103RD GENERAL ASSEMBLY

State of Illinois

2023 and 2024

HB4346

Introduced 1/16/2024, by Rep. Bob Morgan

SYNOPSIS AS INTRODUCED:

20 ILCS 105/3.11 20 ILCS 105/4.01 20 ILCS 105/4.02 20 ILCS 105/5.03 new

from Ch. 23, par. 6104.01

Amends the Illinois Act on the Aging. In provisions concerning the Community Care Program (program), removes from the list of program services clearinghouse information provided by senior citizen home owners who want to rent rooms to or share living space with other senior citizens. In a provision requiring the Department on Aging to perform certain actions to increase the effectiveness of the program, removes a requirement that the Department ensure the determination of need tool is accurate in determining program participants' level of need. In a provision concerning pre-service certification for in-home workers who provide housekeeping or home aide services, requires employing agencies to pay wages to in-home workers for pre-service and in-service training. Provides that the Department may authorize (rather than shall delay) program services until an applicant is determined eligible for medical assistance under the Illinois Public Aid Code. Removes a provision requiring the Department to implement co-payments under the program. Requires the Department to make annual (rather than quarterly) reports on care coordination unit performance and adherence to service guidelines. Removes expired rate levels. Requires the Department to pay an enhanced rate under the Community Care Program to those in-home service provider agencies that offer health insurance coverage as a benefit to their direct service worker employees. Provides that all final administrative decisions of the Department are subject to judicial review. Makes other changes.

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AN ACT concerning State government.

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

4 Section 5. The Illinois Act on the Aging is amended by 5 changing Sections 3.11, 4.01, and 4.02 and by adding Section 6 5.03 as follows:

7 (20 ILCS 105/3.11)

Sec. 3.11. Greatest social need. "Greatest For the 8 9 purposes of 89 Ill. Adm. Code 210.50, "greatest social need" means the need caused by noneconomic factors that restrict an 10 individual's ability to perform normal daily tasks or that 11 threaten his or her capacity to live independently. These 12 factors include, but are not limited to, physical or mental 13 14 disability, language barriers, and cultural or social isolation caused by, among other things, racial and ethnic 15 16 status, sexual orientation, gender identity, gender 17 expression, or HIV status.

18 (Source: P.A. 101-325, eff. 8-9-19.)

(20 ILCS 105/4.01) (from Ch. 23, par. 6104.01)
Sec. 4.01. Additional powers and duties of the Department.
In addition to powers and duties otherwise provided by law,
the Department shall have the following powers and duties:

1 (1) To evaluate all programs, services, and facilities for 2 the aged and for minority senior citizens within the State and 3 determine the extent to which present public or private 4 programs, services and facilities meet the needs of the aged.

5 (2) To coordinate and evaluate all programs, services, and 6 facilities for the Aging and for minority senior citizens 7 presently furnished by State agencies and make appropriate 8 recommendations regarding such services, programs and 9 facilities to the Governor and/or the General Assembly.

10 (2-a) То request, receive, and share information 11 electronically through the use of data-sharing agreements for 12 the purpose of (i) establishing and verifying the initial and 13 continuing eligibility of older adults to participate in programs administered by the Department; (ii) 14 maximizing 15 federal financial participation in State assistance 16 expenditures; and (iii) investigating allegations of fraud or 17 other abuse of publicly funded benefits. Notwithstanding any other law to the contrary, but only for the limited purposes 18 19 identified in the preceding sentence, this paragraph (2-a) 20 expressly authorizes the exchanges of income, identification, 21 and other pertinent eligibility information by and among the 22 Department and the Social Security Administration, the 23 Employment Security, Department of the Department of Family Services, the Department of Human 24 Healthcare and 25 Services, the Department of Revenue, the Secretary of State, 26 the U.S. Department of Veterans Affairs, and any other

1 governmental entity. The confidentiality of information 2 otherwise shall be maintained as required by law. In addition, 3 the Department on Aging shall verify employment information at 4 the request of a community care provider for the purpose of 5 ensuring program integrity under the Community Care Program.

6 (3) To function as the sole State agency to develop a 7 comprehensive plan to meet the needs of the State's senior 8 citizens and the State's minority senior citizens.

9 (4) To receive and disburse State and federal funds made 10 available directly to the Department including those funds 11 made available under the Older Americans Act and the Senior 12 Community Service Employment Program for providing services 13 for senior citizens and minority senior citizens or for 14 purposes related thereto, and shall develop and administer any 15 State Plan for the Aging required by federal law.

16 (5) To solicit, accept, hold, and administer in behalf of 17 the State any grants or legacies of money, securities, or 18 property to the State of Illinois for services to senior 19 citizens and minority senior citizens or purposes related 20 thereto.

