

AN ACT concerning health.

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

Section 5. The Developmental Disability and Mental Disability Services Act is amended by changing the heading of Article VII-A and Section 7A-1 and by adding Sections 7A-2, 7A-3, and 7A-4 as follows:

(405 ILCS 80/Art. VII-A heading)

ARTICLE VII-A. STABILIZATION SUPPORT PILOT PROGRAMS ~~DIVERSION
FROM FACILITY-BASED CARE PROGRAM~~

(Source: P.A. 100-924, eff. 7-1-19; 101-81, eff. 7-12-19.)

(405 ILCS 80/7A-1)

(Section scheduled to be repealed on January 1, 2025)

Sec. 7A-1. Stabilization Support Pilot Programs ~~Diversion
from Facility based Care Pilot Program.~~

(a) The purposes of this Article are to:

(1) decrease the number of admissions to State developmental centers ~~State-operated facilities;~~

(2) address the needs of individuals receiving Home and Community Based Services (HCBS) with intellectual disabilities or developmental disabilities who are at risk of facility-based care due to significant behavioral

~~challenges, some with a dual diagnosis of mental illness,~~
by providing a community-based residential alternative to
facility-based care consistent with their personal
~~individual~~ plans, and to transition these individuals back
to home and community-based services programming ~~a~~
~~traditional community integrated living arrangement or~~
~~other HCBS community setting program;~~

(3) (blank); ~~create greater capacity within the~~
~~short term stabilization homes by allowing individuals who~~
~~need an extended period of treatment to transfer to a~~
~~long term stabilization home;~~

(4) stabilize the existing community-integrated living
arrangement system ~~homes~~ where the presence of individuals
with complex behavioral challenges is disruptive to their
housemates; ~~and~~

(5) add support services to enhance community service
providers who serve individuals with significant
behavioral challenges; and ~~-~~

(6) increase the number of individuals transitioning
out of State developmental centers into home and
community-based services programming.

(b) (Blank). ~~Subject to appropriation or the availability~~
~~of other funds for these purposes at the discretion of the~~
~~Department, the Department shall establish the Diversion from~~
~~Facility-based Care Pilot Program consisting of at least 6~~
~~homes in various locations in this State in accordance with~~

~~this Article and the following model:~~

~~(1) the Diversion from Facility-based Care Model shall serve individuals with intellectual disabilities or developmental disabilities who are currently receiving HCBS services and are at risk of facility based care due to significant behavioral challenges, some with a dual diagnosis of mental illness, for a period ranging from one to 2 years, or longer if appropriate for the individual;~~

~~(2) the Program shall be regulated in accordance with the community integrated living arrangement guidelines;~~

~~(3) each home shall support no more than 4 residents, each having his or her own bedroom;~~

~~(4) if, at any point, an individual, his or her guardian, or family caregivers, in conjunction with the provider and clinical staff, believe the individual is capable of participating in a HCBS service, those opportunities shall be offered as they become available; and~~

~~(5) providers shall have adequate resources, experience, and qualifications to serve the population target by the Program, as determined by the Department;~~

~~(6) participating Program providers and the Department shall participate in an ongoing collaborative whereby best practices and treatment experiences would be shared and utilized;~~

~~(7) home locations shall be proposed by the provider~~

~~in collaboration with other community stakeholders;~~

~~(8) The Department, in collaboration with participating providers, by rule shall develop data collection and reporting requirements for participating community service providers. Beginning December 31, 2020 the Department shall submit an annual report electronically to the General Assembly and Governor that outlines the progress and effectiveness of the pilot program. The report to the General Assembly shall be filed with the Clerk of the House of Representatives and the Secretary of the Senate in electronic form only, in the manner that the Clerk and the Secretary shall direct;~~

~~(9) the staffing model shall allow for a high level of community integration and engagement and family involvement; and~~

~~(10) appropriate day services, staff training priorities, and home modifications shall be incorporated into the Program model, as allowed by HCBS authorization.~~

~~(c) (Blank). This Section is repealed on January 1, 2025.~~

(Source: P.A. 102-1109, eff. 12-21-22.)

(405 ILCS 80/7A-2 new)

Sec. 7A-2. Long-Term Stabilization Support Program.

(a) Subject to appropriation or the availability of other funds for these purposes at the discretion of the Department, the Department shall establish the Long-Term Stabilization

Support Program consisting of at least 8 homes across the State in accordance with this Article and the following requirements:

(1) The Long-Term Stabilization Support Program shall serve individuals with intellectual disabilities or developmental disabilities who are currently receiving home and community-based services and are at risk of facility-based care due to significant behavioral challenges and individuals transitioning out of State developmental centers for a period of up to 2 years, or longer if appropriate for the individual.

