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1) **Heading of the Part:** Employer Training Investment Program

2) **Code Citation:** 56 Ill. Adm. Code 2650

3) **Section Numbers:**
   - 2650.10    Amend
   - 2650.20    Amend
   - 2650.40    Amend
   - 2650.50    Amend
   - 2650.110   Amend
   - 2650.120   Amend
   - 2650.130   Amend
   - 2650.310   Amend
   - 2650.320   Amend
   - 2650.330   Amend

4) **Statutory Authority:** Implementing Section 605-800 and authorized by Section 605-95 of the Civil Administrative Code of Illinois [20 ILCS 605/605-800 and 605-95].

5) **A Complete Description of the Subjects and Issues Involved:** These rules are for the Employer Training Investment Program (ETIP). The rules are based upon the old Industrial Training Program (ITP) Rules, since the ETIP program uses the same statutory authority. These rules encompass both the single and multi company options for the small and large company components of the ETIP program. There are no real substantive changes between the ITP rules and the ETIP rules.

6) **Will these amendments replace any emergency amendments currently in effect?** No

7) **Does this rulemaking contain an automatic repeal date?** No

8) **Does this rulemaking contain incorporations by reference?** No

9) **Are there any proposed amendments containing incorporations by reference?** No

10) **Statement of Statewide Policy Objective:** The rulemaking does not create or expand a State Mandate as defined in Section 3(b) of the State Mandates Act (30 ILCS 805).

11) **Time, Place and Manner in which interested persons may comment on this proposed rulemaking:**
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Jolene Clarke  
Department of Commerce and Economic Opportunity  
620 E. Adams Street  
Springfield, Illinois 62701  
Phone: 217/557-1820  
Fax: 217-782-0038  
e-mail: jolene_clarke@commerce.state.il.us

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses and small municipalities affected: These rules apply to both small and large company components of the ETIP program.

B) Reporting, bookkeeping or other procedures required for compliance: Bookkeeping, financial management, program administration and reporting of approved grants.

C) Types of professional skills necessary for compliance: Grantees would already possess the skills necessary for compliance.

13) Regulatory Agenda on which this rulemaking was summarized: This rulemaking was not included on either of the two most recent regulatory agendas because: the Department did not anticipate the changes.

The full text of the Proposed Amendments begins on the next page:
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TITLE 56: LABOR AND EMPLOYMENT
CHAPTER III: DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY COMMUNITY AFFAIRS

PART 2650
EMPLOYER TRAINING INVESTMENT INDUSTRIAL TRAINING PROGRAM

SUBPART A: GENERAL REQUIREMENTS

Section
2650.10 Purpose
2650.20 Definitions
2650.30 Eligible Applicants and Training Activities
2650.40 Allowable Costs
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2650.60 Nondiscrimination
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2650.80 Allowable Costs (Recodified)
2650.90 Grant Administration Requirements (Recodified)
2650.100 Nondiscrimination (Recodified)

SUBPART B: SINGLE COMPANY APPLICANTS

Section
2650.110 Application Procedures
2650.120 Application Documentation
2650.130 Application Evaluation
2650.140 Selection for Funding

SUBPART C: SECONDARY AND POST-SECONDARY EDUCATION INSTITUTION APPLICANTS

Section
2650.210 Application Procedures (Repealed)
2650.220 Application Documentation (Repealed)
2650.230 Application Evaluation (Repealed)
2650.240 Selection for Funding (Repealed)
2650.250 Reporting Requirements (Repealed)
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SUBPART D: MULTI-COMPANY AND MEMBERSHIP TRAINING PROJECT APPLICANTS

Section
2650.310 Application Procedures
2650.320 Application Documentation
2650.330 Application Evaluation
2650.340 Selection for Funding
2650.350 Administrative Requirements (Repealed)

AUTHORITY: Implementing Section 605-800 and authorized by Section 605-95 of the Civil Administrative Code of Illinois [20 ILCS 605/605-800 and 605-95].


SUBPART A: GENERAL REQUIREMENTS

Section 2650.10 Purpose

Through the Illinois Employer Training InvestmentIndustrial Training Program (Program), the Department of Commerce and Economic OpportunityCommunity Affairs (Department) will provide training grants to businesses operating or locating in Illinois in conjunction with planned permanent expansion, location or retention activities; and to multi-company training projects sponsored by business or industry associations, institutions of secondary and higher education, strategic business partnerships, large manufacturers for supplier network companies, and labor organizations. The purpose of the Program is to enhance employment opportunities for Illinois citizens by assisting Illinois employers in the training of their workforce, to assist multi-company training projects in addressing common employee training needs identified by participating companies, and to facilitate self-employment by encouragement and preparation through comprehensive, instructional programs and services and entrepreneurial education.

(Source: Amended at 29 Ill. Reg. _____, effective ____________)
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Section 2650.20 Definitions

Director – The Director of the Department of Commerce and Economic Opportunity.

Employee Training – Training programs, either on-the-job, classroom or any combination thereof, sponsored by an employer or other eligible grant recipient on behalf of employers, which are intended to provide employees with the skills required to perform their current job or as a condition of continued employment. The employee skill requirements are established by the employer or participating employers and may include basic, technical and managerial skills.

Entrepreneurial Education and Training – Any education and training program operated by or in cooperation with the Illinois Institute for Entrepreneurial Education for youth and/or adult learners that is intended: to enhance the business-building capabilities of aspiring and practicing entrepreneurs; to assist executives in transition who are interested in entrepreneurial growth opportunities; to encourage an early interest in entrepreneurship among youth; to develop programs for successful companies that want to expand the growth of entrepreneurship within their own organizations; and/or, to introduce low-income and at-risk youth to the world of business and entrepreneurship by teaching them how to develop and operate their own small business; and/or to enhance the business-building capabilities of researchers, developers, inventors, professors and other to successfully commercialize technology into viable business enterprises.

Grantee – Any program applicant whose proposal is funded by the Department through a grant.

Labor Organization – Any collective bargaining unit or any labor entity formed by collective bargaining units such as state labor councils, district labor councils, local central labor councils and international unions as well as the American Federation of Labor and Congress of Industrial Organizations (AFL-CIO).

Large Company – Defined by the Department based on number of employees, sales dollars, or other indicators as determined by the Department.

Large Manufacturers Supplier Network – Any company located or with facilities in the State of Illinois which supplies products or services to an original equipment manufacturer or large manufacturing assembly facility in Illinois.
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Location Activities – Activities necessary to retain existing companies and to place or attract new companies to Illinois (e.g., training).

Multi-Company Training Project – Any project submitted for the benefit of more than two companies which addresses the common employee training, retraining or skills upgrading needs identified by participating companies. The participating companies shall not include units of local, municipal, home rule, county, state or federal government or government agencies or government-operated facilities.

New Employee – An individual who is hired by the grantee during the term of a training contract or who is permanently transferred to Illinois during the term of a training contract.

Planned Permanent Expansion – Any of the following will apply:

- Permanent increase in the workforce (no minimum number of new jobs required);
- Addition of new product line or expansion of existing product line; or
- New capital investment in machinery or equipment.

Retention Activities – Activities necessary to keep existing companies in Illinois that might otherwise leave the State or reduce their workforce (e.g., retraining, upgrading, cross-training).

Self-Employment Training Program – A competency-based business management training program in which demonstrated proficiency to complete a business operating and financing plan is a prerequisite to successful completion.

Retraining – The training of an employee with the intent that the employee will learn to perform a significantly different type of job than was previously held by that employee.

Small Company – Those companies not meeting the minimum threshold definition of a large company.

Strategic Business Partnership – A formal or informal agreement between more than two businesses with facilities in Illinois where an objective of the partnership
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is to address employee training or other common workforce development issues among the participating businesses.

Trainee – A full-time existing or newly-hired employee of a company who is participating in a training, retraining or skills upgrading program. Part-time, seasonal, temporary and/or contractual employees cannot be considered trainees for program reimbursement.

Upgrade Training – The enhancement of employees' job skills with the intent that the employee will continue working at the same type of job (e.g., cross-training of skilled employees).

(Source: Amended at 29 Ill. Reg. _____, effective ____________)

Section 2650.40 Allowable Costs

a) Grants for employee training to single companies will allow for reimbursement or payment on the terms and conditions agreed to between the grantee and the Department through the execution of a Notice of Grant Agreement. The Agreement includes the following sections, all of which are incorporated and made part of the Agreement: (I) Grantee's Approved Budget, (II) Special Grant Conditions, (III) Grantee's Scope of Work, (IV) Program Terms and Conditions, (V) General Provisions, and (VI) Required Certifications. No grant shall exceed 50% of the total approved training costs. Allowable costs for single company training projects include:

1) Instructor costs, including wages, fringe benefits and travel expenses.
2) Costs for tuition and educational fees.
3) Training materials.
4) Rent or lease of training equipment and/or facilities.
5) Other usual and customary training costs.
6) Trainee travel expenses.
7) Trainee wages and fringe benefits.
NOTICE OF PROPOSED AMENDMENTS

8) Audit costs.

b) Grants for multi-company or membership training projects will allow for reimbursement or payment on the terms and conditions agreed to between the grantee and the Department through the execution of a Notice of Grant Agreement. The Agreement includes the following sections, all of which are incorporated and made part of the Agreement: (I) Grantee's Approved Budget, (II) Special Grant Conditions, (III) Grantee's Scope of Work, (IV) Program Terms and Conditions, (V) General Provisions, and (VI) Required Certifications. No grant shall exceed 50% of the total approved training costs. For the multi-company training projects, the Department requires that a minimum of 50% of the local contribution be a direct cash contribution toward the training project by the companies participating in the training project. Allowable costs for multi-company or membership training projects include:

1) Administrative costs of tracking, documenting, reporting, auditing and processing training funds or project costs. Administrative costs must be reasonable and shall not exceed 15% of the total approved direct training expenditures, including indirect costs.

2) Costs of curriculum development. The Department will only reimburse for the costs of curriculum development when such curricula are judged by the Department as being of benefit to multiple Illinois employers and such curricula will be considered to be in the public domain.

The Grantee shall include the following statement in all written materials produced in whole or in part by funds awarded under this Grant Agreement: "This publication and material were supported in whole or in part by an [Employer Training Investment] [Industrial Training Program] grant awarded by the Illinois Department of Commerce and [Economic Opportunity] [Community Affairs]. Representations made by this publication and material do not necessarily reflect the opinions and conclusions of the Department."

The Department reserves the right to request at least one copy of all training materials used by the Grantee or any subcontractor for training which is eligible for reimbursement under the grant. The Department will not distribute any proprietary information nor circulate any training materials without the expressed consent of the Grantee or subcontractor with the exception of those materials which are developed in whole or in
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part with State funds.

3) Training materials, including manuals, workbooks, videotapes and other materials that are used for training purposes only. Any item that can be depreciated will not be considered to be training materials.

4) Instructor costs, including wages, fringe benefits, and travel expenses.

5) Rent or lease of training equipment and/or facilities.

6) Other usual and customary training costs.

(Source: Amended at 29 Ill. Reg. _____, effective ____________)

Section 2650.50 Grant Administration Requirements

a) Audits – The Department reserves the right to conduct special audits at any time during normal working hours of funds expended under Department grants (e.g., evidence of fraud or abuse). If the Department determines that an audit of grant funds will be required for an individual company, the scope of the audit will be outlined in the grant contract.

b) Monitoring – The Director will ensure that a minimum of one on-site grant monitoring visit is conducted by the Department either during the course of the grant period or within six months following the end of the grant period. The Department will verify that the Grantee's financial management system is structured to provide for accurate, current and complete disclosure of the financial results of the grant program in accordance with all provisions, terms and conditions contained in the grant contract. The Department also reserves the right to contact any company participating in a multi-company training project funded by this program to verify the information submitted by the Grantee on behalf of the participating company.

c) Training Evaluation Report – The Grantee must submit to DCEO DCCA, within 60 days following the end of the grant period, a descriptive written evaluation of the results of the training experience by either the company, in the case of single-company grantees, or the companies participating in the training project, in the case of multi-company training projects. The narrative evaluation report should be based on the measurable outcomes or benefits contained in the grant application submitted and approved by DCEO DCCA. DCEO DCCA reserves the
right to withhold any future year funding for noncompliance with this provision.

d) Reporting Requirements – To receive payment for training costs which have been incurred by a Grantee in accordance with the Scope of Work and Budget contained in the grant contract with the Department, the Grantee shall furnish evidence to the Department of having completed training by following either a monthly certification schedule or other schedule negotiated by the Department and the Grantee. This certification shall be filed on forms provided to the Grantee by the Department. Payments to the Grantee are subject to the initiation of an invoice-voucher which shall be due to the Department according to the schedule established in the grant contract. A project summary report shall be due to the Department either each month, or as negotiated, consisting of an analysis of major project activities; a listing of clients served, if the project served clients; and an evaluation of how the project's operation is related to the objectives of the grant.

e) Grant Closeout – The Grantee shall be responsible for completing the grant closeout package which shall be provided by the Department and identifies the financial status of these grant funds. The Grantee, upon submission of the closeout package, or within 45 days after expiration of the grant, whichever is first, shall refund to the Department any balance of funds, including administrative costs, which were unexpended or unobligated at the end of the grant period. In addition, the Grantee shall repay the Department for any funds that are determined by the Department to have been spent in violation of the grant contract. If the grant contract should terminate for any reason, the closeout package shall be due within 45 days after the date of termination.

f) For the purpose of Subparts B and D of this Part, the provisions specified in 47 Ill. Adm. Code 1.30, 1.40, 1.60, 1.70, 1.80, 1.90, 1.100, 1.105, 1.110, 1.120, 1.140, and 1.185 are applicable.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

SUBPART B: SINGLE COMPANY APPLICANTS

Section 2650.110 Application Procedures

Applications will be accepted at any time. Receipt of an application does not commit the Department to award a grant or to pay any costs incurred in the preparation of an application. The applicant should not procure, contract for, or incur costs for services or supplies prior to the signing of a written contract. The contents of an approved application will become part of the
contract awarded to the applicant. All data, material, and documentation originated by an application and prepared for an application or contract shall belong exclusively to the State of Illinois and the Department. The Department will supply interested businesses with an application upon request. Applications for grant funds shall be submitted to the Office of Employer Training Investment or Springfield on forms provided by the Department along with any necessary attachments which may be required.

(Source: Amended at 29 Ill. Reg. ______, effective _____________)

Section 2650.120 Application Documentation

Applications will include documentation of the following:

a) Application Cover Page – which contains name, address, and telephone number of applicant; name, address, e-mail address and telephone and fax numbers of training coordinator, if different from the applicant; amount of program funds being requested; starting and ending dates of program; total number of new and upgraded employees to be trained; current number of employees working in administration and production; company Federal Employment Identification Number (F.E.I.N.); North American Industry Classification System (NAICS) Standard Industrial Code (S.I.C.); Illinois Unemployment Insurance Account Code; Senate District number; Representative District number; indication whether the company is located in an Illinois State Enterprise Zone; indication whether company is reopening a facility which had been previously closed; the name of labor unions representing employees at the facility, if applicable; and an indication of whether the company applied for or received training assistance under the program in prior fiscal years.

b) Business Certification – a form which must be signed and dated by the Chief Executive Officer or duly authorized representative of the applicant company certifying that the applicant:

1) Understands that the receipt by the Department of an application for training assistance is not a guarantee or commitment by the Department for funding;

2) Agrees to discuss with representatives of the local Workforce Investment Act (WIA) office the hiring of WIA-eligible individuals for new jobs which are created as a result of this project;
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3) Agrees to submit to the Department, on a monthly basis, information regarding training activity as required for reimbursement under the Employer Training Investment Industrial Training Program;

4) Agrees to submit to the Department, within 60 days following the end of the grant period, a written evaluation of the results of the training experience by the company. The evaluation report should be based on the measurable outcomes or benefits contained in this grant application;

5) Maintains that it is a company in good standing, authorized to do business in Illinois and has no delinquent State tax liabilities;

6) Authorizes the Department of Commerce and Economic Opportunity Community Affairs to verify in any manner deemed appropriate any and all items indicated in this application which include information obtained through the Illinois Department of Employment Security, Consumer Credit Bureau Services and business reporting services such as Dun and Bradstreet;

7) Agrees to immediately notify the Department regarding any major business or personnel changes at their facility (e.g., layoff situations, changes in training plans or schedules);

8) Acknowledges that if their application is funded, they will be required to comply with the Illinois Drug Free Workplace Act, the Americans with Disabilities Act and the Illinois Human Rights Act and any future laws enacted which may be applicable to the grant;

9) To the best of its knowledge as of the date of the application, is not in material violation of any local, State or federal labor laws at the site and that abnormal labor conditions such as a strike or lockout do not exist at this site;

10) Maintains that all information contained in the application, including the documentation, is accurate, complete and true to the best of their knowledge;

11) Agrees to submit to the Department by the end of the grant period the Social Security Number of all employees participating in the approved training program;
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12) Agrees to notify all trainees that, if funded, the training is being partially funded by an Employer Training Investment Industrial Training Program grant administered by the Department of Commerce and Economic Opportunity Community Affairs; and

13) Agrees that, upon request by the Department, it will conduct an audit of the grant funds in accordance with generally accepted auditing standards and any special audit conditions that the Department deems necessary to ensure the accountability of public funds.

c) Training Outline – which details, by job classification or training course, minimum skills desired for entry into training by job or training course and additional skills to be acquired in training by job or training course.

d) Program Outline Timetable – which details the training schedule of employee entry by job classification or training course per month into the program.

e) Training Outline Data/Trainees – which lists the job classification or training course and the number of trainees for each classification or training course. This form lists the number of new and upgraded trainees, the number of hours of training requested for each trainee or training course, and the average wage paid to the employees in that job classification or training course.

f) Training Outline Data/Trainers – which identifies all instructors or entities conducting training. The number of instructors, the total number of instructional hours and the instructor costs, including tuition and fees, are required.

g) Project Budget Summary – which details the total cost of training and the requested grant amounts of the Program and other available training programs in Illinois (e.g., Workforce Investment Act, Welfare-To-Work, Secretary of State Literacy Office Grant Program, Prairie State 2000 Program).

h) Attachments as applicable:

1) Attach a brief narrative explaining each line item on the budget summary. The narrative shall state how each "total costs" figure was obtained and should provide information regarding how all training hours and other training costs will be tracked and documented.
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2) Financial statements consisting of profit and loss statements and balance sheets for the last two years and tax returns for the last two years at a minimum. For newly-established companies, a three-year projected balance sheet and profit and loss statement and a one-year monthly cash flow statement are required. Companies submitting financial information more than six months old must submit a statement regarding why more current information is not available.

3) Transmittal letter providing information on: recent trends and significant events in the company's workforce, sales, competition, production, markets, and facility locations; how applicant will coordinate and use other training programs for funding, as appropriate; describe training activities, including training content, training providers, timeline, training methods, assessment techniques and how the training is linked to any new capital investment; and how these activities will be linked to work unit and/or company performance.

i) Disclosure of Financial Information – a form which may be signed and dated by the Chief Executive Officer certifying that the commercial and financial information contained in the grant application is proprietary, privileged, confidential or is of a nature that its disclosure may cause competitive harm to the applicant, thereby rendering the application exempt from disclosure under Section 7 of the Freedom of Information Act [5 ILCS 140].

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 2650.130 Application Evaluation

The Department shall screen all applications to determine that all requirements of the application package have been addressed. Complete applications will be reviewed and evaluated comparatively by Department staff. This review and evaluation process will be completed within 75 days of receipt of all required information. Department staff will conduct a technical and financial evaluation of each application.

a) Technical Evaluation Component – Each application will be reviewed to assure compliance with technical program requirements as detailed in Sections 2650.30 and 2650.120.

b) Financial Evaluation Component – The company's audited financial statements, including the annual balance sheets and profit and loss statements for the past
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three years, or other acceptable financial information as determined by the Department, will be reviewed through a standard credit analysis which will determine the: liquidity and debt coverage for the project; ability of the company to manage debt; business trends; and projected earnings. This data will be compared to similar data for companies in the same industry using "Robert Morris Associates Annual Statement Studies" (1999), if such industry is evaluated by this source. This standard credit analysis will determine the financial stability of the company.

c) Application Evaluation – Those applications determined eligible for funding based on the evaluation process described in subsections (a) and (b), will be evaluated according to the following criteria:

1) Project readiness (e.g., time schedule for project initiation, etc.);
2) Average wage rate of trainees;
3) New capital investment (e.g., training directly relates to jobs, etc.) and capital investment per trainee;
4) Applicant has identified specific and measurable training objectives;
5) Financial feasibility of the project as determined by the financial evaluation described in subsection (b);
6) Compliance with terms and conditions under previous Employer Training Investment Industrial Training Program grant awards;
7) County unemployment rate;
8) Applicant is adversely affected by foreign competition or training would provide company an advantage in competing in a global market;
9) Quality and consistency of the proposed training program;
10) Illinois-based company;
11) Level of value-added for the specific industry;
12) Industries specified in annual application packages; and
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13) Located in a State-designated enterprise zone.

(Source: Amended at 29 Ill. Reg. _____, effective ____________)

SUBPART D: MULTI-COMPANY AND MEMBERSHIP TRAINING PROJECT APPLICANTS

Section 2650.310 Application Procedures

Applications will be accepted at any time. Receipt of an application does not commit the Department to award a grant or to pay any costs incurred in the preparation of an application. The applicant and any companies participating in the project shall not procure, contract for or incur costs for services or supplies prior to the signing of a written contract. The contents of an approved application shall become part of the contract awarded to the applicant. All data, material and documentation originated by an application and prepared for an application or contract shall belong exclusively to the State of Illinois and the Department. The Department shall supply interested businesses, business and industry associations, institutions of secondary or higher education, strategic business partnerships, labor organizations or other organizations with an application upon request. Applications for grant funds shall be submitted to the Department's Office of Employer Training Investment in Chicago or Springfield on forms provided by the Department along with any necessary attachments which may be required.

(Source: Amended at 29 Ill. Reg. _____, effective ____________)

Section 2650.320 Application Documentation

Applications shall include documentation of the following:

a) A history and summary of the qualifications of the organization submitting the application, including any related experience in coordinating, conducting or sponsoring training programs for businesses or its membership.

b) A description of how the companies or members will be/were selected to participate in the project and an explanation of how the common employee training needs were determined. The applicant also should indicate if a training needs assessment has been conducted.

c) A company profile for each of the participating companies, including how long
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they have been in business, a description of the products manufactured or services provided, the location of their facilities, the North American Industry Classification System, Standard Industrial Code, the current number of employees, the name of any labor organizations representing the employees (if applicable) and a company contact and telephone number.

d) A description of any new capital investment made by the participating companies and if it relates to the proposed training program.

e) The type of training being requested (e.g., classroom, on-the-job training).

f) The objectives of the training.

g) Where the training will be conducted.

h) The names of the training providers.

i) The expected measurable outcomes or benefits to the participating companies of the training program and a description of how these benefits will be measured.

j) An Applicant Certification form which is signed and dated by the Chief Executive Officer or duly authorized representative of the applicant certifying that the applicant:

1) Understands that receipt by the Department of Commerce and Economic OpportunityCommunity Affairs of an application for training assistance is not a guarantee or commitment by DCEODCCA for funding;

2) Agrees to submit to DCEODCCA, on either a monthly basis or other basis agreed upon by the Department and the Grantee, information regarding training activity as required for training payment under the Employer Training InvestmentIndustrial Training Program;

3) Agrees to submit to DCEODCCA, within 60 days following the end of the grant period, a written evaluation of the results of the training experience by the participating companies. The evaluation report should be based on the measurable outcomes or benefits contained in the grant application;

4) Authorizes DCEODCCA to verify in any manner deemed appropriate any and all items indicated in this application which include information
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obtained through the Illinois Department of Employment Security, Consumer Credit Bureau Services and business reporting services such as Dun and Bradstreet;

5) Agrees to submit the Social Security Number of the participating employees and the Unemployment Insurance Employer Account Number of all employers participating in an approved training program;

6) Agrees to notify promptly regarding any major changes in the project (e.g., layoff situations at participating companies, changes in training plans or schedules);

7) Maintains that, to the best of its knowledge as of the date of the application, no employers participating in the project are in material violation of local, State or federal labor laws at any sites involved in the application, and that abnormal labor conditions such as a strike or lockout do not exist at any of these sites;

8) Acknowledges that, if the application is funded, the applicant will be required to comply with the Illinois Drug Free Workplace Act, the Illinois Human Rights Act, the Americans with Disabilities Act and any future laws enacted which may be applicable to the grant;

9) Maintains that all information contained in this application, including the documentation, is accurate, complete and true to the best of their knowledge;

10) That, if funded, all companies participating in the training and the trainees of those companies will be notified in writing that the training is partially funded by the Employer Training Investment Program grant administered by the Department of Commerce and Economic Opportunity Community Affairs; and

11) Agrees that, upon request by the Department, it will conduct an audit of grant funds in accordance with generally accepted auditing standards and any special audit conditions that the Department deems necessary to ensure the accountability of public funds.

k) Training Outline – which provides a descriptive picture of each training module
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or job classification, the requirements for selection to enter training and additional
skills to be acquired through training.

l) Training Outline Data/Trainees – by training module, the number of employees in
training, the proposed number of hours of training requested for each trainee and
the average wage rates of the trainees.

m) Training Outline Data/Trainers – which details the trainers or course names, the
number of instructional hours and the cost of the training.

n) A project budget summary listing administration, internal instructor wages and
fringe benefits, tuition costs, trainee wages and fringe benefits, training materials
and other costs. The budget summary shall contain the total training costs, the
local/company share, other sources of training assistance and the amount
requested from the Employer Training Investment[Industrial Training]
Program.

o) A budget narrative detailing how each line item in the budget summary was
obtained and how the costs of each line item will be tracked and documented.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 2650.330 Application Evaluation

The Department shall screen all applications to determine if all requirements of the application
package have been addressed. Complete applications shall be reviewed and evaluated
comparatively by Department staff. This review and evaluation process will be completed
within 75 working days after receipt of all required information. Department staff shall conduct
a technical and programmatic evaluation of each application.

a) Technical/Programmatic Evaluation Component – Each application shall be
reviewed to assure compliance with technical program requirements as detailed in
Section 2650.30.

b) Application Evaluation – Those applications determined eligible for funding
based on the evaluation process described in subsection (a) above shall be
evaluated according to the following criteria:

1) Project readiness (e.g., time schedule for project initiation);

2) The number of participating companies and the number of employees of
NOTICE OF PROPOSED AMENDMENTS

those participating companies who will receive training;

3) The cost effectiveness of the training (e.g., cost per trainee or cost per business);

4) New capital investment by participating companies;

5) How closely the training is related to the nature of the business process and the transferability of the skills obtained from the training;

6) Other significant benefits or impact (e.g., project is for high technology, quality and/or productivity improvements or export oriented, job retention or improving business competitiveness);

7) Level of performance by applicant organization and/or participating employers under previous Employer Training Investment Industrial Training Program grant awards;

8) Evaluation measures utilized to determine the effectiveness of the training (e.g., the identification of quantifiable training outcome measures);

9) Extent to which the project demonstrates that it is employer driven; and

10) In making grant awards to original equipment manufacturers (OEM) for supplier training programs, the Director shall take into consideration the extent to which applications: demonstrate advanced consultation between organized labor and management; specify procedures that provide equitable access to training for existing supplier firms; and demonstrate that the proposed training will not result in the transfer of work from the OEM to supplier firms that, in turn, results in the displacement of the OEM's existing labor force. Notwithstanding these considerations, the Department may make grant awards if both labor and management support the award. The Department shall make grant awards to OEMs for supplier training only when those awards will not negatively impact the labor-management relationship. Further, the Department shall retain the responsibility to review and approve the final curricula and list of supplier firms to receive training under all grant awards; and.