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

(7) To promote community education regarding the problems
 of senior citizens and minority senior citizens through
 institutes, publications, radio, television and the local

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1 press.

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

6 (9) To establish and maintain information and referral 7 sources throughout the State when not provided by other 8 agencies.

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

11 (11) To make and enforce rules and regulations necessary 12 and proper to the performance of its duties.

13 (12) To establish and fund programs or projects or 14 experimental facilities that are specially designed as 15 alternatives to institutional care.

16 (13) To develop a training program to train the counselors 17 presently employed by the Department's aging network to 18 provide Medicare beneficiaries with counseling and advocacy in 19 Medicare, private health insurance, and related health care 20 coverage plans. The Department shall report to the General 21 Assembly on the implementation of the training program on or 22 before December 1, 1986.

(14) To make a grant to an institution of higher learning to study the feasibility of establishing and implementing an affirmative action employment plan for the recruitment, hiring, training and retraining of persons 60 or more years old for jobs for which their employment would not be precluded
 by law.

3 (15)To present one award annually in each of the categories of community service, education, the performance 4 5 and graphic arts, and the labor force to outstanding Illinois senior citizens and minority senior citizens in recognition of 6 their individual contributions to either community service, 7 8 education, the performance and graphic arts, or the labor 9 force. The awards shall be presented to 4 senior citizens and 10 minority senior citizens selected from a list of 44 nominees 11 compiled annually by the Department. Nominations shall be 12 solicited from senior citizens' service providers, area 13 agencies on aging, senior citizens' centers, and senior citizens' organizations. If there are no nominations in a 14 category, the Department may award a second person in one of 15 16 the remaining categories. The Department shall establish a 17 central location within the State to be designated as the Senior Illinoisans Hall of Fame for the public display of all 18 19 the annual awards, or replicas thereof.

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

26 (17) (Blank).

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(18) To develop a pamphlet in English and Spanish which 1 2 may be used by physicians licensed to practice medicine in all 3 of its branches pursuant to the Medical Practice Act of 1987, pharmacists licensed pursuant to the Pharmacy Practice Act, 4 5 and Illinois residents 65 years of age or older for the purpose 6 physicians, pharmacists, of assisting and patients in 7 monitoring prescriptions provided by various physicians and to 8 aid persons 65 years of age or older in complying with 9 directions for proper use of pharmaceutical prescriptions. The 10 pamphlet may provide space for recording information including 11 but not limited to the following: 12 (a) name and telephone number of the patient; 13 (b) name and telephone number of the prescribing 14 physician; 15 (c) date of prescription; 16 (d) name of drug prescribed; 17 (e) directions for patient compliance; and (f) name and telephone number of dispensing pharmacy. 18 19 In developing the pamphlet, the Department shall consult 20 with the Illinois State Medical Society, the Center for Minority Health Services, the Illinois Pharmacists Association 21 22 and senior citizens organizations. The Department shall 23 distribute the pamphlets to physicians, pharmacists and persons 65 years of age or older or various senior citizen 24 25 organizations throughout the State.

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26 (19) To conduct a study of the feasibility of implementing

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1 the Senior Companion Program throughout the State.

2 (20) The reimbursement rates paid through the community 3 care program for chore housekeeping services and home care 4 aides shall be the same.

5 (21) From funds appropriated to the Department from the 6 Meals on Wheels Fund, a special fund in the State treasury that 7 is hereby created, and in accordance with State and federal 8 guidelines and the intrastate funding formula, to make grants 9 to area agencies on aging, designated by the Department, for 10 the sole purpose of delivering meals to homebound persons 60 11 years of age and older.

12 (22) To distribute, through its area agencies on aging, 13 information alerting seniors on safety issues regarding 14 emergency weather conditions, including extreme heat and cold, 15 flooding, tornadoes, electrical storms, and other severe storm 16 weather. The information shall include all necessary 17 instructions for safety and all emergency telephone numbers of organizations that will provide additional information and 18 19 assistance.

20 (23) To develop guidelines for the organization and implementation of Volunteer Services Credit Programs to be 21 22 administered by Area Agencies on Aging or community based 23 senior service organizations. The Department shall hold public 24 hearings on the proposed guidelines for public comment, 25 suggestion, and determination of public interest. The 26 quidelines shall be based on the findings of other states and

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of community organizations in Illinois that are currently operating volunteer services credit programs or demonstration volunteer services credit programs. The Department shall offer guidelines for all aspects of the programs including, but not limited to, the following:

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

7 (b) types of services to be received upon the
8 redemption of service credits;

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

11 (d) methods of tracking service credits earned and 12 service credits redeemed;

13 (e) issues of time limits for redemption of service14 credits;

15

(f) methods of recruitment of volunteers;

16 (g) utilization of community volunteers, community 17 service groups, and other resources for delivering 18 services to be received by service credit program clients;

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

22

(i) volunteer screening and qualifications.

