

AN ACT concerning LGBTQ older adults.

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

Section 5. The Illinois Act on the Aging is amended by changing Sections 3, 7.01, and 7.09 and by adding Sections 3.12, 3.13, 8.10, 8.11, and 8.12 as follows:

(20 ILCS 105/3) (from Ch. 23, par. 6103)

Sec. 3. As used in this Act, unless the context otherwise requires, the terms specified in Sections 3.01 through 3.13 ~~3.11~~ have the meanings ascribed to them in those Sections.

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

(20 ILCS 105/3.12 new)

Sec. 3.12. "Commission" means the Illinois Commission on LGBTQ Aging.

(20 ILCS 105/3.13 new)

Sec. 3.13. "LGBTQ older adults" means adults 55 years of age or older who are lesbian, gay, bisexual, transgender, intersex, gender non-conforming, Two-Spirit, non-binary, same-gender-loving, queer, or any other diverse sexual orientation or gender identity.

(20 ILCS 105/7.01) (from Ch. 23, par. 6107.01)

Sec. 7.01. The Council shall consist of 31 voting members, including: two Senators appointed by the President of the Senate; two Senators appointed by the Senate Minority Leader; two Representatives appointed by the Speaker of the House of Representatives; two Representatives appointed by the House Minority Leader; and twenty three citizen members, at least sixteen of whom shall be senior citizens. Of the citizen members, at least 7 shall represent underrepresented communities as follows:

(1) one member who is a lesbian, gay, bisexual, or queer individual;

(2) one member who is a transgender or gender-expansive individual;

(3) one member who is a person living with HIV;

(4) one member who is an African-American or Black individual;

(5) one member who is a Hispanic or Latino individual;

(6) one member who is an Asian-American or Pacific Islander individual; and

(7) one member who is an ethnically diverse individual.

(Source: P.A. 78-242.)

(20 ILCS 105/7.09) (from Ch. 23, par. 6107.09)

Sec. 7.09. The Council shall have the following powers and

duties:

(1) review and comment upon reports of the Department to the Governor and the General Assembly;

(2) prepare and submit to the Governor, the General Assembly and the Director an annual report evaluating the level and quality of all programs, services and facilities provided to the aging by State agencies;

(3) review and comment upon the comprehensive state plan prepared by the Department;

(4) review and comment upon disbursements by the Department of public funds to private agencies;

(5) recommend candidates to the Governor for appointment as Director of the Department;

(6) consult with the Director regarding the operations of the Department; and ~~and~~

(7) review and support implementation of the Commission's recommendations as identified in the Commission's Second Report, which shall be issued no later than March 30, 2025.

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

(Source: P.A. 100-1148, eff. 12-10-18.)

(20 ILCS 105/8.10 new)

Sec. 8.10. The Illinois Commission on LGBTQ Aging.

(a) Commission purpose. The Commission is created to investigate, analyze, and study the health, housing, financial, psychosocial, home-and-community-based services, assisted living, and long-term care needs of LGBTQ older adults and their caregivers. The Commission shall make recommendations to improve access to benefits, services, and supports for LGBTQ older adults and their caregivers. The Commission, in formulating its recommendations, shall take into account the best policies and practices in other states and jurisdictions. Specifically, the Commission shall:

(1) Examine the impact of State and local laws, policies, and regulations on LGBTQ older adults and make recommendations to ensure equitable access, treatment, care and benefits, and overall quality of life.

(2) Examine best practices for increasing access, reducing isolation, preventing abuse and exploitation, promoting independence and self-determination, strengthening caregiving, eliminating disparities, and improving overall quality of life for LGBTQ older adults.

(3) Examine the impact of race, ethnicity, sex assigned at birth, socioeconomic status, disability, sexual orientation, gender identity, and other characteristics on access to services for LGBTQ older

adults and make recommendations to ensure equitable access, treatment, care, and benefits and overall quality of life.

(4) Examine the experiences and needs of LGBTQ older adults living with HIV/AIDS and make recommendations to ensure equitable access, treatment, care, benefits, and overall quality of life.