11) Extent to which the applicant has demonstrated the impact of the training on the regional economy.
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(Source: Amended at 29 Ill. Reg. ______, effective _____________)


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1) **Heading of the Part:** Procurement by the State Board of Education

2) **Code Citation:** 44 Ill. Adm. Code 1100

3) **Section Number:** Proposed Action:
   - 1100.4545 Amendment
   - 1100.5520 Amendment

4) **Statutory Authority:** 30 ILCS 500/1-30(a)

5) **A Complete Description of the Subjects and Issues Involved:** This set of amendments responds to two recent pieces of legislation that amended the Illinois Procurement Code.
   - P.A. 93-77, enacted in 2003, revised the maximum amount of time for which a contractor may be suspended from five to ten years. The change affects Section 1100.5520(c) of the State Board’s rules.
   - P.A. 93-769, enacted this year, changed the dollar figures that are used to define “small business”. The new maximums need to be incorporated into Section 1100.4545(f) of the rules.

6) **Will this rulemaking replace emergency amendments currently in effect?** No

7) **Does this rulemaking contain an automatic repeal date?** No

8) **Does rulemaking contain incorporations by reference?** No

9) **Are there any other proposed amendments pending on this Part?** No

10) **Statement of Statewide Policy Objective:** This rulemaking will not create or enlarge a state mandate.

11) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Written comments may be submitted within 45 days after the publication of this notice to:

    Sally Vogl  
    Agency Rules Coordinator  
    Illinois State Board of Education  
    100 North First Street  
    Springfield, Illinois 62777
Comments may also be submitted via e-mail, addressed to:

rules@isbe.net

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not-for-profit corporations affected: Small businesses with annual sales greater than the old maximums but lower than the new maximums may be affected if they seek to do business with the State Board of Education. Small businesses that contract with ISBE may also be affected if they qualify for suspension as contractors.

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

13) Regulatory Agenda on which this rulemaking was summarized: January 2004

The full text of the Proposed Amendments begins on the next page:
STATE BOARD OF EDUCATION

NOTICE OF PROPOSED AMENDMENTS

TITLE 44: GOVERNMENT CONTRACTS, PROCUREMENTS AND PROPERTY MANAGEMENT
SUBTITLE B: SUPPLEMENTAL PROCUREMENT RULES
CHAPTER XIII: STATE BOARD OF EDUCATION

PART 1100
PROCUREMENT BY THE STATE BOARD OF EDUCATION

SUBPART A: GENERAL

Section
1100.5 Policy
1100.10 Application
1100.15 Definitions of Terms Used in this Part
1100.25 Property Rights

SUBPART B: PROCUREMENT RULES

Section
1100.525 Applicability of Rules

SUBPART C: PROCUREMENT AUTHORITY

Section
1100.1005 Exercise of Procurement Authority

SUBPART D: PUBLICIZING PROCUREMENT ACTIONS

Section
1100.1510 Illinois Procurement Bulletin
1100.1560 Supplemental Notice
1100.1570 Error in Notice
1100.1580 Direct Solicitation

SUBPART E: SOURCE SELECTION AND CONTRACT FORMATION

Section
1100.2010 Competitive Sealed Bidding
1100.2012 Multi-Step Sealed Bidding
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1100.2015 Competitive Sealed Proposals
1100.2020 Small Purchases
1100.2025 Sole Economically Feasible Source Procurement
1100.2030 Emergency Procurements
1100.2035 Competitive Selection Procedures for Professional and Artistic Services
1100.2036 Other Methods of Source Selection
1100.2037 Tie Bids and Proposals
1100.2038 Mistakes
1100.2040 Cancellation of Solicitations; Rejection of Bids or Proposals

SUBPART F: SUPPLIERS, PREQUALIFICATION AND RESPONSIBILITY

Section
1100.2043 Suppliers
1100.2044 Vendor Lists
1100.2046 Responsibility

SUBPART G: BID, PROPOSAL AND PERFORMANCE SECURITY

Section
1100.2047 Security Requirements

SUBPART H: SPECIFICATIONS

Section
1100.2050 Specifications

SUBPART I: CONTRACT TYPE

Section
1100.2055 Types of Contracts

SUBPART J: DURATION OF CONTRACTS

Section
1100.2060 Duration of Contracts - General

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1100.2560 Prevailing Wage
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1100.2570 Equal Employment Opportunity; Affirmative Action

SUBPART L: CONTRACT PRICING

Section 1100.2800 All Costs Included

SUBPART M: REAL PROPERTY LEASES AND CAPITAL IMPROVEMENT LEASES

Section 1100.4005 Real Property Leases and Capital Improvement Leases

SUBPART N: PREFERENCES

Section 1100.4505 Procurement Preferences
1100.4510 Resident Bidder Preference
1100.4530 Correctional Industries
1100.4535 Sheltered Workshops for Persons with Disabilities
1100.4540 Gas Mileage
1100.4545 Small Business
1100.4570 Contracting with Businesses Owned and Controlled by Minorities, Females and Persons with Disabilities

SUBPART O: ETHICS

Section 1100.5013 Conflicts of Interest
1100.5015 Negotiations for Future Employment
1100.5020 Exemptions
1100.5030 Revolving Door
1100.5035 Disclosure of Financial Interests and Potential Conflicts of Interest

SUBPART P: COMPLAINTS, PROTESTS AND REMEDIES

Section 1100.5510 Complaints Against Vendors
1100.5520 Suspension
1100.5530 Resolution of Contract Controversies
1100.5540 Violation of Statute or Rule
1100.5550 Protests
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SUBPART Q: SUPPLY MANAGEMENT AND DISPOSITIONS

Section
1100.6010 Supply Management and Dispositions

SUBPART R: GOVERNMENTAL JOINT PURCHASING

Section
1100.6500 General
1100.6510 No Agency Relationship
1100.6520 Obligations of Participating Governmental Units
1100.6530 Use of Other Contracts

SUBPART S: MISCELLANEOUS PROVISIONS OF GENERAL APPLICABILITY

Section
1100.7000 Severability
1100.7010 Government Furnished Property
1100.7015 Inspections
1100.7020 Records and Audits
1100.7025 Written Determinations
1100.7030 No Waiver of Sovereign Immunity

AUTHORITY: Implementing the Illinois Procurement Code [30 ILCS 500] and authorized by Section 1-30(a) of that Code.


SUBPART N: PREFERENCES

Section 1100.4545 Small Business

a) The Procurement Officer may determine categories of supplies or service procurements that will be set aside for small businesses located in Illinois. The set-aside designation may be made for current and future procurements of a specific supply, service or construction, or for a class of like supplies, services or construction. A set-aside designation may last indefinitely or for a stated period of time.
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b) The Procurement Officer may contact DCMS to determine whether a particular procurement has been set aside for small businesses and, if so, the SBE may honor the set-aside to the extent practicable.

c) The Procurement Officer may use the list, maintained by DCMS or other appropriate State agency, of responsible vendors that meet the criteria of small business. A business that fits the definition of small on the day of bid or proposal opening shall be considered small for the duration of the contract.

d) If the Procurement Officer wishes to make a procurement covered by a set-aside designation, the solicitation shall note responses are limited to those from responsible small businesses. Bids or proposals received from large businesses shall be rejected as not responsive.

e) If the Procurement Officer determines that acceptance of the best bid or proposal will result in the payment of an unreasonable price, the Procurement Officer shall reject all bids or proposals and withdraw the designation of small business set-aside for the procurement in question. When a small business set-aside is withdrawn, notification shall be published in the Bulletin with an explanation. After withdrawal of the small business set-aside, the procurement shall be conducted in accordance with the limitations of the Code and this Part.

f) Unless the Procurement Officer provides a definition for a particular procurement that reflects industrial characteristics, a small business is one:

1) that is independently owned and operated.

2) that is not dominant in its field of operations. This means the business does not exercise a controlling or major influence in a kind of business activity in which a number of business concerns are primarily engaged. In determining dominance, consideration shall be given to all appropriate factors, including volume of business, number of employees, financial resources, competitive status or position, ownership or control of materials, processes, patents, license agreements, facilities, sales territory, and nature of business activity.

3) has annual sales for the most recently ended fiscal year no greater than:

   A) $10,000,000 for wholesale business;
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B) $10,000,000\$3,000,000 for construction business; or

C) $6,000,000\$1,500,000 for retail business.

4) has no more than 250 employees if it is a manufacturing business.

A) A manufacturing business shall calculate how many people it employs by determining its average full-time equivalent employment, based on the number of persons employed on a full-time, part-time, temporary or other basis, for its most recently ended fiscal year.

B) If a manufacturing business has been in existence for less than a full fiscal year, its average employment should be calculated for the period through one month prior to the bid or proposal due date.

5) If the business is any combination of retailer, wholesaler, and construction business, then the annual sales for each component may not exceed the amounts shown in subsection (f)(3) of this Section. For example, a business that is both a retailer and a wholesaler may not have total sales exceeding $16,000,000\$9,000,000; the retail component may not exceed $6,000,000\$1,500,000 and the wholesale component may not exceed $10,000,000\$7,500,000. If the business is also a manufacturer, in addition to meeting the annual sales requirement, the number of manufacturing employees may not exceed the number shown in subsection (f)(4) of this Section.

6) When computing the size status of a vendor, the number of employees and annual sales and receipts, as applicable, of the vendor and all affiliates shall be included. Concerns are affiliates when either one directly or indirectly controls or has the power to control the other, or when a third party or parties controls or has the power to control both. In determining whether concerns are independently owned and operated and whether affiliation exists, consideration shall be given to all appropriate factors, including use of common facilities, common ownership and management and contractual arrangements. However, a franchise relationship shall not affect small business status if the franchise has the right to profit commensurate with ownership and bears the risk of loss or failure.

Vendors desiring to submit bids or proposals or to otherwise contract for items set aside for small businesses shall submit information verifying that the vendor
qualifies as a small business as defined in subsection (f) of this Section. The CPO may establish procedures for verifying such information.

(Source: Amended at 29 Ill. Reg. _____, effective ____________)

SUBPART P: COMPLAINTS, PROTESTS AND REMEDIES

Section 1100.5520 Suspension

This Section applies to all debarments or suspensions of vendors from consideration for award of contract.

a) The CPO may suspend a vendor from doing business with the SBE, or for specific types of supplies or services. A suspension may be issued upon a showing that the vendor violated the Code or this Part, or failed to conform to specifications or terms of delivery.

b) When the CPO finds cause exists for suspension, a notice of suspension, including a copy of such determination, shall be sent to the suspended vendor. Bids or proposals shall not be solicited from the suspended vendor, and, if they are received, they shall not be considered during the period of suspension.

c) A contractor may be suspended for a period of time commensurate with the seriousness of the offense, but for no more than ten years. The suspension shall be effective within seven days after receipt of the notice unless an objection is filed. If an objection is filed, the suspension shall not become effective until the evaluation of the objection is completed.

d) The CPO may debar a vendor. Debarment is the permanent suspension of a vendor from doing business with the SBE. A debarment may only take place in those instances involving bribery or attempted bribery of a State of Illinois officer or employee, or as otherwise allowed or required by law. Bids or proposals shall not be solicited from the debarred vendor, and if they are received, they shall not be considered.

e) The SBE shall maintain a master list of all suspensions and debarments. The master list shall retain information concerning suspensions and debarments as public records. Such records shall be maintained for a period of at least three years following the end of the suspension or debarment. Such public information may be considered in determining responsibility.
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(Source: Amended at 29 Ill. Reg. _______, effective ____________)
DEPARTMENT OF HUMAN SERVICES

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1) **Heading of the Part:** Temporary Assistance for Needy Families

2) **Code Citation:** 89 Ill. Adm. Code 112

3) **Section Numbers:**

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4) **Statutory Authority:** Implementing Article IV and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. IV and 12-13].

5) **A Complete Description of the Subjects and Issues involved:** As part of the Agency’s initiative to simplify TANF policy, this rulemaking eliminates the consideration of assets in the determination of eligibility for the TANF Program. This change makes TANF policy consistent with the Family Health Plan’s medical assistance policy. By eliminating the asset limit for TANF, families can be encouraged to build a savings fund that would assist them in maintaining self-sufficiency when they experience an employment setback.

   This rulemaking also adds the word “non-citizen” in 89 Ill. Adm. Code Section 112.307(f) to clarify that the sponsor, if found able to support the non-citizen wholly or partially, is liable for the needs of the individual non-citizen only.

6) **Will this proposed rulemaking replace any emergency rulemaking currently in effect?** No

7) **Does this rulemaking contain an automatic repeal date?** No

8) **Do these proposed amendments contain incorporations by reference?** No

9) **Are there any other amendments pending on this Part?** Yes
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10) **Statement of Statewide Policy Objectives (if applicable):** This rulemaking does not create or expand a State mandate.

11) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Interested persons may present their comments concerning this rulemaking within 45 days after this issue of the *Illinois Register*. All requests and comments should be submitted in writing to:

   Tracie Drew, Chief
   Bureau of Administrative Rules and Procedures
   Department of Human Services
   100 South Grand Avenue East
   Harris Building, 3rd Floor
   Springfield IL 62762
   (217) 785-9772

   If because of physical disability you are unable to put comments into writing, you may make them orally to the person listed above.

12) **Initial Regulatory Flexibility Analysis:**

   A) **Types of small businesses, small municipalities and not for profit corporations affected:** None

   B) **Reporting, bookkeeping or other procedures required for compliance:** None

   C) **Types of professional skills necessary for compliance:** None

13) **Regulatory Agenda on which this rulemaking was summarized:** July 2004

   The full text of the Proposed Amendments begins on the next page:
DEPARTMENT OF HUMAN SERVICES

NOTICE OF PROPOSED AMENDMENT

TITLE 89: SOCIAL SERVICES
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES
SUBCHAPTER b: ASSISTANCE PROGRAMS

PART 112
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

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SUBPART C: TANF EMPLOYMENT AND WORK ACTIVITY REQUIREMENTS

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AUTHORITY: Implementing Article IV and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. IV and 12-13].

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SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

Section 112.9  Client Cooperation

a) As a condition of eligibility, clients must cooperate:
   1) in the determination of eligibility;
   2) with Department programs conducted for the purposes of acquisition or verification of information upon which eligibility may depend;
   3) in applying for all financial benefits for which they may qualify and to avail themselves of such benefits at the earliest possible date;
   4) by designing a Responsibility and Services Plan (RSP) appropriate for his or her situation, signing the RSP and following through on the activities agreed to in the RSP. An applicant who refuses to cooperate in designing or signing an RSP is not eligible for TANF cash assistance. An applicant who refuses to follow through or fails, without good cause, to follow through with the activities agreed upon in the RSP is also ineligible for TANF cash assistance.

b) TANF applicants who quit working without good cause during the application process are not eligible for cash assistance.

c) Clients are required to avail themselves of all potential income sources.

d) When eligibility cannot be conclusively determined because the individual is unwilling or fails to provide essential information or to consent to verification, the client is ineligible.

e) At screening, applicants shall be informed, in writing, of any information they are to provide at the eligibility interview.

f) At the eligibility interview or at any time during the application process, when the applicant is requested to provide information in his or her possession, the Department will allow a reasonable period for the return of the requested information. The first day of the period is the calendar day following the date the information request form is sent or given to the applicant. The last day of the period shall be a work day and is to be indicated on the information request form.
If the applicant does not provide the information by the date on the information request form, the application shall be denied on the following work day.

g) At the eligibility interview or at any time during the application process, when the applicant is requested to provide third party information, the Department shall allow a reasonable period for the return of the requested information or for verification that the third party information has been requested. The first day of the period is the calendar day following the date the information request form is sent or given to the applicant. The last day of the period shall be a work day and is to be indicated on the information request form. It is to be indicated on the information request form that the applicant shall provide written verification of the request for the third party information. If the applicant does not provide the information or the verification that the information was requested by the date on the information request form, the application shall be denied on the following work day.

1) Third party information is defined as information which must be provided by someone other than the applicant. An authorized representative or person applying on another's behalf is not a third party but is treated as if he were the applicant.

2) The Department shall advise clients of the need to provide written verification of third party information requests and the consequences of failing to provide such verification.

3) If the applicant requests an extension, either verbally or in writing, in order to obtain third party information and provides written verification of the request for the third party information such as a copy of the request that was sent to the third party, an extension of 90 days from the date of application shall be granted. The first day of the 90-day period is the calendar day following the date of application. The 90th day must be a work day.

4) If an applicant's attempt to obtain third party information is unsuccessful, upon the applicant's request the Department will assist in securing evidence to support the client's eligibility for assistance.

(Source: Amended at 29 Ill. Reg. ______, effective _____________)

Section 112.65 Responsibility and Services Plan
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a) The Department shall advise every applicant and recipient of:
   1) the requirement that all recipients move toward self-sufficiency; and
   2) the value and benefits of employment.

b) Clients who are adults or minor parents must prepare, sign and submit a personal
   Responsibility and Services Plan. Active recipients who are adults or minor
   parents who have previously prepared, signed and submitted a personal
   Responsibility and Services Plan must comply with the plan. Department staff
   shall assist each client in completing the plan.

c) The Responsibility and Services Plan includes the following:
   1) job history;
   2) job preferences;
   3) job search plans;
   4) child immunization;
   5) school attendance;
   6) family well-being, including domestic violence, substance abuse,
      homelessness and mental and physical health issues;
   7) family information;
   8) income and assets;
   9) child support;
   10) education/training;
   11) child care;
   12) transportation;
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13) legal; and

14) referral.

d) This Section does not apply to Representative Payees.

e) A parent who refuses to complete the Responsibility and Services Plan, when appropriate for his or her family, renders the entire assistance unit ineligible. Supervisory approval is required to confirm refusal.

f) A client who fails to follow up in taking the necessary steps that will lead to self-sufficiency, as decided upon in the Responsibility and Services Plan, is subject to sanction (see Section 112.79). Failure to comply with provisions relating to domestic violence will not result in sanction.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 112.69 Felons and Violators of Parole or Probation

a) Persons convicted, for acts that occur after August 21, 1996, of a Class X or Class 1 felony involving the possession, use or distribution of a controlled substance under Illinois or comparable federal law will not receive payment.

b) Persons convicted, for acts that occur after August 21, 1996, of any drug-related felony not listed in subsection (a) of this Section under Illinois or federal law are ineligible for two years following the date of the conviction, unless they are in drug treatment or aftercare as defined in the Illinois Alcoholism and Other Drug Abuse and Dependency Act [20 ILCS 301/1-10] or have successfully participated in and completed drug treatment and/or aftercare subsequent to their conviction.

c) Persons convicted in state or federal court of misrepresenting an address to receive assistance from programs funded by a federal TANF grant, Title XIX, the Food Stamp Act of 1977, or the Supplemental Security Income program in two or more states is ineligible to participate in the Illinois TANF program for a ten-year period beginning with the date of the conviction.

d) Probation and parole violators are not eligible.

e) Fugitive felons are not eligible.
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f) Family members of the persons ineligible under subsections (a) through (e) of this Section may be eligible, unless the ineligible person is the only child in the family. In considering eligibility and the amount of assistance for such family members, the income and resources of the ineligible person are considered available to them.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

SUBPART G: FINANCIAL FACTORS OF ELIGIBILITY

Section 112.127 Lump-Sum Payments

a) Income received either in the form of a one-time only payment that does not continue on a regular basis or in the form of a retroactive payment for income that continues on a regular basis is considered non-recurring lump-sum income (a lump-sum payment). Examples of non-recurring lump-sum income are retroactive social security payments, retroactive unemployment insurance benefits, personal injury settlements, workers compensation injury settlements, lottery winnings, inheritances and insurance settlements.

b) Any portion of the lump-sum payment used to pay for expenses incurred as a result of the lump-sum payment shall be exempt from consideration as non-recurring lump-sum income as follows:

1) Personal Injury Settlement – That portion of a personal injury payment is exempt which is used to pay for:

   A) necessary costs of litigation or settlement, including attorney's fees;

   B) the Department's charge (see 89 Ill. Adm. Code Section 102.260);

   C) medical costs resulting from the injury and paid by the client;

   D) expenses to repair or replace personal property which was damaged as a result of the injury.

2) Workers' Compensation Payment – That portion of a Workers' Compensation payment is exempt which is used to pay for:
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A) necessary costs of litigation or settlement, including attorney's fees;

B) medical costs resulting from the injury and paid by the client.

3) Insurance Payments

A) Insurance Payments – That portion of an insurance payment received due to loss is exempt when used to:

i) Repair or replace a lost or damaged resource including but not limited to repair or replacement of home, furniture, or clothing lost or damaged in a fire or flood and repair or replacement of a car as a result of an accident or fire;

ii) Pay the funeral, burial or medical expenses of an insured where the client is the beneficiary of the insured's life insurance policy.

B) Any insurance proceeds not spent or contracted to be spent as specified in subsection (b)(3)(A) of this Section within 60 days after receipt shall be budgeted as non-recurring lump-sum income. A payment receipt shall be required as verification of any insurance-related expenses claimed as exempt under subsection (b)(3)(A) of this Section.

c) Lump-sum payments are considered nonexempt unearned income for the month of receipt. Any amount remaining is considered an asset for the following month.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 112.150 Assets

a) The value of nonexempt assets shall not be considered in determining eligibility for an assistance payment.

b) The entire equity value of a jointly held liquid asset or the client's proportional share of a jointly held non-liquid asset shall be considered in determining eligibility for an assistance payment, unless:
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1) the asset is a joint income tax refund;

2) the client can document the amount of his or her legal interest in the asset, and that such amount is less than the entire value of the asset, the documented amount shall be considered. Appropriate documentation may include, but is not limited to, bank documents, trust documents, signature cards, divorce papers, or court orders;

3) the asset is held jointly with a client or clients of any Department assistance program other than food stamps;

4) the client documents that he or she does not have access to the asset. Appropriate documentation may include but is not limited to, bank documents, trust documents, signature cards, divorce papers, or court orders;

5) the client documents that the asset or a portion of the asset is not owned by the client and the client's accessibility to the asset is changed (see subsections (b)(2) and (4) of this Section for examples of documentation);

6) the co-owner refuses to make the asset available; or

7) the co-owner has engaged in violent activity against a family member in the past.

c) Income tax refunds shall be considered available assets and are to be considered against the appropriate non-exempt asset limitation of the assistance unit. One-half of joint tax refunds shall be considered available for each payee. A client who declares that less than one-half of the joint income tax was received may claim an exception. Only the amount claimed to be received shall be considered.

d) An applicant or recipient can appeal the Department's decision relating to consideration of assets in accordance with 89 Ill. Adm. Code 104.

(Source: Amended at 29 Ill. Reg. _______, effective ____________)

Section 112.151 Exempt Assets (Repealed)

a) The following assets are exempt from consideration in determining eligibility for
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assistance and the amount of the assistance payment:

1) A home that is the usual residence of the assistance unit.

2) Clothing, personal effects and household furnishings.

3) One automobile per assistance unit.

4) The value of the coupon allotment under the Food Stamp Act of 1977 (7 USC 2011 et seq.).

5) The value of the U.S. Department of Agriculture donated foods (surplus commodities).

6) The value of supplemental food assistance received under the Child Nutrition Act of 1966 (42 USC 1771 et seq.) and the special food service program for children under the National School Lunch Act (42 USC 1751 et seq.).

7) The principal and interest of a trust fund which the court refuses to release and one-time only payments released for a specific purpose other than income maintenance needs of the child.

8) Burial spaces and additions or improvements to a burial space.

9) Prepaid Funeral Agreements worth $1500 or less per person.

10) Donations or benefits from fund raisers held for a seriously ill client provided the client or a responsible relative of the client does not have control (that is, not available to the client or the responsible relative) over the donations or benefits or the disbursement of the donations or benefits.

11) A nonrecurring lump-sum SSI payment and a nonrecurring lump-sum SSA payment based on the individual’s disability and made to that individual in a TANF assistance unit is exempt as an asset for the month of receipt and the following month. For the third month, any remainder must be counted as a nonexempt asset.

12) The value of any savings in which the money is accumulated from the earning of a child. The interest is also exempt as well as gifts to the child.
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not exceeding $50 per quarter.

13) The value of micro-equipment and inventory needed for a functioning self-employment enterprise or being held in accordance with a Responsibility and Services Plan for the establishment of a self-employment enterprise.

14) Funds held in Individual Development Accounts meeting the requirements of Section 404(h) of the Social Security Act or in a program approved by the Department.

b) In addition to the above, the following assets are exempt. The assets listed in this subsection (b) remain exempt only as long as they can be separately identified if they are added to an existing account. If the amount of combined assets at any time, from the time of the receipt of the exempt asset or assets until the date of the eligibility determination or redetermination, fall below the amount of the exempted assets, only the lowest balance remains exempt.

