



Rep. Michelle Mussman

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LRB104 04770 KTG 23773 a

1 AMENDMENT TO HOUSE BILL 872

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 872 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Act on the Aging is amended by  
5 changing Sections 3.07, 3.08, 3.11, 4.01, 4.02, and 4.15 as  
6 follows:

7 (20 ILCS 105/3.07) (from Ch. 23, par. 6103.07)

8 Sec. 3.07. "Area agency on aging" means any public or  
9 non-profit private agency in a planning and service area  
10 designated by the Department, which is eligible for funds  
11 available under the Older Americans Act and other funds made  
12 available by the State of Illinois or the federal government.

13 ~~Responsibilities of "area agencies" shall include the~~  
14 ~~development of an area plan that provides for the development~~  
15 ~~of a comprehensive and coordinated service delivery system for~~  
16 ~~social and nutrition services needed by older persons and to~~

1 ~~define the special needs of minority senior citizens in the~~  
2 ~~planning and service area in which the area agency enters into~~  
3 ~~cooperative arrangements with other service planners and~~  
4 ~~providers to:~~

5 ~~(1) Facilitate access to and utilization of all~~  
6 ~~existing services;~~

7 ~~(2) Develop social and nutrition services effectively~~  
8 ~~and efficiently to meet the needs of older persons; and~~

9 ~~(3) Coordinate existing services to meet the special~~  
10 ~~needs and circumstances of minority senior citizens.~~

11 (Source: P.A. 88-254.)

12 (20 ILCS 105/3.08) (from Ch. 23, par. 6103.08)

13 Sec. 3.08. "Planning and Service Area" means a geographic  
14 area of the State that is designated by the Department for the  
15 purposes of planning, development, delivery, and overall  
16 administration of services under the area plan. Within each  
17 planning and service area the Department must designate an  
18 area agency on aging. For the purposes of this Section such  
19 planning and service areas shall be as follows:

20 Area 1, which is comprised of the counties of Jo Daviess,  
21 Stephenson, Winnebago, Boone, Carroll, Ogle, DeKalb, Whiteside  
22 and Lee;

23 Area 2, which is comprised of the counties of McHenry,  
24 Lake, Kane, DuPage, Kendall, Will, Grundy and Kankakee;

25 Area 3, which is comprised of the counties of Rock Island,

1 Mercer, Henry, Bureau, LaSalle, Putnam, Henderson, Warren,  
2 Knox and McDonough;

3 Area 4, which is comprised of the counties of Stark,  
4 Marshall, Peoria, Woodford, Fulton and Tazewell;

5 Area 5, which is comprised of the counties of Livingston,  
6 Iroquois, McLean, Ford, DeWitt, Piatt, Champaign, Vermilion,  
7 Macon, Moultrie, Douglas, Edgar, Shelby, Coles, Clark and  
8 Cumberland;

9 Area 6, which is comprised of the counties of Hancock,  
10 Schuyler, Adams, Brown, Pike and Calhoun;

11 Area 7, which is comprised of the counties of Mason,  
12 Logan, Cass, Menard, Scott, Morgan, Sangamon, Christian,  
13 Greene, Macoupin, Montgomery and Jersey;

14 Area 8, which is comprised of the counties of Madison,  
15 Bond, St. Clair, Clinton, Monroe, Washington and Randolph;

16 Area 9, which is comprised of the counties of Fayette,  
17 Effingham, Marion, Clay and Jefferson;

18 Area 10, which is comprised of the counties of Jasper,  
19 Crawford, Richland, Lawrence, Wayne, Edwards, Wabash, Hamilton  
20 and White;

21 Area 11, which is comprised of the counties of Perry,  
22 Franklin, Jackson, Williamson, Saline, Gallatin, Union,  
23 Johnson, Pope, Hardin, Alexander, Pulaski and Massac;

24 Area 12, which is comprised of the City of Chicago in Cook  
25 County; and

26 Area 13, which is comprised of the County of Cook outside

1 the City of Chicago.

2 ~~At the discretion of the Department and the county, a~~  
3 ~~county of 500,000 population or more may form its own area~~  
4 ~~agency.~~

5 (Source: P.A. 82-979.)

6 (20 ILCS 105/3.11)

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

16 (Source: P.A. 103-670, eff. 1-1-25.)

17 (20 ILCS 105/4.01)

18 Sec. 4.01. Additional powers and duties of the Department.  
19 In addition to powers and duties otherwise provided by law,  
20 the Department shall have the following powers and duties:

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

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

6           (2-a) To request, receive, and share information  
7 electronically through the use of data-sharing agreements for  
8 the purpose of (i) establishing and verifying the initial and  
9 continuing eligibility of older adults to participate in  
10 programs administered by the Department; (ii) maximizing  
11 federal financial participation in State assistance  
12 expenditures; and (iii) investigating allegations of fraud or  
13 other abuse of publicly funded benefits. Notwithstanding any  
14 other law to the contrary, but only for the limited purposes  
15 identified in the preceding sentence, this paragraph (2-a)  
16 expressly authorizes the exchanges of income, identification,  
17 and other pertinent eligibility information by and among the  
18 Department and the Social Security Administration, the  
19 Department of Employment Security, the Department of  
20 Healthcare and Family Services, the Department of Human  
21 Services, the Department of Revenue, the Secretary of State,  
22 the U.S. Department of Veterans Affairs, and any other  
23 governmental entity. The confidentiality of information  
24 otherwise shall be maintained as required by law. In addition,  
25 the Department on Aging shall verify employment information at  
26 the request of a community care provider for the purpose of

1 ensuring program integrity under the Community Care Program.

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

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

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

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

20 (7) To promote community education regarding the problems  
21 of senior citizens and minority senior citizens through  
22 institutes, publications, radio, television, and the local  
23 press.

24 (8) To cooperate with agencies of the federal government  
25 in studies and conferences designed to examine the needs of  
26 senior citizens and minority senior citizens and to prepare

1 programs and facilities to meet those needs.

2 (9) To establish and maintain information and referral  
3 sources throughout the State when not provided by other  
4 agencies.

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

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

9 (12) To establish and fund programs or projects or  
10 experimental facilities that are specially designed as  
11 alternatives to institutional care.

12 (13) To develop a training program to train the counselors  
13 presently employed by the Department's aging network to  
14 provide Medicare beneficiaries with counseling and advocacy in  
15 Medicare, private health insurance, and related health care  
16 coverage plans.

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

23 (15) To present one award annually in each of the  
24 categories of community service, education, the performance  
25 and graphic arts, and the labor force to outstanding Illinois  
26 senior citizens and minority senior citizens in recognition of

1 their individual contributions to either community service,  
2 education, the performance and graphic arts, or the labor  
3 force. Nominations shall be solicited from senior citizens'  
4 service providers, area agencies on aging, senior citizens'  
5 centers, and senior citizens' organizations. If there are no  
6 nominations in a category, the Department may award a second  
7 person in one of the remaining categories. The Department  
8 shall establish a central location within the State to be  
9 designated as the Senior Illinoisans Hall of Fame for the  
10 public display of all the annual awards, or replicas thereof.

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

17 (17) (Blank).