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

(24) To function as the sole State agency to receive and
disburse State and federal funds for providing adult

protective services in a domestic living situation in
 accordance with the Adult Protective Services Act.

3 (25) To hold conferences, trainings, and other programs for which the Department shall determine by rule a reasonable 4 fee to cover related administrative costs. Rules to implement 5 the fee authority granted by this paragraph (25) must be 6 adopted in accordance with all provisions of the Illinois 7 8 Administrative Procedure Act and all rules and procedures of 9 the Joint Committee on Administrative Rules; any purported 10 rule not so adopted, for whatever reason, is unauthorized. 11 (Source: P.A. 98-8, eff. 5-3-13; 98-49, eff. 7-1-13; 98-380, 12 eff. 8-16-13; 98-756, eff. 7-16-14; 99-331, eff. 1-1-16.)

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(20 ILCS 105/4.02)

14 Sec. 4.02. Community Care Program. The Department shall 15 establish a program of services to prevent unnecessary 16 institutionalization of persons age 60 and older in need of long term care or who are established as persons who suffer 17 from Alzheimer's disease or a related disorder under the 18 19 Alzheimer's Disease Assistance Act, thereby enabling them to 20 remain in their own homes or in other living arrangements. 21 Such preventive services, which may be coordinated with other 22 programs for the aged and monitored by area agencies on aging 23 in cooperation with the Department, may include, but are not 24 limited to, any or all of the following:

25

(a) (blank);

1	(b) (blank);
2	(c) home care aide services;
3	(d) personal assistant services;
4	(e) adult day services;
5	(f) home-delivered meals;
6	(g) education in self-care;
7	(h) personal care services;
8	(i) adult day health services;
9	(j) habilitation services;
10	(k) respite care;
11	(k-5) community reintegration services;
12	(k-6) flexible senior services;
13	(k-7) medication management;
14	(k-8) emergency home response;
15	(1) other nonmedical social services that may enable
16	the person to become self-supporting; or
17	(m) <u>(blank).</u> clearinghouse for information provided by
18	senior citizen home owners who want to rent rooms to or
19	share living space with other senior citizens.
20	The Department shall establish eligibility standards for
21	such services. In determining the amount and nature of
22	services for which a person may qualify, consideration shall

services for which a person may qualify, consideration shall not be given to the value of cash, property, or other assets held in the name of the person's spouse pursuant to a written agreement dividing marital property into equal but separate shares or pursuant to a transfer of the person's interest in a home to his spouse, provided that the spouse's share of the marital property is not made available to the person seeking such services.

4 <u>The</u> Beginning January 1, 2008, the Department shall 5 require as a condition of eligibility that all new financially 6 eligible applicants apply for and enroll in medical assistance 7 under Article V of the Illinois Public Aid Code in accordance 8 with rules promulgated by the Department.

9 The Department shall, in conjunction with the Department 10 of Public Aid (now Department of Healthcare and Family 11 Services), seek appropriate amendments under Sections 1915 and 12 1924 of the Social Security Act. The purpose of the amendments shall be to extend eligibility for home and community based 13 services under Sections 1915 and 1924 of the Social Security 14 15 Act to persons who transfer to or for the benefit of a spouse those amounts of income and resources allowed under Section 16 17 1924 of the Social Security Act. Subject to the approval of such amendments, the Department shall extend the provisions of 18 Section 5-4 of the Illinois Public Aid Code to persons who, but 19 20 for the provision of home or community-based services, would require the level of care provided in an institution, as is 21 22 provided for in federal law. Those persons no longer found to 23 be eligible for receiving noninstitutional services due to 24 changes in the eligibility criteria shall be given 45 days 25 notice prior to actual termination. Those persons receiving 26 notice of termination may contact the Department and request

the determination be appealed at any time during the 45 day 1 2 notice period. The target population identified for the 3 purposes of this Section are persons age 60 and older with an identified service need. Priority shall be given to those who 4 5 are at imminent risk of institutionalization. The services shall be provided to eligible persons age 60 and older to the 6 extent that the cost of the services together with the other 7 personal maintenance expenses of the persons are reasonably 8 9 related to the standards established for care in a group 10 facility appropriate to the person's condition. These 11 non-institutional services, pilot projects, or experimental 12 facilities may be provided as part of or in addition to those authorized by federal law or those funded and administered by 13 14 the Department of Human Services. The Departments of Human 15 Services, Healthcare and Family Services, Public Health, 16 Veterans' Affairs, and Commerce and Economic Opportunity and 17 other appropriate agencies of State, federal, and local governments shall cooperate with the Department on Aging in 18 the establishment and development of the non-institutional 19 20 services. The Department shall require an annual audit from all personal assistant and home care aide vendors contracting 21 22 with the Department under this Section. The annual audit shall 23 assure that each audited vendor's procedures are in compliance with Department's financial reporting guidelines requiring an 24 25 administrative and employee wage and benefits cost split as 26 defined in administrative rules. The audit is a public record