1) The assets of a stepparent for purposes of determining the stepchild's eligibility.

2) Any benefits received under Title VII, Nutrition Program for the Elderly of the Older Americans Act of 1965 (42 USC 3045 et seq.), as amended.

3) Any payment received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (42 USC 4601 et seq.).

4) Any payments distributed per capita or held in trust for members of any Indian Tribe under P.L. 92-254, P.L. 93-134 or P.L. 94-540.

5) Tax-exempt portions of payments made pursuant to the Alaska Native Claims Settlement Act (43 USC 1601 et seq.).

6) Federally subsidized housing payments under Section 8 of the Housing and Community Development Act of 1974 (42 USC 1437f) of the U.S. Housing Act of 1937.

7) Effective October 17, 1975, receipts distributed to certain Indian Tribunal members of marginal land held by the United States government.
8) Payments for supporting services or reimbursement for out-of-pocket expenses made to volunteers serving as senior health aides, senior companions, foster grandparents, and persons serving in the Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE) and any other programs under Titles II and III, pursuant to Section 418 of P.L. 93-113.

9) Any grant or loan to an undergraduate student for educational purposes made or insured under any programs administered by the Commissioner of Education.

10) For those individuals who have approved self-employment plans under Section 112.78, business assets must be separate from personal assets. Business assets are those assets that are directly related to producing goods and services that have been purchased after the business begins or as part of an approved self-employment plan (see Section 112.78). Business assets are considered exempt unless it is determined that the equity value (the value for which the asset can be sold less any amount owned on the asset) exceeds $1,000. If the assets are determined to exceed $1,000 but are less than $5,000, the case will be reviewed in the DHS central office to ensure that the assets in excess of $1,000 are appropriate as business assets. A determination of business assets will be completed two years after the plan is approved.


12) Any payment received under Title II of P.L. 100-383 of the Aleutian and Pribilof Islands Restitution Act (50 USC 1989c through 1989c-8).

13) Payments made to veterans who receive an annual disability payment or to the survivors of deceased veterans who receive a one-time lump sum payment from the Agent Orange Settlement Fund or any other fund referencing Agent Orange product liability under P.L. 101-201.

14) Payments made by the Illinois Department of Mental Health and Developmental Disabilities under the Family Assistance Program for Mentally Disabled Children under P.A. 86-921.

15) Assets accumulated from income earned through employment under the
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federal "Health Start" Project.

16) Disaster relief payments provided by federal, State or local government or a disaster assistance organization.

17) Earmarked child support payments received by a client for the support of a child not included in the assistance unit.

18) Payments received under the federal Radiation Exposure Compensation Act (42 USC 2210 nt).

19) Payments made to individuals because of their status as victims of Nazi persecution pursuant to P.L. 103-286.

(Source: Repealed at 29 Ill. Reg. _____, effective ____________)

Section 112.152 Asset Disregards (Repealed)

In addition to the exempt assets listed in Section 112.151, the Department disregards up to $2000 of equity value of other resources for a one person family and up to $3000 of equity value of other resources for a two person family. The asset disregard increases $50 for each additional person (for example, $3050 for a three person family and $3100 for a four person family).

(Source: Repealed at 29 Ill. Reg. _____, effective ____________)

Section 112.153 Deferral of Consideration of Assets (Repealed)

Non-exempt real property is to be deferred for six consecutive months provided the family makes a good faith effort to sell the property and agrees to use the proceeds to repay the amount of assistance received during such period that would not have been paid had the property been sold at the beginning of the period.

(Source: Repealed at 29 Ill. Reg. _____, effective ____________)

SUBPART I: OTHER PROVISIONS

Section 112.305 Strikers

a) Definition
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1) A striker is anyone directly involved in:
   A) a strike;
   B) a work stoppage planned by employees, including a work stoppage because a contract expired;
   C) a slowdown planned by employees;
   D) other interruption of operations planned by employees.

2) A person who is a sympathy striker is considered to be a striker.

3) An individual who has been or is on strike at any time during a fiscal month is considered a striker for the fiscal month.

b) An employee affected by a lockout is not a striker.

c) A family with a parent on strike, or a caretaker relative on strike who is not a parent, or a child on strike shall be ineligible unless the family was receiving TANF or was eligible to receive TANF on the day before the strike began.

d) Eligibility and level of benefits for a striker's family are determined using the family's income as it was and assets as they were on the day before the strike began. If eligible on the day before the strike, eligibility and level of benefits are determined by using the greater of the striker's pre-strike income or current income plus the non-striking household member's current income.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 112.307 Responsibility of Sponsors of Non-Citizens Entering the Country Prior to 8/22/96

a) This Section 112.307, except as specified in subsection (b), applies to all non-citizens who entered the country prior to August 22, 1996, or who entered the country on or after that date, but whose sponsor did not sign an Affidavit of Support under Section 213A of the Immigration and Nationality Act (INA) (8 USC 1183a(a)(1)(A)).

b) This Section applies to all non-citizens except the following:
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1) persons paroled under Section 212(d)(5) of the INA (8 USC 1182(d)(5)) for at least one year and who entered the United States before August 22, 1996;

2) persons granted asylum by the U.S. Attorney General under Section 208 of the INA (8 USC 1158);

3) persons admitted as Cuban or Haitian Entrants;

4) persons admitted by application before April 1, 1980, under Section 203(a)(7) of the INA (8 USC 1153(a)(7));

5) persons admitted as refugees by application after March 31, 1980, under Section 207(c) of the INA (8 USC 1157(c)); and

6) persons whose deportation is being withheld under Section 243(h) of the INA (8 USC 1253(h)) (as in effect immediately before the effective date of Public Law 104-208) or Section 241(b)(3) of the INA (8 USC 1231(b)(3)).

c) Certain amounts of the income and assets of a sponsor of a non-citizen and the sponsor's spouse, if they live together, are deemed to be available unearned income of the individual non-citizen applying for or receiving assistance if:

1) the sponsor signed an affidavit of support or a similar agreement assuring the non-citizen will not become a public charge;

2) the sponsor is not a recipient of TANF or SSI;

3) the non-citizen has been a resident of the U.S. for less than three years;

4) the non-citizen is not a child or spouse of the sponsor.

d) A sponsor is an individual, private organization or agency or public organization or agency.

e) The spouse's income and assets will be counted even if the sponsor and spouse married after the agreement was signed.
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f) The sponsor, if found able to support the non-citizen, wholly or partially, is liable for the needs of the individual non-citizen only. The sponsor is not responsible for the needs of the spouse or child or children of the non-citizen if he or she did not sponsor them.

g) If two or more non-citizens applying for assistance are sponsored by the same sponsor, the income of the sponsor deemed available is divided equally among the non-citizens.

h) The sponsor's income and assets available to meet the needs of the non-citizen is determined in the following manner:

1) Determination of Available Income

   A) Disregard 20 percent, not to exceed $175, of the earned income of the sponsor or of the sponsor and sponsor's spouse, if they live together. This includes net earnings from self-employment, allowing business expenses incurred in the production of self-employment income.

   B) Add the unearned income of the sponsor and spouse, if they live together.

   C) Deduct 3 times the TANF payment level for the size of the sponsor's family unit. This includes the sponsor and other individuals living with the sponsor who are claimed as federal tax dependents.

   D) Deduct any amount paid to individuals outside the home whom the sponsor claims as federal tax dependents.

   E) Subtract any alimony or child support paid to individuals not living with the sponsor.

2) Income remaining is applied to the needs of the immigrant.

3) Determination of Sponsor's Assets

   The asset disregard for a sponsor of a non-citizen is $1500. The same assets are exempt for a TANF case as provided in Section 112.151.
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i) If nonexempt assets are more than the $1500 disregard, the amount over the disregard shall be considered as available to the non-citizen.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 112.308 Responsibility of Sponsors of Non-Citizens Entering the Country On or After 8/22/96

a) This Section applies to all non-citizens who entered the country on or after August 22, 1996, and whose sponsors signed an Affidavit of Support under Section 213A of the Immigration and Nationality Act (INA) (8 USC 1183(a)(1)(A)).

b) This Section applies to all non-citizens except the following:

1) persons paroled under Section 212(d)(5) of the INA (8 USC 1182(d)(5)) for at least one year and who entered the United States before August 22, 1996;

2) persons granted asylum by the U.S. Attorney General under Section 208 of the INA (8 USC 1158);

3) persons admitted as Cuban or Haitian Entrants;

4) persons admitted by application before April 1, 1980, under Section 203(a)(7) of the INA (8 USC 1153(a)(7));

5) persons admitted as refugees by application after March 31, 1980, under Section 207(e) of the INA (8 USC 1157(e)); and

6) persons whose deportation is being withheld under Section 243(h) of the INA (8 USC 1253(h)) (as in effect immediately before the effective date of Public Law 104-208) or Section 241(b)(3) of the INA (8 USC 1231(b)(3)).

c) Certain amounts of the income and assets of a sponsor of a non-citizen and the sponsor's spouse, if they live together, are deemed to be available unearned income of the individual non-citizen applying for or receiving assistance if:

1) the sponsor signed an Affidavit of Support under Section 213A of the INA
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(8 USC 1183a(a)(1)(A)) assuring the non-citizen will not become a public charge;

2) the sponsor is not a recipient of TANF or SSI; and

3) the non-citizen is not a child or spouse of the sponsor.

d) A sponsor is an individual, private organization or agency or public organization or agency.

e) The spouse's income and assets will be counted even if the sponsor and spouse married after the agreement was signed.

f) The sponsor, if found able to support the non-citizen wholly or partially, is liable for the needs of the individual non-citizen only. The sponsor is not responsible for the needs of the spouse or child or children of the non-citizen if he or she did not sponsor them.

g) If two or more non-citizens applying for assistance are sponsored by the same sponsor, the income of the sponsor deemed available is divided equally among the non-citizens.

h) The sponsor's income and assets available to meet the needs of the non-citizen is determined in the following manner:

1) Determination of Available Income

   A) Disregard 20 percent, not to exceed $175, of the earned income of the sponsor or of the sponsor and sponsor's spouse, if they live together. This includes net earnings from self-employment, allowing business expenses incurred in the production of self-employment income.

   B) Add the unearned income of the sponsor and spouse, if they live together.

   C) Deduct three times the TANF payment level for the size of the sponsor's family unit. This includes the sponsor and other individuals living with the sponsor who are claimed as federal tax dependents.
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D) Deduct any amount paid to individuals outside the home whom the sponsor claims as federal tax dependents.

E) Subtract any alimony or child support paid to individuals not living with the sponsor.

2) Income remaining is applied to the needs of the non-citizen.

3) **Determination of Sponsor's Assets**
   The asset disregard for a sponsor of a non-citizen is $1500. The same assets are exempt for a TANF case as provided in Section 112.151.

   i) If non-exempt assets are more than the $1500 disregard, the amount over the disregard shall be considered as available to the non-citizen.

   jj) The sponsor's income and assets shall be deemed available to meet the needs of the non-citizen until the non-citizen is naturalized or has worked 40 qualifying quarters of coverage as specified in Section 421 of the Personal Responsibility and Work Opportunities Reconciliation Act of 1996.

(Source: Amended at 29 Ill. Reg. ______, effective ____________ )
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1) **Heading of the Part:** General Assistance

2) **Code Citation:** 89 Ill Adm. Code 114

3) **Section Numbers:**

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4) **Statutory Authority:** Implementing Article VI and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/Art. VI and 12-13].

5) **A Complete Description of the Subjects and Issues involved:** As part of the Agency’s initiative to simplify General Assistance policy, this rulemaking eliminates the consideration of assets in the determination of eligibility for the General Assistance Program. This change makes General Assistance policy consistent with the Family Health Plan’s medical assistance policy. By eliminating the asset limit for General Assistance, families can be encouraged to build a savings fund that would assist them in maintaining self-sufficiency when they experience an employment setback.

6) **Will this rulemaking replace any emergency rulemaking currently in effect?** No

7) **Does this rulemaking contain an automatic repeal date?** No

8) **Does this rulemaking contain incorporations by reference?** No

9) **Are there any other amendments pending on this Part?** Yes

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10) **Statement of Statewide Policy Objectives (if applicable):** This rulemaking does not create or expand a State mandate.

11) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Interested persons may present their comments concerning these
DEPARTMENT OF HUMAN SERVICES

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amendments within 45 days after the date of this issue of the Illinois Register. All requests and comments should be submitted in writing to:

Tracie Drew, Chief
Bureau of Administrative Rules and Procedures
Department of Human Services
100 South Grand Avenue East
Harris Building, 3rd Floor
Springfield, Illinois 62762
(217) 785-9772

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not-for-profit corporations affected: None

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

13) Regulatory agenda on which this rulemaking was summarized: July 2004

The full text of the Proposed Amendments begins on the next page:
DEPARTMENT OF HUMAN SERVICES

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TITLE 89: SOCIAL SERVICES
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES
SUBCHAPTER b: ASSISTANCE PROGRAMS

PART 114
GENERAL ASSISTANCE

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AUTHORITY: Implementing Article VI and authorized by Section 12-13 of the Illinois Public
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Aid Code [305 ILCS 5/Art. VI and 12-13].

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SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

Section 114.9 Client Cooperation

a) As a condition of eligibility, clients must cooperate:

1) in the determination of eligibility;

2) with Department programs conducted for the purposes of acquisition or verification of information upon which eligibility may depend;

3) in applying for all financial benefits for which they may qualify and to avail themselves of such benefits at the earliest possible date.

b) Clients are required to avail themselves of all potential income sources.

c) When eligibility cannot be conclusively determined because the individual is unwilling or fails to provide essential information or to consent to verification, the client is ineligible.

d) At screening, applicants shall be informed, in writing, of any information they are to provide at the eligibility interview.

e) At the eligibility interview or at any time during the application process, when the applicant is requested to provide information in his or her possession, the Department will allow ten (10) days for the return of the requested information. The first day of the ten (10) day period is the calendar day following the date the information request form is sent or given to the applicant. The last day of the ten (10) day period shall be a work day and is to be indicated on the information request form. If the applicant does not provide the information by the date on the
information request form, the application shall be denied on the following work day.

f) At the eligibility interview or at any time during the application process, when the applicant is requested to provide third party information, the Department shall allow ten (10) days for the return of the requested information or for verification that the third party information has been requested. The first day of the ten (10) day period is the calendar day following the date the information request form is sent or given to the applicant. The last day of the ten (10) day period shall be a work day and is to be indicated on the information request form. It is to be indicated on the information request form that the applicant shall provide written verification of the request for the third party information. If the applicant does not provide the information or the verification that the information was requested by the date on the information request form, the application shall be denied on the following work day.

1) Third party information is defined as information that must be provided by someone other than the applicant. An authorized representative or person applying on another's behalf is not a third party but is treated as if he were the applicant.

2) The Department shall advise clients of the need to provide written verification of third party information requests and the consequences of failing to provide such verification.

3) If the applicant requests an extension either verbally or in writing in order to obtain third party information and provides written verification of the request for the third party information such as a copy of the request that was sent to the third party, an extension of ninety (90) days from the date of application shall be granted. The first day of the ninety (90) day period is the calendar day following the date of application. The 90th day must be a work day.

4) If an applicant's attempt to obtain third party information is unsuccessful, upon the applicant's request the Department will assist in securing evidence to support the client's eligibility for assistance.

(Source: Amended at 29 Ill. Reg. _____, effective ___________

SUBPART E: FINANCIAL FACTORS OF ELIGIBILITY)
Section 114.223  Lump-Sum Payments

a) Income received either in the form of a one-time only, payment that does not continue on a regular basis or in the form of a retroactive payment for income that continues on a regular basis is considered nonrecurring lump-sum income (a lump-sum payment). Examples of nonrecurring lump-sum income are retroactive social security payments, retroactive unemployment insurance benefits, personal injury settlements, Workers' Compensation injury settlements, lottery winnings, inheritances and insurance settlements.

b) Any portion of the lump-sum payment used to pay for expenses incurred as a result of the lump-sum payment shall be exempt from consideration as nonrecurring lump-sum income as follows:

1) Personal Injury Settlement – That portion of a personal injury payments is exempt which is used to pay for:
   A) necessary costs of litigation or settlement, including attorney's fees;
   B) the Department's charge (see 89 Ill. Adm. Code 102.260);
   C) medical costs resulting from the injury and paid by the client;
   D) expenses to repair or replace personal property which was damaged as a result of the injury.

2) Workers' Compensation Payment – That portion of a Workers' Compensation payment is exempt which is used to pay for:
   A) necessary costs of litigation or settlement, including attorney's fees;
   B) medical costs resulting from the injury and paid by the client.

3) Insurance Payments
   A) Insurance Payments – That portion of an insurance payment received due to loss is exempt when used to:
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i) repair or replace a lost or damaged resource including but not limited to repair or replacement of home, furniture, or clothing lost or damaged in a fire or flood and repair or replacement of a car as a result of an accident or fire;

ii) pay the funeral/burial or medical expenses of an insured where the client is the beneficiary of the insured's life insurance policy.

B) Any insurance proceeds not spent or contracted to be spent as specified in subsection (b)(3)(A) of this Section within 60 days after receipt shall be budgeted as nonrecurring lump-sum income. A payment receipt shall be required as verification of any insurance-related expense claimed as exempt under subsection (b)(3)(A) of this Section.

c) A SSI lump-sum payment made on behalf of a child that is paid directly into a dedicated account is disregarded.

d) Lump-sum payments are considered nonexempt unearned income for the month of receipt. Any amount remaining is considered an asset for the following month.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 114.250 Assets

a) The value of non-exempt assets is not considered in determining eligibility for an assistance payment.

b) The entire equity value of jointly held assets shall be considered in determining eligibility for an assistance payment, unless:

1) The asset is a joint income tax refund; or

2) The client documents that he/she does not have access to the asset. Appropriate documents may include, but are not limited to, bank documents, signature cards, trust documents, divorce papers, and papers from court proceedings.
3) The client can document the amount of his legal interest in the asset, and that such amount is less than the entire value of the asset, then the documented amount shall be considered. Appropriate documentation may include, but is not limited to, bank documents, trust documents, signature cards, divorce papers, or court orders; or

4) The asset is held jointly with a client(s) of any Illinois Department of Human Services assistance program, other than Food Stamps; or

5) The client documents that the asset or a portion of the asset is not owned by the client and the client's accessibility to the asset is changed (see subsections (b)(2) and (b)(3) above for documentation examples).

c) Income tax refunds

1) Income tax refunds shall be considered available assets and are to be considered against the appropriate nonexempt asset limitation of the assistance unit. One-half of joint tax refunds shall be considered available for each payee.

2) A client who declares that less than one-half of the joint income tax was received may claim an exception. Only the amount claimed to be received shall be considered.

d) Trust Fund for the Benefit of a Dependent Child

1) When trust fund exists in the name of a child or for the benefit of a child included in the assistance unit and the amount of the trust fund by itself or combined with other nonexempt assets of the assistance unit exceeds the asset disregard, the caretaker shall be allowed forty-five (45) days to petition the court for release of the funds. When someone other than the caretaker is the trustee of the trust fund, the caretaker is responsible for taking action within forty-five (45) days of the Department's becoming aware of the existence of the trust fund to petition the court to order the trustee to release the funds. The child for whom the trust fund was established shall remain in the assistance unit for the forty-five (45) days.

2) When the trust fund combined with other nonexempt assets of the assistance unit does not exceed the asset disregard, petitioning the court for release of the funds is not required.
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3) At the end of forty-five (45) days, if the caretaker:

A) does not provide verification that the court has been petitioned, the amount of the trust fund shall be considered a nonexempt asset and shall be applied to the asset disregard of the assistance unit. When the trust fund and other nonexempt assets exceed the asset disregard, the child may be deleted or if the child is the only child in the assistance unit, the case may be changed to an adult only case(s). The eligibility of all other members of the assistance unit shall not be affected unless the child with the trust fund is the only child in the assistance unit, or

B) provides verification that the court has been petitioned and the court denied the request for release of the funds, the amount of the trust fund shall be considered an exempt asset, or

C) provides verification the court will release the funds for the child, the released amount(s) shall be considered as follows:

i) When the petition and court order direct the money be used for the child's income maintenance needs or do not specify a purpose, payments shall be budgeted as nonexempt unearned income. The caretaker may request the child be removed from the assistance unit if the earmarked income meets the child's needs. The earmarked income shall be considered available to meet the needs of the child only and the other assistance unit members remain eligible.

ii) When the petition and court order direct the money be used for the child's income maintenance needs or do not specify a purpose, a one-time only release of the money shall be considered an asset subject to the asset disregard. If the payment plus other nonexempt assets exceed the asset disregard, the caretaker may choose to delete the child from the assistance unit. The other assistance unit members shall remain eligible.

iii) When the petition and court order direct the money be used for a specific purpose other than the income maintenance
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needs of the child, the money shall be considered exempt
and does not affect eligibility, or

D) provides verification the court was petitioned but a decision was
not made, assistance shall be continued for the child and a control
established for 30 days.

(Source: Amended at 29 Ill. Reg. _______, effective ____________)

Section 114.251 Exempt Assets (Repealed)

a) The following assets are exempt from consideration in determining eligibility for assistance:

1) Homestead property.

2) Household furnishings.

3) Clothing and personal effects.

4) One-motor vehicle.

5) The principal and interest of a court-ordered trust fund established for a child which, upon petition, the court refuses to release and one-time only payments released for a specific purpose other than the income maintenance needs of the child.

6) Donations or benefits from fund raisers held for a seriously ill client provided the client or responsible relative of the client does not have control over the donations or benefits or the disbursement of the donations or benefits and the donations or benefits are not available to the client or the responsible relative.

b) The following payments are also exempt:

1) The value of any savings in which the money is accumulated from the earnings of a child.

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3) Any payment received under Title II of P.L. 100-383 of the Aleutian and

4) Payments made by the Illinois Department of Mental Health and
Developmental Disabilities under the Family Assistance Program for
Mentally Disabled Children under P.A. 86-921.

5) Disaster relief payments provided by federal, State or local governments
or a disaster assistance organization.

(Source: Repealed at 29 Ill. Reg. ______, effective ____________)

Section 114.252 Asset Disregards (Repealed)

In addition to the exempt assets listed in Section 114.251, the cash value of assets shall be
disregarded as follows:
All assets or the cash value of assets other than those listed in Section 114.251 are nonexempt
and must be considered in determining initial or continued eligibility for assistance and level of
assistance payment. The client's asset disregard is the same as the TANF asset disregard
contained in 89 Ill. Adm. Code 112.152.

(Source: Repealed at 29 Ill. Reg. ______, effective ____________)

SUBPART G: OTHER PROVISIONS

Section 114.408 Responsibility of Sponsors of Non-citizens Entering the Country On or
After 8/22/96

a) This Section applies to all non-citizens who entered the country on or after
August 22, 1996, and whose sponsors signed an Affidavit of Support under
Section 213A of the Immigration and Nationality Act (INA) (8 USC 1183a(a)(1)(A)A).

b) This Section applies to all non-citizens except the following:

1) persons granted asylum by the U.S. Attorney General under Section 208
of the INA (8 USC 1158);

2) persons admitted as Cuban or Haitian entrants;
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3) persons admitted as refugees by application after March 31, 1980, under Section 207 of the INA (8 USC 1157); and

4) persons whose deportation is being withheld under Section 243(h) of the INA (8 USC 1253(h)) (as in effect immediately before the effective date of Public Law 104-208) or Section 241(b)(3) of the INA (8 USC 1231(b)(3)).

c) Certain amounts of the income and assets of a sponsor and of a sponsor's spouse, if they live together, are deemed to be available unearned income and/or assets of the individual non-citizen applying for or receiving General Assistance if:

1) the sponsor signed an Affidavit of Support under Section 213A of the INA (8 USC 1183a(a)(1)(A)) assuring that the non-citizen would not become a public charge;

2) the sponsor is not a recipient of GA, TANF, SSI or SSP; and

3) the non-citizen is not a child or spouse of the sponsor.

d) A sponsor is an individual, private organization or agency, or public organization or agency.

e) The sponsor's spouse's income and assets will be counted even if the sponsor and spouse married after the agreement was signed.

f) The sponsor, if found able to support the non-citizen wholly or partially, is liable for the needs of the individual non-citizen only. The sponsor is not responsible for the needs of the spouse or child or children of the non-citizen if he or she did not sponsor them.

g) If two or more non-citizens applying for assistance are sponsored by the same sponsor, the income of the sponsor is deemed available and is divided equally among the non-citizens.

h) The sponsor's income and assets available to meet the needs of the non-citizen is determined in the following manner:

1) Determination of Available Sponsor's Income
DEPARTMENT OF HUMAN SERVICES

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A) The Department shall disregard 20%, not to exceed $175, of the earned income of the sponsor or of the sponsor and sponsor's spouse if they live together. This includes net earnings from self-employment, allowing business expenses incurred in the production of self-employment income.

B) The Department shall add the unearned income of the sponsor and spouse if they live together.

C) The Department shall deduct 3 times the appropriate TANF cash payment level for the size of the sponsor's family unit. This includes the sponsor and other individuals living with the sponsor who are claimed as federal tax dependents.

D) The Department shall deduct any amount paid to individuals outside the home whom the sponsor claims as federal tax dependents.

E) The Department shall subtract any alimony or child support paid to individuals not living with the sponsor.

2) Any remaining income is applied to the needs of the non-citizen.

3) Determination of Sponsor's Assets
   The asset disregard for a sponsor of a non-citizen is $1500. The same assets are exempt for a GA case as provided in Section 114.251.
   
i) If nonexempt assets are more than the $1500 disregard, the amount over the disregard shall be considered as available to the non-citizen.
   
j) The sponsor's income and assets shall be deemed available to meet the needs of the non-citizen until the non-citizen is naturalized or has worked 40 qualifying quarters of coverage as specified in Section 421 of the Personal Responsibility and Work Opportunities Reconciliation Act of 1996.