(2) The program shall be regulated by the Department in accordance with the community-integrated living arrangement guidelines set forth under the Community-Integrated Living Arrangement Licensure and Certification Act and any applicable rules or policies.

(3) Each home shall support no more than 4 residents, each having his or her own bedroom.

(4) If an individual is in need of this program, it must be reflected in his or her individual plan.

(5) The individual, in conjunction with his or her guardian, if applicable, may change his or her home and community-based services, including his or her participation in this program, including requesting alternate placement when the wants or needs of the individual, as reflected in the individual's personal

plan, would be better served in another setting along the full spectrum of care. If an individual, his or her guardian, if applicable, or family caregivers, in conjunction with the independent service coordination agency, the provider, and clinical staff, believe the individual's wants or needs, as reflected in the individual's personal plan, would be better served in an alternate setting along the full spectrum of care, those opportunities shall be discussed as they are identified. The request may be made at any point during the period specified in paragraph (1) or at the conclusion of that period, when assessing whether continued participation in the program would be appropriate for the individual.

(6) The Department shall ensure providers have adequate resources, experience, and qualifications to serve the population targeted by this program.

(7) The Department shall lead the providers in an ongoing collaboration, whereby best practices and treatment experiences shall be shared and utilized.

(8) The providers shall propose home locations in collaboration with other community stakeholders.

(b) Beginning March 31, 2025, the Department shall publish quarterly reports on the following:

(1) the number of individuals participating in the program;

(2) the number of individuals transitioning from the

program;

(3) the location where individuals transition to during and after participation in the program; and

(4) the length of time individuals are participating in the program.

The report to the General Assembly shall be filed with the Clerk of the House of Representatives and the Secretary of the Senate in electronic form, in the manner that the Clerk and the Secretary shall direct.

(c) The Department shall adopt rules to develop and implement this program.

(405 ILCS 80/7A-3 new)

Sec. 7A-3. Short-Term Stabilization Support Program.

(a) Subject to appropriation or the availability of other funds for these purposes at the discretion of the Department, the Department shall establish the Short-Term Stabilization Support Program consisting of at least 10 homes across the State, in accordance with this Article and the following requirements:

(1) The Short-Term Stabilization Support Program shall serve individuals with intellectual disabilities or developmental disabilities who are currently receiving home and community-based services and are at risk of facility-based care due to significant behavioral challenges for a period ranging up to 90 days with an

option to extend if appropriate for the individual.

(2) The program shall be regulated by the Department in accordance with the community-integrated living arrangement guidelines set forth under the Community-Integrated Living Arrangement Licensure and Certification Act and any applicable rules or policies or shall be regulated by the Department of Children and Family Services in accordance with child group home guidelines set forth under the Children and Family Services Act and any applicable rules or policies.

(3) Each home shall support no more than 4 residents, each having his or her own bedroom.

(4) If an individual is in need of this program, it must be reflected in his or her individual plan.

(5) The individual, in conjunction with his or her guardian, if applicable, may change his or her home and community-based services, including his or her participation in this program, including requesting alternate placement when the wants or needs of the individual, as reflected in the individual's personal plan, would be better served in another setting along the full spectrum of care. If an individual, his or her guardian, if applicable, or family caregivers, in conjunction with the independent service coordination agency, the provider, and clinical staff, believe the individual's wants or needs, as reflected in the

individual's personal plan, would be better served in an alternate setting along the full spectrum of care, those opportunities shall be discussed as they are identified. The request may be made at any point during the period specified in paragraph (1) or at the conclusion of that period, when assessing whether continued participation in the program would be appropriate for the individual.

(6) The Department shall ensure providers have adequate resources, experience, and qualifications to serve the population targeted by this program.

(7) The Department shall lead the providers in an ongoing collaboration, whereby best practices and treatment experiences shall be shared and utilized.

(8) The providers shall propose home locations in collaboration with other community stakeholders.

(b) Beginning March 31, 2025, the Department shall publish quarterly reports on the following:

(1) the number of individuals participating in the program;

(2) the number of individuals transitioning from the program;

(3) the location where individuals transition to during and after participation in the program; and

(4) the length of time individuals are participating in the program.

The report to the General Assembly shall be filed with the

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Clerk of the House of Representatives and the Secretary of the Senate in electronic form, in the manner that the Clerk and the Secretary shall direct.

(c) The Department shall adopt rules to develop and implement this program.

(405 ILCS 80/7A-4 new)

Sec. 7A-4. Repealer. This Article is repealed January 1, 2028.