under the Freedom of Information Act. The Department shall 1 2 execute, relative to the nursing home prescreening project, 3 written inter-agency agreements with the Department of Human Services and the Department of Healthcare and Family Services, 4 5 to effect the following: (1) intake procedures and common eligibility criteria for those persons who are receiving 6 7 non-institutional services; and (2) the establishment and 8 development of non-institutional services in areas of the 9 State where they are not currently available or are undeveloped. On and after July 1, 1996, all nursing home 10 11 prescreenings for individuals 60 years of age or older shall 12 be conducted by the Department.

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

19 The Department is authorized to establish a system of 20 recipient copayment for services provided under this Section, 21 such copayment to be based upon the recipient's ability to pay 22 but in no case to exceed the actual cost of the services 23 provided. Additionally, any portion of a person's income which 24 is equal to or less than the federal poverty standard shall not 25 be considered by the Department in determining the copayment. 26 The level of such copayment shall be adjusted whenever

necessary to reflect any change in the officially designated
 federal poverty standard.

3 The Department, or the Department's authorized representative, may recover the amount of moneys expended for 4 5 services provided to or in behalf of a person under this Section by a claim against the person's estate or against the 6 7 estate of the person's surviving spouse, but no recovery may be had until after the death of the surviving spouse, if any, 8 9 and then only at such time when there is no surviving child who 10 is under age 21 or blind or who has a permanent and total 11 disability. This paragraph, however, shall not bar recovery, 12 at the death of the person, of moneys for services provided to the person or in behalf of the person under this Section to 13 14 which the person was not entitled; provided that such recovery 15 shall not be enforced against any real estate while it is 16 occupied as a homestead by the surviving spouse or other 17 dependent, if no claims by other creditors have been filed against the estate, or, if such claims have been filed, they 18 remain dormant for failure of prosecution or failure of the 19 20 claimant to compel administration of the estate for the 21 purpose of payment. This paragraph shall not bar recovery from 22 the estate of a spouse, under Sections 1915 and 1924 of the 23 Social Security Act and Section 5-4 of the Illinois Public Aid 24 Code, who precedes a person receiving services under this 25 Section in death. All moneys for services paid to or in behalf 26 of the person under this Section shall be claimed for recovery

1 from the deceased spouse's estate. "Homestead", as used in 2 this paragraph, means the dwelling house and contiguous real 3 estate occupied by a surviving spouse or relative, as defined 4 by the rules and regulations of the Department of Healthcare 5 and Family Services, regardless of the value of the property.

6 The Department shall increase the effectiveness of the 7 existing Community Care Program by:

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

10 (2) ensuring that care plans contain the services that 11 eligible participants need based on the number of days in 12 a month, not limited to specific blocks of time, as 13 identified by the comprehensive assessment tool selected 14 by the Department for use statewide, not to exceed the 15 total monthly service cost maximum allowed for each 16 service; the Department shall develop administrative rules 17 to implement this item (2);

18 (3) ensuring that the participants have the right to 19 choose the services contained in their care plan and to 20 direct how those services are provided, based on 21 administrative rules established by the Department;

(4) (blank); ensuring that the determination of need
tool is accurate in determining the participants' level of
need; to achieve this, the Department, in conjunction with
the Older Adult Services Advisory Committee, shall
institute a study of the relationship between the

1	Determination of Need scores, level of need, service cost
2	maximums, and the development and utilization of service
3	plans no later than May 1, 2008; findings and
4	recommendations shall be presented to the Governor and the
5	General Assembly no later than January 1, 2009;
6	recommendations shall include all needed changes to the
7	service cost maximums schedule and additional covered
8	services;
9	(5) ensuring that homemakers can provide personal care
10	services that may or may not involve contact with clients,
11	including <u>,</u> but not limited to:
12	(A) bathing;
13	(B) grooming;
14	(C) toileting;
15	(D) nail care;
16	(E) transferring;
17	(F) respiratory services;
18	(G) exercise; or
19	(H) positioning;
20	(6) ensuring that homemaker program vendors are not
21	restricted from hiring homemakers who are family members
22	of clients or recommended by clients; the Department may
23	not, by rule or policy, require homemakers who are family
24	members of clients or recommended by clients to accept
25	assignments in homes other than the client;
26	(7) ensuring that the State may access maximum federal

matching funds by seeking approval for the Centers for 1 2 Medicare and Medicaid Services for modifications to the 3 State's home and community based services waiver and additional waiver opportunities, including applying for 4 5 enrollment in the Balance Incentive Payment Program by May 1, 2013, in order to maximize federal matching funds; this 6 shall include, but not be limited to, modification that 7 reflects all changes in the Community Care Program 8 9 services and all increases in the services cost maximum;