(Source: Amended at 29 Ill. Reg. _______, effective ___________)

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1) **Heading of the Part:** Food Stamps

2) **Code Citation:** 89 Ill Adm. Code 121

3) **Section Numbers:**
   - 121.57
   - 121.58

   **Proposed Action:**
   - Amendment
   - Amendment

4) **Statutory Authority:** Implementing Sections 12-4.4 through 12-4.6 and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-4.4 through 12-4.6 and 12-13].

5) **A Complete Description of the Subjects and Issues involved:** The Agriculture Appropriations Bill revision to the Food Stamp Act allows use of the vehicle asset policy adopted for the TANF Program to be applied to the Food Stamp Program. With the elimination of an asset limit for the TANF Program, this rulemaking revises the Food Stamp Rules to no longer consider vehicles when determining countable assets.

6) **Will these proposed amendments replace any emergency amendments currently in effect?** No

7) **Does this rulemaking contain an automatic repeal date?** No

8) **Does this rulemaking contain incorporations by reference?** No

9) **Are there any other amendments pending on this Part?** Yes

<table>
<thead>
<tr>
<th>Section Numbers</th>
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<tbody>
<tr>
<td>121.57</td>
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<td>28 Ill. Reg. 10531; 9-13-04</td>
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<td>121.58</td>
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<tr>
<td>121.108</td>
<td>Amendment</td>
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10) **Statement of Statewide Policy Objectives (if applicable):** This rulemaking does not create or expand a State mandate.

11) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Interested persons may present their comments concerning these rules within 45 days of the date of this issue of the *Illinois Register*. All requests and comments should be submitted in writing to:
NOTICE OF PROPOSED AMENDMENTS

Tracie Drew, Chief
Bureau of Administrative Rules and Procedures
Department of Human Services
100 South Grand Avenue East
Harris Building, 3rd Floor
Springfield, Illinois  62762
(217) 785-9772

12) Initial Regulatory Flexibility Analysis:

    A) Types of small businesses, small municipalities and not-for-profit corporations affected: None

    B) Reporting, bookkeeping or other procedures required for compliance: None

    C) Types of professional skills necessary for compliance: None

13) Regulatory agenda on which this rulemaking was summarized: July 2004

The full text of the Proposed Amendments begins on the next page:
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TITLE 89: SOCIAL SERVICES
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES
SUBCHAPTER b: ASSISTANCE PROGRAMS

PART 121
FOOD STAMPS

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121.2 Time Limitations on the Disposition of an Application
121.3 Approval of an Application and Initial Authorization of Assistance
121.4 Denial of an Application
121.5 Client Cooperation
121.6 Emergency Assistance
121.7 Expedited Service
121.10 Interviews

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121.18 Work Requirement
121.19 Ending a Voluntary Quit Disqualification (Repealed)
121.20 Citizenship
121.21 Residence
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121.23 Work Registration/Participation Requirements
121.24 Individuals Exempt from Work Registration Requirements
121.25 Failure to Comply with Work Provisions
121.26 Period of Sanction
121.27 Voluntary Job Quit/Reduction in Work Hours
121.28 Good Cause for Voluntary Job Quit/Reduction in Work Hours
121.29 Exemptions from Voluntary Quit/Reduction in Work Hours Rules

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121.32 Education Benefits (Repealed)
121.33 Unearned Income In-Kind
121.34 Lump Sum Payments and Income Tax Refunds
121.40 Earned Income
121.41 Budgeting Earned Income
121.50 Exempt Earned Income
121.51 Income from Work/Study/Training Programs
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121.53 Income From Rental Property
121.54 Earned Income In-Kind
121.55 Sponsors of Aliens
121.57 Assets
121.58 Exempt Assets
121.59 Asset Disregards

SUBPART D: ELIGIBILITY STANDARDS

Section
121.60 Net Monthly Income Eligibility Standards
121.61 Gross Monthly Income Eligibility Standards
121.62 Income Which Must Be Annualized
121.63 Deductions from Monthly Income
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121.72 Nonhousehold Members
121.73 Ineligible Household Members
121.74 Strikers
121.75 Students
121.76 Households Receiving AFDC, SSI, Interim Assistance and/or GA – Categorical Eligibility

SUBPART F: MISCELLANEOUS PROGRAM PROVISIONS

Section
121.80 Fraud Disqualification (Renumbered)
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121.81 Initiation of Administrative Fraud Hearing (Repealed)
121.82 Definition of Fraud (Renumbered)
121.83 Notification To Applicant Households (Renumbered)
121.84 Disqualification Upon Finding of Fraud (Renumbered)
121.85 Court Imposed Disqualification (Renumbered)
121.90 Monthly Reporting and Retrospective Budgeting (Repealed)
121.91 Monthly Reporting (Repealed)
121.92 Budgeting
121.93 Issuance of Food Stamp Benefits
121.94 Replacement of the EBT Card or Food Stamp Benefits
121.95 Restoration of Lost Benefits
121.96 Uses For Food Coupons
121.97 Supplemental Payments
121.98 Client Training for the Electronic Benefits Transfer (EBT) System
121.105 State Food Program (Repealed)
121.107 New State Food Program
121.120 Redetermination of Eligibility
121.125 Redetermination of Earned Income Households
121.130 Residents of Shelters for Battered Women and their Children
121.131 Fleeing Felons and Probation/Parole Violators
121.135 Incorporation By Reference
121.140 Small Group Living Arrangement Facilities and Drug/Alcoholic Treatment Centers
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Section
121.160 Persons Required to Participate
121.162 Program Requirements
121.163 Vocational Training
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121.164 Orientation (Repealed)
121.165 Community Work
121.166 Assessment and Employability Plan (Repealed)
121.167 Counseling/Prevention Services
121.170 Job Search Activity
121.172 Basic Education Activity
121.174 Job Readiness Activity
121.176 Work Experience Activity
121.177 Illinois Works Component (Repealed)
121.178 Job Training Component (Repealed)
121.179 JTPA Employability Services Component (Repealed)
121.180 Grant Diversion Component (Repealed)
121.182 Earnfare Activity
121.184 Sanctions for Non-cooperation with Food Stamp Employment and Training
121.186 Good Cause for Failure to Cooperate
121.188 Supportive Services
121.190 Conciliation
121.200 Types of Claims (Recodified)
121.201 Establishing a Claim for Intentional Violation of the Program (Recodified)
121.202 Establishing a Claim for Unintentional Household Errors and Administrative Errors (Recodified)
121.203 Collecting Claim Against Households (Recodified)
121.204 Failure to Respond to Initial Demand Letter (Recodified)
121.205 Methods of Repayment of Food Stamp Claims (Recodified)
121.206 Determination of Monthly Allotment Reductions (Recodified)
121.207 Failure to Make Payment in Accordance with Repayment Schedule (Recodified)
121.208 Suspension and Termination of Claims (Recodified)

SUBPART I: WORK REQUIREMENT FOR FOOD STAMPS

Section
121.220 Work Requirement Components (Repealed)
121.221 Meeting the Work Requirement with the Earnfare Component (Repealed)
121.222 Volunteer Community Work Component (Repealed)
121.223 Work Experience Component (Repealed)
121.224 Supportive Service Payments to Meet the Work Requirement (Repealed)
121.225 Meeting the Work Requirement with the Illinois Works Component (Repealed)
121.226 Meeting the Work Requirement with the JTPA Employability Services Component (Repealed)
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AUTHORITY: Implementing Sections 12-4.4 through 12-4.6 and authorized by Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-4.4 through 12-4.6 and 12-13].

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SUBPART C: FINANCIAL FACTORS OF ELIGIBILITY

Section 121.57 Assets

a) The value of nonexempt assets shall be considered in determining eligibility.

b) Value of Nonexempt Assets

1) The value of nonexempt assets is the equity value (fair market value less the amount owed), except for prepaid funeral agreements valued over $1500.

2) The Department considers the following assets in determining eligibility:

A) Liquid Assets

i) Liquid assets are those properties in the form of cash or other financial instruments which are convertible to cash, such as, but not limited to, cash on hand, money, in checking or savings accounts, credit union accounts, savings certificates, stocks or bonds, lump-sum payments, prepaid funeral agreements, IRAs and Keogh Plans that do not involve a contractual relationship with someone who is not a member of the same food stamp household.

ii) The amount of the Keogh Plan or IRA to be counted as an asset is the total value minus any amount that would be lost for early withdrawal. The amount considered is the amount the individual would receive if the account were closed. An individual (one-person) Keogh Plan is the nonexempt asset. However, the Keogh Plan involving a household
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member and someone who is not a member of the same food stamp household is exempt unless the client can make withdrawals from the account without affecting the other individual or individuals.

B) Nonliquid Assets
Nonliquid assets are those properties that are not in the form of cash or other financial instruments, such as personal property, licensed vehicles, unlicensed vehicles, buildings, land, recreational properties, and any other property not specifically exempted in Section 121.58.

C) Assets of Sponsors of Aliens
Consider the assets of the sponsor and the sponsor's spouse who sponsored an alien on or after February 1, 1983 (7 CFR 272.1(g)(54)(2001)) in accordance with Section 121.55.

D) Licensed Vehicles
The Department shall consider the equity value of a licensed vehicle unless exempted as stated in Section 121.58.

E) Prepaid Funeral Agreements
The value of prepaid funeral agreements over $1500.00 per person is considered.

(Source: Amended at 29 Ill. Reg. ______, effective ____________)

Section 121.58 Exempt Assets

a) Homestead Property

1) The home and surrounding property, exclusive of public rights of way, is not separated from the home by intervening property owned by others.

2) Homes are temporarily unoccupied for reasons of employment, training for future employment, illness, or inhabitability caused by casualty or natural disaster, remain exempt if the household intends to return.
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3) A lot owned or being purchased by the household if the household intends to build or is building a permanent home and the household does not currently own a home.

b) Personal Property
Household goods, personal effects, one burial plot per household member, and the cash value of life insurance policies and pension plans except Individual Retirement Accounts (IRA's) and Keogh plans that do not involve a household member in a contractual relationship with someone who is not a member of the same food stamp household. If the Keogh plan involves a member of the household and someone who is not a member of the same food stamp household, it is exempt unless the client can withdraw funds from the plan without affecting the other individual or individuals.

c) Income Producing Property

1) Property that is annually producing income consistent with its fair market value (including land or buildings being sold by installment contract), even if only used on a seasonal basis.

2) Property that is essential to the employment or self-employment of a household member, such as, farmland and work related equipment (tools of a tradesman, farm machinery). This includes property, real or personal, that is:

A) directly related to the maintenance or use of a vehicle used primarily (over 50% of the time) for producing income, such as, but not limited to, a taxi, truck, or fishing boat;

B) annually producing income consistent with its fair market value (even if only used seasonally); or

C) necessary for long distance travel essential to employment, other than daily commuting (such as a sales person, migrant farmworker).

In the case of farm property (including land, equipment, and supplies) that is essential to the self-employment of a household member in a farming operation, the value of such property shall be excluded from financial resources until the expiration of the one year period beginning on the date
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| the such member ceases to be self-employed in farming. |
| 3) A rental home that which is used by a household for vacation purposes at sometime during the year is an asset, unless excluded by subsection (c)(1) of this Section. |


d) Disaster Relief Payments
Disaster relief payments provided by federal, state or local government or a disaster assistance organization.

e) Inaccessible Assets
Assets whose cash value is not accessible to the household, such as but not limited to:

1) irrevocable trust funds,

2) security deposits on rental property and utilities,

3) property in probate,

4) real property when a good faith effort is being made to sell at a reasonable price,

5) jointly owned assets that which cannot be practically subdivided and are accessible only with the consent of the joint owner who refuses to give that consent,

6) non-liquid asset or assets (see Section 121.57(b)(2)(B)) that which have a lien against it as a result of a business loan and the household is prohibited by the security or lien agreement from selling the asset or assets,

7) monies received from the Social Security Administration under the PASS Program that are held in a separate account, or

8) an asset if when sold or otherwise disposed of would net the household less than $1500. The net is determined by subtracting the expenses of disposing of the property from the equity value. This does not apply to negotiable financial instruments or stocks and bonds.

f) Prorated Income
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Money that has been prorated as income, such as income of self-employed persons or students.

g) Indian Lands
Indian lands held jointly with the tribe, or land that can be sold only with the approval of the Bureau of Indian Affairs.

h) Federal Statute Exclusions
Assets excluded for food stamp purposes by express provision of Federal Statute.

i) Licensed Vehicles

1) used primarily for producing income such as, but not limited to, a taxi, truck, or fishing boat. "Used primarily" means: used over 50% of the time the vehicle is used;

2) annually producing income consistent with its fair market value (even if only used on a seasonal basis);

3) necessary for long distance travel essential to employment, other than daily commuting (such as a sales person, migrant farmworker);

4) necessary for subsistence hunting or fishing (game and fish necessary for the livelihood of the household);

5) used as the household's home;

6) necessary to transport a physically disabled household member regardless of the purpose of such transportation. Only one vehicle per disabled person is allowed. The vehicle need not be specially equipped or used primarily for the transportation of the disabled individual;

*Agency Note: Exclusions (1) - (6) also apply when the vehicle is not in use because of temporary unemployment.

7) one licensed vehicle per household, regardless of its use;

8) the equity value of one licensed vehicle for each adult household member, regardless of its use;
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9) the equity value of any other licensed vehicles used by household members under age 18 to drive to and from employment, training or education which is preparatory for employment, or to seek employment. Temporary periods of unemployment are not to affect this exemption;

10) any vehicle if the net proceeds would total less than $1500 if sold; and

11) property, real or personal, to the extent that it is directly related to the maintenance or use of a vehicle excluded under subsections (i)(1), (i)(2) or (i)(3) of this Section.

Assets of a TANF or SSI household member
All assets of household member who receives TANF or SSI benefits.

(Source: Amended at 29 Ill. Reg. _______, effective ___________)
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF PROFESSIONAL REGULATION

NOTICE OF PROPOSED RULES

1) Heading of the Part: Electrologist Licensing Act

2) Code Citation: 68 Ill. Adm. Code 1246

3) Section Numbers: Proposed Action:
   1246.10        New Section
   1246.20        New Section
   1246.30        New Section
   1246.40        New Section
   1246.50        New Section
   1246.60        New Section
   1246.70        New Section
   1246.80        New Section
   1246.90        New Section
   1246.100       New Section
   1246.105       New Section
   1246.110       New Section

4) Statutory Authority: Electrologist Licensing Act [225 ILCS412]

5) A Complete Description of the Subjects and Issues Involved: Public Act 92-750 established the Electrologist Licensing Act. This proposed rulemaking provides qualifications and requirements for individuals in the practice of electrology in this State to obtain a license from the Department of Financial and Professional Regulation-Division of Professional Regulation as an electrologist. When adopted, these rules will allow the Division to begin accepting and processing applications for licensure.

Sections 1246.10, 1246.20, 1246.30, and 1246.50 set forth the application process and requirements for licensure as an electrologist. Qualifications are also provided for individuals who wish to apply under the grandfather provision. Standards for sterilization and sanitation, procedures for renewal of a license and conditions for the Director of the Division to grant a variance to these rules are also provided. Fees for certification and renewal as well as general processing fees are set forth in Section 1246.40.

6) Do these proposed Rules replace emergency rules currently in effect? No

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed rules contain incorporations by reference? No
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION  

NOTICE OF PROPOSED RULES  

9) Are there any other proposed Rules pending on this Part? No  

10) Statement of Statewide Policy Objectives (if applicable): This rulemaking has no effect on local governments.  

11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may submit written comments to:  

Department of Financial and Professional Regulation  
Division of Professional Regulation  
Attention: Barb Smith  
320 West Washington, 3rd Floor  
Springfield, IL 62786  
217/785-0813 Fax #: 217/782-7645  

All written comments received within 45 days after this issue of the Illinois Register will be considered.  

12) Initial Regulatory Flexibility Analysis:  

A) Types of small businesses, small municipalities and not for profit corporations affected: Those providing electrology services.  

B) Reporting, bookkeeping or other procedures required for compliance: None  

C) Types of professional skills necessary for compliance: Training in electrology is necessary for licensure.  

13) Regulatory Agenda on which this rulemaking was summarized: None  

The full text of the Proposed Rules begins on the next page:
Section 1246.10 Qualifications for Licensure

a) An applicant may apply for licensure as an electrologist by filing an application on forms provided by the Department of Financial and Professional Regulation-Division of Professional Regulation (Division). For individuals who wish to apply under the grandfather provision, the application shall be postmarked no later than January 1, 2006 and shall include:

1) A complete work history documenting employment as an electrologist;

2) Verification that the applicant has received compensation for practicing electrology for a period of 3 years. This may be in the form of affidavits from at least 3 clients or business owners who can attest to applicant's practicing electrology for compensation;
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3) Proof of one of the following:

A) Current board certification by the American Electrology Association as a Certified Professional Electrologist (CPE) or Clinical Certified Electrologist (CCE) or certification from any other organization approved by the Division; or

B) Completion of 30 hours of continuing education in electrology as set forth in Section 1246.70; and

4) the required fee set forth in Section 1246.30.

b) Individuals applying for licensure as an electrologist, except for those qualified under the grandfather provision, shall file an application with the Division, on forms provided by the Division, that the applicant has:

1) Completed 600 hours in the study of electrology over a period of not less than 16 weeks nor more than 2 consecutive years at a program approved by the Division. If an applicant completed a program before December 31, 2003, the program may be less than 600 hours if it is approved by the Division; and

2) Successfully completed the IBEC (International Board of Electrology Certification) examination.

Section 1246.20 Examination

a) The examination for licensed electrologists shall be the IBEC (International Board of Electrology Certification) examination.

b) The passing score on the examination shall be the passing score of the testing entity.

c) Applicants who fail the examination 3 times in Illinois or any other jurisdiction shall be required to submit proof of successful completion of 100 hours in an electrology education program in a course of study on the subjects of the portion failed in the third examination.

Section 1246.30 Application for Licensure by Examination
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF PROFESSIONAL REGULATION

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Applicants for licensure based on examination shall submit to the Division a properly completed application on forms provided by the Division, along with the following:

a) Proof of successful completion of the examination approved by the Division specified in Section 1246.20 of this Part; and

b) The required fee set forth in Section 1246.40.

Section 1246.40 Fees

The following fees shall be paid to the Division and are not refundable:

a) Application Fees.
The fee for application for a license as an electrologist is calculated at $125.

b) Renewal Fees.
The fee for the renewal of a license as an electrologist shall be calculated at $62.50 per year.

c) Examination.
Applicants for examination shall be required to pay, either to the Division or to the designated testing service, a fee covering the cost of the examination. Failure to appear for the examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Division or the designated testing service, shall result in the forfeiture of the examination fee.

d) General Fees.

1) The fee for the restoration of a license other than from inactive status is $20 plus payment of all lapsed renewal fees not to exceed $500.

2) The fee for the issuance of a duplicate license, for the issuance of a replacement license, for a license that has been lost or destroyed, or for the issuance of a license with a change of name or address other than during the renewal period is $20. No fee is required for name and address changes on Division records when no duplicate license is issued.

3) The fee for a certification of a licensee's record for any purpose is $20.
4) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.

5) The fee for a roster of persons licensed as electrologists in this State shall be the actual cost of producing the roster.

Section 1246.50 Endorsement

a) An applicant for licensure as an electrologist who is licensed under the laws of another state shall file an application with the Division that shall include:

1) Documentation certifying that applicant meets the education requirements set forth in Section 1246.10(b);

2) Documentation from all jurisdictions in which the applicant has been licensed, certifying the time during which the applicant was licensed in that jurisdiction, whether the file on the applicant contains any disciplinary actions taken or pending, and the applicant's license number;

3) A report of the applicant's examination record forwarded directly from the test reporting service;

4) Complete work history; and

5) The required fee.

b) The Division shall examine each endorsement application to determine whether the requirements and examination in the jurisdiction at the date of licensing were substantially equivalent to the requirements and examination then in force in this State and whether the applicant has otherwise complied with the Act.

c) The Division shall either issue a license by endorsement to the applicant or notify the applicant in writing of the reasons for the denial of the application.

Section 1246.60 Standards of Sterilization and Sanitation

The Division hereby incorporates by reference "Standards of Practice for Electrologists", dated April 23, 1994, as approved and amended by the American Electrology Association, and "Infection Control Standards for the Practice of Electrology", dated 2001, as approved and
amended by the American Electrology Association, P.O. Box 687, Bodega Bay CA 94923 (no later amendments or editions included).

Section 1246.70 Continuing Education

For the April 2009 renewal and every renewal thereafter, in order to renew a license, the licensee shall be required to complete 30 hours of continuing education. One Continuing Education Unit (CEU) is defined as 10 contact hours of participation in an organized continuing education experience.

a) Qualifying continuing education activities are the following:

1) courses offered or approved by the American Electrology Association or its affiliates;

2) hospital or medical school sponsored educational offerings, provided the coursework is related to health issues of practitioners;

3) credit-bearing college courses and other post-graduate classes for continuing education credit offered at a regionally accredited academic institution, provided the coursework is clearly related to electrology theory, technical and clinical aspects of electrolysis, electrology research, ethical or legal aspects of practicing electrolysis or health issues of electrologists;

4) any other courses approved by the Division.

b) Continuing education activities shall meet the following requirements:

1) the activity involves face-to-face instruction or a home study program;

2) the provider implements a mechanism to monitor and document physical attendance at such instruction or to verify licensee completion in the case of a home study program;

3) the provider retains written records for a period of 3 years from the participant's actual successful completion of the activity, including but not limited to: content description; instructor; date of activity; location of activity; list of participants; participant's evaluation of instruction presented; and number of contact hours; and
Section 1246.80 Renewals

a) The first renewal date for licensure under the Electrologist Licensing Act [225 ILCS 412] (Act) shall be April 30, 2007. Thereafter, every license issued under the Act shall expire on April 30 of odd numbered years. The holder of the license may renew the license during the month preceding the expiration date by paying the required fee and proof of 30 hours of continuing education in accordance with Section 1245.70.

b) It is the responsibility of each license holder to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee.

c) Practice on an expired license shall be considered the unlicensed practice of electrology and subject to discipline or other penalties set forth in Section 75 of the Act.

Section 1246.90 Restoration

a) A person seeking restoration of a license that has expired for 5 years or less shall have the license restored upon payment of all lapsed renewal fees and proof of 30 hours of continuing education.

b) A person seeking restoration of a license that has been placed on inactive status for 5 years or less shall have the license restored upon payment of the current renewal fee and proof of 30 hours of continuing education.

c) A person seeking restoration of a license after it has expired or been placed on inactive status for more than 5 years shall file an application, on forms supplied by the Division, including the applicant's work history since the license expired, the required fee and proof of 30 hours of continuing education completed within the 24 months preceding the date of application. The person shall also submit one of the following:
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1) Sworn evidence of active practice in another jurisdiction. The evidence shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the registrant was authorized to practice during the term of active practice; or

2) An affidavit attesting to military service as provided in Section 60 of the Act.

d) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Division because of a lack of information, discrepancies or conflicts in information given or a need for clarification, the applicant seeking restoration of a license shall be requested to provide information as may be necessary.

e) Upon the recommendation of the Director of the Division of Professional Regulation (Director), an applicant shall have the license restored or will be notified in writing of the reason for the denial of the application.

Section 1246.100 Inactive Status

a) An electrologist who notifies the Division, on forms provided by the Division, may place his or her license on inactive status and shall be excused from paying renewal fees until he/she notifies the Division in writing of the intention to resume active practice.

b) Any electrologist seeking restoration from inactive status shall do so in accordance with Section 1246.80.

c) Any person violating this Section shall be considered to be practicing without a license and shall be subject to the disciplinary provisions of the Act.

Section 1246.105 Granting Variances

The Director may grant variances from this Part in individual cases where he or she finds that:

a) The provision from which the variance is granted is not statutorily mandated;

b) No party will be injured by the granting of the variance; and
c) The rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.

Section 1246.110 Dishonorable, Unethical or Unprofessional Conduct

a) The Division may suspend or revoke a license, refuse to issue or renew a license or take disciplinary action, based upon its finding of dishonorable, unethical or unprofessional conduct within the meaning of Section 75 of the Act.

b) The Division hereby incorporates by reference "Standards of Practice for Electrologists", developed by the American Electrology Association and approved April 23, 1994.
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NOTICE OF ADOPTED AMENDMENT

1) **Heading of the Part:** Health Maintenance Organization

2) **Code Citation:** 50 Ill. Adm. Code 5421

3) **Section Number:** 
   Adopted Action:
   5421.110 Amendment

4) **Statutory Authority:** Implementing and authorized by Sections 4-6.1, 4-17, 5-2 and 5-7 of the Health Maintenance Organization Act [215 ILCS 125/4-6.1, 4-17, 5-2 and 5-7]

5) **Effective Date of Amendment:** October 19, 2004

6) **Does this amendment contain an automatic repeal date?** No

7) **Does this amendment contain incorporations by reference?** No

8) A copy of the adopted amendment, including any material incorporated by reference, is on file in the principal office of the Division of Insurance and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** June 18, 2004; 28 Ill. Reg. 8392

10) **Has JCAR issued a Statement of Objection to this amendment?** No

11) **Differences between proposal and final version:**

    a) In the Code descriptive header, add "FINANCIAL AND PROFESSIONAL REGULATION" following "OF" and strike "INSURANCE".

    b) In Section 5421.110(c), on the third line, add "copayments" and strike "co-payments", at JCAR's request.

    c) In Section 5421.110(d), on the last line, strike "thereto" and add "to it", at JCAR’s request.

    d) In Section 5421.110(g), on the first line, add "and individual contract" following "coverage", at JCAR's request. Also, in the second sentence, add a comma
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following "contract"; strike "or" and add "or individual contract" following "coverage".

e) In Section 5421.110(i), in the fourth sentence, add a comma following "when" and strike the comma following "enrollee".

f) In Section 5421.110(r)(3), at the end, add a semicolon and "and" following "hours" and strike the period, at JCAR's request.

g) Section 5421.110(r)(4) has been rewritten as follows: "the name of all enrollees entitled to coverage, along with all other mandated information, if the HMO does not issue a card to each enrollee who is entitled to coverage. In such situations, at least two cards must be issued to the primary enrollee upon enrollment and the HMO must issue additional cards to all enrollees at the request of the enrollee for no additional charge. Notification of the right to order additional cards for no additional charge must be included with information required to be disseminated to enrollees under subsection (q).".