(5) Examine strategies to increase provider awareness of the needs of LGBTQ older adults and their caregivers and to improve the competence of and access to treatment, services, and ongoing care, including preventive care.

(6) Examine the feasibility of developing statewide training curricula to improve provider competency in the delivery of culturally responsive health, housing, and long-term support services to LGBTQ older adults and their caregivers.

(7) Assess the funding and programming needed to enhance services to the growing population of LGBTQ older adults.

(8) Examine whether certain policies and practices, or the absence thereof, promote the premature admission of LGBTQ older adults to institutional care, and examine whether potential cost-savings exist for LGBTQ older adults as a result of providing lower cost and culturally responsive home and community-based alternatives to institutional care.

(9) Examine outreach protocols to reduce apprehension among LGBTQ older adults and caregivers of utilizing mainstream providers.

(10) Evaluate the implementation status of Public Act 101-325.

(11) Evaluate the implementation status of Public Act 102-543, examine statewide strategies for the collection of sexual orientation and gender identity data and the impact of these strategies on the provision of services to LGBTQ older adults, and conduct a statewide survey designed to approximate the number of LGBTQ older adults in the State and collect demographic information (if resources allow for the implementation of a survey instrument).

(b) Commission members.

(1) The Commission shall include at least all of the following persons who must be appointed by the Governor within 60 days after the effective date of this amendatory Act of the 102nd General Assembly:

(A) one member from a statewide organization that advocates for older adults;

(B) one member from a national organization that advocates for LGBTQ older adults;

(C) one member from a community-based, multi-site healthcare organization founded to serve LGBTQ people;

(D) the director of senior services from a

community center serving LGBTQ people, or the director's designee;

(E) one member from an HIV/AIDS service organization;

(F) one member from an organization that is a project incubator and think tank that is focused on action that leads to improved outcomes and opportunities for LGBTQ communities;

(G) one member from a labor organization that provides care and services for older adults in long-term care facilities;

(H) one member from a statewide association representing long-term care facilities;

(I) 5 members from organizations that serve Black, Asian-American, Pacific Islander, Indigenous, or Latinx LGBTQ people;

(J) one member from a statewide organization for people with disabilities; and

(K) 10 LGBTQ older adults, including at least:

(i) 3 members who are transgender or gender-expansive individuals;

(ii) 2 members who are older adults living with HIV;

(iii) one member who is Two-Spirit;

(iv) one member who is an African-American or Black individual;

- (v) one member who is a Latinx individual;
- (vi) one member who is an Asian-American or Pacific Islander individual; and
- (vii) one member who is an ethnically diverse individual.

(2) The following State agencies shall each designate one representative to serve as an ex officio member of the Commission: the Department, the Department of Public Health, the Department of Human Services, the Department of Healthcare and Family Services, and the Department of Veterans' Affairs.

(3) Appointing authorities shall ensure, to the maximum extent practicable, that the Commission is diverse with respect to race, ethnicity, age, sexual orientation, gender identity, gender expression, and geography.

(4) Members of the Commission shall serve until this Section is repealed. Members shall continue to serve until their successors are appointed. Any vacancy shall be filled by the appointing authority. Any vacancy occurring other than by the dissolution of the Commission shall be filled for the balance of the unexpired term. Members of the Commission shall serve without compensation but shall be reimbursed for expenses necessarily incurred in the performance of their duties.

(c) Commission organization. The Commission shall provide for its organization and procedure, including selection of the

chairperson and vice-chairperson. A majority of the Commission shall constitute a quorum for the transaction of business. Administrative and other support for the Commission shall be provided by the Department. Any State agency under the jurisdiction of the Governor shall provide testimony and information as directed by the Commission.

(d) Meetings and reports. The Commission shall:

(1) Hold at least one public meeting per quarter. Public meetings may be virtually conducted.

(2) No later than March 30, 2023, submit a First Report to the Illinois General Assembly that contains findings and recommendations, including any recommended legislation. The First Report shall be made available to the public on the Department's publicly accessible website.

