92\_HB0275 LRB9201551DJmgA

- 1 AN ACT in relation to disabled persons.
- 2 Be it enacted by the People of the State of Illinois,
- 3 represented in the General Assembly:
- 4 Section 5. The Illinois Act on the Aging is amended by
- 5 changing Section 4.02 as follows:
- 6 (20 ILCS 105/4.02) (from Ch. 23, par. 6104.02)
- Sec. 4.02. The Department shall establish a program of 7 8 services to prevent unnecessary institutionalization of persons age 60 and older in need of long term care or who are 9 established as persons who suffer from Alzheimer's disease or 10 a related disorder under the Alzheimer's Disease Assistance 11 Act, thereby enabling them to remain in their own homes or in 12 13 other living arrangements. Such preventive services, which may be coordinated with other programs for the aged and 14 15 monitored by area agencies on aging in cooperation with the 16 Department, may include, but are not limited to, any or all
- 18 (a) home health services;

of the following:

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- 19 (b) home nursing services;
- 20 (c) homemaker services;
- 21 (d) chore and housekeeping services;
- (e) day care services;
- 23 (f) home-delivered meals;
- 24 (g) education in self-care;
- 25 (h) personal care services;
- 26 (i) adult day health services;
- 27 (j) habilitation services;
- 28 (k) respite care;
- 29 (1) other nonmedical social services that may 30 enable the person to become self-supporting; or
- 31 (m) clearinghouse for information provided by

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senior citizen home owners who want to rent rooms to or share living space with other senior citizens.

The Department shall establish eligibility standards for such services taking into consideration the unique economic and social needs of the target population for whom they are to be provided. Such eligibility standards shall be based on the recipient's ability to pay for services; provided, however, that in determining the amount and nature of services for which a person may qualify, consideration shall not be given to the value of cash, property or other assets held in the name of the person's spouse pursuant to a written agreement dividing marital property into equal but separate shares or pursuant to a transfer of the person's interest in a home to his spouse, provided that the spouse's share of the marital property is not made available to the person seeking such services.

The eligibility standards must include a provision that if eligibility for a particular home or community-based service is based on a person's functional need, every person with a similar functional need is eligible for that service, regardless of the nature of the person's disability. For persons making the transition from institutional care to home or community-based care, the Department must ensure that (i) each person's needs and resources are taken into account in arranging appropriate community reintegration services and (ii) those services are provided as appropriate regardless of the nature of the person's disability. The Department must ensure that persons who may be or may become eligible for home or community-based services under this Section are notified of their right to receive those services and notified of the particulars of all available services.

For persons receiving or at risk of receiving institutional care, the Department, in cooperation with the Department of Human Services and the Department of Public

Aid, shall develop transition teams to identify those persons and inform them of their right to receive services in a setting less restrictive than institutional care. For persons receiving institutional care who wish to receive services in a less restrictive home or community setting, the transition teams shall assist those persons in making the transition from institutional care to home or community-based care. The transition teams shall be composed of health care and other service professionals, advocates for persons with

disabilities, and friends and family members of persons with

disabilities.

The Department shall, in conjunction with the Department of Public Aid, seek appropriate amendments under Sections 1915 and 1924 of the Social Security Act. The purpose of the amendments shall be to extend eligibility for home and community based services under Sections 1915 and 1924 of the Social Security Act to persons who transfer to or for the benefit of a spouse those amounts of income and resources allowed under Section 1924 of the Social Security Act. Subject to the approval of such amendments, the Department shall extend the provisions of Section 5-4 of the Illinois Public Aid Code to persons who, but for the provision of home or community-based services, would require the level of care provided in an institution, as is provided for in federal law.

Those persons no longer found to be eligible for receiving noninstitutional services due to changes in the eligibility criteria shall be given 60 days notice prior to actual termination. Those persons receiving notice of termination may contact the Department and request the determination be appealed at any time during the 60 day notice period. With the exception of the lengthened notice and time frame for the appeal request, the appeal process shall follow the normal procedure. In addition, each person

1 affected regardless of the circumstances for discontinued

eligibility shall be given notice and the opportunity to

3 purchase the necessary services through the Community Care

4 Program. If the individual does not elect to purchase

services, the Department shall advise the individual of

6 alternative services.

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7 The target population identified for the purposes of this Section are persons age 60 and older with an identified 8 9 service need. Priority shall be given to those who are at imminent risk of institutionalization. The services shall be 10 11 provided to eligible persons age 60 and older to the extent that the cost of the services together with the other 12 personal maintenance expenses of the persons are reasonably 13 related to the standards established for care in a group 14

facility appropriate to the person's condition.

These non-institutional services, pilot projects or experimental facilities may be provided as part of or in addition to those authorized by federal law or those funded and administered by the Department of Human Services. The Departments of Human Services, Public Aid, Public Health, Veterans' Affairs, and Commerce and Community Affairs and other appropriate agencies of State, federal and local governments shall cooperate with the Department on Aging in the establishment and development of the non-institutional services.