12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes

13) Will this amendment replace any emergency rulemaking currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of rulemaking: The Division of Insurance has amended Section 5421.110 in order to adjust maximum yearly out-of-pocket limits for enrollees and to specify how those maximums are to be calculated amendments.

16) Information and questions regarding this adopted amendment shall be directed to:
   David Grant
   Healthcare Coordinator
   Department of Financial and Professional Regulation
   Division of Insurance
   320 West Washington Street
   Springfield, Illinois  62767-0001   217-782-6369

The full text of the Adopted Amendment begins on the next page.
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TITLE 50: INSURANCE

CHAPTER I: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

SUBCHAPTER kkk: HEALTH CARE SERVICE PLANS

PART 5421

HEALTH MAINTENANCE ORGANIZATION

Section
5421.10 Scope
5421.20 Definitions
5421.30 Valuation of Investments
5421.40 Grievance Procedure
5421.50 Contracts, Administrative Arrangements and Material Modifications
5421.60 Rates
5421.70 Subordinated Indebtedness
5421.80 Financial Reporting
5421.90 Conflict of Interest and Required Disclosure
5421.100 Solicitation
5421.110 Requirements for Group Contracts, Evidences of Coverage and Individual Contracts
5421.111 Cancellation
5421.112 Form Filing Requirements
5421.113 Point of Service Plan Requirements
5421.120 Internal Security Standards and Fidelity Bonds
5421.130 Basic Health Care Services
5421.131 Basic Outpatient Preventive and Primary Health Care Services for Children
5421.132 Required Coverage for Reconstructive Surgery Following Mastectomies
5421.140 General Provisions
5421.141 HMO Producer Licensing Requirements
5421.142 Limited Insurance Representative Requirements - Public Aid and Medicare Enrollers
5421.150 Severability
5421.160 Effective Date (Repealed)

AUTHORITY: Implementing and authorized by Sections 4-6.1, 4-17, 5-2 and 5-7 of the Health Maintenance Organization Act [215 ILCS 125/4-6.1, 4-17, 5-2 and 5-7].
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Section 5421.110  Requirements for Group Contracts, Evidences of Coverage and Individual Contracts

a) Any group contract, evidence of coverage, individual contract, enrollee handbook, enrollment application, identification card or other form which affects the terms and conditions applicable to the subscriber or enrollee in the provision of health care services must be filed with and approved by the Director prior to use in accordance with the requirements of Section 5421.112 of this Part and Section 4-13 of the Act. The HMO shall issue to each subscriber or enrollee a group contract, evidence of coverage, or individual contract. Any conflicting information between the valid current document referenced above issued to the subscriber or enrollee and the current group contract shall be interpreted according to whichever is most beneficial to the subscriber or enrollee. Any such group contract, evidence of coverage, or individual contract shall provide for the rendering of health care services as defined therein for either a specific period of not less than twelve months from the date of issuance or for such period as is otherwise mutually agreed to by the HMO and the group or individual contractholder; and shall provide for renewal on a basis mutually agreed to by both parties, unless the HMO has given 31 days written notice of nonrenewal prior to the renewal date of the contract.

b) A detailed statement of any exceptions, exclusions or limitations shall be set forth in the group contract, evidence of coverage, and individual contract for any type of health care service to be excepted. Such exceptions, exclusions or limitations shall appear with the same prominence in the group contract, evidence of coverage and individual contract as any benefit.

c) The group contract, evidence of coverage, and individual contract shall set forth a detailed statement of the terms and conditions of maternity benefits and any related exceptions, exclusions, limitations, copayments and payments and
deductibles. Such exceptions, exclusions, limitations, copayments and deductibles applicable to prenatal and post-natal care shall be covered no differently than any other covered health care services provided pursuant to the contract, with the exception of a limitation for coverage of routine prenatal care or delivery when the enrollee is outside the service area against medical advice, except when the enrollee is outside of the service area due to circumstances beyond her control, may be included in the group contract and evidence of coverage.

d) Entire Contract. The group contract, evidence of coverage and individual contract shall contain a statement that the group contract evidence of coverage and individual contract, all applications, and any amendments thereto shall constitute the entire agreement between the parties. No portion of the charter, by-laws or other document of the HMO shall be part of such a contract or evidence of coverage unless set forth in full in such document or attached to it.

e) Eligibility Requirements. The group contract, evidence of coverage and individual contract shall contain eligibility requirements indicating the conditions that must be met to enroll in a health care plan, the limiting age for enrollees and eligible dependents including the effects of Medicare eligibility, and a clear statement regarding coverage of newborn children as set forth in Sections 4-8 and 4-9 of the Act.

f) Benefits and Services Within the Service Area. The group contract, evidence of coverage and individual contract shall contain a specific description of benefits and services available within the HMO's designated service area.

g) Emergency Care Services. The group contract, evidence of coverage and individual contract shall contain a specific description of benefits and services available for emergencies 24-hours a day, 7 days a week, including disclosure of any restrictions on emergency care services. No group contract, or evidence of coverage or individual contract shall limit the coverage of emergency services within the service area to those providers having a contract with the HMO.

h) Out of Area Benefits and Services. The group contract, evidence of coverage and individual contract shall contain a specific description of benefits and services available out of the HMO's designated service area.
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i) Deductibles and Copayments. An HMO may require copayments of enrollees as a condition for the receipt of specific health care services. Deductibles and copayments shall be the only allowable charge, other than premiums, assessed enrollees. Copayments and deductibles shall be for a specific dollar amount. Deductibles shall be either for a specific dollar amount or for a specific percentage of the cost of the health care service. No combination of deductibles and copayments single deductible or copayment for basic health care services may exceed 50% of the usual and customary fee of the service to the HMO and must be waived when, in a contract calendar year, deductibles and copayments paid for the receipt of basic health care services exceed $3000 per enrollee; or $6000 per family. Deductibles and copayments applicable to supplemental health care services or pre-existing conditions are not subject to this annual limitation. Nothing within this subsection shall preclude the provider from charging reasonable administrative fees such as service fees for checks returned for non-sufficient funds and missed appointments.

j) Pre-existing Conditions. An HMO may impose deductible and copayment pre-existing condition limitations as a condition to receiving health care services. A pre-existing condition shall not be defined more restrictively than a condition for which medical advice or treatment was recommended by a physician or received from a physician within a one year period preceding the effective date of coverage under the health care plan or the existence of symptoms which, in the opinion of a legally qualified physician, would have caused an ordinarily prudent person to seek diagnosis, care or treatment within a one year period preceding the effective date of coverage under the health care plan. Such condition may only be limited for a period not to exceed one year from the effective date of coverage.

k) Cancellation. The group contract, evidence of coverage, and individual contract shall contain the conditions upon which cancellation may be effected by the HMO or the enrollee as set forth in Section 5421.111 of this Part.

l) Reinstatement. The group contract, evidence of coverage, and individual contract shall contain the conditions of the enrollee's right to reinstatement.

m) Grace Period. A group contract or individual contract shall provide for a grace period for the payment of any premium, except the first, during which coverage shall remain in effect if payment is made during the grace period. The grace
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period for a group contract shall not be less than 10 days. The grace period for an individual contract shall not be less than 31 days. During the grace period, the HMO shall remain liable for providing the services and benefits contracted for; the subscriber shall remain liable for the payment of the premium for the time coverage was in effect during the grace period and the enrollee shall remain liable for the payment of any applicable share of the premium, for the time coverage was in effect, as well as for any copayments owed.

n) No group contract, or evidence of coverage, or individual contract may be delivered in this State unless the subscriber and/or enrollee is provided written notice required by Section 143c of the Illinois Insurance Code [215 ILCS 5/143c].

o) Right to Examine Contract. An individual contract, with the exception of an HMO Medicare contract entered into between the Health Care Financing Administration and the HMO under Title XVIII of the Social Security Act, as amended from time to time, shall contain a provision stating that an enrollee who has entered into an agreement with an HMO shall be permitted to return the individual contract within ten days after receiving it and to receive a refund of the premium paid if the enrollee is not satisfied with the contract for any reason. If the individual contract is returned to the HMO or to its representative through whom it was purchased, it is considered void from the beginning. However, if services are rendered or claims are paid for such enrollee or dependent by the HMO during the ten-day examination period, the enrollee shall not be permitted to return the contract and receive a refund of the premium paid.

p) An HMO Medicare contract entered into between the Health Care Financing Administration and the HMO under Title XVIII of the Social Security Act, as amended from time to time, shall be delivered to the enrollee at least 15 days prior to the effective date of the contract. The enrollee shall be permitted to return the HMO Medicare contract prior to the effective date and to receive a refund of the premium paid if the enrollee is not satisfied with the contract for any reason, provided the enrollee complies with the disenrollment procedures of Title XVIII of the Social Security Act, as amended from time to time.

q) Every HMO will provide to every enrollee of the HMO information which generally describes the philosophy, functions and organization of the HMO and related institutions, and specific information which describes the appropriate use of the HMO’s services, including a general description of benefits and limitations.
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The HMO shall include in its enrollee information a description of the HMO's grievance procedure, directions for filing a grievance, and "Notice of Availability of the Department."

r) Every HMO shall provide enrollees with an identification card which must prominently display the following information:

1) the words "Health Maintenance Organization" or "HMO"; and

2) disclaimer language concerning an enrollee's unauthorized use of providers not selected by the HMO; and

3) a current telephone number for the enrollees to use when health care services are required outside of normal office hours; and

4) the name of all enrollees entitled to coverage, along with all other mandated information, if the HMO does not issue a card to each enrollee who is entitled to coverage. In such situations, at least two cards must be issued to the primary enrollee upon enrollment and the HMO must issue additional cards to all enrollees at the request of the enrollee for no additional charge. Notification of the right to order additional cards for no additional charge must be included with information required to be disseminated to enrollees under subsection (q).

s) Enrollment Application. No individual contract shall be issued except upon the signed enrollment application of the enrollee for whom coverage is being sought. Any information or statement of the applicant shall appear on such application in the form of interrogatories by the HMO and answers by the applicant. The enrollee shall not be bound by any statement made within an application for health care coverage unless a copy of such application is attached to the individual contract. Group enrollment applications must be maintained on file by the HMO; otherwise, disputes arising from statements made within such applications will be resolved in the enrollee's favor. Except for those instances involving fraud or material misrepresentation, an HMO's failure to investigate incomplete or conflicting answers on an enrollment application, shall estop the HMO from subsequently denying coverage on the basis of such responses.

t) Coordination of Benefits.
1) HMOs are permitted, but not required, to adopt coordination of benefits provisions to avoid over insurance and to provide for the orderly payment of claims when a person is covered by two or more group health insurance or health care plans.

2) If an HMO adopts coordination of benefits, the provision must be consistent with the coordination of benefits requirements set forth in 50 Ill. Adm. Code 2009.

3) To the extent necessary for an HMO to meet its obligations as a secondary carrier under 50 Ill. Adm. Code 2009, and where an enrollee has established a credit within the reserve bank, the HMO shall make payments for services that are:

   A) received from non-participating providers; or

   B) provided outside their services areas; or

   C) not covered under the terms of health care plan.

u) Dependents-termination of coverage-disability and dependency, proof-application. Every group contract, evidence of coverage, or individual contract which provides that coverage of a dependent person of an enrollee shall terminate upon attainment of the limiting age for dependent persons shall comply with the requirements of Section 4-9.1 of the Act.

v) Conversion of coverage.

1) The group contract and evidence of coverage shall contain a conversion provision which provides that each enrollee has the right to convert coverage to an individual or group HMO contract in the following circumstances:

   A) upon cancellation of eligibility for coverage under a group contract,

   B) upon cancellation of the group contract, or
C) upon non-renewal of the group contract.

2) The conversion contract shall cover the enrollee and his/her eligible dependents who were covered by the group contract on the date of cancellation or non-renewal of coverage. To obtain the conversion contract, an enrollee shall submit a written application and the application premium payment within 31 days after the date the enrollee's coverage is cancelled.

3) The HMO may require copayments and deductibles under a conversion contract that differ from the group contract.

4) A conversion contract shall not be required to be made available if:

   A) The cancellation of the enrollee's coverage occurred for any of the reasons listed in Section 5421.111(a) of this Part; or

   B) The enrollee is covered by or is eligible for benefits under Title XVIII of the United States Social Security Act; or

   C) The enrollee is covered by similar hospital, medical, or surgical benefits under state or federal law; or

   D) The enrollee is covered by similar hospital, medical, or surgical benefits under any arrangement of coverage for individuals in a group whether on an insured or uninsured basis; or

   E) The enrollee is covered for similar benefits through individual coverage; or

   F) The enrollee has not been continuously covered during the three-month period immediately preceding cancellation of that person's coverage; or

   G) The enrollee has moved outside of the service area of the health maintenance organization; or
H) The cancellation of the enrollee's coverage occurred in relation to the HMO being placed in rehabilitation or liquidation proceedings pursuant to Section 5-6 of the Act; or

I) The group contract has been discontinued in its entirety and there is a succeeding carrier providing coverage to the group in its entirety.

5) Benefits or coverage shall be considered "similar" if coverage is provided for at least 12 months under comprehensive type medical coverage.

6) Notwithstanding subsection (v)(4)(C), (D), (E), or (I) above, if the enrollee or any of his or her covered dependents has a pre-existing condition, and the enrollee is covered by similar hospital, medical or surgical benefits under any arrangement of coverage for individuals in a group, whether on an insured or uninsured basis, and such coverage does not cover pre-existing conditions, then such enrollee may continue conversion coverage for the individual with such pre-existing condition until the enrollee's or dependent's pre-existing condition is covered under the succeeding plan.

7) The conversion contract shall provide as a minimum to its enrollees basic health care services.

8) The conversion contract shall begin coverage of the enrollee and any dependents formerly covered under the group contract on the date of termination from the group or the former individual contract.

9) Coverage shall be provided without requiring evidence of insurability and shall not impose any pre-existing condition limitations or exclusions other than those remaining unexpired under the contract from which conversion is exercised.

10) Prior to the issuance of a conversion contract, the enrollee must be notified in writing that the election of any conversion contract will terminate the individual's federal eligibility for coverage under the Illinois Comprehensive Health Insurance Plan.

w) Discrimination between individuals of the same class in the terms and conditions
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of such health care plan, or in the amount charged for coverage under a health care plan except where the rate differential is based on sound actuarial principles, or in any other manner whatsoever is prohibited.

x) Grievance Procedure
The group contract, evidence of coverage, and individual contract shall set forth a full description of the HMO grievance procedure required by Section 5421.40 of this Part.

(Source: Amended at 28 Ill. Reg. 14412, effective October 19, 2004)
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1) **Heading of the Part:** Illinois Architecture Practice Act of 1989

2) **Code Citation:** 68 Ill. Adm. Code 1150

3) **Section Numbers:**
   - 1150.10 Amendment
   - 1150.40 Amendment
   - 1150.60 Amendment

4) **Statutory Authority:** Illinois Architecture Practice Act of 1989 [225 ILCS 305]

5) **Effective Date of Amendments:** October 20, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain incorporations by reference?** No

8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.

9) **Date Notice of Proposal Published in Illinois Register:** April 23, 2004; 28 Ill. Reg. 6382

10) **Has JCAR issued a Statement of Objection to these amendments?** No

11) **Differences between proposal and final version:** References have been changed from “Department” to “Division” to reflect the consolidation of agencies into the Department of Financial and Professional Regulation and the creation of the Division of Professional Regulation.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR?** Yes

13) **Will these amendments replace any emergency amendments currently in effect?** No

14) **Are there any amendments pending on this Part?** No

15) **Summary and Purpose of Amendments:** Section 1150.10 adds clarification on education in relation to requirements for training units (TUs). Section 1150.60 clarifies when
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submission of a work history is necessary for licensure by endorsement. Obsolete language has been removed and other technical changes are also being made.

16) Information and questions regarding these adopted amendments shall be directed to:

Department of Financial and Professional Regulation
Division of Professional Regulation
Attention: Barb Smith
320 West Washington, 3rd Floor
Springfield, Illinois 62786

217/785-0813 Fax: 217/782-7645

The full text of the Adopted Amendments begins on the next page:
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TITLE 68: PROFESSIONS AND OCCUPATIONS

CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

PART 1150

ILLINOIS ARCHITECTURE PRACTICE ACT OF 1989

Section
1150.10 Education Requirements and Diversified Professional Training Requirements
1150.20 Category II – Education Requirements and Diversified Professional Training Requirements for Individuals Whose Education Was Initiated Prior to January 1, 1990 (Repealed)
1150.30 Application for Licensure by Examination/Acceptance of Examination
1150.40 Examination
1150.50 Approved Architecture Programs
1150.60 Licensure by Endorsement
1150.65 Inactive Status
1150.70 Restoration
1150.75 Fees
1150.80 Professional Design Firm
1150.85 Acts Constituting the Practice of Architecture Pursuant to Section 5 of the Act
1150.90 Standards of Professional Conduct
1150.95 Architecture Complaint Committee
1150.100 Renewals
1150.105 Continuing Education Requirements
1150.110 Granting Variances

1150.APPENDIX A Categories of Diversified Professional Training (Repealed)
1150.APPENDIX B Historical Summary of Minimum Requirements to Qualify for Examination for Licensure as an Architect in Illinois
1150.APPENDIX C Historical Summary of Examination Requirements
1150.ILLUSTRATION A Architect Seal Requirements


SOURCE: Rules and Regulations Promulgated for the Administration of the Illinois Architecture Act, effective May 29, 1975; amended May 12, 1977; codified at 5 Ill. Reg. 11019; emergency amendment at 6 Ill. Reg. 916, effective January 6, 1982, for a maximum of 150 days;

Section 1150.10 Education Requirements and Diversified Professional Training Requirements

The education and diversified professional training required for examination for licensure under the Illinois Architecture Practice Act [225 ILCS 305] (the Act) are set forth in this Section. Applicants shall meet the requirements set forth in this Section.

a) Education Requirements

1) Applicants with a professional degree from a program accredited by the National Architectural Accrediting Board (NAAB) or the Canadian Architectural Certification Board (CACB) not later than 2 years after termination of an applicant's enrollment, or with a professional degree in architecture from a Canadian university certified as accredited by CACB:

A) Bachelor of Architecture degree; or

B) Master of Architecture degree.

2) Applicants with a degree from a program not accredited by the NAAB or CACB:

A) A pre-professional 4 year baccalaureate degree program in architecture approved by the Board in accordance with Section
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1150.50 of this Part, which is accepted for direct entry into a professional Master of Architecture degree program accredited by the NAAB or the CACB; or

B) Completion of the education requirements as specified in the National Council of Architectural Registration Boards (NCARB) Education Standard. This includes the requirement that applicants with a degree from a program not accredited by the NAAB or the CACB must obtain an EESA-NCARB Evaluation Report prepared by the Education Evaluation Services for Architects (EESA), which is administered by NAAB. Applicants may request the report from the National Architectural Accrediting Board, 1735 New York Avenue, NW, 3rd Floor, Washington, D.C. 20006; phone (202) 783-2007; or www.naab.org.

b) Diversified Professional Training Requirements

1) An applicant must complete the Intern Development Program (IDP) of the National Council of Architectural Registration Boards (NCARB), 1801 K Street, NW, Suite 1100, Washington, D.C. 20006-1310, as set forth in the NCARB IDP Guidelines (July 1, 2003 to June 30, 2004, no later additions or amendments included). (A copy of these Guidelines is available from the Department or NCARB.)

2) To satisfy diversified professional training requirements, each applicant must acquire a minimum number of training units (TUs) based on the education requirements set forth in subsection (b)(3) below. One TU equals eight hours of acceptable activity. Acceptable activities and conditions affecting training are set forth in the IDP Guidelines.

3) TUs shall be acquired in prescribed categories and areas and under requirements set forth in the NCARB IDP Training Requirements included in the IDP Guidelines. The required number of TUs will vary according to the following educational requirements:

A) Applicants who meet the educational requirements set forth in subsections (a)(1) and (a)(2)(B) shall complete 700 TUs pursuant to the IDP Training Requirement.
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B) Applicants with a pre-professional 4 year baccalaureate degree set forth in subsection (a)(2)(A) shall complete 1170 TUs pursuant to the IDP Training Requirements where twice the listed minimum TUs required for each training category and area shall be acquired.

4) The required minimums in IDP Training Categories A, B, C and D total 465 TUs for the education requirements set forth in subsections (a)(1) and (a)(2)(B) and 930 TUs for the education requirements set forth in subsection (a)(2)(A), allowing for the additional TUs to be acquired in any of the listed categories.

5) To satisfy the Illinois Diversified Professional Training requirements, an applicant must have satisfied the training requirements in accordance with the NCARB IDP Training Requirements and subsection (b)(3)(A) or (B). An applicant who has satisfied the training requirements is expected to have been exposed to the comprehensive practice of architecture. Accordingly, each applicant must demonstrate that his or her training has been sufficiently diversified as to include exposure to each of the training areas set forth in the IDP Training Requirement. (An applicant with the required number of TUs may nonetheless be denied approval of training if that training is not diversified.)

6) The training settings in which TUs may be acquired, and the maximum TUs allowed to be acquired in each training setting, are set forth in the NCARB IDP Guidelines and shall apply to all applicants.

7) Program Requirements

A) No TUs may be earned prior to satisfactory completion of:

i) Three years in an NAAB-accredited professional degree program; or

ii) The third year of a 4 year pre-professional degree program in architecture accepted for direct entry to an NAAB-accredited professional master's degree program; or

iii) One year in an NAAB-accredited professional master's degree program following receipt of a non-professional
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undergraduate degree; or

iv) 96 semester credit hours as evaluated by Education Evaluation Services for Architects (EESA) in accordance with NCARB Education Standard of which no more than 60 hours can be in the general education category.

B) No experience used to meet education requirements described in subsection (a) of this Section may be used to earn TUs.

C) To earn TUs in IDP Training Settings A, B, C, D and E, an applicant must work at least 35 hours per week for a minimum period of 10 consecutive weeks or at least 20 hours per week for a minimum period of 6 consecutive months.

D) To earn TUs in IDP Training Setting F, the applicant must be employed on a full-time basis.

E) A "licensed architect" is a person licensed to practice architecture in the jurisdiction in which he or she practices.

F) A person practices as a "principal" by being:

i) A licensed architect; and

ii) The person in charge of the organization's architectural practice, either alone or with other licensed architects.

G) A person who has completed the education requirements, is actively participating in the diversified professional training and maintains in good standing a training record as required by this Section may use the title "architectural intern", but may not engage in the practice of architecture except to the extent that such practice is exempted from the requirement for licensure.

8) Explanation of Requirements

A) TUs may be acquired only if the applicant meets the time requirements of Section 1150.10(b)(7)(C). Full TU credit is
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earned for acceptable full-time and part-time employment in the training settings described in Section 1150.10(b)(5).

B) No TUs may be acquired prior to meeting the requirements of Section 1150.10(b)(7)(A).

C) Applicants with a post-professional degree in architecture may qualify for TU credit as set forth in the IDP Guidelines.

D) An applicant may earn TUs by completing Board-approved supplementary education programs. Supplementary education cannot be used to satisfy the minimum TU requirements. No TUs may be earned for supplementary education unless the applicant is employed in a recognized training setting (refer to IDP Guidelines). Credit for supplementary education activities may not exceed 235 TUs.

E) To satisfy Category A of the IDP Training Requirements, TUs (including TUs earned from supplementary education) in those categories must be acquired when employed in the training settings described in Section 1150.10(b)(6). A minimum of 235 TUs must be acquired in Training Setting A.

F) For a detailed description of the IDP training categories, settings and conditions and supplementary education requirements, see IDP Guidelines.

c) All applicants shall utilize NCARB to collect, evaluate and certify all training data and records required for compliance with this Part.

d) The verification of training shall be submitted to the Department of Financial and Professional Regulation-Division of Professional Regulation at the time of application.

e) If the accuracy of any submitted documentation or the relevance or sufficiency of the training is questioned by the Department or the Architecture Licensing Board (the Board) because of discrepancies or conflicts in information, a need for additional information or clarification, the applicant will be requested to provide such information as is necessary.
Section 1150.40 Examination

a) The examination for licensure as an architect is a computer based examination prepared by the National Council of Architectural Registration Boards (NCARB).

b) The examination shall consist of the following divisions:

1) Pre-Design;
2) Site Planning;
3) Building Planning;
4) Building Technology;
5) General Structures;
6) Lateral Forces;
7) Mechanical and Electrical Systems;
8) Building Design/Materials and Methods; and
9) Construction Documents and Services.

c) Site Planning, Building Planning and Building Technology are graphic design problems, with all other divisions being a multiple-choice format. All divisions are graded with a score of pass or fail. To pass the examination, the applicant must achieve a passing grade on each division of the examination.

d) An applicant failing a division may repeat that division test 6 months after his or her unsuccessful attempt.

e) All applicants who are in the process of taking the examination formerly administered by the Division Departm...
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Examination (ARE) divisions in Appendix C.

f) If an applicant fails to pass an examination for licensure under the Act within 3 years after filing an application, the application shall expire and be denied. The applicant may, however, make a new application for examination accompanied by the required fee, and must furnish proof of meeting the qualifications for examination in effect at the time of new application. Scores from divisions of the examination already passed under a previous application shall be carried over and applied to subsequent applications.

g) Applicants who fail to achieve the required passing score in any division of the examination will be afforded unlimited opportunities to repeat the failed parts of the examination.

h) The provisions of this Section shall be waived for an applicant for licensure as an architect who makes application in form and substance satisfactory to the Division Department pursuant to the standards set forth in Section 1150.30 and causes to be filed with the Division Department, in addition to his/her application, proof of successful completion of the NCARB examination administered pursuant to the standards outlined above in another jurisdiction. Such proof of successful completion must be forwarded directly to the Division Department from the jurisdiction in which the examination was taken.

i) Divisions of the examination passed in another jurisdiction will be accepted toward licensure in this State if the division was not subsequently failed.

