Administration. 4 5 (F) Safety and Security. (G) Meals and Nutrition. 6 7 (H) Rooms, Furnishings, and Equipment. 8 (I) Family, Volunteer, and Visitation Provisions. 9 (3) Make this information accessible to the public, 10 including on the Internet by means of a hyperlink on the 11 Office's World Wide Web home page. Information about 12 facilities licensed under the ID/DD Community Care Act or 13 the MC/DD Act shall be made accessible to the public by the 14 Department of Human Services, including on the Internet by 15 means of a hyperlink on the Department of Human Services' "For Customers" website. 16

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

20 (5) Request a new report from any licensed facility21 whenever it deems necessary.

(6) Include in the Office's Consumer Choice
Information Report for each type of licensed long term
care facility additional information on each licensed long
term care facility in the State of Illinois, including
information regarding each facility's compliance with the

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relevant State and federal statutes, rules, and standards;
 customer satisfaction surveys; and information generated
 from quality measures developed by the Centers for
 Medicare and Medicaid Services.

(d) Access and visitation rights.

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(1) In accordance with subparagraphs (A) and (E) of 6 paragraph (3) of subsection (c) of Section 1819 and 7 8 subparagraphs (A) and (E) of paragraph (3) of subsection 9 (c) of Section 1919 of the Social Security Act, as now or 10 hereafter amended (42 U.S.C. 1395i-3 (c)(3)(A) and (E) and 42 U.S.C. 1396r (c) (3) (A) and (E)), and Section 712 of the 11 Older Americans Act of 1965, as now or hereafter amended 12 13 (42 U.S.C. 3058f), a long term care facility, supportive 14 living facility, assisted living establishment, and shared 15 housing establishment must:

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

(ii) permit representatives of the Office, with 18 19 the permission of the resident, the resident's legal 20 representative, or the resident's legal guardian, to 21 examine and copy a resident's clinical and other 22 records, regardless of the age of the resident, and if 23 a resident is unable to consent to such review, and has 24 no legal quardian, permit representatives of the 25 Office appropriate access, as defined by the 26 Department, in consultation with the Office, in administrative rules, to the resident's records; and (iii) permit a representative of the Program to communicate privately and without restriction with any participant who consents to the communication regardless of the consent of, or withholding of consent by, a legal guardian or an agent named in a power of attorney executed by the participant.

8 (2) Each long term care facility, supportive living 9 facility, assisted living establishment, and shared 10 housing establishment shall display, in multiple, 11 conspicuous public places within the facility accessible to both visitors and residents and in an easily readable 12 13 format, the address and phone number of the Office of the 14 Long Term Care Ombudsman, in a manner prescribed by the 15 Office.

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

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(f) Business offenses.

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(1) No person shall:

(i) Intentionally prevent, interfere with, or
attempt to impede in any way any representative of the
Office in the performance of his official duties under

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this Act and the Older Americans Act of 1965; or

2 (ii) Intentionally retaliate, discriminate 3 against, or effect reprisals against any long term 4 care facility resident or employee for contacting or 5 providing information to any representative of the 6 Office.

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

9 (3) The State Long Term Care Ombudsman shall notify 10 the State's Attorney of the county in which the long term 11 care facility, supportive living facility, or assisted 12 living or shared housing establishment is located, or the 13 Attorney General, of any violations of this Section.

14 (a) Confidentiality of records and identities. The 15 Department shall establish procedures for the disclosure by 16 the State Ombudsman or the regional ombudsmen entities of files maintained by the program. The procedures shall provide 17 18 that the files and records may be disclosed only at the 19 discretion of the State Long Term Care Ombudsman or the person 20 designated by the State Ombudsman to disclose the files and 21 records, and the procedures shall prohibit the disclosure of 22 the identity of any complainant, resident, participant, 23 witness, or employee of a long term care provider unless:

(1) the complainant, resident, participant, witness,
 or employee of a long term care provider or his or her
 legal representative consents to the disclosure and the

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## consent is in writing;

2 (2) the complainant, resident, participant, witness, 3 or employee of a long term care provider gives consent 4 orally; and the consent is documented contemporaneously in 5 writing in accordance with such requirements as the 6 Department shall establish; or

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(3) the disclosure is required by court order.