10 (8) ensuring that the determination of need tool 11 accurately reflects the service needs of individuals with 12 Alzheimer's disease and related dementia disorders;

(9) ensuring that services are authorized accurately 13 14 and consistently for the Community Care Program (CCP); the 15 Department shall implement a Service Authorization policy 16 directive; the purpose shall be to ensure that eligibility 17 and services are authorized accurately and consistently in the CCP program; the policy directive shall clarify 18 19 service authorization guidelines to Care Coordination 20 Units and Community Care Program providers no later than May 1, 2013; 21

(10) working in conjunction with Care Coordination Units, the Department of Healthcare and Family Services, the Department of Human Services, Community Care Program providers, and other stakeholders to make improvements to the Medicaid claiming processes and the Medicaid

1 enrollment procedures or requirements as needed, 2 including, but not limited to, specific policy changes or 3 rules to improve the up-front enrollment of participants in the Medicaid program and specific policy changes or 4 5 rules to insure more prompt submission of bills to the 6 federal government to secure maximum federal matching 7 dollars as promptly as possible; the Department on Aging 8 shall have at least 3 meetings with stakeholders by 9 January 1, 2014 in order to address these improvements;

10 (11) requiring home care service providers to comply 11 with the rounding of hours worked provisions under the 12 federal Fair Labor Standards Act (FLSA) and as set forth 13 in 29 CFR 785.48(b) by May 1, 2013;

(12) implementing any necessary policy changes or promulgating any rules, no later than January 1, 2014, to assist the Department of Healthcare and Family Services in moving as many participants as possible, consistent with federal regulations, into coordinated care plans if a care coordination plan that covers long term care is available in the recipient's area; and

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(13) <u>(blank).</u> maintaining fiscal year 2014 rates at the same level established on January 1, 2013.

By January 1, 2009 or as soon after the end of the Cash and Counseling Demonstration Project as is practicable, the Department may, based on its evaluation of the demonstration project, promulgate rules concerning personal assistant 1 services, to include, but need not be limited to, 2 qualifications, employment screening, rights under fair labor 3 standards, training, fiduciary agent, and supervision requirements. All applicants shall be subject to 4 the 5 provisions of the Health Care Worker Background Check Act.

6 shall develop procedures to enhance The Department 7 availability of services on evenings, weekends, and on an 8 emergency basis to meet the respite needs of caregivers. 9 Procedures shall be developed to permit the utilization of 10 services in successive blocks of 24 hours up to the monthly 11 maximum established by the Department. Workers providing these 12 services shall be appropriately trained.

13 No Beginning on the effective date of this amendatory Act of 1991, no person may perform chore/housekeeping and home 14 15 care aide services under a program authorized by this Section 16 unless that person has been issued а certificate of 17 pre-service to do so by his or her employing agency. Information gathered to effect such certification shall 18 19 include (i) the person's name, (ii) the date the person was hired by his or her current employer, and (iii) the training, 20 including dates and levels. Persons engaged in the program 21 22 authorized by this Section before the effective date of this 23 amendatory Act of 1991 shall be issued a certificate of all pre-service pre- and in-service training from his or her 24 employer upon submitting the necessary information. 25 The 26 employing agency shall be required to retain records of all

staff <u>pre-service</u> pre- and in-service training, and shall provide such records to the Department upon request and upon termination of the employer's contract with the Department. In addition, the employing agency is responsible for the issuance of certifications of in-service training completed to their employees <u>as well as paying wages to the in-home workers for</u> <u>pre-service and in-service training</u>.

8 The Department is required to develop a system to ensure 9 that persons working as home care aides and personal 10 assistants receive increases in their wages when the federal 11 minimum wage is increased by requiring vendors to certify that 12 they are meeting the federal minimum wage statute for home 13 care aides and personal assistants. An employer that cannot 14 ensure that the minimum wage increase is being given to home 15 care aides and personal assistants shall be denied any 16 increase in reimbursement costs.