(Source: Amended at 28 Ill. Reg. 14424, effective October 20, 2004)

Section 1150.60 Licensure by Endorsement

a) An applicant who holds an active license or registration to practice architecture under the laws of another state or territory and who desires to become licensed by endorsement shall file an application with the Division Department together with:

1) Either:

   A) Council Certification, issued by and forwarded directly to the Division Department by the NCARB; or
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B) Other Proof of Qualifications and Licensure

i) Proof that the applicant has met requirements substantially equivalent to those in force in this State at the time of original or subsequent licensure by written examination in the other state or territory, including certification of education, and affidavits of training.

ii) A certification by the state or territory of original licensure and any other jurisdiction in which the applicant is or has ever been licensed, including the date of issuance of the applicant's license and the current status of each license; the basis of licensure and a description of all examinations by which the applicant was licensed in that state or territory and the date of passage of any such examinations; and whether the records of the licensing authority contain any record of disciplinary action taken or pending against the applicant;

iii) A complete work history since graduation from an architecture program;

2) The required fee as set forth in Section 1150.75;

3) A complete work history since graduation from an architecture program;

4) A signed and dated affidavit attesting the applicant has read and understands the Act and this Part;

b) Applicants filing an application under subsection (a)(1)(B) are subject to the following requirements and provisions:

1) Applicants who received their education in a foreign country shall have the education comprehensively evaluated, at their expense. Applicants shall obtain an EESA-NCARB Evaluation Report prepared by the Education Evaluation Services for Architects (EESA), which is administered by NAAB. Applicants may request the report from the National Architectural Accrediting Board, 1735 New York Avenue, NW, 3rd Floor, Washington, D.C. 20006; phone (202) 783-2007; or
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www.naab.org. The Board will review all transcripts and the evaluation submitted to the Division to determine if the education meets the requirements set forth in Sections 1150.10 and 1150.20; and

2) Proof of passage of the Test of English as a Foreign Language (TOEFL) with a minimum score of 550 or 213 for the computer-based test and the Test of Spoken English (TSE) with a minimum score of 50, for applicants who apply after January 1, 1997, who graduated from an architectural program outside the United States or its territories and whose first language is not English. In order to determine applicants whose first language is English, the applicant shall submit verification from the school that the architectural program from which the applicant graduated was taught in English.

3) The Division shall examine each endorsement application to determine whether the requirements in the state or territory of original or subsequent licensure were substantially equivalent to the requirements then in force in this State. The Division shall either issue a license by endorsement to the applicant or notify the applicant in writing of the reason for the denial of the application.

4) The Division shall, in individual cases, upon recommendation of the Board, waive passage of one or more parts of the examination upon proof that the applicant has been lawfully engaged in the practice of architecture in another jurisdiction for a minimum of five years and has provided evidence demonstrating competence in the area or areas of the examination being considered for waiver (i.e., architectural education, training and experience). If an applicant has previously failed to pass a part or parts of the examination, the applicant shall not be granted a waiver for that part or parts pursuant to this provision.

c) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Division or the Board because of a lack of information, discrepancies or conflicts in information given or a need for clarification, the applicant shall be requested to:

1) Provide such information as may be necessary; and/or
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2) Appear for an interview before the Board to explain such relevance or sufficiency, clarify information, or clear up any discrepancies or conflicts in information.

(Source: Amended at 28 Ill. Reg. 14424, effective October 20, 2004)
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1) **Heading of the Part:** The Illinois Speech-Language Pathology and Audiology Practice Act

2) **Code Citation:** 68 Ill. Adm. Code 1465

3) **Section Numbers:**
   - 1465.40 Amendment
   - 1465.41 New Section
   - 1465.50 Amendment
   - 1465.60 Amendment
   - 1465.75 Amendment

4) **Statutory Authority:** Illinois Speech-Language Pathology and Audiology Practice Act [225 ILCS 110]

5) **Effective Date of Amendments:** October 20, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Do these amendments contain incorporations by reference?** No

8) **A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.**

9) **Date Notice of Proposal Published in Illinois Register:** March 19, 2004; 28 Ill. Reg. 4838

10) **Has JCAR issued a Statement of Objection to these amendments?** No

11) **Differences between proposal and final version:** Amendments to Sections 1465.40 and 1465.50 have been added to clarify that PRAXIS is the required licensure examination. References have been changed from “Department” to “Division” to reflect the consolidation of agencies into the Department of Financial and Professional Regulation and the creation of the Division of Professional Regulation. Various technical changes have also been made.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR?** Yes

13) **Will these amendments replace any emergency amendments currently in effect?** No
Are there any amendments pending on this Part? No

Summary and Purpose of Amendments: Public Act 93-112, effective January 1, 2004, requires individuals intending to undertake supervised professional experience as a speech-language pathologist to first obtain a temporary license from the Department; this rulemaking implements this provision. Section 1465.41 has been added to provide for the temporary license, while Section 1465.75 has been amended to provide for the application fee. Section 1465.60 has also been amended to allow temporary practice for up to 90 days for applicants licensed in another state or territory if they meet certain criteria, including never having been disciplined in another jurisdiction.

Information and questions regarding these adopted amendments shall be directed to:

Department of Financial and Professional Regulation
Division of Professional Regulation
Attention: Barb Smith
320 West Washington, 3rd Floor
Springfield, Illinois 62786

217/785-0813  Fax: 217/782-7645

The full text of the Adopted Amendments begins on the next page:
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TITLE 68: PROFESSIONS AND OCCUPATIONS
CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

PART 1465
THE ILLINOIS SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY PRACTICE ACT

Section
1465.10 Application for Licensure Under Section 7 of the Act (Repealed)
1465.20 Approved Programs
1465.30 Professional Experience
1465.35 Supervision
1465.36 Evaluation and Management Related to Speech-Language Pathology and Audiology
1465.40 Application for Licensure
  1465.41 Temporary License
1465.45 Jurisdiction
1465.50 Examination
1465.60 Endorsement
1465.70 Renewal
1465.75 Fees
1465.80 Restoration
1465.85 Continuing Education
1465.90 Granting Variances
1465.95 Professional Conduct Standards

AUTHORITY: Implementing the Illinois Speech-Language Pathology and Audiology Practice Act [225 ILCS 110] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS 2105/2105-15(7)].

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Section 1465.40 Application for Licensure

a) Each applicant for a speech-language pathology or audiology license shall file an application with the Department of Financial and Professional Regulation - Division of Professional Regulation (Division), on forms provided by the Division. The application shall include:

1) Certification, on forms provided by the Division, of a master's or doctoral degree from a program approved by the Division in accordance with Section 1465.20(a);

2) Passage of the PRAXIS examination National Examination in Speech-Language Pathology and/or Audiology (NESPA) set forth in Section 1465.50 or certification from the American Speech-Language-Hearing Association or from the American Board of Audiology pursuant to Section 8(e) of the Act. Exam scores shall be submitted directly to the Division from the testing service;

3) Certification, on forms provided by the Division, of completion of the equivalent of 9 months of full-time supervised professional experience as set forth in Section 1465.30 of this Part;

4) A complete work history since completion of a master's or doctoral degree program; and

5) The required fee as set forth in Section 1465.75 of this Part.

b) The Division, upon recommendation of the Board, will accept a Certificate of Clinical Competence in Speech-Language Pathology or Audiology awarded by the American Speech-Language-Hearing Association's Clinical Certification Board or certification in audiology from the American Board of Audiology, in lieu of the documents required in subsections (a)(2) and (3).

c) Each applicant for a speech-language pathology assistant license shall file an application with the Division on forms provided by the Division. The application shall include:

1) Certification, on forms provided by the Division, of completion of an associate's degree from a speech-language pathology
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assistant program approved by the Division in accordance with Section 1465.20(b);

2) A complete work history since completion of an associate's degree program; and

3) The required fee as set forth in Section 1465.75 of this Part.

d) Until January 1, 2004, the Division, upon recommendation of the Board, will accept an application for license as a speech-language pathology assistant by a person holding a bachelor's degree in communication disorders who was employed to assist a speech-language pathologist on January 1, 2002. The application shall include:

1) Certification, on forms provided by the Division, of completion of a bachelor's degree in speech-language pathology.

2) A complete work history since completion of the bachelor's degree program.

3) Verification of employment as a bachelor's level speech-language pathology assistant on January 1, 2002.

4) The required fee as set forth in Section 1465.75 of this Part.

(Source: Amended at 28 Ill. Reg. 14437, effective October 20, 2004)

Section 1465.41 Temporary License

On or after January 1, 2004, an applicant pursuing licensure as a speech language pathologist shall obtain a temporary license prior to beginning the supervised professional experience as specified in Section 1465.30. The application shall include:

a) Certification, on forms provided by the Division, of a master's or doctoral degree from a program approved by the Division in accordance with Section 1465.20(a);

b) Passage of the PRAXIS examination set forth in Section 1465.50 or certification from the American Speech-Language-Hearing Association pursuant to Section
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8(e) of the Act. Exam scores shall be submitted directly to the Division from the testing service;

c) A complete work history since completion of a master's or doctoral degree program;

d) Certification on forms provided by the Division demonstrating that a licensed speech-language pathologist has agreed to supervise the professional experience of the applicant; and

e) The required fee set forth in Section 1465.75 of this Part.

(Source: Added at 28 Ill. Reg. 14437, effective October 20, 2004)

Section 1465.50 Examination

a) The examinations for licensure as a licensed speech-language pathologist and/or licensed audiologist are the PRAXIS National Examinations in Speech-Language Pathology or Audiology (NESPA).

b) Candidates for the examination shall make application and pay the examination fee directly to the designated testing service.

c) Application to the testing services for purposes of the examination shall not constitute application to the Division for licensure.

(Source: Amended at 28 Ill. Reg. 14437, effective October 20, 2004)

Section 1465.60 Endorsement

a) An applicant for a license as a speech-language pathologist or audiologist who is licensed under the laws of another state or territory of the United States shall file an application with the Division, on forms provided by the Division, that includes:

1) Certification, on forms provided by the Division, of a master's or doctoral degree from a program approved by the Department in accordance with Section 1465.20;
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2) Certification, on forms provided by the Department, of completion of the equivalent of 9 months of full-time supervised professional experience as set forth in Section 1465.30 of this Part;  

3) Proof of successful completion of the examination set forth in Section 1465.50 of this Part;  

4) The Department, upon recommendation of the Board, will accept a Certificate of Clinical Competence in Speech-Language Pathology or Audiology awarded by the American Speech-Language-Hearing Association's Clinical Certification Board or certification in audiology from the American Board of Audiology, in lieu of the documents required in subsections (a)(2) and (3);  

5) Certification, on forms provided by the Department, from the state or territory of the United States in which the applicant was originally licensed and any state in which the applicant is currently licensed, stating:  

A) The time during which the applicant was licensed; and  

B) Whether the file of the applicant contains any record of any disciplinary actions taken or pending;  

6) A complete work history since completion of a master's or doctoral degree program; and  

7) The required fee as set forth in Section 1465.75 of this Part.  

b) The Department may require additional information to determine if the requirements in the state or territory of original licensure were substantially equivalent to the requirements then in effect in Illinois at the time of original licensure or to determine whether the requirements of another state or territory together with education and professional experience qualifications of the applicant are substantially equivalent to the requirements in Illinois at the time of application. The Department, upon recommendation of the Board, shall determine substantial equivalency based on, but not limited to, certification in speech-language pathology or audiology from the American Speech-Language-Hearing Association or certification in audiology from the American Board of Audiology; education, training, and experience, including, but not limited to,
whether he/she has achieved special honors or awards, has had articles published in professional journals, has written textbooks relating to speech-language-hearing; and any other attribute the Director of the Department of Financial and Professional Regulation-Division of Professional Regulation (Director) accepts as evidence that the applicant has outstanding and proven ability in speech-language-hearing. The Division Department shall either issue a license by endorsement to the applicant or notify him/her of the reasons for the denial of the application.

c) A person licensed as a speech-language pathologist or audiologist under the laws of another state, who has made application to the Division for a license to practice, may practice speech-language pathology or audiology without a license for 90 days from the date of application or until disposition of the license application by the Division, whichever is sooner. The person must hold a Certificate of Clinical Competence from the American Speech-Language-Hearing Association in speech-language pathology or audiology or, in the case of an audiologist, a certificate from the American Board of Audiology. In order to qualify under this subsection, there shall be no discipline or pending discipline against the applicant from the state or territory of the United States in which the applicant was originally licensed or any state in which the applicant is currently licensed.

d) An applicant for a license as a speech-language pathology assistant who is licensed under the laws of another state or territory of the United States shall file an application with the Division Department, on forms provided by the Division Department, that includes:

1) Certification, on forms provided by the Division Department, of completion of an associate's degree from a speech-language pathology assistant program approved by the Division Department in accordance with Section 1465.20(b);

2) A complete work history since completion of an associate's degree program;

3) The required fee set forth in Section 1465.75 of this Part; and

4) Certification, on forms provided by the Division Department, from the state or territory of the United States in which the applicant was originally licensed and any state in which the applicant is currently licensed, stating:
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A) The time during which the applicant was licensed; and

B) Whether the file of the applicant contains any record of any disciplinary actions taken or pending.

The Division may require additional information to determine if the requirements in the state or territory of original licensure were substantially equivalent to the requirements then in effect in Illinois at the time of original licensure or to determine whether the requirements of another state or territory, together with education and professional experience qualifications of the applicant, are substantially equivalent to the requirements in Illinois at the time of application. The Division shall either issue a license by endorsement to the applicant or notify him/her of the reasons for the denial of the application.

(Source: Amended at 28 Ill. Reg. 14437, effective October 20, 2004)

Section 1465.75 Fees

The following fees shall be paid to the Division and are not refundable:

a) Application Fees.

1) The fee for application for initial speech-language pathologist or audiologist license by examination is $90. In addition, applicants for any examination shall be required to pay, either to the Division or to the designated testing service, a fee covering the cost of determining an applicant's eligibility and providing the examination. Failure to appear for the examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Division or the designated testing service, shall result in the forfeiture of the examination fee.

2) The fee for application as a speech-language pathology assistant is $45.

3) The fee for application for a person licensed as a speech-language pathologist or audiologist under the laws of another state or territory of the United States or of a foreign country or province is $100.
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4) The fee for a temporary license as a speech-language pathologist is $75.

b) Renewal Fees.

1) The fee for the renewal of a speech-language pathologist or audiologist license shall be calculated at the rate of $50 per year.

2) The fee for the renewal of a speech-language pathology assistant license shall be calculated at the rate of $25 per year.

3) The fee for the renewal of a temporary license as a speech-language pathologist shall be $50.

c) General Fees.

1) The fee for the restoration of a license other than from inactive status is $20 plus payment of all lapsed renewal fees.

2) The fee for the issuance of a duplicate license, for the issuance of a replacement license, for a license that has been lost or destroyed or for the issuance of a license with a change of name or address other than during the renewal period is $20. No fee is required for name and address changes on Division Department records when no duplicate license is issued.

3) The fee for a certification of a licensee's record for any purpose is $20.

4) The fee for rescoring an examination shall be the cost to the Division Department of rescoring the examination, plus any fees charged by the applicable testing service to have the examination rescored.

5) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.

6) The fee for a roster of persons licensed as speech-language pathologists or audiologists in this State shall be the actual cost of producing the roster.

(Source: Amended at 28 Ill. Reg. 14437, effective October 20, 2004)
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1) Heading of the Part: Registered Surgical Assistant and Registered Surgical Technologist Title Protection Act

2) Code Citation: 68 Ill. Adm. Code 1485

3) Section Numbers:    Adopted Action:
1485.10    New Section
1485.20    New Section
1485.30    New Section
1485.40    New Section
1485.50    New Section
1485.60    New Section
1485.70    New Section
1485.80    New Section
1485.90    New Section

4) Statutory Authority: Implementing the Registered Surgical Assistant and Registered Surgical Technologist Title Protection Act [225 ILCS 130]

5) Effective Date of Rules: October 20, 2004

6) Does this rulemaking contain an automatic repeal date? No

7) Do these rules contain incorporations by reference? Yes

8) A copy of the adopted rules, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.

9) Date Notice of Proposal Published in Illinois Register: April 30, 2004; 28 Ill. Reg. 6564

10) Has JCAR issued a Statement of Objection to these rules? No

11) Differences between proposal and final version: References have been changed from "Department" to "Division" to reflect the consolidation of agencies into the Department of Financial and Professional Regulation and the creation of the Division of Professional Regulation. Additional clarification has also been included in Section 1485.10 to assist in processing applications.
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12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will these rules replace any emergency rules currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Rules: Public Act 93-280, effective July 1, 2004, provides for registration of surgical assistants and surgical technologists by the Department of Financial and Professional Regulation. These rules will allow the Department to begin accepting and processing applications for registration.

Sections 1485.10, 1485.20 and 1485.30 set forth the application process and requirements for surgical assistants and surgical technologists. The rules also set forth procedures for renewal of a registration and under what circumstances the Director may grant variances to these rules. Fees for certification and renewal, as well as general processing fees, are set forth in Section 1485.80.

16) Information and questions regarding this adopted Part shall be directed to:

Department of Financial and Professional Regulation
Division of Professional Regulation
Attention: Barb Smith
320 West Washington, 3rd Floor
Springfield, Illinois 62786

217/785-0813  Fax: 217/782-7645

The full text of the Adopted Rules begins on the next page:
Section 1485.10 Application for Registration as a Surgical Assistant

An applicant for registration as a surgical assistant shall file an application on forms supplied by the Division of Professional Regulation of the Department of Financial and Professional Regulation (Division), together with:

a) Certification of completion from a medical education program approved by the Division, or has graduated from a United States Military Program that emphasizes surgical assisting. The following applicants are considered from an approved program:

1) Individuals who are graduates of a National Surgical Assistant Association approved program of surgical assisting. The category shall include
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certificate programs, an associate degree or higher, and formal hospital
based programs for surgical assisting.

2) Individuals with 3 consecutive years experience as a surgical first assistant
with 750 hours per year. The individual must provide a signed and
notarized affidavit from his or her supervisor attesting to his or her
experience and 5 verifiable letters of reference from surgeons he or she
has assisted.

3) Individuals who are graduates of a foreign medical school must submit: a
copy of the diploma or a reference letter from their medical school
(verify surgical training and experience); a reference letter from a
sponsoring U.S. surgeon who has evaluated the individual's technical
skills and aseptic technique; and proof of having passed the TOEFL (Test
of English as a Foreign Language).

b) A complete work history since completion of the medical education program;

c) Documentation that the applicant has passed a national certifying examination
from the National Surgical Assistant Association on the Certification of Surgical
Assistants; the Liaison Council on Certification for Surgical Technologists as a
certified first assistant; or the American Board of Surgical Assistants;

d) Proof of current certification by one of the following certifying bodies:

1) National Surgical Assistant Association for the certification of surgical
assistants;

2) Liaison Council on Certification for the Surgical Technologist as a
certified first assistant; or

3) American Board of Surgical Assistants;

e) If the applicant has ever been licensed/registered in another state or territory of
the United States (jurisdiction), certification, on forms provided by the Division,
from the jurisdiction applicant was originally licensed and the jurisdiction
applicant predominantly practices and is currently licensed, stating:
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1) The time during which the applicant was registered in that jurisdiction, including the date of original issuance of the license; and

2) Whether the file on the applicant contains any record of disciplinary actions taken or pending.

f) The required fee as specified in Section 1485.80.

Section 1485.20 Application for Registration as a Surgical Technologist

An applicant for registration as a surgical technologist shall file an application on forms supplied by the Division, together with:

a) Proof of completion of a surgical technologist program approved by the Division;

b) A complete work history since completion of a surgical technologist program;

c) Proof of current certification and successful completion of the Surgical Technologist National Certification Examination provided by the Liaison Council on Certification for the Surgical Technologist or its successor agency;

d) If the applicant has ever been licensed/registered in another state or territory of the United States, certification, on forms provided by the Division, from the jurisdiction in which the applicant was originally licensed and the jurisdiction in which the applicant predominantly practices and is currently licensed, stating:

1) The time during which the applicant was registered in that jurisdiction, including the date of original issuance of the license; and

2) Whether the file on the applicant contains any record of disciplinary actions taken or pending.

e) The required fee as specified in Section 1485.80.

Section 1485.30 Endorsement

a) An applicant seeking registration in Illinois who is licensed/registered under the laws of another jurisdiction shall file an application with the Division, on forms provided by the Division, that includes:
1) For Surgical Assistant

A) Certification of completion from a medical education program approved by the Division or graduation from a United States Military Program that emphasizes surgical assisting;

B) A complete work history since completion of a surgical assistant program;

C) Verification of successful completion of a national certifying examination set forth in Section 1485.10(c).

D) Current certification by one of the following organizations:
   i) National Surgical Assistant Association on Certification of Surgical Assistants;
   ii) Liaison Council on Certification for the Surgical Technologist as a certified first assistant; or
   iii) American Board of Surgical Assistants.

E) The required fee set forth in Section 1485.80.

2) For Surgical Technologist

A) Proof of completion of a surgical technologist program approved by the Division;

B) A complete work history since completion of a surgical technologist program;

C) Successful completion of the surgical technologist national certification examination provided by the Liaison Council on Certification for the Surgical Technologist or its successor agency;

D) Current certification from the Liaison Council on Certification for the Surgical Technologist or its successor agency and proof that
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the applicant has met the requirements set forth for certification; and

E) The required fee set forth in Section 1485.80.

b) Certification from the state or territory of the United States in which the applicant was originally licensed, and the states in which the applicant is currently licensed, stating:

1) The time during which the applicant was licensed/registered in that jurisdiction;

2) Whether the file on the applicant contains any record of disciplinary actions taken or pending.

c) The Division shall either issue a registration by endorsement to the applicant or notify him/her of the reasons for the denial of the application.

Section 1485.40 Supervision

a) As stated in Section 10 of the Act, all registered surgical assistants and registered surgical technologists shall perform duties only under direct supervision.

b) "Direct supervision" means supervision by an operating physician, licensed podiatrist, or licensed dentist who is physically present and who personally directs delegated acts and remains available to personally respond to an emergency until the patient is released from the operating room. A registered professional nurse may also provide direct supervision within the scope of his or her license. A registered surgical assistant or registered surgical technologist shall perform duties as assigned. (Section 10 of the Act)

Section 1485.50 Renewal

a) Every certification of registration issued under the Act shall expire on April 30 of each even numbered year. The holder of a certification of registration may renew such registration during the month preceding the expiration date by paying the required fee.
b) It is the responsibility of each registrant to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to renew a registration or pay the renewal fee.

Section 1485.60 Inactive Status

a) A registered surgical assistant or surgical technologist who notifies the Division in writing may place his or her registration on inactive status and shall be excused from paying renewal fees until he or she notifies the Division in writing of the intention to resume active practice.

b) Any registered surgical assistant or surgical technologist seeking restoration of a registration that has been on inactive status for 5 years or less shall pay the current renewal fee specified in Section 1485.80 and have the certification of registration restored in accordance with Section 1485.70.

Section 1485.70 Restoration

a) Any surgical assistant or surgical technologist whose registration has been expired for 5 years or less may have the registration restored by paying all lapsed renewal fees as required by Section 1485.80.

b) A surgical assistant or surgical technologist who is seeking restoration of a registration that has been inactive for 5 years or less shall have the registration restored upon payment of the current renewal fee.

c) A surgical assistant or surgical technologist seeking restoration of a registration that has been expired or placed on inactive status for more than 5 years shall file an application, on forms supplied by the Division, together with the fee required in Section 1485.80, and show proof of one of the following:

1) Proof of current certification from one of the following:

   A) National Surgical Assistant Association for the certification of surgical assistants;

   B) Liaison Council on Certification for the Surgical Technologist; or

   C) American Board of Surgical Assistants;
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DIVISION OF PROFESSIONAL REGULATION

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2) Sworn evidence of active practice in another jurisdiction;

3) An affidavit attesting to military service as provided in Section 60 of the Act; or

4) Proof of passage of an examination set forth in Section 1485.10(a)(3) and Section 1485.20(a)(3) during the 24 months preceding application for restoration.

Section 1485.80 Fees

The following fees shall be paid to the Division and are not refundable:

a) Application Fees
   The fee for application for registration as a surgical assistant or surgical technologist is $100.

b) Renewal Fees
   The fee for the renewal of a registration shall be calculated at the rate of $62.50 per year.

c) General Fees

   1) The fee for the restoration of a registration other than from inactive status is $20 plus payment of all lapsed renewal fees.

   2) The fee for the issuance of a duplicate registration, for the issuance of a replacement registration for a registration that has been lost or destroyed or for the issuance of a registration with a change of name or address, other than during the renewal period, is $20. No fee is required for name and address changes on Division records when no duplicate registration is issued.

   3) The fee for a certification of a registrant's record for any purpose is $20.

   4) The fee for a wall certificate showing registration shall be the actual cost of producing the certificate.
Section 1485.90  Granting Variances

The Director of the Division of Professional Regulation of the Department (Director) may grant variances from this Part in individual cases when he/she finds that:

a) The provision from which the variance is granted is not statutorily mandated;

b) No party will be injured by the granting of the variance;

c) The rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.
NOTICE OF ADOPTED AMENDMENTS

1) **Heading of the Part:** Public Information, Rulemaking, Organization and Personnel

2) **Code Citation:** 2 Ill. Adm. Code 600

3) **Section Numbers:**
   - 600.610 Amended
   - 600.614 Amended
   - 600.618 Amended
   - 600.622 Amended
   - 600.626 Amended
   - 600.630 Amended
   - 600.634 Amended
   - 600.638 Amended
   - 600.646 Amended
   - 600.650 Amended
   - 600.654 Amended
   - 600.658 Amended
   - 600.662 Amended
   - 600.666 Amended
   - 600.670 Amended
   - 600.674 Amended
   - 600.678 Amended
   - 600.682 Amended
   - 600.686 Amended
   - 600.690 Amended
   - 600.699 New

4) **Statutory Authority:** Implementing Section 5-15 of the Illinois Administrative Procedure Act [5 ILCS 100/5-15] and Section 2-10 of the Illinois State Auditing Act [30 ILCS 5/2-10] and authorized by Section 2-12 (a) of the Illinois State Auditing Act [30 ILCS 5/2-12(a)]

5) **Effective Date of Amendments:** December 1, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this amendment contain incorporations by reference?** No

8) **A copy of the adopted amendments, including any material incorporated by reference, is on file in the Auditor General's Springfield office and is available for public inspection.**
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9) Notice of Proposal Published in Illinois Register: Prior publication of internal rule in Illinois Register is not required.