8 (h) Legal representation. The Attorney General shall 9 provide legal representation to any representative of the 10 Office against whom suit or other legal action is brought in 11 connection with the performance of the representative's 12 official duties, in accordance with the State Employee 13 Indemnification Act.

(i) Treatment by prayer and spiritual means. Nothing in 14 15 this Act shall be construed to authorize or require the 16 medical supervision, regulation or control of remedial care or treatment of any resident in a long term care facility 17 18 operated exclusively by and for members or adherents of any church or religious denomination the tenets and practices of 19 20 which include reliance solely upon spiritual means through 21 prayer for healing.

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

(k) Each Regional Ombudsman may, in accordance with rules 2 promulgated by the Office, establish a multi-disciplinary team 3 4 to act in an advisory role for the purpose of providing 5 professional knowledge and expertise in handling complex abuse, neglect, and advocacy issues involving participants. 6 Each multi-disciplinary team may consist of one or more 7 8 volunteer representatives from any combination of at least 7 9 members from the following professions: banking or finance; 10 disability care; health care; pharmacology; law; law 11 enforcement; emergency responder; mental health care; clergy; medical examiner; substance abuse; domestic 12 coroner or 13 violence; sexual assault; or other related fields. To support 14 multi-disciplinary teams in this role, law enforcement 15 agencies and coroners or medical examiners shall supply 16 records as may be requested in particular cases. The Regional Ombudsman, or his or her designee, of the area in which the 17 18 multi-disciplinary team is created shall be the facilitator of 19 the multi-disciplinary team.

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

Section 10. The Adult Protective Services Act is amended
by changing Section 2 as follows:

23 (320 ILCS 20/2) (from Ch. 23, par. 6602)
24 Sec. 2. Definitions. As used in this Act, unless the

1 context requires otherwise:

(a) "Abandonment" means the desertion or willful forsaking 2 3 of an eligible adult by an individual responsible for the care 4 and custody of that eligible adult under circumstances in 5 which a reasonable person would continue to provide care and custody. Nothing in this Act shall be construed to mean that an 6 eligible adult is a victim of abandonment because of health 7 8 care services provided or not provided by licensed health care 9 professionals.

10 (a-1) "Abuse" means causing any physical, mental or sexual 11 injury to an eligible adult, including exploitation of such 12 adult's financial resources, and abandonment.

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

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

23 (a-5) "Abuser" means a person who abuses, abandons,
 24 neglects, or financially exploits an eligible adult.

(a-6) "Adult with disabilities" means a person aged 18
 through 59 who resides in a domestic living situation and

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whose disability as defined in subsection (c-5) impairs his or her ability to seek or obtain protection from abuse, abandonment, neglect, or exploitation.

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

10 (b) "Department" means the Department on Aging of the11 State of Illinois.

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

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

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

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

24 (1.5) A facility licensed under the ID/DD Community
 25 Care Act;

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(1.6) A facility licensed under the MC/DD Act;

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

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

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

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

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(f-5) "Mandated reporter" means any of the following

1 persons while engaged in carrying out their professional 2 duties:

3 (1) a professional or professional's delegate while engaged in: (i) social services, (ii) law enforcement, 4 5 (iii) education, (iv) the care of an eligible adult or eligible adults, or (v) any of the occupations required to 6 be licensed under the Behavior Analyst Licensing Act, the 7 Clinical Psychologist Licensing Act, the Clinical Social 8 9 Work and Social Work Practice Act, the Illinois Dental 10 Practice Act, the Dietitian Nutritionist Practice Act, the 11 Marriage and Family Therapy Licensing Act, the Medical Practice Act of 1987, the Naprapathic Practice Act, the 12 13 Practice Act, the Nursing Home Administrators Nurse 14 Licensing and Disciplinary Act, the Illinois Occupational 15 Therapy Practice Act, the Illinois Optometric Practice Act 16 of 1987, the Pharmacy Practice Act, the Illinois Physical Therapy Act, the Physician Assistant Practice Act of 1987, 17 18 Podiatric Medical Practice Act of 1987, the the 19 Respiratory Care Practice Act, the Professional Counselor 20 and Clinical Professional Counselor Licensing and Practice 21 Act, the Illinois Speech-Language Pathology and Audiology 22 Practice Act, the Veterinary Medicine and Surgery Practice 23 Act of 2004, and the Illinois Public Accounting Act;