The Department shall require an annual audit from all chore/housekeeping and homemaker vendors contracting with the Department under this Section. The annual audit shall assure that each audited vendor's procedures are in compliance with Department's financial reporting guidelines requiring a 27% administrative cost split and a 73% employee wages and benefits cost split. The audit is a public record under the Freedom of Information Act.

34 The Department shall execute, relative to the nursing

home prescreening project, written inter-agency agreements
with the Department of Human Services and the Department of

Public Aid, to effect the following: (1) intake procedures

and common eligibility criteria for those persons who are

receiving non-institutional services; and (2) the

establishment and development of non-institutional services

7 in areas of the State where they are not currently available

8 or are undeveloped. On and after July 1, 1996, all nursing

home prescreenings for individuals 60 years of age or older

shall be conducted by the Department.

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

The Department, or the Department's authorized representative, shall recover the amount of moneys expended for services provided to or in behalf of a person under this Section by a claim against the person's estate or against the estate of the person's surviving spouse, but no recovery may be had until after the death of the surviving spouse, if any, and then only at such time when there is no surviving child who is under age 21, blind, or permanently and totally disabled. This paragraph, however, shall not bar recovery, at the death of the person, of moneys for services provided to the person or in behalf of the person under this Section to which the person was not entitled; provided that such recovery shall not be enforced against any real estate while it is occupied as a homestead by the surviving spouse or

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

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

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Beginning on the effective date of this Amendatory Act of 1991, no person may perform chore/housekeeping and homemaker services under a program authorized by this Section unless that person has been issued a certificate of pre-service to do so by his or her employing agency. Information gathered to effect such certification shall include (i) the person's name, (ii) the date the person was hired by his or her current employer, and (iii) the training, including dates and levels. Persons engaged in the program authorized by this Section before the effective date of this amendatory Act of 1991 shall be issued a certificate of all pre- and in-service

training completed to their employees.

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training from his or her employer upon submitting the
necessary information. The employing agency shall be
required to retain records of all staff pre- and in-service
training, and shall provide such records to the Department
upon request and upon termination of the employer's contract
with the Department. In addition, the employing agency is
responsible for the issuance of certifications of in-service

The Department is required to develop a system to ensure that persons working as homemakers and chore housekeepers receive increases in their wages when the federal minimum wage is increased by requiring vendors to certify that they are meeting the federal minimum wage statute for homemakers and chore housekeepers. An employer that cannot ensure that the minimum wage increase is being given to homemakers and chore housekeepers shall be denied any increase in reimbursement costs.

The Department on Aging and the Department of Human Services shall cooperate in the development and submission of an annual report on programs and services provided under this Section. Such joint report shall be filed with the Governor and the General Assembly on or before September 30 each year.

The requirement for reporting to the General Assembly shall be satisfied by filing copies of the report with the Speaker, the Minority Leader and the Clerk of the House of Representatives and the President, the Minority Leader and the Secretary of the Senate and the Legislative Research Unit, 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.

the State Library Act.

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

- 1 under the Emergency Budget Act of Fiscal Year 1992, and who
- 2 do not meet the eligibility standards in effect on or after
- 3 July 1, 1992, shall remain ineligible on and after July 1,
- 4 1992. Those persons previously not required to cost-share
- 5 and who were required to cost-share effective March 1, 1992,
- 6 shall continue to meet cost-share requirements on and after
- 7 July 1, 1992. Beginning July 1, 1992, all clients will be
- 8 required to meet eligibility, cost-share, and other
- 9 requirements and will have services discontinued or altered
- when they fail to meet these requirements.
- 11 (Source: P.A. 91-303, eff. 1-1-00; 91-798, eff. 7-9-00.)
- 12 Section 10. The Mental Health and Developmental
- 13 Disabilities Administrative Act is amended by changing
- 14 Section 50 as follows:
- 15 (20 ILCS 1705/50) (from Ch. 91 1/2, par. 100-50)
- 16 Sec. 50. An annual plan shall set forth the service and
- 17 program plans of the Department. An annual plan shall
- 18 include:
- 19 (1) a record of the past year's performance in services
- and programs;
- 21 (2) the current year's plans for services and programs;
- 22 and
- 23 (3) plans for services and programs for 2 succeeding
- 24 fiscal years.
- The annual plan shall also include: needs assessment;
- goals and objectives, with time-frames; and a description of
- 27 measures used to evaluate program effectiveness and
- achievement of objectives.
- 29 An annual plan shall be coordinated with Federal planning
- 30 requirements, as well as with other State planning
- 31 activities, including those required by P.A. 79-1035 and the
- 32 "Community Mental Health Act of 1963", as amended; to the

1 extent possible, the plan shall use definitions and 2 classifications consistent with the Statewide process so that the Department's plan can be coordinated with 3 4 State health plans on an annual basis. The Department shall 5 also coordinate its planning efforts with local and regional 6 mental health authorities. The plan shall delineate a 7 comprehensive integrated service system. The following 8 information shall be provided on a Statewide and a regional

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The plan shall include any financial obligations or arrangements entered into by the Department for service delivery, including individual care grants, purchase of care, and grant in aid, and the exercise of all other powers and duties of the Department. It shall also include any research programs and any time-limited pilot or experimental projects. Plans for non-institutional services relating to recipients of mental health and developmental disability services from the Department shall be included, such as community-based alternative living arrangements and other aftercare support services for former residents, as well as intervention programs for persons with a high risk of being institutionalized. The rationale for selecting service priorities shall be annotated. A plan shall also include monitoring requirements and methods for client and program evaluation.