10) Has JCAR issued a Statement of Objection to this rulemaking? Prior review of internal rule by JCAR is not required.

11) Differences between proposal and final version: Not applicable

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Not applicable

13) Will this rulemaking replace any emergency amendments currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Amendments: To update the Auditor General's internal rules governing personnel to conform to changes in law and adopt best practices

16) Information and questions regarding this adopted rulemaking shall be directed to:

   Rebecca Patton  
   Legal Counsel  
   Office of the Auditor General  
   740 E. Ash St.  
   Springfield, IL 62703  
   217/782-6698  
   888/261-2887 (TTY)

The full text of the Adopted Amendments begins on the next page.
NOTICE OF ADOPTED AMENDMENTS

TITLE 2: GOVERNMENTAL ORGANIZATION
SUBTITLE C: CONSTITUTIONAL OFFICERS
CHAPTER V: AUDITOR GENERAL

PART 600
PUBLIC INFORMATION, RULEMAKING, ORGANIZATION AND PERSONNEL

SUBPART A: PUBLIC INFORMATION
Section 600.10 Procedures for the Public to Obtain Information

SUBPART B: RULEMAKING PROCEDURES
Section 600.110 Introduction
Section 600.120 Rulemaking Procedures

SUBPART C: ORGANIZATION
Section 600.210 Introduction
Section 600.220 Description of Organization of Office of the Auditor General

SUBPART D: PERSONNEL
Section 600.610 Introduction
Section 600.614 Position Classification and Compensation
Section 600.618 Application and Appointment
Section 600.622 Work Schedule and Attendance
Section 600.626 Continuous Service
Section 600.630 Personnel Records and Performance Reviews
Section 600.634 Probationary Status
Section 600.638 Promotion
Section 600.642 Employee Transfer
Section 600.646 Demotion
Section 600.650 Layoff
Section 600.654 Voluntary Reduction
Section 600.658 Resignation and Reinstatement
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600.662 Employee Conduct
600.666 Discipline and Discharge
600.670 Grievance Procedure
600.674 Sick Leave
600.678 Vacation Leave
600.682 Leave for Personal Business
600.686 Leaves of Absence
600.690 Holidays
600.694 Overtime
600.698 Interpretation and Application of Rules
600.699 Savings Clause

600.APPENDIX A Internal Office Rulemaking Procedures – Flow Chart
600.APPENDIX B Organization Chart

AUTHORITY: Implementing Section 5-15 of the Illinois Administrative Procedure Act [5 ILCS 100/5-15] and Section 2-10 of the Illinois State Auditing Act [30 ILCS 5/2-10] and authorized by Section 2-12(a) of the Illinois State Auditing Act [30 ILCS 5/2-12(a)].


SUBPART D: PERSONNEL

Section 600.610 Introduction
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a) General

1) Subject
This Subpart establishes the basic policies governing personnel in the Office of the Auditor General.

2) Equal Employment
The Office of the Auditor General does not discriminate against any individual on any unlawful basis, including race, color, religion, sex, age, marital status, physical or mental disability, national origin, citizenship, political affiliation, ancestry, military status or unfavorable discharge from military service.

3) Scope
All payroll employees of the Office of the Auditor General are subject to the provisions of this Subpart.

b) References

1) Authority
This Subpart is promulgated under the authority of Sections 2-10 and 2-12(a) of the Illinois State Auditing Act (Ill. Rev. Stat. 1991, ch. 15, pars. 302-10 and 302-12(a)) [30 ILCS 5/2-10 and 2-12(a)].

2) Incorporations
The following materials are incorporated by reference and made a part of this Subpart:

A) Standards of Construction for Rules, 74 Ill. Adm. Code 440.Subpart A; and

B) Definitions, 74 Ill. Adm. Code 440.Subpart B.

c) Definitions

"Auditor General" means the Auditor General of the State of Illinois.

"Certified Employee" means an employee who has satisfactorily completed a required period of probation and attained certified status in any position during the employee's most recent period of continuous
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Service with probationary period in the Office after initial hiring from outside the Office.

"Certified Status" means status achieved through the completion of a probationary period.

"Deputy Auditor General" means Deputy Auditor General of the State of Illinois.

"Director" means a designated head of an organizational unit as reflected in the organizational chart. Where appropriate, the term "director" includes the Auditor General and Deputy Auditor General.

"Executive Employee" means a Director, a Legal Counsel, the Assistant to the Auditor General, and other employees as designated in their position descriptions.

"Immediate Family" means spouse, parents, stepparents, children, stepchildren, siblings, grandparents, grandchildren, and other persons abiding within the same household. For bereavement purposes, the term includes parents-in-law, brother- or sister-in-law, and children-in-law.

"Office" means Office of the Auditor General.

"Probationary Employee" means an employee serving a probationary period after initial hiring from outside the Office or after appointment to a position within the Office in which the employee has not previously been certified.

"Probationary Period" means a period of approximately six calendar months preceding receipt of notice of certification and after initial hiring from outside the Office or of approximately four (4) months after appointment to a position within the Office in which the employee has not previously been certified.

"State Auditor" means a State payroll employee of the Office who has been authorized by the Auditor General to conduct audits, investigations and studies and who has been appointed State Auditor in accordance with this Subpart.
Section 600.614 Position Classification and Compensation

a) Position Classification

1) Organizational Structure: The organizational structure of the Office shall be as established by the Auditor General and maintained on file.

2) Positions and Service: The establishment and abolition of positions and duties shall be at the discretion of the Auditor General. All employees serve at the discretion of the Auditor General subject to the employee rights established by this Subpart.

3) Classification Plan: The Auditor General shall maintain, and revise when necessary, a uniform position classification plan for positions necessary to carry out the duties of the Office. The classification plan shall be based on the similarity of duties and responsibilities assigned so that the same schedule of pay may be equitably applied to all positions within a classification, under the same or substantially the same employment conditions. Employees shall be classified by position and each position classification shall be governed by a formal, written position description approved by the Auditor General. Any change in salary or position description shall be recorded as a personnel transaction.

4) Allocation: It is the responsibility of each Director to report to the Personnel Coordinator any significant changes in the duties of any position within the organizational unit. At the request of a Director, a survey, audit, or such other investigation as may be deemed necessary by the Director shall be made to determine the proper allocation of any position to a classification. Upon written request of an employee, such investigation as may be deemed necessary by a Director shall be made to determine the proper allocation of the employee's position. At the request of an employee, a Director, or the Auditor General, a survey, audit, or other investigation shall be made to determine the proper allocation of any position to a classification. The Personnel Coordinator shall make a determination as to the proper allocation of the position in question. It shall be the responsibility of the Director of the organizational unit in which the position is located to notify the employee of the determination concerning the proper allocation of his or her position incumbent of the...
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position of the decision.

5) Reconsideration:

A) Within 30 days after receiving notice of the decision, the employee may make a request in writing of the Director Personnel Coordinator for reconsideration of the decision. Thereafter, the Director Personnel Coordinator shall reinvestigate the duties and responsibilities of the position and, if necessary, of related positions. The employee shall be given a reasonable opportunity to be heard.

B) After the re-investigation, the Director Personnel Coordinator shall render a decision in writing and it shall be served on the employee in person or by certified mail, return receipt requested, at the employee's last address shown in the personnel file. The effective date of the reconsidered decision shall be the effective date of the allocation decision giving rise to the reconsideration request.

C) An employee wishing to appeal the reconsidered decision shall be entitled to a hearing by the Grievance Review Committee in accordance with the procedures established in Section 600.670 of this Part.

6) Assignments to other Classifications: An employee whose position has been allocated to a classification having a higher, lower, or same maximum permissible salary or rate may remain in the position, provided however that the Director shall determine in the case of allocation to a class having a higher maximum salary or rate whether, considering the nature of such change in duties, such employee is qualified for the position.

7) Revised Class Requirements: When requirements for a classification are revised and the duties and responsibilities of positions comprising the classification remain essentially unchanged, incumbents in these positions who qualified under the previous requirements for the classification will be considered qualified.

b) Compensation Plan
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1) Establishment of Plan: The Auditor General shall establish and maintain a Pay Plan for all employees. The Pay Plan shall designate a salary range for each position classification. The salary for any particular position shall be fixed by the Auditor General within the designated salary range and based, in his discretion, on the duties, responsibilities and work requirements of that position as they relate to the total duties, responsibilities and work requirements of the Office.

2) Provisions of the Pay Plan: The Pay Plan shall provide for starting rates of pay, and the time and manner in which subsequent changes of salary may be made. The rate each employee is to be paid shall be set forth in appropriate documents contained within his or her personnel file. The Pay Plan may also include other provisions not inconsistent with law to assist in the administration of good personnel practices for the Office.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.618 Application and Appointment

a) Applications for Employment

1) Notice: Positions shall be advertised in the offices by posting unless the Auditor General directs otherwise. Other recruitment methods may be used as deemed appropriate.

2) Submission of Application

A) Persons seeking employment must submit an application, resume or other document demonstrating education and experience to the Personnel Coordinator.

B) Employees seeking positions within the Office must apply in writing to the Director of the organizational unit in which the desired position is located.

3) Screening of Applicants

A) Interviews: Directors or their designees are responsible for screening applications for positions. Interviews may be conducted
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as part of the screening process.

B) Examinations: The Auditor General may require applicants to take examinations as a means to assess knowledge, skills and the ability to perform the duties of the position.

4) Criteria for Selection

A) Selection may be based on education, experience, interviews, references, and examinations, if conducted. Other factors such as experience within the Office may also be considered.

B) Pre-employment screening of applicants, including but not limited to performance tests, job knowledge tests, personality inventory or other psychological tests, background checks and routine reference verifications, may be performed at the direction of a Director if job related and done in compliance with applicable federal or State statutes and regulations.

C) If, following the screening process, the Director desires to place an applicant in a position, the Director shall submit his or her recommendation along with justification to the Personnel Coordinator, who shall review the recommendation and forward it to the Auditor General for final action.

D) A central file of all applicants who applied for or were considered for a position, along with appropriate supporting materials, will be maintained for a minimum of three years from the date the position is filled or a decision to not fill the position is made. After the selection of an applicant and his or her acceptance of the position, a Director or a designee shall submit to the Personnel Coordinator:

i) the names and addresses of all applicants who applied for the position or were considered for the position; and

ii) other supporting materials prepared according to Office policy.

b) Appointment
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1) The Auditor General shall notify applicants in writing of their appointment to a position. Such notification shall state the position classification, work location, starting salary, and the beginning date of employment in the position. Appointments become effective upon the applicant's reporting for work at the place and time designated in the notification.

2) Types of Appointments: The following types of appointments may be made by the Auditor General:

A) Probationary Employees: All appointments for newly hired employees and current employees to positions in which they have not previously held certified status shall be subject to the employee's performance through two (2) consecutive performance appraisals of approximately three (3) months each and receipt of notification that the employee has been certified in the position to which appointed. At any time during this probationary period, newly hired employees may be discharged without notice, cause or any right to a hearing.

B) Certified Employees: Employees successfully completing a probationary period shall be appointed to certified status. Appointment to certified status shall be effective upon receipt of written notice from the Auditor General or his designee.

C) Permanent Part Time Employees: Employees authorized by the Auditor General to perform duties and responsibilities on a regular but less than full-time, noncontinuous, basis shall be appointed to permanent part-time status. Permanent part time employees shall receive compensation and benefits, if eligible, at a pro-rated proportion of that received by full time employees in that classification.

D) Acting Status: An employee assigned to acting status for any position shall, at the Auditor General's discretion, be paid in accordance with the salary range allocated to the position and the responsibilities incurred as a result of the acting assignment; provided, however, that such payment shall not be lower than the employee's base salary immediately prior to his or her acting assignment. An employee removed from acting status shall be returned to the same or similar position which he or she held prior
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to the acting status appointment. The employee's salary shall be not less than his or her salary at the time he or she was appointed to the acting status.

E) Executive Employees: Executive Employees serve at the discretion of the Auditor General and may be discharged or demoted at any time without notice, cause or any right to a hearing.

3) State Auditors: In addition to any other type of status, employees may be appointed as State Auditors at the discretion of the Auditor General.

A) Appointment to Status of State Auditor: The Auditor General shall appoint an employee to the status of State Auditor only upon the recommendation of a Director and the employee's successful completion of any required training course. The Auditor General shall instate employees as State Auditors by signing their credentials and placing them in their custody.

B) Removal: The Auditor General may remove an employee from State Auditor status. An employee who is terminated is automatically removed from the status of State Auditor. An employee who is removed from the status of State Auditor shall immediately return his or her credentials to a Director or to the Auditor General.

C) Reinstatement: The Auditor General may reinstate an employee to State Auditor status by returning the credentials to the employee.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.622 Work Schedule and Attendance

a) The Auditor General shall establish and maintain on file a schedule of working hours for the Office.

b) The Office shall maintain daily attendance records.

c) An employee shall, whenever possible, provide advance notice of absence from work. For those positions specified in the Pay Plan, any time away from scheduled work hours that is not specifically authorized shall constitute cause for
a deduction from pay. Such time shall include tardiness and early departure. Absence of an employee for five (5) consecutive workdays without reporting to the appropriate Director may be cause for discharge. An employee who is absent without approval for five (5) consecutive work days without reporting to the appropriate supervisor shall be deemed to have resigned his or her position.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.626 Continuous Service

a) Definition:

1) Continuous service is the uninterrupted period of service from the date of original appointment to State service.

2) Employees who have previous State service which qualified for earning of vacation benefits shall be given credit for said service, as determined by the Office or as required by law.

b) Interruptions in Continuous Service: Continuous service shall be interrupted by:

1) Resignation; provided, however, that continuous service will not be interrupted by resignation when an employee is employed in another position in State service within four (4) calendar days of resignation;

2) Discharge; provided, however, continuous service shall not be interrupted if the employee is retained in the position after a hearing before the Grievance Review Committee; and

3) Termination: because an employee has not been reemployed within 1 year after layoff.

c) Deductions from Continuous Service: Except as provided in subsection (f)(d), below, the following shall be deducted from, but shall not interrupt, continuous service:

1) Time away from work for any leave of absence with or without pay totalling more than thirty (30) days in any twelve-month period calendar year;
2) Time away from work because of disciplinary suspensions totalling more than thirty (30) days in any twelve-month period; calendar year.

3) Time away from work because of layoff.

d) Veterans Continuous Service: Leaves of absence shall be granted to all employees who leave their positions and enter military service for four (4) years or less (exclusive of any additional service imposed pursuant to law). An employee shall be restored to the same or similar position on making an application within 90 days after separation from active duty or from hospitalization continuing after discharge of not more than one (1) year. The employee must provide evidence of satisfactory completion of training and military service when making application and be qualified to perform the duties of the position. Continuous service and reemployment rights for veterans subject to federal law shall be as provided in the Uniformed Services Employment and Reemployment Rights Act (38 USC 4301-4333).

e) Peace Corps or Job Corps Enrollees Continuous Service: Any employee who volunteers and is accepted for service in the overseas or domestic Peace Corps or Job Corps shall be given a leave of absence from his or her State employment for the duration of his or her initial period of service and be restored to the same or similar position provided that the employee returns to his or her employment within ninety (90) days of the termination of his or her service or release from hospitalization from a service Peace Corps or Job Corps connected disability.

f) Accrual and Retention of Continuous Service During Certain Leaves: During an absence for family and medical, educational, administrative, military, Peace Corps or Job Corps, disaster service volunteer or service-connected disability leaves, an employee shall retain and accrue continuous service provided appropriate application and return is made as required by Section 600.686 of this Subpart.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.630 Personnel Records and Performance Reviews

a) Personnel Records

1) A personnel file shall be established for each employee upon his or her entry into employment and shall be maintained by the custodian
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designated by the Auditor General. When the following records are maintained, they must be maintained in the personnel file:

A) Applications for employment, letters of recommendation, resumes and school transcripts

B) Offers and acceptances of employment

C) Employee information cards

D) Personnel transaction forms

E) Written commendations and disciplinary actions

F) Annual performance appraisals

G) Employee disclosure statements

2) Records not otherwise confidential are not made confidential because of their inclusion in the personnel file.

3) An employee is entitled to view his or her personnel file during working hours with reasonable notice to the custodian. Such records may be inspected only in the presence of an authorized employee. Certain records in the personnel file, in accordance with the law, may be withheld from the employee's inspection. In addition, personnel files may be viewed by the Auditor General, a Deputy Auditor General, the custodian and other employees, at the discretion of the Auditor General, on a need-to-know basis only.

4) An employee shall be notified of any additions to or deletions from his or her personnel file. If an employee disagrees with any information contained in a personnel record, the employee may submit a written statement explaining his or her position for inclusion in the personnel file.

5) Performance records shall constitute material in an employee's personnel file which is relevant to determining the appropriateness of proposed or recommended personnel transactions.

6) Performance records shall be considered in all cases, unless excepted by
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this Subpart, of promotion, demotion, discharge, layoff, reinstatement, merit salary increases and certification. In considering any potential change in an employee's current status, the employee's most recent performance records may be given greater weight than the employee's earlier performance records.

b) Performance Evaluations: Performance records shall include an evaluation of employee performance prepared by the Auditor General, a Deputy Auditor General, or a Director or designee at least annually on prescribed forms prescribed by the Personnel Coordinator. Executive employees shall be evaluated in the time and manner prescribed by the Auditor General.

1) For an employee serving a six (6) month probationary period, two evaluations shall be prepared and submitted to the personnel file custodian – one at the end of the third month of the employee's probationary period and another before the conclusion thereof.

2) For an employee serving a four (4) month probationary period as a result of a promotion, one evaluation shall be prepared and submitted to the personnel file custodian before the conclusion thereof.

3) Each employee shall receive an annual performance evaluation. Additional performance evaluations of individual employees may be conducted as deemed necessary.

4) Employees shall be required to sign all evaluation forms to indicate they have read the evaluation and it has been discussed with them.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.634 Probationary Status

a) Probationary Period:

1) A probationary period of approximately six (6) months shall be served by a full-time employee who is newly hired from outside the Office.

2) A probationary period of approximately four (4) six (6) months shall be served by a full-time employee who is promoted. A probationary employee transferred during the probationary period shall serve that
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portion of the probationary period which was not completed at the time of such transfer.

3) The length of a probationary period for a newly-hired permanent part-time employee or a promoted permanent part-time employee shall be determined on a case-by-case basis at the time of hiring or promotion.

4) If an employee is absent from work for more than fifteen (15) calendar five (5) working days during the probationary period, the probationary period shall be extended by the length of the absence.

5) Probationary employees who have not attained certified status shall have no right to grievance procedures with regard to termination, demotion or any other employment action.

b) Certified Status: A probationary employee shall attain certified status only after successful completion of a probationary period and receipt of notice of certification from the Auditor General or his designee.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.638 Promotion

a) Definition: A promotion is the appointment of an employee to a position in a classification with a higher maximum permissible salary than the former classification.

b) Promotions from Within: Whenever possible and desirable, position vacancies in the Office will be filled from within. If an outside applicant and an internal applicant are equally qualified for a position, the employee may be given preference.

c) Salary Increases Resulting from Promotion: Upon promotion, the salary of an employee shall be as provided in the Pay Plan.

d) Failure to Complete Probationary Period:

1) A promoted, certified employee who fails to satisfactorily complete the probationary period in the promoted position because of inability to perform the duties and responsibilities of the promoted position shall be
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returned to a position in the classification from which promoted without the appeal rights specified in Section 600.670 of this Part.

2) A promoted employee who has been previously certified in any position within the Office may be discharged during the probationary period and, in such event, the employee has the same rights to appeal as a certified employee.

3) No probationary employee shall be promoted unless the employee has previously held certified status during his or her current period of continuous service. Employees who are not certified in their current position may not be promoted.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.646 Demotion

a) Definition:

1) Demotion is the assignment of an employee to a position in a classification having a lower maximum permissible salary than the former classification, made for reasons of inability to perform the work of the position from which the demotion was made.

2) A Director may initiate demotion of an employee by submitting a written statement of reasons for demotion containing sufficient facts to show good cause for the demotion to the Personnel Coordinator. Such written statement shall be signed by the Director and shall contain facts supporting the demotion based upon the performance records of the employee. No demotion shall become effective without the prior approval of the Auditor General.

b) Notice to Employee: If the statement of reasons for demotion of a certified employee is approved by the Auditor General, a copy of the approved statement of reasons for demotion shall be served on the employee in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file.

c) Employee Obligations: Upon receipt of the approved statement of reasons for notice of demotion or upon the effective date of demotion, whichever is later,
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the employee shall leave the position in which assigned prior to receipt of the notice of demotion and report for work to the position to which demoted. An employee's report for work to the position to which demoted shall be without waiving any right to appeal under subsection (e), below.

d) Salary and Other Benefits of Employee: Upon receipt by the employee of the approved statement of reasons for notice of demotion, or on the effective date thereof, whichever is later, all salaries and benefits of the employee in the position in which assigned prior to receipt of such statement of reasons shall be adjusted to reflect the demotion.

e) Appeal by Certified Employee: An employee who is certified in the position from which he or she is demoted may appeal the demotion to the Grievance Review Committee by submitting a request for hearing in writing within fifteen (15) calendar days of receipt of the approved statement of reasons for demotion in accordance with the procedures established in Section 600.670 of this Part. No later than ten (10) working days prior to the hearing, the employee shall submit a written statement setting forth his or her position to the Grievance Review Committee, unless the time is extended in writing by the Chair.

f) Demotion of Other Employees: The Auditor General may approve the demotion of probationary employees. Notice of demotion shall be served on the employee in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file. The demotion of probationary employees is not appealable.

g) Status of Demoted Employees: A demoted employee shall serve a probationary period in the position to which demoted unless the employee previously held certified status in that classification, in which case the demotion shall be to certified status in the demoted classification.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.650 Layoff

a) Layoff Procedure

1) A Director may request the layoff of an employee because of lack of funds, material change in duties or organization, reduced workload or lack of work, or the abolition of the employee's position. Based on
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classification, division or other designation, layoffs shall be within organizational units justified by operations.

2) A proposed layoff plan is subject to the Auditor General's approval before becoming effective and shall include the following:

A) A list of all employees in the organizational unit in classifications affected by the layoff plan, showing status and total continuous service accompanied by their performance records;

B) A list of those employees to be laid off;

C) Performance records of all employees affected by the layoff plan; and

D) An explanation of the organizational unit selected, reflecting division, geographical, operational, and other elements deemed relevant by the Director.

b) Order of Layoff

1) No certified employee may be laid off until all newly-hired probationary employees in the same position classification, work location and organizational unit are terminated.

2) In accordance with the layoff plan submitted under subsection (a), above, consideration shall be given to performance records and continuous service.

c) Effective Date of Layoff: Unless extraordinary operating conditions or events are specified in the proposed layoff plan, no layoff shall be effective until ten (10) working days after the Auditor General's approval of the layoff plan.

d) Layoff Rights: For a period of six (6) months following the effective date of his or her layoff, a laid off employee shall be notified of any vacancy in the same position classification, work location and organizational unit held by the employee at the time of layoff and be given an opportunity to apply for that vacancy.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)
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Section 600.654 Voluntary Reduction

a) Voluntary Reduction of Certified and Probationary Employees: Certified and probationary employees may voluntarily request or accept assignment to a vacant position in the same organizational unit in a classification having a lower maximum permissible salary. All requests for or acceptances of such voluntary reductions shall be in writing and signed by the employee and be directed to the Director of the organizational unit in which the vacancy exists. No reduction shall become effective without the written approval of the Auditor General. A certified employee who is assigned and accepts a voluntary reduction shall be certified in the lower classification without serving a probationary period.

b) Certified employees who are subject to layoff shall be advised of the opportunity to request a voluntary reduction. Requests for voluntary reduction must be received prior to the proposed effective date of layoff.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.658 Resignation and Reinstatement

a) Resignation: An employee who voluntarily leaves his or her position of employment with the Office shall, except in emergency circumstances approved by the Auditor General, give advance notice of intent not less than ten (10) working days before the effective date of the resignation. Once an employee submits a resignation, the resignation shall not be revoked unless the revocation is requested by the employee and the revocation is approved by the agency head. Resignation in good standing means that the employee gave the required notice, or that emergency circumstances justified failure to do so, and that the employee's conduct and work performance were satisfactory at the effective date thereof.

b) Reinstatement: On request of a Director, the Auditor General may, in his discretion, reinstate an employee who was formerly certified and who resigned or was terminated in good standing or whose position was reallocated downward or who was laterally transferred. Such reinstatement may be to a position in the classification to which the employee was assigned prior to resignation, termination, downward allocation, lateral transfer, or layoff or to an equivalent or lower position in a related classification. A reinstated employee shall serve a six month probationary period in the position to which reinstated.
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(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.662 Employee Conduct

a) Standards of Conduct: Employees of the Office shall obey the rules of conduct of this Office and shall be aware that the absence of a specific published rule of conduct covering an act tending to discredit an employee, this Office or the State of Illinois does not mean the act is condoned or permissible or would not call for, and result in, disciplinary action.

b) Conflicts of Interest

1) General Provisions
No employee shall violate any law, rule, regulation, policy or standard concerning conflicts of interest nor shall any employee engage in any conduct in which the employee's private interests or involvements are, or may reasonably be construed to be, in conflict with or detrimental to the objective performance of his or her official duties and responsibilities.

2) Disclosure Statement to the Auditor General

A) The purpose of the Disclosure Statement required by this Subsection is to aid the Auditor General in maintaining the objectivity and impartiality of the conduct of the activities of the Office and, where a potential conflict is unavoidable, to provide for the full disclosure of the facts and circumstances involved.

B) Disclosure Statements shall be confidential. The Auditor General shall designate a custodian who shall be responsible for the safekeeping of Disclosure Statements. The Auditor General, a Deputy Auditor General, the custodian, and others designated by the Auditor General on an as-needed basis may review Disclosure Statements.

C) Each employee shall file with the custodian a Disclosure Statement which indicates involvements or relationships which could affect the employee's performance of his or her official duties.