18 (18) (Blank). ~~To develop a pamphlet in English and Spanish~~  
19 ~~which may be used by physicians licensed to practice medicine~~  
20 ~~in all of its branches pursuant to the Medical Practice Act of~~  
21 ~~1987, pharmacists licensed pursuant to the Pharmacy Practice~~  
22 ~~Act, and Illinois residents 65 years of age or older for the~~  
23 ~~purpose of assisting physicians, pharmacists, and patients in~~  
24 ~~monitoring prescriptions provided by various physicians and to~~  
25 ~~aid persons 65 years of age or older in complying with~~  
26 ~~directions for proper use of pharmaceutical prescriptions. The~~

1 ~~pamphlet may provide space for recording information including~~  
2 ~~but not limited to the following:~~

3 ~~(a) name and telephone number of the patient;~~

4 ~~(b) name and telephone number of the prescribing~~  
5 ~~physician;~~

6 ~~(c) date of prescription;~~

7 ~~(d) name of drug prescribed;~~

8 ~~(e) directions for patient compliance; and~~

9 ~~(f) name and telephone number of dispensing pharmacy.~~

10 ~~In developing the pamphlet, the Department shall consult~~  
11 ~~with the Illinois State Medical Society, the Center for~~  
12 ~~Minority Health Services, the Illinois Pharmacists Association~~  
13 ~~and senior citizens organizations. The Department shall~~  
14 ~~distribute the pamphlets to physicians, pharmacists and~~  
15 ~~persons 65 years of age or older or various senior citizen~~  
16 ~~organizations throughout the State.~~

17 (19) (Blank). ~~To conduct a study of the feasibility of~~  
18 ~~implementing the Senior Companion Program throughout the~~  
19 ~~State.~~

20 (20) (Blank). ~~The reimbursement rates paid through the~~  
21 ~~community care program for chore housekeeping services and~~  
22 ~~home care aides shall be the same.~~

23 (21) (Blank).

24 (22) To distribute, through its area agencies on aging,  
25 information alerting seniors on safety issues regarding  
26 emergency weather conditions, including extreme heat and cold,

1 flooding, tornadoes, electrical storms, and other severe storm  
2 weather. The information shall include all necessary  
3 instructions for safety and all emergency telephone numbers of  
4 organizations that will provide additional information and  
5 assistance.

6 (23) To develop guidelines for the organization and  
7 implementation of Volunteer Services Credit Programs to be  
8 administered by Area Agencies on Aging or community-based  
9 ~~community-based~~ senior service organizations. The Department  
10 shall hold public hearings on the proposed guidelines for  
11 public comment, suggestion, and determination of public  
12 interest. The guidelines shall be based on the findings of  
13 other states and of community organizations in Illinois that  
14 are currently operating volunteer services credit programs or  
15 demonstration volunteer services credit programs. The  
16 Department shall offer guidelines for all aspects of the  
17 programs, including, but not limited to, the following:

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

19 (b) types of services to be received upon the  
20 redemption of service credits;

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

23 (d) methods of tracking service credits earned and  
24 service credits redeemed;

25 (e) issues of time limits for redemption of service  
26 credits;

- 1 (f) methods of recruitment of volunteers;
- 2 (g) utilization of community volunteers, community  
3 service groups, and other resources for delivering  
4 services to be received by service credit program clients;
- 5 (h) accountability and assurance that services will be  
6 available to individuals who have earned service credits;  
7 and
- 8 (i) volunteer screening and qualifications.

9 (24) To function as the sole State agency to receive and  
10 disburse State and federal funds for providing adult  
11 protective services in a domestic living situation in  
12 accordance with the Adult Protective Services Act.

13 (25) To hold conferences, trainings, and other programs  
14 for which the Department may ~~shall~~ determine by rule a  
15 reasonable fee to cover related administrative costs. Rules to  
16 implement the fee authority granted by this paragraph (25)  
17 must be adopted in accordance with all provisions of the  
18 Illinois Administrative Procedure Act and all rules and  
19 procedures of the Joint Committee on Administrative Rules; any  
20 purported rule not so adopted, for whatever reason, is  
21 unauthorized.

22 (26) To implement the Older Americans Act.

23 (Source: P.A. 103-616, eff. 7-1-24; 103-670, eff. 1-1-25;  
24 revised 11-26-24.)

25 (20 ILCS 105/4.02)

1           Sec. 4.02. Community Care Program. The Department shall  
2 establish a program of services to prevent unnecessary  
3 institutionalization of persons age 60 and older in need of  
4 long term care or who are established as persons who suffer  
5 from Alzheimer's disease or a related disorder under the  
6 Alzheimer's Disease Assistance Act, thereby enabling them to  
7 remain in their own homes or in other living arrangements.  
8 Such preventive services, which may be coordinated with other  
9 programs for the aged, may include, but are not limited to, any  
10 or all of the following:

11           (a) (blank);

12           (b) (blank);

13           (c) home care aide services;

14           (d) personal assistant services;

15           (e) adult day services;

16           (f) home-delivered meals;

17           (g) education in self-care;

18           (h) personal care services;

19           (i) adult day health services;

20           (j) habilitation services;

21           (k) respite care;

22           (k-5) community reintegration services;

23           (k-6) flexible senior services;

24           (k-7) medication management;

25           (k-8) emergency home response;

26           (l) other nonmedical social services that may enable

1 the person to become self-supporting; or

2 (m) (blank).

3 The Department shall establish eligibility standards for  
4 such services. In determining the amount and nature of  
5 services for which a person may qualify, consideration shall  
6 not be given to the value of cash, property, or other assets  
7 held in the name of the person's spouse pursuant to a written  
8 agreement dividing marital property into equal but separate  
9 shares or pursuant to a transfer of the person's interest in a  
10 home to his spouse, provided that the spouse's share of the  
11 marital property is not made available to the person seeking  
12 such services.

13 The Department shall require as a condition of eligibility  
14 that all new financially eligible applicants apply for and  
15 enroll in medical assistance under Article V of the Illinois  
16 Public Aid Code in accordance with rules promulgated by the  
17 Department.

18 The Department shall, in conjunction with the ~~Department~~  
19 ~~of Public Aid~~ (now Department of Healthcare and Family  
20 Services), seek appropriate amendments under Sections 1915 and  
21 1924 of the Social Security Act. The purpose of the amendments  
22 shall be to extend eligibility for home and community based  
23 services under Sections 1915 and 1924 of the Social Security  
24 Act to persons who transfer to or for the benefit of a spouse  
25 those amounts of income and resources allowed under Section  
26 1924 of the Social Security Act. Subject to the approval of

1 such amendments, the Department shall extend the provisions of  
2 Section 5-4 of the Illinois Public Aid Code to persons who, but  
3 for the provision of home or community-based services, would  
4 require the level of care provided in an institution, as is  
5 provided for in federal law. Those persons no longer found to  
6 be eligible for receiving noninstitutional services due to  
7 changes in the eligibility criteria shall be given 45 days  
8 notice prior to actual termination. Those persons receiving  
9 notice of termination may contact the Department and request  
10 the determination be appealed at any time during the 45 day  
11 notice period. The target population identified for the  
12 purposes of this Section are persons age 60 and older with an  
13 identified service need. Priority shall be given to those who  
14 are at imminent risk of institutionalization. The services  
15 shall be provided to eligible persons age 60 and older to the  
16 extent that the cost of the services together with the other  
17 personal maintenance expenses of the persons are reasonably  
18 related to the standards established for care in a group  
19 facility appropriate to the person's condition. These  
20 noninstitutional ~~non-institutional~~ services, pilot projects,  
21 or experimental facilities may be provided as part of or in  
22 addition to those authorized by federal law or those funded  
23 and administered by the Department of Human Services. The  
24 Departments of Human Services, Healthcare and Family Services,  
25 Public Health, Veterans' Affairs, and Commerce and Economic  
26 Opportunity and other appropriate agencies of State, federal,

1 and local governments shall cooperate with the Department on  
2 Aging in the establishment and development of the  
3 noninstitutional ~~non-institutional~~ services. The Department  
4 shall require an annual audit from all personal assistant and  
5 home care aide vendors contracting with the Department under  
6 this Section. The annual audit shall assure that each audited  
7 vendor's procedures are in compliance with Department's  
8 financial reporting guidelines requiring an administrative and  
9 employee wage and benefits cost split as defined in  
10 administrative rules. The audit is a public record under the  
11 Freedom of Information Act. The Department shall execute,  
12 relative to the nursing home prescreening project, written  
13 inter-agency agreements with the Department of Human Services  
14 and the Department of Healthcare and Family Services, to  
15 effect the following: (1) intake procedures and common  
16 eligibility criteria for those persons who are receiving  
17 noninstitutional ~~non-institutional~~ services; and (2) the  
18 establishment and development of noninstitutional  
19 ~~non-institutional~~ services in areas of the State where they  
20 are not currently available or are undeveloped. Nursing ~~On and~~  
21 ~~after July 1, 1996, all nursing~~ home prescreenings for  
22 individuals 60 years of age or older shall be conducted by the  
23 Department.