17 The Community Care Program Advisory Committee is created in the Department on Aging. The Director shall appoint 18 individuals to serve in the Committee, who shall serve at 19 20 their own expense. Members of the Committee must abide by all applicable ethics laws. The Committee shall advise the 21 22 Department on issues related to the Department's program of 23 services to prevent unnecessary institutionalization. The Committee shall meet on a bi-monthly basis and shall serve to 24 25 identify and advise the Department on present and potential 26 issues affecting the service delivery network, the program's

to recommend 1 clients, and the Department and solution 2 strategies. Persons appointed to the Committee shall be appointed on, but not limited to, their own and their agency's 3 experience with the program, geographic representation, and 4 5 willingness to serve. The Director shall appoint members to 6 represent provider, advocacy, the Committee to policy 7 research, and other constituencies committed to the delivery 8 of high quality home and community-based services to older 9 adults. Representatives shall be appointed to ensure 10 representation from community care providers, including, but 11 limited to, adult day service providers, homemaker not 12 providers, case coordination and case management units, 13 emergency home response providers, statewide trade or labor 14 unions that represent home care aides and direct care staff, 15 area agencies on aging, adults over age 60, membership adults, 16 organizations representing older and other 17 organizational entities, providers of care, or individuals with demonstrated interest and expertise in the field of home 18 19 and community care as determined by the Director.

Nominations may be presented from any agency or State association with interest in the program. The Director, or his or her designee, shall serve as the permanent co-chair of the advisory committee. One other co-chair shall be nominated and approved by the members of the committee on an annual basis. Committee members' terms of appointment shall be for 4 years with one-quarter of the appointees' terms expiring each year.

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A member shall continue to serve until his or her replacement 1 2 is named. The Department shall fill vacancies that have a 3 remaining term of over one year, and this replacement shall occur through the annual replacement of expiring terms. The 4 5 Director shall designate Department staff to provide technical assistance and staff support to the committee. Department 6 7 representation shall not constitute membership of the 8 committee. All Committee papers, issues, recommendations, 9 reports, and meeting memoranda are advisory only. The 10 Director, or his or her designee, shall make a written report, 11 as requested by the Committee, regarding issues before the 12 Committee.

13 The Department on Aging and the Department of Human 14 Services shall cooperate in the development and submission of 15 an annual report on programs and services provided under this 16 Section. Such joint report shall be filed with the Governor 17 and the General Assembly on or before March 31 of the following 18 fiscal year.

19 The requirement for reporting to the General Assembly 20 shall be satisfied by filing copies of the report as required 21 by Section 3.1 of the General Assembly Organization Act and 22 filing such additional copies with the State Government Report 23 Distribution Center for the General Assembly as is required 24 under paragraph (t) of Section 7 of the State Library Act.

Those persons previously found eligible for receiving non-institutional services whose services were discontinued

under the Emergency Budget Act of Fiscal Year 1992, and who do 1 2 not meet the eligibility standards in effect on or after July 1, 1992, shall remain ineligible on and after July 1, 1992. 3 Those persons previously not required to cost-share and who 4 5 were required to cost-share effective March 1, 1992, shall continue to meet cost-share requirements on and after July 1, 6 7 1992. Beginning July 1, 1992, all clients will be required to 8 meet eligibility, cost-share, and other requirements and will 9 have services discontinued or altered when they fail to meet these requirements. 10

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

16 The Department shall implement an electronic service 17 verification based on global positioning systems or other 18 cost-effective technology for the Community Care Program no 19 later than January 1, 2014.

20 The Department shall require, as a condition of eligibility, application for enrollment in the medical 21 22 assistance program under Article V of the Illinois Public Aid Code (i) beginning August 1, 2013, if the Auditor General has 23 reported that the Department has failed to comply with the 24 reporting requirements of Section 2-27 of the Illinois State 25 26 Auditing Act; or (ii) beginning June 1, 2014, if the Auditor

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

5 The Department may authorize shall delay Community Care Program services until an applicant is determined eligible for 6 7 medical assistance under Article V of the Illinois Public Aid Code (i) beginning August 1, 2013, if the Auditor General has 8 9 reported that the Department has failed to comply with the reporting requirements of Section 2 27 of the Illinois State 10 11 Auditing Act; or (ii) beginning June 1, 2014, if the Auditor 12 General has reported that the Department has not undertaken the required actions listed in the report required by 13 subsection (a) of Section 2-27 of the Illinois State Auditing 14 15 Act.

16 The Department shall implement co payments for the 17 Community Care Program at the federally allowable maximum level (i) beginning August 1, 2013, if the Auditor General has 18 19 reported that the Department has failed to comply with the reporting requirements of Section 2-27 of the Illinois State 20 Auditing Act; or (ii) beginning June 1, 2014, if the Auditor 21 22 General has reported that the Department has not undertaken 23 the required actions listed in the report required bv subsection (a) of Section 2-27 of the Illinois State Auditing 24 25 Act.