Plans for non-institutional services must include a provision that if eligibility for a particular home or community-based service is based on a person's functional need, every person with a similar functional need is eligible for that service, regardless of the person's age or the nature of the person's disability. For persons making the transition from institutional care to home or community-based care, the Department's plan must ensure that (i) each person's needs and resources are taken into account in

1 arranging appropriate community reintegration services and

2 (ii) those services are provided as appropriate regardless of

3 the person's age or the nature of the person's disability.

The Department's plan must ensure that persons who may be or

may become eligible for home or community-based services are

notified of their right to receive those services and

7 <u>notified of the particulars of all available services.</u>

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8 For persons receiving or at risk of receiving 9 institutional care in a State-operated or other facility, the Department's plan shall provide for the Department's 10 11 development, in cooperation with the Department on Aging and the Department of Public Aid, of transition teams to identify 12 those persons and inform them of their right to receive 13 services in a setting less restrictive than institutional 14 15 care. For persons receiving institutional care who wish to receive services in a less restrictive home or community 16 setting, the transition teams shall assist those persons in 17 making the transition from institutional care to home or 18 community-based care. The transition teams shall be composed 19 20 of health care and other service professionals, advocates for 21 persons with disabilities, and friends and family members of 22 persons with disabilities.

The plan shall include a description of all State operated facilities, their fiscal operations and plans for accreditation. It shall also include a statement of the role and function of existing or planned State facilities in the delivery of mental health or developmental disability services in the State and region where they are located, and shall indicate: the classifications and levels of staffing; types of disabilities or illnesses to be treated; historical and current physical plant utilization data; and plans for the development of or phase out of programs. To the extent possible, the plan shall identify, describe and assess the availability and utilization of non-State resources in the

- 1 planning, development and delivery of mental health and
- 2 developmental disability services. The plan shall include
- 3 any capital development, rehabilitation or conversion plans
- 4 for existing State facilities.
- 5 The plan shall include a family impact statement
- 6 indicating how the Department's actions have strengthened and
- 7 promoted stability within Illinois families.
- 8 (Source: P.A. 86-922.)
- 9 Section 15. The Illinois Public Aid Code is amended by
- 10 adding Section 5-5d as follows:
- 11 (305 ILCS 5/5-5d new)
- 12 <u>Sec. 5-5d. Home and community-based services;</u>
- 13 <u>eligibility; transition teams.</u>
- 14 (a) The eligibility standards for home and
- 15 <u>community-based</u> <u>services</u> <u>provided</u> <u>under</u> <u>the</u> <u>medical</u>
- 16 <u>assistance program under this Article must include a</u>
- 17 provision that if eligibility for a particular home or
- 18 <u>community-based service is based on a person's functional</u>
- 19 <u>need, every person with a similar functional need is eligible</u>
- 20 <u>for that service, regardless of the person's age or the</u>
- 21 <u>nature of the person's disability.</u>
- 22 (b) For persons making the transition from institutional
- 23 <u>care to home or community-based care, the Department must</u>
- 24 <u>ensure that (i) each person's needs and resources are taken</u>
- 25 <u>into account in arranging appropriate community reintegration</u>
- 26 <u>services and (ii) those services are provided as appropriate</u>
- 27 <u>regardless</u> of the person's age or the nature of the person's
- disability.
- (c) The Department must ensure that persons who may be
- 30 <u>or may become eligible for home or community-based services</u>
- 31 <u>under the medical assistance program under this Article are</u>
- 32 <u>notified of their right to receive those services and</u>

- 1 <u>notified of the particulars of all available services.</u>
- 2 (d) For persons receiving or at risk of receiving
- 3 <u>institutional care</u>, the Department, in cooperation with the
- 4 <u>Department on Aging and the Department of Human Services</u>,
- 5 shall develop transition teams to identify those persons and
- 6 inform them of their right to receive services in a setting
- 7 <u>less restrictive than institutional care.</u> For persons
- 8 receiving institutional care who wish to receive services in
- 9 <u>a less restrictive home or community setting, the transition</u>
- 10 teams shall assist those persons in making the transition
- 11 <u>from institutional care to home or community-based care. The</u>
- 12 <u>transition teams shall be composed of health care and other</u>
- 13 service professionals, advocates for persons with
- 14 <u>disabilities</u>, and friends and family members of persons with
- disabilities.
- 16 Section 99. Effective date. This Act takes effect upon
- 17 becoming law.