24 As part of the Department on Aging's routine training of  
25 case managers and case manager supervisors, the Department may  
26 include information on family futures planning for persons who

1 are age 60 or older and who are caregivers of their adult  
2 children with developmental disabilities. The content of the  
3 training shall be at the Department's discretion.

4 The Department is authorized to establish a system of  
5 recipient copayment for services provided under this Section,  
6 such copayment to be based upon the recipient's ability to pay  
7 but in no case to exceed the actual cost of the services  
8 provided. Additionally, any portion of a person's income which  
9 is equal to or less than the federal poverty standard shall not  
10 be considered by the Department in determining the copayment.  
11 The level of such copayment shall be adjusted whenever  
12 necessary to reflect any change in the officially designated  
13 federal poverty standard.

14 The Department, or the Department's authorized  
15 representative, may recover the amount of moneys expended for  
16 services provided to or in behalf of a person under this  
17 Section by a claim against the person's estate or against the  
18 estate of the person's surviving spouse, but no recovery may  
19 be had until after the death of the surviving spouse, if any,  
20 and then only at such time when there is no surviving child who  
21 is under age 21 or blind or who has a permanent and total  
22 disability. This paragraph, however, shall not bar recovery,  
23 at the death of the person, of moneys for services provided to  
24 the person or in behalf of the person under this Section to  
25 which the person was not entitled; provided that such recovery  
26 shall not be enforced against any real estate while it is

1 occupied as a homestead by the surviving spouse or other  
2 dependent, if no claims by other creditors have been filed  
3 against the estate, or, if such claims have been filed, they  
4 remain dormant for failure of prosecution or failure of the  
5 claimant to compel administration of the estate for the  
6 purpose of payment. This paragraph shall not bar recovery from  
7 the estate of a spouse, under Sections 1915 and 1924 of the  
8 Social Security Act and Section 5-4 of the Illinois Public Aid  
9 Code, who precedes a person receiving services under this  
10 Section in death. All moneys for services paid to or in behalf  
11 of the person under this Section shall be claimed for recovery  
12 from the deceased spouse's estate. "Homestead", as used in  
13 this paragraph, means the dwelling house and contiguous real  
14 estate occupied by a surviving spouse or relative, as defined  
15 by the rules and regulations of the Department of Healthcare  
16 and Family Services, regardless of the value of the property.

17 The Department shall increase the effectiveness of the  
18 existing Community Care Program by:

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

21 (2) ensuring that care plans contain the services that  
22 eligible participants need based on the number of days in  
23 a month, not limited to specific blocks of time, as  
24 identified by the comprehensive assessment tool selected  
25 by the Department for use statewide, not to exceed the  
26 total monthly service cost maximum allowed for each

1 service; the Department shall develop administrative rules  
2 to implement this item (2);

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

7 (4) (blank);

8 (5) ensuring that homecare aides ~~homemakers~~ can  
9 provide personal care services that may or may not involve  
10 contact with clients, including, but not limited to:

11 (A) bathing;

12 (B) grooming;

13 (C) toileting;

14 (D) nail care;

15 (E) transferring;

16 (F) respiratory services;

17 (G) exercise; or

18 (H) positioning;

19 (6) ensuring that providers ~~homemaker program vendors~~  
20 are not restricted from hiring homecare aides ~~homemakers~~  
21 who are family members of clients or recommended by  
22 clients; the Department may not, by rule or policy,  
23 require homecare aides ~~homemakers~~ who are family members  
24 of clients or recommended by clients to accept assignments  
25 in homes other than the client;

26 (7) ensuring that the State may access maximum federal

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

13 (9) ensuring that services are authorized accurately  
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  
18 the CCP program; the policy directive shall clarify  
19 service authorization guidelines to Care Coordination  
20 Units and Community Care Program providers no later than  
21 May 1, 2013;

22 (10) working in conjunction with Care Coordination  
23 Units, the Department of Healthcare and Family Services,  
24 the Department of Human Services, Community Care Program  
25 providers, and other stakeholders to make improvements to  
26 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  
4 in the Medicaid program and specific policy changes or  
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;

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

21 (13) (blank).

22 By January 1, 2009 or as soon after the end of the Cash and  
23 Counseling Demonstration Project as is practicable, the  
24 Department may, based on its evaluation of the demonstration  
25 project, promulgate rules concerning personal assistant  
26 services, to include, but need not be limited to,

1 qualifications, employment screening, rights under fair labor  
2 standards, training, fiduciary agent, and supervision  
3 requirements. All applicants shall be subject to the  
4 provisions of the Health Care Worker Background Check Act.

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

12 No ~~September 23, 1991 (Public Act 87-729)~~ person may  
13 perform homecare aid ~~chore/housekeeping and home care aide~~  
14 services under a program authorized by this Section unless  
15 that person has been issued a certificate of pre-service to do  
16 so by his or her employing agency. Information gathered to  
17 effect such certification shall include (i) the person's name,  
18 (ii) the date the person was hired by his or her current  
19 employer, and (iii) the training, including dates and levels.  
20 Persons engaged in the program authorized by this Section  
21 before the effective date of this amendatory Act of 1991 shall  
22 be issued a certificate of all pre-service and in-service  
23 training from his or her employer upon submitting the  
24 necessary information. The employing agency shall be required  
25 to retain records of all staff pre-service and in-service  
26 training, and shall provide such records to the Department

1 upon request and upon termination of the employer's contract  
2 with the Department. In addition, the employing agency is  
3 responsible for the issuance of certifications of in-service  
4 training completed to their employees.

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

14 The Community Care Program Advisory Committee is created  
15 in the Department on Aging. The Director shall appoint  
16 individuals to serve in the Committee, who shall serve at  
17 their own expense. Members of the Committee must abide by all  
18 applicable ethics laws. The Committee shall advise the  
19 Department on issues related to the Department's program of  
20 services to prevent unnecessary institutionalization. The  
21 Committee shall meet on a bi-monthly basis and shall serve to  
22 identify and advise the Department on present and potential  
23 issues affecting the service delivery network, the program's  
24 clients, and the Department and to recommend solution  
25 strategies. Persons appointed to the Committee shall be  
26 appointed on, but not limited to, their own and their agency's

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

17 Nominations may be presented from any agency or State  
18 association with interest in the program. The Director, or his  
19 or her designee, shall serve as the permanent co-chair of the  
20 advisory committee. One other co-chair shall be nominated and  
21 approved by the members of the committee on an annual basis.  
22 Committee members' terms of appointment shall be for 4 years  
23 with one-quarter of the appointees' terms expiring each year.  
24 A member shall continue to serve until his or her replacement  
25 is named. The Department shall fill vacancies that have a  
26 remaining term of over one year, and this replacement shall

1 occur through the annual replacement of expiring terms. The  
2 Director shall designate Department staff to provide technical  
3 assistance and staff support to the committee. Department  
4 representation shall not constitute membership of the  
5 committee. All Committee papers, issues, recommendations,  
6 reports, and meeting memoranda are advisory only. The  
7 Director, or his or her designee, shall make a written report,  
8 as requested by the Committee, regarding issues before the  
9 Committee.