(3) No later than March 30, 2025, submit a Second Report in the same manner as the First Report, containing updates to the findings and recommendations contained in the First Report. The Second Report shall be made available to the public on the Department's publicly accessible website.

The Department and Commission may collaborate with an institution of higher education in Illinois to compile the First Report and Second Report.

(e) This Section is repealed 3 years after the effective date of this amendatory Act of the 102nd General Assembly.

(20 ILCS 105/8.11 new)

Sec. 8.11. LGBTQ Older Adult Advocate.

(a) The Director shall designate an LGBTQ Older Adult Advocate to discharge the requirements of this Section. The LGBTQ Older Adult Advocate shall have the powers delegated to them by the Department, in addition to the powers set forth in this Section.

(b) The LGBTQ Older Adult Advocate shall:

(1) advocate for LGBTQ older adults and older adults living with HIV who experience barriers to accessing and utilizing services;

(2) ensure the needs and perspectives of LGBTQ older adults and older adults living with HIV are included and incorporated in the Department's decision-making and policymaking processes and throughout the Department's operations and programs;

(3) recommend to and assist providers and the public with identifying how best to serve and affirm LGBTQ older adults and older adults living with HIV;

(4) administer and oversee the curriculum and training program established by Section 8.12 of this Act;

(5) support LGBTQ older adults and older adults living with HIV with information about their civil rights and ability to access federal, State, and local aging services and benefits; and

(6) support the work and policy recommendations of the Commission on LGBTQ Aging, the Council on Aging, and the State Plan on Aging.

(c) In meeting the requirements of this Section, the LGBTQ Older Adult Advocate shall collaborate with organizations or individuals that affirm LGBTQ older adults and older adults living with HIV and have recognized expertise in identifying and addressing the legal and social challenges faced by LGBTQ older adults and older adults living with HIV.

(d) The Department shall maintain information about the LGBTQ Older Adult Advocate, including contact information, on the Department's publicly accessible website.

(e) The Department may adopt rules for the administration, implementation, and enforcement of this Section.

(20 ILCS 105/8.12 new)

Sec. 8.12. LGBTQ Older Adult Curriculum and Training Program.

(a) All providers of services who contract with or receive funding from the Department shall complete a curriculum and training program on the prevention and elimination of discrimination based on sexual orientation, gender identity, and gender expression and on providing affirming care and improving access to services for LGBTQ older adults, older adults living with HIV, and their caregivers. The curriculum and training program must be completed by all employees of

each provider as well as the employees of the provider's subgrantees and vendors. Providers shall complete training in accordance with the Department's established training requirements. Providers must maintain records of when each employee completes the curriculum and training program. Such proof of completion shall be made available to the Department upon its request.

(b) The Department may develop the curriculum and training program or may contract with organizations or individuals to provide their curriculum and training program. Such organizations or individuals must affirm LGBTQ older adults and older adults living with HIV and have recognized expertise in identifying and addressing the legal and social challenges faced by LGBTQ older adults and older adults living with HIV. If the Department develops its own curriculum and training program, the Department shall collaborate on developing the program with individuals and organizations that affirm LGBTQ older adults and older adults living with HIV and have recognized expertise in identifying and addressing the legal and social challenges faced by LGBTQ older adults and older adults living with HIV. At a minimum, the curriculum and training program required by this Section must address the following:

(1) definitions of common terms and examples associated with sexual orientation, gender identity, and gender expression;

(2) affirming methods of communicating with or about LGBTQ older adults and older adults living with HIV;

(3) the health and social challenges historically faced by LGBTQ older adults and older adults living with HIV;

(4) the importance of professionalism by providers and the way caretaker attitudes affect access to care, services, participation, and overall physical and mental health outcomes;

(5) methods to create a safe and affirming environment and the penalties for failing to meet legal and professional standards; and

(6) legal issues relating to LGBTQ older adults and older adults living with HIV, including, but not limited to, civil rights and marriage laws.

(c) The curriculum and training program established in accordance with this Section shall be implemented by the Department within 12 months after the effective date of this amendatory Act of the 102nd General Assembly.

Section 99. Effective date. This Act takes effect upon becoming law.