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The Department shall continue to provide other Community

Care Program reports as required by statute, which shall
 <u>include an annual report on Care Coordination Unit performance</u>
 and adherence to service guidelines.

The Department shall conduct a quarterly review of Care 4 Coordination Unit performance and adherence to service 5 6 guidelines. The quarterly review shall be reported to the 7 Speaker of the House of Representatives, the Minority Leader of the House of Representatives, the President of the Senate, 8 9 and the Minority Leader of the Senate. The Department shall 10 collect and report longitudinal data on the performance of 11 each care coordination unit. Nothing in this paragraph shall 12 be construed to require the Department to identify specific 13 care coordination units.

In regard to community care providers, failure to comply 14 15 with Department on Aging policies shall be cause for 16 disciplinary action, including, but not limited to, 17 disgualification from serving Community Care Program clients. Each provider, upon submission of any bill or invoice to the 18 Department for payment for services rendered, shall include a 19 20 notarized statement, under penalty of perjury pursuant to Section 1-109 of the Code of Civil Procedure, that the 21 22 provider has complied with all Department policies.

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

1 maintenance system.

2 Within 30 days after July 6, 2017 (the effective date of Public Act 100-23), rates shall be increased to \$18.29 per 3 hour, for the purpose of increasing, by at least \$.72 per hour, 4 5 the wages paid by those vendors to their employees who provide homemaker services. The Department shall pay an enhanced rate 6 7 under the Community Care Program to those in home service provider agencies that offer health insurance coverage as 8 9 benefit to their direct service worker employees consistent 10 with the mandates of Public Act 95 713. For State fiscal years 11 2018 and 2019, the enhanced rate shall be \$1.77 per hour. The 12 rate shall be adjusted using actuarial analysis based on the cost of care, but shall not be set below \$1.77 per hour. The 13 Department shall adopt rules, including emergency rules under 14 subsections (y) and (bb) of Section 5-45 of the Illinois 15 16 Administrative Procedure Act, to implement the provisions of 17 this paragraph.

The Department shall pay an enhanced rate under the 18 Community Care Program to those in-home service provider 19 20 agencies that offer health insurance coverage as a benefit to their direct service worker employees pursuant to rules 21 22 adopted by the Department. Subject to federal approval, 23 beginning on January 1, 2024, rates for adult day services shall be increased to \$16.84 per hour and rates for each way 24 25 transportation services for adult day services shall be increased to \$12.44 per unit transportation. 26

Subject to federal approval, on and after January 1, 2024, 1 2 rates for homemaker services shall be increased to \$28.07 to sustain a minimum wage of \$17 per hour for direct service 3 workers. Rates in subsequent State fiscal years shall be no 4 5 lower than the rates put into effect upon federal approval. Providers of in-home services shall be required to certify to 6 7 the Department that they remain in compliance with the 8 mandated wage increase for direct service workers. Fringe 9 benefits, including, but not limited to, paid time off and 10 payment for training, health insurance, travel, or 11 transportation, shall not be reduced in relation to the rate 12 increases described in this paragraph.

13 The General Assembly finds it necessary to authorize an 14 aggressive Medicaid enrollment initiative designed to maximize 15 federal Medicaid funding for the Community Care Program which 16 produces significant savings for the State of Illinois. The 17 Department on Aging shall establish and implement a Community Care Program Medicaid Initiative. Under the Initiative, the 18 19 Department on Aging shall, at a minimum: (i) provide an 20 enhanced rate to adequately compensate care coordination units to enroll eligible Community Care Program clients into 21 22 Medicaid; (ii) use recommendations from a stakeholder 23 committee on how best to implement the Initiative; and (iii) establish requirements for State agencies to make enrollment 24 25 in the State's Medical Assistance program easier for seniors. 26 The Community Care Program Medicaid Enrollment Oversight

Subcommittee is created as a subcommittee of the Older Adult 1 2 Services Advisory Committee established in Section 35 of the Older Adult Services Act to make recommendations on how best 3 to increase the number of medical assistance recipients who 4 5 are enrolled in the Community Care Program. The Subcommittee shall consist of all of the following persons who must be 6 appointed within 30 days after June 4, 2018 (the effective 7 8 date of Public Act 100-587) this amendatory Act of the 100th 9 General Assembly:

- 10 (1) The Director of Aging, or his or her designee, who11 shall serve as the chairperson of the Subcommittee.
- 12 (2) One representative of the Department of Healthcare
 13 and Family Services, appointed by the Director of
 14 Healthcare and Family Services.
- 15 (3) One representative of the Department of Human
 16 Services, appointed by the Secretary of Human Services.
- 17 (4) One individual representing a care coordination18 unit, appointed by the Director of Aging.
- 19 (5) One individual from a non-governmental statewide
 20 organization that advocates for seniors, appointed by the
 21 Director of Aging.
- 22 (6) One individual representing Area Agencies on23 Aging, appointed by the Director of Aging.
- (7) One individual from a statewide association
 dedicated to Alzheimer's care, support, and research,
 appointed by the Director of Aging.