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

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

22 Those persons previously found eligible for receiving  
23 noninstitutional ~~non-institutional~~ services whose services  
24 were discontinued under the Emergency Budget Act of Fiscal  
25 Year 1992, and who do not meet the eligibility standards in  
26 effect on or after July 1, 1992, shall remain ineligible on and

1 after July 1, 1992. Those persons previously not required to  
2 cost-share and who were required to cost-share effective March  
3 1, 1992, shall continue to meet cost-share requirements on and  
4 after July 1, 1992. Beginning July 1, 1992, all clients will be  
5 required to meet eligibility, cost-share, and other  
6 requirements and will have services discontinued or altered  
7 when they fail to meet these requirements.

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

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

17 The Department shall require, as a condition of  
18 eligibility, application for the medical assistance program  
19 under Article V of the Illinois Public Aid Code.

20 The Department may authorize Community Care Program  
21 services until an applicant is determined eligible for medical  
22 assistance under Article V of the Illinois Public Aid Code.

23 The Department shall continue to provide Community Care  
24 Program reports as required by statute, which shall include an  
25 annual report on Care Coordination Unit performance and  
26 adherence to service guidelines and a 6-month supplemental

1 report.

2 In regard to community care providers, failure to comply  
3 with Department on Aging policies shall be cause for  
4 disciplinary action, including, but not limited to,  
5 disqualification from serving Community Care Program clients.  
6 Each provider, upon submission of any bill or invoice to the  
7 Department for payment for services rendered, shall include a  
8 notarized statement, under penalty of perjury pursuant to  
9 Section 1-109 of the Code of Civil Procedure, that the  
10 provider has complied with all Department policies.

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

16 The Department shall pay an enhanced rate of at least  
17 \$1.77 per unit under the Community Care Program to those  
18 in-home service provider agencies that offer health insurance  
19 coverage as a benefit to their direct service worker employees  
20 pursuant to rules adopted by the Department. The Department  
21 shall review the enhanced rate as part of its process to rebase  
22 in-home service provider reimbursement rates pursuant to  
23 federal waiver requirements. Subject to federal approval,  
24 beginning on January 1, 2024, rates for adult day services  
25 shall be increased to \$16.84 per hour and rates for each way  
26 transportation services for adult day services shall be

1 increased to \$12.44 per unit transportation.

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

14 Subject to and upon federal approval, on and after January  
15 1, 2025, rates for homecare aid ~~homemaker~~ services shall be  
16 increased to \$29.63 to sustain a minimum wage of \$18 per hour  
17 for direct service workers. Rates in subsequent State fiscal  
18 years shall be no lower than the rates put into effect upon  
19 federal approval. Providers of in-home services shall be  
20 required to certify to the Department that they remain in  
21 compliance with the mandated wage increase for direct service  
22 workers. Fringe benefits, including, but not limited to, paid  
23 time off and payment for training, health insurance, travel,  
24 or transportation, shall not be reduced in relation to the  
25 rate increases described in this paragraph.

26 ~~The General Assembly finds it necessary to authorize an~~

1 ~~aggressive Medicaid enrollment initiative designed to maximize~~  
2 ~~federal Medicaid funding for the Community Care Program which~~  
3 ~~produces significant savings for the State of Illinois. The~~  
4 ~~Department on Aging shall establish and implement a Community~~  
5 ~~Care Program Medicaid Initiative. Under the Initiative, the~~  
6 ~~Department on Aging shall, at a minimum: (i) provide an~~  
7 ~~enhanced rate to adequately compensate care coordination units~~  
8 ~~to enroll eligible Community Care Program clients into~~  
9 ~~Medicaid; (ii) use recommendations from a stakeholder~~  
10 ~~committee on how best to implement the Initiative; and (iii)~~  
11 ~~establish requirements for State agencies to make enrollment~~  
12 ~~in the State's Medical Assistance program easier for seniors.~~

13 ~~The Community Care Program Medicaid Enrollment Oversight~~  
14 ~~Subcommittee is created as a subcommittee of the Older Adult~~  
15 ~~Services Advisory Committee established in Section 35 of the~~  
16 ~~Older Adult Services Act to make recommendations on how best~~  
17 ~~to increase the number of medical assistance recipients who~~  
18 ~~are enrolled in the Community Care Program. The Subcommittee~~  
19 ~~shall consist of all of the following persons who must be~~  
20 ~~appointed within 30 days after June 4, 2018 (the effective~~  
21 ~~date of Public Act 100-587):~~

22 ~~(1) The Director of Aging, or his or her designee, who~~  
23 ~~shall serve as the chairperson of the Subcommittee.~~

24 ~~(2) One representative of the Department of Healthcare~~  
25 ~~and Family Services, appointed by the Director of~~  
26 ~~Healthcare and Family Services.~~

1           ~~(3) One representative of the Department of Human~~  
2 ~~Services, appointed by the Secretary of Human Services.~~

3           ~~(4) One individual representing a care coordination~~  
4 ~~unit, appointed by the Director of Aging.~~

5           ~~(5) One individual from a non governmental statewide~~  
6 ~~organization that advocates for seniors, appointed by the~~  
7 ~~Director of Aging.~~

8           ~~(6) One individual representing Area Agencies on~~  
9 ~~Aging, appointed by the Director of Aging.~~

10          ~~(7) One individual from a statewide association~~  
11 ~~dedicated to Alzheimer's care, support, and research,~~  
12 ~~appointed by the Director of Aging.~~

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

16          ~~(9) One member of a trade or labor union representing~~  
17 ~~persons who provide services under the Community Care~~  
18 ~~Program, appointed by the Director of Aging.~~

19          ~~(10) One member of the Senate, who shall serve as~~  
20 ~~co chairperson, appointed by the President of the Senate.~~

21          ~~(11) One member of the Senate, who shall serve as~~  
22 ~~co chairperson, appointed by the Minority Leader of the~~  
23 ~~Senate.~~

24          ~~(12) One member of the House of Representatives, who~~  
25 ~~shall serve as co chairperson, appointed by the Speaker of~~  
26 ~~the House of Representatives.~~

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

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

7           ~~The Subcommittee shall provide oversight to the Community~~  
8           ~~Care Program Medicaid Initiative and shall meet quarterly. At~~  
9           ~~each Subcommittee meeting the Department on Aging shall~~  
10           ~~provide the following data sets to the Subcommittee: (A) the~~  
11           ~~number of Illinois residents, categorized by planning and~~  
12           ~~service area, who are receiving services under the Community~~  
13           ~~Care Program and are enrolled in the State's Medical~~  
14           ~~Assistance Program; (B) the number of Illinois residents,~~  
15           ~~categorized by planning and service area, who are receiving~~  
16           ~~services under the Community Care Program, but are not~~  
17           ~~enrolled in the State's Medical Assistance Program; and (C)~~  
18           ~~the number of Illinois residents, categorized by planning and~~  
19           ~~service area, who are receiving services under the Community~~  
20           ~~Care Program and are eligible for benefits under the State's~~  
21           ~~Medical Assistance Program, but are not enrolled in the~~  
22           ~~State's Medical Assistance Program. In addition to this data,~~  
23           ~~the Department on Aging shall provide the Subcommittee with~~  
24           ~~plans on how the Department on Aging will reduce the number of~~  
25           ~~Illinois residents who are not enrolled in the State's Medical~~  
26           ~~Assistance Program but who are eligible for medical assistance~~

1 ~~benefits. The Department on Aging shall enroll in the State's~~  
2 ~~Medical Assistance Program those Illinois residents who~~  
3 ~~receive services under the Community Care Program and are~~  
4 ~~eligible for medical assistance benefits but are not enrolled~~  
5 ~~in the State's Medicaid Assistance Program. The data provided~~  
6 ~~to the Subcommittee shall be made available to the public via~~  
7 ~~the Department on Aging's website.~~