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

1 (2) an employee of a vocational rehabilitation 2 facility prescribed or supervised by the Department of 3 Human Services;

4 (3) an administrator, employee, or person providing
5 services in or through an unlicensed community based
6 facility;

7 (4) any religious practitioner who provides treatment 8 by prayer or spiritual means alone in accordance with the 9 tenets and practices of a recognized church or religious 10 denomination, except as to information received in any 11 confession or sacred communication enjoined by the 12 discipline of the religious denomination to be held 13 confidential;

14 (5) field personnel of the Department of Healthcare 15 and Family Services, Department of Public Health, and 16 Department of Human Services, and any county or municipal 17 health department;

(6) personnel of the Department of Human Services, the 18 19 Guardianship and Advocacy Commission, the State Fire 20 Marshal, local fire departments, the Department on Aging 21 and its subsidiary Area Agencies on Aging and provider 22 agencies, except the State Long Term Care Ombudsman and 23 any of his or her representatives or volunteers where 24 prohibited from making such a report pursuant to 45 CFR 25 1324.11(e)(3)(iv); and the Office of State Long Term Care 26 Ombudsman;

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1 (7) any employee of the State of Illinois not 2 otherwise specified herein who is involved in providing 3 services to eligible adults, including professionals 4 providing medical or rehabilitation services and all other 5 persons having direct contact with eligible adults;

6 (8) a person who performs the duties of a coroner or 7 medical examiner; or

8 (9) a person who performs the duties of a paramedic or
9 an emergency medical technician.

10 "Neglect" means another individual's failure to (q) provide an eligible adult with or willful withholding from an 11 eligible adult the necessities of life including, but not 12 limited to, food, clothing, shelter or health care. This 13 14 subsection does not create any new affirmative duty to provide 15 support to eligible adults. Nothing in this Act shall be 16 construed to mean that an eligible adult is a victim of neglect because of health care services provided or not provided by 17 18 licensed health care professionals.

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

26 (i) "Regional administrative agency" means any public or

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1 nonprofit agency in a planning and service area that provides 2 regional oversight and performs functions as set forth in subsection (b) of Section 3 of this Act. The Department shall 3 4 designate an Area Agency on Aqinq as the regional 5 administrative agency or, in the event the Area Agency on 6 Aging in that planning and service area is deemed by the Department to be unwilling or unable to provide those 7 8 functions, the Department may serve as the regional 9 administrative agency or designate another qualified entity to 10 serve as the regional administrative agency; any such 11 designation shall be subject to terms set forth by the Department. 12

(i-5) "Self-neglect" means a condition that is the result 13 14 of an eligible adult's inability, due to physical or mental 15 impairments, or both, or a diminished capacity, to perform 16 essential self-care tasks that substantially threaten his or her own health, including: providing essential food, clothing, 17 shelter, and health care; and obtaining goods and services 18 19 necessary to maintain physical health, mental health, 20 emotional well-being, and general safety. The term includes 21 compulsive hoarding, which is characterized by the acquisition and retention of large quantities of items and materials that 22 23 an extensively cluttered living produce space, which 24 significantly impairs the performance of essential self-care 25 tasks or otherwise substantially threatens life or safety.

26 (j) "Substantiated case" means a reported case of alleged

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1 or suspected abuse, abandonment, neglect, financial 2 exploitation, or self-neglect in which a provider agency, 3 after assessment, determines that there is reason to believe 4 abuse, abandonment, neglect, or financial exploitation has 5 occurred.

6 (k) "Verified" means a determination that there is "clear 7 and convincing evidence" that the specific injury or harm 8 alleged was the result of abuse, abandonment, neglect, or 9 financial exploitation.

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