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

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

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

9 (11) One member of the Senate, who shall serve as 10 co-chairperson, appointed by the Minority Leader of the 11 Senate.

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

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

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

The Subcommittee shall provide oversight to the Community Care Program Medicaid Initiative and shall meet quarterly. At each Subcommittee meeting the Department on Aging shall provide the following data sets to the Subcommittee: (A) the number of Illinois residents, categorized by planning and service area, who are receiving services under the Community

and are enrolled in the State's Medical 1 Program Care 2 Assistance Program; (B) the number of Illinois residents, 3 categorized by planning and service area, who are receiving services under the Community Care Program, but are not 4 5 enrolled in the State's Medical Assistance Program; and (C) the number of Illinois residents, categorized by planning and 6 7 service area, who are receiving services under the Community 8 Care Program and are eligible for benefits under the State's 9 Medical Assistance Program, but are not enrolled in the 10 State's Medical Assistance Program. In addition to this data, 11 the Department on Aging shall provide the Subcommittee with 12 plans on how the Department on Aging will reduce the number of 13 Illinois residents who are not enrolled in the State's Medical Assistance Program but who are eligible for medical assistance 14 15 benefits. The Department on Aging shall enroll in the State's 16 Medical Assistance Program those Illinois residents who 17 receive services under the Community Care Program and are eligible for medical assistance benefits but are not enrolled 18 19 in the State's Medicaid Assistance Program. The data provided 20 to the Subcommittee shall be made available to the public via 21 the Department on Aging's website.

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

1 The Department on Aging, the Department of Human Services, 2 and the Department of Healthcare and Family Services shall 3 coordinate and implement a streamlined process for seniors to 4 access benefits under the State's Medical Assistance Program.

5 The Subcommittee shall collaborate with the Department of Human Services on the adoption of a uniform application 6 7 submission process. The Department of Human Services and any 8 other State agency involved with processing the medical 9 assistance application of any person enrolled in the Community 10 Care Program shall include the appropriate care coordination 11 unit in all communications related to the determination or 12 status of the application.

13 The Community Care Program Medicaid Initiative shall 14 provide targeted funding to care coordination units to help 15 seniors complete their applications for medical assistance 16 benefits. On and after July 1, 2019, care coordination units 17 shall receive no less than \$200 per completed application, which rate may be included in a bundled rate for initial intake 18 19 services when Medicaid application assistance is provided in 20 conjunction with the initial intake process for new program participants. 21

The Community Care Program Medicaid Initiative shall cease operation 5 years after <u>June 4, 2018 (the effective date of</u> <u>Public Act 100-587)</u> this amendatory Act of the 100th General Assembly, after which the Subcommittee shall dissolve.

26 Effective July 1, 2023, subject to federal approval, the

Department on Aging shall reimburse Care Coordination Units at 1 2 the following rates for case management services: \$252.40 for each initial assessment; \$366.40 for each initial assessment 3 with translation; \$229.68 for each redetermination assessment; 4 5 \$313.68 for each redetermination assessment with translation; \$200.00 for each completed application for medical assistance 6 7 benefits; \$132.26 for each face-to-face, choices-for-care screening; \$168.26 for each face-to-face, choices-for-care 8 9 screening with translation; \$124.56 for each 6-month, 10 face-to-face visit: \$132.00 for each MCO participant 11 eliqibility determination; and \$157.00 for each MCO 12 participant eligibility determination with translation.

13 (Source: P.A. 102-1071, eff. 6-10-22; 103-8, eff. 6-7-23;
14 103-102, Article 45, Section 45-5, eff. 1-1-24; 103-102,
15 Article 85, Section 85-5, eff. 1-1-24; 103-102, Article 90,
16 Section 90-5, eff. 1-1-24; revised 12-12-23.)

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(20 ILCS 105/5.03 new)

Sec. 5.03. Judicial review. All final administrative decisions of the Department are subject to judicial review in accordance with the provisions of the Administrative Review Law, and all rules adopted under the Administrative Review Law. The term "administrative decision" is defined as in Section 3-101 of the Code of Civil Procedure.

24 <u>Proceedings for judicial review shall be commenced in the</u> 25 <u>circuit court of the county in which the party applying for</u>

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- 1 review resides; however, if the party is not a resident of this
- 2 State, the venue shall be Sangamon County.