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

13 ~~The Department on Aging, the Department of Human Services,~~  
14 ~~and the Department of Healthcare and Family Services shall~~  
15 ~~coordinate and implement a streamlined process for seniors to~~  
16 ~~access benefits under the State's Medical Assistance Program.~~

17 ~~The Subcommittee shall collaborate with the Department of~~  
18 ~~Human Services on the adoption of a uniform application~~  
19 ~~submission process. The Department of Human Services and any~~  
20 ~~other State agency involved with processing the medical~~  
21 ~~assistance application of any person enrolled in the Community~~  
22 ~~Care Program shall include the appropriate care coordination~~  
23 ~~unit in all communications related to the determination or~~  
24 ~~status of the application.~~

25 ~~The Community Care Program Medicaid Initiative shall~~  
26 ~~provide targeted funding to care coordination units to help~~

1 ~~seniors complete their applications for medical assistance~~  
2 ~~benefits. On and after July 1, 2019, care coordination units~~  
3 ~~shall receive no less than \$200 per completed application,~~  
4 ~~which rate may be included in a bundled rate for initial intake~~  
5 ~~services when Medicaid application assistance is provided in~~  
6 ~~conjunction with the initial intake process for new program~~  
7 ~~participants.~~

8 ~~The Community Care Program Medicaid Initiative shall cease~~  
9 ~~operation 5 years after June 4, 2018 (the effective date of~~  
10 ~~Public Act 100-587), after which the Subcommittee shall~~  
11 ~~dissolve.~~

12 Effective July 1, 2023, subject to federal approval, the  
13 Department on Aging shall reimburse Care Coordination Units at  
14 the following rates for case management services: \$252.40 for  
15 each initial assessment; \$366.40 for each initial assessment  
16 with translation; \$229.68 for each redetermination assessment;  
17 \$313.68 for each redetermination assessment with translation;  
18 \$200.00 for each completed application for medical assistance  
19 benefits; \$132.26 for each face-to-face, choices-for-care  
20 screening; \$168.26 for each face-to-face, choices-for-care  
21 screening with translation; \$124.56 for each 6-month,  
22 face-to-face visit; \$132.00 for each MCO participant  
23 eligibility determination; and \$157.00 for each MCO  
24 participant eligibility determination with translation.

25 (Source: P.A. 102-1071, eff. 6-10-22; 103-8, eff. 6-7-23;  
26 103-102, Article 45, Section 45-5, eff. 1-1-24; 103-102,

1 Article 85, Section 85-5, eff. 1-1-24; 103-102, Article 90,  
2 Section 90-5, eff. 1-1-24; 103-588, eff. 6-5-24; 103-605, eff.  
3 7-1-24; 103-670, eff. 1-1-25; revised 11-26-24.)

4 (20 ILCS 105/4.15)

5 Sec. 4.15. Benefit Access Program Eligibility  
6 ~~determinations.~~

7 (a) The Department shall implement and administer the  
8 Benefit Access Program. Under this program, the Department  
9 shall establish the eligibility criteria for ~~The Department is~~  
10 ~~authorized to make eligibility determinations for benefits~~  
11 ~~administered by other governmental bodies based on the Senior~~  
12 ~~Citizens and Persons with Disabilities Property Tax Relief Act~~  
13 ~~as follows:~~

14 (i) ~~for~~ the Secretary of State with respect to reduced  
15 fees paid by qualified vehicle owners under the Illinois  
16 Vehicle Code;

17 (ii) ~~for~~ special districts that offer free fixed route  
18 public transportation services for qualified older adults  
19 under the Local Mass Transit District Act, the  
20 Metropolitan Transit Authority Act, and the Regional  
21 Transportation Authority Act; and

22 (iii) ~~for~~ special districts that offer transit  
23 services for qualified individuals with disabilities under  
24 the Local Mass Transit District Act, the Metropolitan  
25 Transit Authority Act, and the Regional Transportation

1 Authority Act.

2 (a-5) As used in this Section, unless the context requires  
3 otherwise:

4 "Disability" means the inability to engage in any  
5 substantial gainful activity by reason of a medically  
6 determinable physical or mental impairment which can be  
7 expected to result in death or has lasted or can be expected to  
8 last for a continuous period of not less than 12 months.

9 "Income" means adjusted gross income, properly reportable  
10 for federal income tax purposes under the provisions of the  
11 Internal Revenue Code, modified by adding thereto the sum of  
12 the following amounts to the extent deducted or excluded from  
13 gross income in the computation of adjusted gross income:

14 (1) an amount equal to all amounts paid or accrued as  
15 interest or dividends during the taxable year;

16 (2) an amount equal to the amount of tax imposed by the  
17 Illinois Income Tax Act paid for the taxable year;

18 (3) an amount equal to all amounts received during the  
19 taxable year as an annuity under an annuity, endowment, or  
20 life insurance contract or under any other contract or  
21 agreement;

22 (4) an amount equal to the amount of benefits paid  
23 under the federal Social Security Act during the taxable  
24 year;

25 (5) an amount equal to the amount of benefits paid  
26 under the Railroad Retirement Act during the taxable year;

1           (6) an amount equal to the total amount of cash public  
2           assistance payments received from any governmental agency  
3           during the taxable year other than benefits received under  
4           this Act; or

5           (7) an amount equal to any benefits received under the  
6           Workers' Compensation Act or the Workers' Occupational  
7           Diseases Act during the taxable year.

8           For individuals who are not required to file federal  
9           income tax returns, the Department shall adopt rules to  
10           specify the process to verify income.

11           "Income" does not include any distributions or items of  
12           income described under subparagraph (X) of paragraph (2) of  
13           subsection (a) of Section 203 of the Illinois Income Tax Act.

14           (a-10) To be eligible for benefits under the Benefit  
15           Access Program, an individual shall:

16                   (1) meet the income requirements;

17                   (2) be at least 65 years of age or older or be 16 years  
18                   of age or older before January 1 of the current year and  
19                   have a disability; and

20                   (3) be a resident of Illinois.

21           (a-15) The household income eligibility limits are:

22                   (1) for an individual, less than \$33,562;

23                   (2) for a 2-person household, less than \$44,533; or

24                   (3) for a household of 3 or more people, \$55,500.

25           (b) The Department shall establish the manner by which  
26           individuals ~~claimants~~ shall apply for these benefits. The

1 Department is authorized to promulgate rules regarding the  
2 following matters: the application cycle; the application  
3 process; the content for an electronic application; required  
4 personal identification information; acceptable proof of  
5 eligibility as to age, disability status, marital status,  
6 residency, and household income limits; household composition;  
7 calculating income; use of social security numbers; duration  
8 of eligibility determinations; automatic renewals; appeal  
9 rights; and any other matters necessary for such  
10 administrative operations.

11 (c) All information received by the Department from an  
12 application or from any investigation to determine eligibility  
13 for benefits shall be confidential, except for official  
14 purposes.

15 (d) A person may not under any circumstances charge a fee  
16 to a claimant for assistance in completing an application form  
17 for these benefits.

18 (Source: P.A. 98-887, eff. 8-15-14; 99-143, eff. 7-27-15.)

19 Section 10. The Senior Citizens and Persons with  
20 Disabilities Property Tax Relief Act is amended by changing  
21 Sections 1.5, 3.04, 3.10, 3.12, 4, 7, 8a, and 9 as follows"

22 (320 ILCS 25/1.5)

23 Sec. 1.5. Implementation of Executive Order No. 3 of 2004;  
24 termination of the Illinois Senior Citizens and Disabled

1 Persons Pharmaceutical Assistance Program. Executive Order No.  
2 3 of 2004, in part, provided for the transfer of the programs  
3 under this Act from the Department of Revenue to the  
4 Department on Aging and the Department of Healthcare and  
5 Family Services. It is the purpose of this amendatory Act of  
6 the 96th General Assembly to conform this Act and certain  
7 related provisions of other statutes to that Executive Order.  
8 This amendatory Act of the 96th General Assembly also makes  
9 other substantive changes to this Act.

10 It is the purpose of this amendatory Act of the 97th  
11 General Assembly to terminate the Illinois Senior Citizens and  
12 Disabled Persons Pharmaceutical Assistance Program on July 1,  
13 2012.

14 It is the purpose of this amendatory Act of the 104th  
15 General Assembly to permanently remove the Benefit Access  
16 program, formally known as the Circuit Breaker program, from  
17 this Act. The Department on Aging shall have the sole  
18 discretion to implement this program.

19 (Source: P.A. 96-804, eff. 1-1-10; 97-689, eff. 6-14-12.)

20 (320 ILCS 25/3.04) (from Ch. 67 1/2, par. 403.04)

21 Sec. 3.04. Gross rent. "Gross rent" means the total amount  
22 paid solely for the right to occupy a residence.

23 If the residence is a nursing or sheltered care home,  
24 "gross rent" means the amount paid in a taxable year that is  
25 attributable to the cost of housing, but not of meals or care,

1 for the claimant in that home, ~~determined in accordance with~~  
2 ~~regulations of the Department on Aging.~~

3 (Source: P.A. 96-804, eff. 1-1-10.)

4 (320 ILCS 25/3.10) (from Ch. 67 1/2, par. 403.10)

5 Sec. 3.10. Regulations. "Regulations" includes both rules  
6 promulgated and forms prescribed by the applicable Department.  
7 In this Act, references to the rules of ~~the Department on Aging~~  
8 ~~or~~ the Department of Healthcare and Family Services, in effect  
9 prior to July 1, 2012, shall be deemed to include, in  
10 appropriate cases, the corresponding rules adopted by the  
11 Department of Revenue, to the extent that those rules continue  
12 in force under Executive Order No. 3 of 2004.

13 (Source: P.A. 96-804, eff. 1-1-10; 97-689, eff. 6-14-12.)

14 (320 ILCS 25/3.12) (from Ch. 67 1/2, par. 403.12)

15 Sec. 3.12. Residence. "Residence" means the principal  
16 dwelling place occupied in this State by a household and so  
17 much of the surrounding land as is reasonably necessary for  
18 use of the dwelling as a home, and includes rental property,  
19 mobile homes, single family dwellings, and units in  
20 multifamily, multidwelling or multipurpose buildings. If the  
21 assessor has established a specific legal description for a  
22 portion of property constituting the residence, then that  
23 portion of property shall be deemed "residence" for the  
24 purposes of this Act. "Residence" also includes that portion

1 of a nursing or sheltered care home occupied as a dwelling by a  
2 claimant, ~~determined as prescribed in regulations of the~~  
3 ~~Department on Aging.~~

4 (Source: P.A. 96-804, eff. 1-1-10.)

5 (320 ILCS 25/4) (from Ch. 67 1/2, par. 404)

6 Sec. 4. Amount of Grant.

7 (a) In general. Any individual 65 years or older or any  
8 individual who will become 65 years old during the calendar  
9 year in which a claim is filed, and any surviving spouse of  
10 such a claimant, who at the time of death received or was  
11 entitled to receive a grant pursuant to this Section, which  
12 surviving spouse will become 65 years of age within the 24  
13 months immediately following the death of such claimant and  
14 which surviving spouse but for his or her age is otherwise  
15 qualified to receive a grant pursuant to this Section, and any  
16 person with a disability whose annual household income is less  
17 than the income eligibility limitation, as defined in  
18 subsection (a-5) and whose household is liable for payment of  
19 property taxes accrued or has paid rent constituting property  
20 taxes accrued and is domiciled in this State at the time he or  
21 she files his or her claim is entitled to claim a grant under  
22 this Act. With respect to claims filed by individuals who will  
23 become 65 years old during the calendar year in which a claim  
24 is filed, the amount of any grant to which that household is  
25 entitled shall be an amount equal to 1/12 of the amount to

1 which the claimant would otherwise be entitled as provided in  
2 this Section, multiplied by the number of months in which the  
3 claimant was 65 in the calendar year in which the claim is  
4 filed.

5 (a-5) Income eligibility limitation. For purposes of this  
6 Section, "income eligibility limitation" means an amount for  
7 grant years 2008 through 2019:

8 (1) less than \$22,218 for a household containing one  
9 person;

10 (2) less than \$29,480 for a household containing 2  
11 persons; or

12 (3) less than \$36,740 for a household containing 3 or  
13 more persons.

14 For grant years 2020 and thereafter:

15 (1) less than \$33,562 for a household containing one  
16 person;

17 (2) less than \$44,533 for a household containing 2  
18 persons; or

19 (3) less than \$55,500 for a household containing 3 or  
20 more persons.

21 For 2009 claim year applications submitted during calendar  
22 year 2010, a household must have annual household income of  
23 less than \$27,610 for a household containing one person; less  
24 than \$36,635 for a household containing 2 persons; or less  
25 than \$45,657 for a household containing 3 or more persons.

26 ~~The Department on Aging may adopt rules such that on~~

1 ~~January 1, 2011, and thereafter, the foregoing household~~  
2 ~~income eligibility limits may be changed to reflect the annual~~  
3 ~~cost of living adjustment in Social Security and Supplemental~~  
4 ~~Security Income benefits that are applicable to the year for~~  
5 ~~which those benefits are being reported as income on an~~  
6 ~~application.~~

7 If a person files as a surviving spouse, then only his or  
8 her income shall be counted in determining his or her  
9 household income.

10 (b) Limitation. Except as otherwise provided in  
11 subsections (a) and (f) of this Section, the maximum amount of  
12 grant which a claimant is entitled to claim is the amount by  
13 which the property taxes accrued which were paid or payable  
14 during the last preceding tax year or rent constituting  
15 property taxes accrued upon the claimant's residence for the  
16 last preceding taxable year exceeds 3 1/2% of the claimant's  
17 household income for that year but in no event is the grant to  
18 exceed (i) \$700 less 4.5% of household income for that year for  
19 those with a household income of \$14,000 or less or (ii) \$70 if  
20 household income for that year is more than \$14,000.

21 (c) Public aid recipients. If household income in one or  
22 more months during a year includes cash assistance in excess  
23 of \$55 per month from the Department of Healthcare and Family  
24 Services or the Department of Human Services (acting as  
25 successor to the Department of Public Aid under the Department  
26 of Human Services Act) which was determined under regulations

1 of that Department on a measure of need that included an  
2 allowance for actual rent or property taxes paid by the  
3 recipient of that assistance, the amount of grant to which  
4 that household is entitled, except as otherwise provided in  
5 subsection (a), shall be the product of (1) the maximum amount  
6 computed as specified in subsection (b) of this Section and  
7 (2) the ratio of the number of months in which household income  
8 did not include such cash assistance over \$55 to the number  
9 twelve. If household income did not include such cash  
10 assistance over \$55 for any months during the year, the amount  
11 of the grant to which the household is entitled shall be the  
12 maximum amount computed as specified in subsection (b) of this  
13 Section. For purposes of this paragraph (c), "cash assistance"  
14 does not include any amount received under the federal  
15 Supplemental Security Income (SSI) program.

16 (d) Joint ownership. If title to the residence is held  
17 jointly by the claimant with a person who is not a member of  
18 his or her household, the amount of property taxes accrued  
19 used in computing the amount of grant to which he or she is  
20 entitled shall be the same percentage of property taxes  
21 accrued as is the percentage of ownership held by the claimant  
22 in the residence.

23 (e) More than one residence. If a claimant has occupied  
24 more than one residence in the taxable year, he or she may  
25 claim only one residence for any part of a month. In the case  
26 of property taxes accrued, he or she shall prorate 1/12 of the

1 total property taxes accrued on his or her residence to each  
2 month that he or she owned and occupied that residence; and, in  
3 the case of rent constituting property taxes accrued, shall  
4 prorate each month's rent payments to the residence actually  
5 occupied during that month.

6 (f) (Blank).

7 (g) Effective January 1, 2006, there is hereby established  
8 a program of pharmaceutical assistance to the aged and to  
9 persons with disabilities, entitled the Illinois Seniors and  
10 Disabled Drug Coverage Program, which shall be administered by  
11 the Department of Healthcare and Family Services ~~and the~~  
12 ~~Department on Aging~~ in accordance with this subsection, to  
13 consist of coverage of specified prescription drugs on behalf  
14 of beneficiaries of the program as set forth in this  
15 subsection. Notwithstanding any provisions of this Act to the  
16 contrary, on and after July 1, 2012, pharmaceutical assistance  
17 under this Act shall no longer be provided, and on July 1, 2012  
18 the Illinois Senior Citizens and Disabled Persons  
19 Pharmaceutical Assistance Program shall terminate. The  
20 following provisions that concern the Illinois Senior Citizens  
21 and Disabled Persons Pharmaceutical Assistance Program shall  
22 continue to apply on and after July 1, 2012 to the extent  
23 necessary to pursue any actions authorized by subsection (d)  
24 of Section 9 of this Act with respect to acts which took place  
25 prior to July 1, 2012.

26 To become a beneficiary under the program established

1 under this subsection, a person must:

2 (1) be (i) 65 years of age or older or (ii) a person  
3 with a disability; and

4 (2) be domiciled in this State; and

5 (3) enroll with a qualified Medicare Part D  
6 Prescription Drug Plan if eligible and apply for all  
7 available subsidies under Medicare Part D; and

8 (4) for the 2006 and 2007 claim years, have a maximum  
9 household income of (i) less than \$21,218 for a household  
10 containing one person, (ii) less than \$28,480 for a  
11 household containing 2 persons, or (iii) less than \$35,740  
12 for a household containing 3 or more persons; and

13 (5) for the 2008 claim year, have a maximum household  
14 income of (i) less than \$22,218 for a household containing  
15 one person, (ii) \$29,480 for a household containing 2  
16 persons, or (iii) \$36,740 for a household containing 3 or  
17 more persons; and

18 (6) for 2009 claim year applications submitted during  
19 calendar year 2010, have annual household income of less  
20 than (i) \$27,610 for a household containing one person;  
21 (ii) less than \$36,635 for a household containing 2  
22 persons; or (iii) less than \$45,657 for a household  
23 containing 3 or more persons; and

24 (7) as of September 1, 2011, have a maximum household  
25 income at or below 200% of the federal poverty level.

26 All individuals enrolled as of December 31, 2005, in the

1 pharmaceutical assistance program operated pursuant to  
2 subsection (f) of this Section and all individuals enrolled as  
3 of December 31, 2005, in the SeniorCare Medicaid waiver  
4 program operated pursuant to Section 5-5.12a of the Illinois  
5 Public Aid Code shall be automatically enrolled in the program  
6 established by this subsection for the first year of operation  
7 without the need for further application, except that they  
8 must apply for Medicare Part D and the Low Income Subsidy under  
9 Medicare Part D. A person enrolled in the pharmaceutical  
10 assistance program operated pursuant to subsection (f) of this  
11 Section as of December 31, 2005, shall not lose eligibility in  
12 future years due only to the fact that they have not reached  
13 the age of 65.

14 To the extent permitted by federal law, the Department may  
15 act as an authorized representative of a beneficiary in order  
16 to enroll the beneficiary in a Medicare Part D Prescription  
17 Drug Plan if the beneficiary has failed to choose a plan and,  
18 where possible, to enroll beneficiaries in the low-income  
19 subsidy program under Medicare Part D or assist them in  
20 enrolling in that program.

21 Beneficiaries under the program established under this  
22 subsection shall be divided into the following 4 eligibility  
23 groups:

24 (A) Eligibility Group 1 shall consist of beneficiaries  
25 who are not eligible for Medicare Part D coverage and who  
26 are:

1 (i) a person with a disability and under age 65; or

2 (ii) age 65 or older, with incomes over 200% of the  
3 Federal Poverty Level; or

4 (iii) age 65 or older, with incomes at or below  
5 200% of the Federal Poverty Level and not eligible for  
6 federally funded means-tested benefits due to  
7 immigration status.

8 (B) Eligibility Group 2 shall consist of beneficiaries  
9 who are eligible for Medicare Part D coverage.

10 (C) Eligibility Group 3 shall consist of beneficiaries  
11 age 65 or older, with incomes at or below 200% of the  
12 Federal Poverty Level, who are not barred from receiving  
13 federally funded means-tested benefits due to immigration  
14 status and are not eligible for Medicare Part D coverage.

15 If the State applies and receives federal approval for  
16 a waiver under Title XIX of the Social Security Act,  
17 persons in Eligibility Group 3 shall continue to receive  
18 benefits through the approved waiver, and Eligibility  
19 Group 3 may be expanded to include persons with  
20 disabilities who are under age 65 with incomes under 200%  
21 of the Federal Poverty Level who are not eligible for  
22 Medicare and who are not barred from receiving federally  
23 funded means-tested benefits due to immigration status.

24 (D) Eligibility Group 4 shall consist of beneficiaries  
25 who are otherwise described in Eligibility Group 2 who  
26 have a diagnosis of HIV or AIDS.

1           The program established under this subsection shall cover  
2 the cost of covered prescription drugs in excess of the  
3 beneficiary cost-sharing amounts set forth in this paragraph  
4 that are not covered by Medicare. The Department of Healthcare  
5 and Family Services may establish by emergency rule changes in  
6 cost-sharing necessary to conform the cost of the program to  
7 the amounts appropriated for State fiscal year 2012 and future  
8 fiscal years except that the 24-month limitation on the  
9 adoption of emergency rules and the provisions of Sections  
10 5-115 and 5-125 of the Illinois Administrative Procedure Act  
11 shall not apply to rules adopted under this subsection (g).  
12 The adoption of emergency rules authorized by this subsection  
13 (g) shall be deemed to be necessary for the public interest,  
14 safety, and welfare.

15           For purposes of the program established under this  
16 subsection, the term "covered prescription drug" has the  
17 following meanings:

18           For Eligibility Group 1, "covered prescription drug"  
19 means: (1) any cardiovascular agent or drug; (2) any  
20 insulin or other prescription drug used in the treatment  
21 of diabetes, including syringe and needles used to  
22 administer the insulin; (3) any prescription drug used in  
23 the treatment of arthritis; (4) any prescription drug used  
24 in the treatment of cancer; (5) any prescription drug used  
25 in the treatment of Alzheimer's disease; (6) any  
26 prescription drug used in the treatment of Parkinson's

1 disease; (7) any prescription drug used in the treatment  
2 of glaucoma; (8) any prescription drug used in the  
3 treatment of lung disease and smoking-related illnesses;  
4 (9) any prescription drug used in the treatment of  
5 osteoporosis; and (10) any prescription drug used in the  
6 treatment of multiple sclerosis. The Department may add  
7 additional therapeutic classes by rule. The Department may  
8 adopt a preferred drug list within any of the classes of  
9 drugs described in items (1) through (10) of this  
10 paragraph. The specific drugs or therapeutic classes of  
11 covered prescription drugs shall be indicated by rule.

12 For Eligibility Group 2, "covered prescription drug"  
13 means those drugs covered by the Medicare Part D  
14 Prescription Drug Plan in which the beneficiary is  
15 enrolled.

16 For Eligibility Group 3, "covered prescription drug"  
17 means those drugs covered by the Medical Assistance  
18 Program under Article V of the Illinois Public Aid Code.

19 For Eligibility Group 4, "covered prescription drug"  
20 means those drugs covered by the Medicare Part D  
21 Prescription Drug Plan in which the beneficiary is  
22 enrolled.

23 Any person otherwise eligible for pharmaceutical  
24 assistance under this subsection whose covered drugs are  
25 covered by any public program is ineligible for assistance  
26 under this subsection to the extent that the cost of those

1 drugs is covered by the other program.

2 The Department of Healthcare and Family Services shall  
3 establish by rule the methods by which it will provide for the  
4 coverage called for in this subsection. Those methods may  
5 include direct reimbursement to pharmacies or the payment of a  
6 capitated amount to Medicare Part D Prescription Drug Plans.

7 For a pharmacy to be reimbursed under the program  
8 established under this subsection, it must comply with rules  
9 adopted by the Department of Healthcare and Family Services  
10 regarding coordination of benefits with Medicare Part D  
11 Prescription Drug Plans. A pharmacy may not charge a  
12 Medicare-enrolled beneficiary of the program established under  
13 this subsection more for a covered prescription drug than the  
14 appropriate Medicare cost-sharing less any payment from or on  
15 behalf of the Department of Healthcare and Family Services.

16 The Department of Healthcare and Family Services ~~or the~~  
17 ~~Department on Aging~~, as appropriate, may adopt rules regarding  
18 applications, counting of income, proof of Medicare status,  
19 mandatory generic policies, and pharmacy reimbursement rates  
20 and any other rules necessary for the cost-efficient operation  
21 of the program established under this subsection.

22 (h) A qualified individual is not entitled to duplicate  
23 benefits in a coverage period as a result of the changes made  
24 by this amendatory Act of the 96th General Assembly.

25 (Source: P.A. 101-10, eff. 6-5-19.)

1 (320 ILCS 25/7) (from Ch. 67 1/2, par. 407)

2 Sec. 7. Payment and denial of claims.

3 (a) In general. The Director shall order the payment from  
4 appropriations made for that purpose of grants to claimants  
5 under this Act in the amounts to which the Department has  
6 determined they are entitled, respectively. If a claim is  
7 denied, the Director shall cause written notice of that denial  
8 and the reasons for that denial to be sent to the claimant.

9 (b) Payment of claims one dollar and under. Where the  
10 amount of the grant computed under Section 4 is less than one  
11 dollar, the Department shall pay to the claimant one dollar.

12 (c) (Blank). ~~Right to appeal. Any person aggrieved by an~~  
13 ~~action or determination of the Department on Aging arising~~  
14 ~~under any of its powers or duties under this Act may request in~~  
15 ~~writing that the Department on Aging reconsider its action or~~  
16 ~~determination, setting out the facts upon which the request is~~  
17 ~~based. The Department on Aging shall consider the request and~~  
18 ~~either modify or affirm its prior action or determination. The~~  
19 ~~Department on Aging may adopt, by rule, procedures for~~  
20 ~~conducting its review under this Section.~~

21 (d) (Blank).

22 (Source: P.A. 96-804, eff. 1-1-10; 97-689, eff. 6-14-12.)

23 (320 ILCS 25/8a) (from Ch. 67 1/2, par. 408.1)

24 Sec. 8a. Confidentiality. ~~(a)~~ Except as otherwise provided  
25 in this Act, all information received by the Department of

1 Revenue or its successor, ~~successors, the Department on Aging~~  
2 ~~and~~ the Department of Healthcare and Family Services, from  
3 claims filed under this Act, or from any investigation  
4 conducted under the provisions of this Act, shall be  
5 confidential, except for official purposes within those  
6 Departments or pursuant to official procedures for collection  
7 of any State tax or enforcement of any civil or criminal  
8 penalty or sanction imposed by this Act or by any statute  
9 imposing a State tax, and any person who divulges any such  
10 information in any manner, except for such purposes and  
11 pursuant to order of the Director of one of those Departments  
12 or in accordance with a proper judicial order, shall be guilty  
13 of a Class A misdemeanor.

14 ~~(b) Nothing contained in this Act shall prevent the~~  
15 ~~Director of Aging from publishing or making available~~  
16 ~~reasonable statistics concerning the operation of the grant~~  
17 ~~programs contained in this Act wherein the contents of claims~~  
18 ~~are grouped into aggregates in such a way that information~~  
19 ~~contained in any individual claim shall not be disclosed.~~

20 ~~(c) The Department on Aging shall furnish to the Secretary~~  
21 ~~of State such information as is reasonably necessary for the~~  
22 ~~administration of reduced vehicle registration fees pursuant~~  
23 ~~to Section 3-806.3 of the Illinois Vehicle Code.~~

24 ~~(d) The Director of the Department on Aging shall make~~  
25 ~~information available to the State Board of Elections as may~~  
26 ~~be required by an agreement the State Board of Elections has~~

1 ~~entered into with a multi-state voter registration list~~  
2 ~~maintenance system.~~

3 (Source: P.A. 100-201, eff. 8-18-17.)

4 (320 ILCS 25/9) (from Ch. 67 1/2, par. 409)

5 Sec. 9. Fraud; error.

6 (a) Any person who files a fraudulent claim for a grant  
7 under this Act, or who for compensation prepares a claim for a  
8 grant and knowingly enters false information on an application  
9 for any claimant under this Act, or who fraudulently files  
10 multiple applications, or who fraudulently states that a  
11 person without a disability is a person with a disability, or  
12 who, prior to July 1, 2012, fraudulently procures  
13 pharmaceutical assistance benefits, or who fraudulently uses  
14 such assistance to procure covered prescription drugs, or who,  
15 on behalf of an authorized pharmacy, files a fraudulent  
16 request for payment, is guilty of a Class 4 felony for the  
17 first offense and is guilty of a Class 3 felony for each  
18 subsequent offense.

19 (b) (Blank).

20 ~~(c) The Department on Aging may recover from a claimant~~  
21 ~~any amount paid to that claimant under this Act on account of~~  
22 ~~an erroneous or fraudulent claim, together with 6% interest~~  
23 ~~per year. Amounts recoverable from a claimant by the~~  
24 ~~Department on Aging under this Act may, but need not, be~~  
25 ~~recovered by offsetting the amount owed against any future~~

1 ~~grant payable to the person under this Act.~~

2       The Department of Healthcare and Family Services may  
3 recover for acts prior to July 1, 2012 from an authorized  
4 pharmacy any amount paid to that pharmacy under the  
5 pharmaceutical assistance program on account of an erroneous  
6 or fraudulent request for payment under that program, together  
7 with 6% interest per year. The Department of Healthcare and  
8 Family Services may recover from a person who erroneously or  
9 fraudulently obtains benefits under the pharmaceutical  
10 assistance program the value of the benefits so obtained,  
11 together with 6% interest per year.

12       (d) A prosecution for a violation of this Section may be  
13 commenced at any time within 3 years of the commission of that  
14 violation.

15       (Source: P.A. 99-143, eff. 7-27-15.)

16       (320 ILCS 25/4.05 rep.)

17       (320 ILCS 25/8 rep.)

18       (320 ILCS 25/12 rep.)

19       (320 ILCS 25/13 rep.)

20       Section 15. The Senior Citizens and Persons with  
21 Disabilities Property Tax Relief Act is amended by repealing  
22 Sections 4.05, 8, 12, and 13."