D) Employees shall file their Disclosure Statements with the custodian immediately upon employment and shall refile their Statements by
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May 1st annually thereafter. Employees shall be under a continuing duty to advise the custodian promptly in writing of any change which would affect an answer given on their current Disclosure Statements or which might affect the objective or efficient performance of their duties.

c) Political Activities

1) Participation in Public Campaigns
   An employee may participate in public campaigns while in the employment of the Office provided that the employee's official position is not used, shown, or advertised in connection with the campaign and that the employee does not violate any prohibitions of this Subsection.

2) Prohibited Activity
   Employees shall not, at any time, engage in the following actions:

   A) Use, threaten to use or offer to use the influence or authority of his or her position to coerce or to persuade any person to follow any course of political action or to make any contribution to a political cause.

   B) Use State time, money, or property for the purposes of political activity.

   C) Hold an elective or appointive office in any political party or other organization whose primary function is to promote and encourage the election of certain individuals to public office.

   D) Participate in or contribute to any public campaign which involves a candidate who is running for or currently employed by, or on leave from, an office or agency over which the Auditor General has audit authority.

   E) Hold any elective office that would require attention to duties during the Office's working hours.

d) Official Conduct

1) Criticism of Agencies
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No employee shall make use of any information gained in the course of his or her employment with the Office to publicly criticize any State, local, or private agency.

2) Handling Antagonism or Refusals
   When an employee is faced with a situation in which the agency's representative appears antagonistic or refuses to release information or documentation, the employee shall report the fact to his or her supervisor. Employees shall at no time threaten or coerce any person.

3) Self-disqualification From Certain Assignments
   When an employee receives an assignment involving a person acting as a representative for any public or private agency with whom he or she has had business or other relationships of a nature that might impair, or give the appearance of impairing, the employee's impartiality or independence, the employee will discuss with his or her supervisor the possible need to have the matter reassigned.

4) Agencies Under Audit
   If an audit team member is approached about possible employment with an agency under audit, he or she will notify his or her supervisor promptly. An employee may not initiate or pursue employment activities with an agency that the employee is currently participating in an audit of.

5) Use of Identification
   Credentials issued to employees are for use only in establishing identity or authority in connection with official duties. Employees shall not allow the use of their credentials by any other person.

   e) Use of State Time, Position and Property

      1) Personal Use Prohibited
         Employees are forbidden to use State time, position or property for personal purposes.

      2) Protection of Property
         Employees have a responsibility to protect and conserve all State property.

      3) Liability for Damage or Loss
         Employees may be held financially liable for damage or loss of State
property resulting from their negligent, wilful or wanton acts or omissions. Costs for damage to or loss of State property may be deducted from the responsible employee's pay.

4) Reporting Damage or Loss
Employees shall promptly report any loss, theft, or damage to State property or documents in their custody to their supervisor.

5) Return of Equipment
Upon leaving their position with the Office, employees shall return all property and credentials assigned to them. At its option, the Office may withhold an employee's final paycheck pending return of State property and credentials assigned to or in the possession of that employee or deduct the value of any such property from the departing employee's final paycheck.

f) Disclosure of Official or Confidential Information

1) Testifying and Responding to Subpoenas
When requested or subpoenaed to testify or produce documentation pertaining to confidential information before an executive or legislative commission or a court of law, employees shall notify the Auditor General prior to giving such testimony or producing such documentation.

2) Engagements to Speak or Write

A) No employee may accept invitations for public addresses or submit articles for publication which concern the official activities of the Office without obtaining the prior approval of the Auditor General.

B) An employee may not accept compensation, or permit his or her expenses to be paid by sources other than the State of Illinois, for speaking engagements or writings performed as official duties, except with the prior approval of the Auditor General.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.666 Discipline and Discharge

a) Termination at the Discretion of the Auditor General: Probationary employees
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who have not obtained certified status in the Office and Executive Employees may be terminated at any time, without notice, cause or any right to a hearing, at the discretion of the Auditor General. Probationary employees who have not obtained certified status in the Office and Executive Employees do not have any right to progressive corrective discipline procedures, as set forth in this Section.

b) Progressive Corrective Discipline

1) Unless grounds clearly are present warranting immediate discharge or suspension pending decision on discharge, employees shall be subject to corrective discipline progressively applied utilizing counseling, warnings, and/or suspensions, as the facts and circumstances dictate, prior to discharge. If an employee's work or work-related conduct remains unacceptable after the application of progressive corrective discipline, the employee may be discharged in accordance with the appropriate rules below. This subsection does not apply to employees subject to subsection (a), above.

2) Grounds warranting immediate discharge or suspension pending decision on discharge shall include, but are not limited to, any violation of the Illinois State Auditing Act or any other law or rule governing the employee's conduct or duties as an employee of State government, this Subpart, any other rule or regulation of the Office or policies promulgated pursuant thereto, or misrepresentation of education, experience or professional qualifications.

c) Discipline – Written Warnings: A Director or designee may warn an employee either orally or in writing as a disciplinary measure. A copy of any written warning shall be signed by the appropriate Director and placed in the employee's personnel file. Written warnings may be used in considering further discipline, demotion, withholding of salary increases, and other personnel transactions when such actions occur within eighteen (18) months of the date of issuance of the written warning. A copy of the warning shall be delivered in person or sent by certified mail, return receipt requested, to the last address of the employee appearing in the personnel file. An employee shall have the right to respond to the warning in writing within ten (10) calendar days of its receipt and any such response shall be included in the employee's personnel file.

d) Suspension: A Director may suspend an employee without pay for up to thirty (30) days in any twelve (12) month period. A longer suspension may be approved
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by the Auditor General. The Director shall provide the employee with written reasons for the suspension in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file. The written charges shall be signed by the Director and contain a clear and concise statement of facts showing cause for the suspension. One copy of the notice of suspension shall be placed in the employee's personnel file and one copy shall be delivered to the payroll clerk. Unless delay will result in clear harm or damage to a division, the employee shall be informed in writing of the proposed suspension and the reasons therefor at least four (4) working days prior to the effective date of the suspension. The employee shall have two (2) working days after being informed of the proposed suspension within which to address to the Director written rebuttal to the reasons given for the suspension. A decision not to suspend the employee shall be rendered in writing before the proposed suspension date.

e) Discharge of Certified Employee:

1) Cause for Discharge: Cause for discharge consists of some substantial shortcoming which renders the continuance of an employee in a State position in some way detrimental to the discipline and/or efficiency of the service and which the law or sound public policy recognizes as good cause for the employee no longer being held in that position.

2) Pre-Termination Hearing: Before charges for discharge may be brought against any certified, non-Executive Employee, the employee shall be apprised of the basis for such action and provided with an opportunity to respond to the charges in accordance with the following standards:

A) The employee will be notified in writing of the intended discharge;

B) A statement of charges in support of the proposed action, full and complete to the Office's knowledge at the time it is drawn, will be given to the employee, including the name of any known witness and a copy of any document pertinent to the charges.

C) The employee shall have five (5) working days after receipt of the charges and prior to the effective date of the discharge in which to respond to them orally or in writing.

D) The employee is entitled to representation in any meeting by any person or organization.
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E) The employee shall remain in paid status pending the response but not necessarily be permitted to work.

F) The employee or the employee's representative shall be permitted access to a designated area or a secure area of the work place to investigate the charges and, upon request, be provided a copy of other pertinent documents.

G) The failure of the employee to respond to the charges within the time limits shall not bar the Office from proceeding with the discharge.

H) When the investigation of the charges causes them to be altered in fact, form, context, or reference from those given the employee at the time the notice was issued and for which the employee has not had an opportunity to respond, a second notice and opportunity for response will be given to the employee.

I) The Auditor General or designee shall receive the response of the employee, whether it is oral or written.

3) Suspension Pending Decision on Discharge: The Office may suspend any employee for up to thirty (30) days pending the decision on whether charges for discharge shall be approved against such employee. The Office shall, at the time of this suspension, provide the employee with written reasons therefor in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file. The Office shall promptly investigate the facts and circumstances and render its decision. Should the Office determine that the facts and circumstances do not warrant disciplinary suspension or charges for discharge, the employee shall be made whole. Should the Office determine that discharge of the employee is appropriate, subsection (e)(4) shall apply in its entirety.

4) Discharge of Certified Employee: The Auditor General or designee may, after compliance with subsection (e)(2), initiate discharge of a certified employee by filing signed written charges for discharge. Written charges shall contain a clear and concise statement of facts showing good cause for discharge, and shall be accompanied by a copy of the employee's
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performance records. The final notice of discharge shall contain a statement that the response of the certified employee has been considered before a final decision was made, or that no response was submitted. Notice of approved charges for discharge shall be served on the employee, in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file.

1) A Director may initiate discharge of a certified employee by filing written charges for discharge with Legal Counsel. Written charges shall be signed by the Director and contain a clear and concise statement of facts showing cause for discharge and shall be accompanied by a copy of the employee's performance records. No discharge of a certified employee shall be effective without the approval of Legal Counsel and the Auditor General.

2) Notice to Employee: Notice of approved charges for discharge shall be served on the employee in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file.

f) Discharge of Probationary Employee: The Auditor General may approve the discharge or suspension of a probationary employee who has not obtained certified status in the Office and Executive Employees. Written notice of discharge or suspension shall be delivered to the employee in person or by certified mail, return receipt requested, at the employee's last address appearing in the personnel file.

g) Employee Obligations: Upon receipt by the employee of any disciplinary notice of suspension or charges for discharge, or on the effective date thereof, whichever is later, the employee shall leave the place of employment.

h) Hearing – Certified Employees: Certified employees who have been served with approved charges for suspension or discharge, notice of suspension or charges for discharge may appeal to the Grievance Review Committee by submitting a request for hearing in writing within fifteen (15) calendar days of receipt of the approved charges for suspension or discharge, in accordance with the procedures established in Section 600.670 of this Part. No later than ten (10) working days prior to the hearing, the employee shall submit a written statement setting forth his or her position to the Auditor General, unless the time is extended in writing by the Auditor General.

i) Reinstatement From Suspension or Discharge: An employee reinstated for the
period for which he or she was suspended or discharged shall receive full
compensation for such period. Full compensation shall mean compensation the
suspended or discharged employee would have earned in the position during the
period of suspension or discharge less amounts earned by the employee from any
other source and any unemployment compensation payments received during
such period.

<table>
<thead>
<tr>
<th>j)</th>
<th>Suspension/Discharge Resulting from Arrest or Criminal Indictment</th>
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<tbody>
<tr>
<td>1)</td>
<td>The arrest or criminal indictment of any employee shall not be grounds for suspension or discharge. The facts in support of either an arrest or criminal indictment may be grounds for suspension or discharge if they meet one or more of the following criteria:</td>
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<tr>
<td>A)</td>
<td>resulted from an employee's conduct in the course of employment duties, including a failure to perform such duties; or</td>
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<tr>
<td>B)</td>
<td>occurred on or proximate to State premises and as a result of the employee's conduct thereon; or</td>
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<tr>
<td>C)</td>
<td>raises reasonable doubt concerning the employee's suitability for continued State employment in the present assignment or position.</td>
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2) If an employee is not subject to suspension or discharge under this subsection (j), the Auditor General may, depending upon the needs of the Office, at the request of the employee place such employee on indefinite leave status, without pay, pending a final court determination of innocence or guilt.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.670 Grievance Procedure

a) Grievance: Any certified employee, unless otherwise excepted by this Subpart, may grieve as to the application of this Subpart or any policy arising hereunder as to the impact of such application upon his or her employment condition or his or her status.

b) Grievance Procedure – Limitation: The rules of the Office and the official policy arising thereunder are not grievable matters. The following are not subject to the
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grievance process: the discipline, demotion or discharge of Executive Employees and probationary employees who have not obtained certified status in the Office; the demotion of a certified employee from a position in which he or she is serving a probationary period; layoff; the appointment, removal or reinstatement to State Auditor status; and intra-agency transfers.

c) Grievance Procedure – Abandonment – Extension:

1) Failure of either party to comply with the form or time requirements of the grievance procedure shall resolve the matter in favor of the other. The parties may mutually extend the time limits in writing at any level of the procedure. However, whenever the last day of a specified time requirement falls on a day on which the Office is closed for regular business, that time requirement shall automatically be extended to the next day on which the Office is open for regular business.

2) An employee's failure to submit a grievance, or to submit or appeal it to the next level of this procedure within specified time limits, shall mean that the employee has withdrawn the grievance or, if the employee so indicates, accepted the last answer given in the grievance procedure.

d) Grievance Procedure – Steps of:

1) Step 1: A grievant shall present the grievance orally to the immediate supervisor explaining its nature and circumstances within five (5) working ten (10) calendar days after learning of the circumstances or conditions which gave rise to it. The immediate supervisor shall answer to the employee in person within five (5) working days of its presentation. If the grievant's immediate supervisor is a Director, the provisions of this Step 1 shall be inapplicable and the grievant shall proceed to Step 2.

2) Step 2: If the grievance is not satisfactorily resolved or no answer is given within five (5) working days of its presentation the time limit set forth in Step 1, or if the provisions of Step 1 are inapplicable, the grievant may, within ten (10) calendar days after the Step 1 answer was due, or, if Step 1 is inapplicable, within ten (10) calendar days after learning of the circumstances or conditions giving rise to the grievance, submit the grievance to the appropriate Director in writing. Within five (5) working days after a Step 2 appeal is filed, the Director shall issue a written
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decision and serve a copy of the decision in person upon the grievant.

3) Step 3: If the grievance is not satisfactorily resolved or no answer is given within the time limit set forth in Step 2, the grievant may submit, within ten (10) calendar days from the date the Director's decision was due, to the [Auditor General] Chair of the Grievance Review Committee a copy of the written statement of grievance submitted in Step 2, along with a request for a grievance hearing.

e) Grievance Review Committee:

1) The Auditor General shall designate a Deputy Auditor General to chair the Grievance Review Committee. The Chair, no later than five (5) working days following receipt of an employee's request for a grievance hearing, shall appoint a Grievance Review Committee. The Committee shall consist of no less than three nor more than five members. Committee members must have experience or knowledge in the areas of personnel administration and employee relations, including the Chair and, as available, two (2) employees from the same or similar classification as the grievant and two (2) employees from a classification above the grievant. The Director and the immediate supervisor of the grievant shall not be appointed to the Committee.

2) Immediately upon appointment of the Committee, the Chair shall set a date for hearing which shall be no later than twenty (20) ten (10) working days after receipt of the employee's request for a grievance hearing. The grievant shall promptly be notified in person or by certified mail, return receipt requested, of the time, date and place of the hearing.

3) The grievant and others who have knowledge of the facts shall have an opportunity to present evidence in person or by written statement, after which the Committee will meet privately to reach a recommendation. The Chair may require that testimony be given under oath or by sworn affidavit.

4) The members of the Committee shall reduce their recommendations as to the disposition of the grievance to writing and submit them to the Auditor General within five (5) working days following the hearing. A dissenting member of the Committee may make separate recommendations. All recommendations will bear the signatures of the concurring committee.
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The Committee shall make their determination in writing within three (3) working days following the hearing. Upon receipt of the recommendations from a grievance committee, the Auditor General shall approve, disapprove or modify the Committee recommendations, shall render a decision thereon in writing, and cause a copy of such decision to be served upon the parties. The Auditor General's decision shall be final. The Committee's determination shall be delivered to the grievant in person or by certified mail, return receipt requested. The Committee's determination is final.

5) The written statement of the employee's grievance, the recommendations of the grievance committee, and the decision of the Auditor General thereon and the Committee's determination shall be made a part of the grievant's personnel file.

6) The Auditor General for good cause may extend any deadline set forth above.

f) Representation: The grievant is entitled to be present and may be accompanied by a representative of his or her choice at the hearing. Only such other persons as the Chair deems advisable shall be entitled to attend the hearing.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.674 Sick Leave

a) Accrual: Full-time employees shall earn sick leave at the rate of one (1) day for each month's service. Employees who work less than nineteen (19) hours per week do not earn sick leave. Permanent part-time employees shall earn sick leave on a prorated basis determined by a fraction the numerator of which shall be the hours worked by the employee and the denominator of which shall be normal working hours in the year required by the position. Employees who work less than a full work week but nineteen (19) or more hours per week shall earn sick leave adjusted by the fraction their working hours bear to the full work week. No employee shall accrue sick leave while remaining on the payroll to collect accrued vacation prior to the effective date of his or her termination.

b) Use: Sick leave may be used in one-half (½) hour increments for illness, disability, or injury of the employee, appointments with doctors, dentists, or other professional medical practitioners, and also may be used in the event of serious
illness, disability, injury or death of an immediate family member of the employee. Documentation to substantiate that leave days were used for the purposes stated may be required. Beginning with calendar year 2005, in the event an employee does not use sick leave in any calendar year, the employee shall be awarded one (1) additional personal day on January 1 of the next calendar year. A permanent part-time employee who works at least 19 hours per week shall be awarded pro-rated additional personal leave on January 1 when the employee has not used sick leave during the previous calendar year. A calendar year for purposes of this provision is the period beginning January 1 and ending December 31 of each year. Such additional personal leave shall be used in accordance with Section 600.682 of this Part. Upon leaving employment with the Office, an employee is entitled to be paid for one-half (1/2) of all unused sick leave earned after January 1, 1984 and before January 1, 1998. The order in which sick leave is charged against employee's accumulated sick leave and the compensability of sick leave upon an employee's death, retirement, resignation or other termination of service shall be governed by the State Finance Act.

c) Accumulation: Employees shall be allowed to carry over any unused sick leave allowed under subsection (a), above, from year to year of continuous service.

d) Payment in Lieu of Sick Leave:

1) Upon termination of employment for any reason, or upon indeterminate layoff, an employee or the employee's estate is entitled to be paid for unused sick leave which has accrued on or after January 1, 1984 and prior to January 1, 1998, provided the employee is not employed in another position in State service within four (4) calendar days of such termination.

2) For purposes of this subsection (d), sick leave is deemed to be used by an employee within the following priority order:

   A) Sick leave earned through December 31, 1983.
   B) Sick leave earned on or after January 1, 1998.
   C) Sick leave earned on or after January 1, 1984 and prior to January 1, 1998.

   The first earned sick leave shall be the first utilized within each category.
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3) In order to determine the amount of sick leave to be paid upon termination of employment, the Office will:

   A) compute the number of sick leave days granted to the employee between January 1, 1984 and December 31, 1997;

   B) compute the employee's sick leave balance for that time period at time of termination; and

   C) cause lump sum payment to be made for one half of the amount of sick leave in subsection (d)(3)(A) or (B) above, whichever is the lesser amount, multiplied by the daily salary rate.

4) An employee who is reemployed, reinstated, or recalled from indeterminate layoff and who received lump sum payment in lieu of unused sick days will have such days restored provided the employee repays upon return to active employment the gross amount paid by the State for the number of days to be so restored to the employee's sick leave account.

5) The payment proved by this subsection (d) shall not be allowed if the purpose of the separation from employment and any subsequent reemployment is for the purpose of obtaining such payment.

6) The accrued leave shall be certified in writing to the employee by the Office. This certification may be held by the employee or forwarded to the Retirement System.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.678 Vacation Leave

a) Accrual:

1) Full-time employees shall earn vacation leave, accrued monthly on a pro-rated basis, in accordance with the following schedule:

   A) From the date of hire until the completion of five (5) years of continuous service: ten (10) days annually.
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B) From the completion of five (5) years of continuous service until the completion of nine (9) years of continuous service: fifteen (15) days annually.

C) From the completion of nine (9) years of continuous service until the completion of fourteen (14) years of continuous service: seventeen (17) days annually.

D) From the completion of fourteen (14) years of continuous service until the completion of nineteen (19) years of continuous service: twenty (20) days annually.

E) From the completion of nineteen (19) years of continuous service until the completion of twenty-five (25) years of continuous service: twenty-two (22) days annually.

F) From the completion of twenty-five (25) years of continuous service: Twenty-five (25) days annually.

2) No employee shall accrue vacation leave while remaining on the payroll to collect accrued vacation prior to the effective date of his or her termination.

3) Employees who work less than nineteen (19) hours per week do not earn vacation leave. Permanent part-time employees shall earn vacation in accordance with the schedule set forth in subsection (a)(1) above on a prorated basis determined by a fraction the numerator of which shall be the hours worked by the employee and the denominator of which shall be normal working hours in the year required by the position. Employees assigned to work less than a full work week but nineteen (19) or more hours per week shall earn vacation leave adjusted by the fraction their working hours bear to the full work week.

b) Use: Vacation leave may be used in one-half (½) hour increments. Employees may use vacation leave only upon the approval of a Director or his or her designee or, if the employee is a Director, upon the approval of the Auditor General. No employee may approve his or her own request for vacation leave.

c) Continuous Service: Computation of vacation leave of State employees who have interrupted continuous State service shall be determined as though all previous
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State service which qualified for earning of vacation benefits is continuous with present service.

**d) Accumulation:** An employee who is employed by the Office on or prior to the effective date of this Part ([May 1, 1994](#)) shall be allowed to carry over accumulated vacation leave from year to year provided that such accumulation does not exceed seventy-five (75) days carry over in any calendar year. Calculation of time will be made on December 31 of each year and, if the employee's total vacation leave exceeds seventy-five (75) days at that time, only seventy-five (75) days will be carried into the next year. An employee who is employed by the Office after the effective date of this Part shall not be allowed to accumulate vacation time for more than twenty-four (24) months after the end of the calendar year in which it is earned. If such an employee does not request and take accrued vacation within such 24 month period, vacation earned during such calendar year shall be lost.

**e) Payout:** Upon leaving employment with the Office, an employee, at his or her option:

1) may be paid in a lump sum for accrued and unused vacation days up to a maximum of 75 days; or

2) may remain on the payroll for the period of time equal to accrued and unused vacation days up to a maximum of 75 days. However, if during this period, the employee is placed on another State payroll, he or she shall be removed from the Office's payroll. In that event, the employee may receive a lump sum payment for, or transfer to his or her account with the new employer, the remaining balance of his or her maximum accrued vacation days less any vacation days used under this paragraph.

This payment shall not be deemed to extend the effective date of termination by the number of days represented by said payment. Payment shall be computed by multiplying the number of days (hours) of accumulated vacation by the employee's daily (hourly) rate. Payment shall not be allowed if the purpose of the separation from employment and any subsequent reemployment is for the purpose of obtaining such payment. The accrued leave amount shall be certified in writing to the employee and may be held by the employee or forwarded to the Retirement System.
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f) Upon the death of a State employee, the person or persons specified in Section 14a of the State Finance Act [30 ILCS 105/14a] shall be entitled to receive from the appropriation for personal services theretofore available for payment of the employee's compensation such sum for any accrued vacation period to which the employee was entitled at the time of death. Such sum shall be computed by multiplying the employee's daily rate by the number of days of accrued vacation due.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.682 Leave for Personal Business

a) Accrual: Full-time employees shall be permitted twenty-one (21) hours of leave for personal business each calendar year subsequent to 1994 with pay. In calendar year 1994, full time employees shall be given credit for personal business leave at the rate of three and one half (3½) hours for each two (2) months remaining in the calendar year subsequent to the effective date of this Part. Full-time employees who enter service with the Office during any calendar year shall be given credit for such leave at the rate of three and one-half (3½) hours for each two (2) months of service for the calendar year in which hired. Permanent part-time employees working nineteen (19) or more hours per week shall earn personal business leave on a pro-rated basis determined by a fraction the numerator of which shall be the hours worked by the employee and the denominator of which shall be normal working hours in the year required by the position at a rate adjusted by the fraction their working hours bear to the full work week. Beginning with calendar year 2005, in the event an employee does not use sick leave in any calendar year, the employee shall be awarded one (1) additional personal day on January 1 of the next calendar year. A permanent part-time employee who works at least 19 hours per week shall be awarded pro-rated additional personal leave on January 1 when the employee has not used sick leave during the previous calendar year. A calendar year for purposes of this provision is the period beginning January 1 and ending December 31 of each year.

b) Personal business leave may be used for occurrences or observance of religious holidays, absence due to severe weather conditions, or for other similar personal reasons but shall not be used to extend a holiday, vacation or other leave without prior written approval. Personal business leave may be used by employees in half-hour increments. Except for those emergency situations which preclude the making of prior arrangements, personal business leave shall be scheduled sufficiently in advance to be consistent with the Office's operating needs.
c) Carry Over: Personal business leave shall not accumulate or carry over from year to year. If the services of an employee in State service are terminated by reason of his or her retirement, disability or death, the employee, or the employee's estate, as the case may be, shall be paid a lump sum, for the number of days for leave for personal business which the employee had accumulated but not used as of the date the employee's services were terminated, in an amount equal to ½ of the employee's pay per working day times the number of such leave days so accumulated and not used. The accrued leave amount paid under this subsection shall be certified in writing to the employee by the Office. This certification shall be held by the employee or forwarded to the Retirement System.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.686 Leaves of Absence

a) Types:

1) Illness: An employee who has expended his or her accumulated sick leave may be granted a leave without pay, provided that he or she may be required to submit a statement from an appropriate health care provider setting forth the reasons for the employee's inability to work. The leave may continue for an appropriate period approved by the Auditor General, provided that an appropriate health care provider's statement, if required, is submitted within the first ten (10) days of each month during the leave. The State will continue to pay the premiums for the basic (State-paid) health and life insurances for an employee on illness leave until expiration of authorized leave and return to active service, but not to exceed twenty-four (24) months.

2) On the Job Injury and Service Connected Disease: An employee who suffers an on-the-job injury or contracts a service-connected disease shall be allowed full pay during the first five (5) working days of absence without utilization of any accumulated sick leave or other benefits. Thereafter, the employee shall be permitted to utilize accumulated sick leave or other benefits unless the employee has applied for and been granted temporary total disability benefits in lieu of salary or wages pursuant to provisions of the Workers' Compensation Act [820 ILCS 305] or through the State's self-insurance program. In the event the service-connected illness or on-the-job injury becomes the subject of payment of
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benefits provided in the Workers' Compensation Act by the Illinois Industrial Commission, the courts, the State self-insurance program or other appropriate authority, the employee shall restore to the State the dollar equivalent which duplicates payments received as sick leave or other accumulated benefit time, and the employee's benefit accounts shall be credited with leave time equivalents. Employees whose compensable service connected injury or illness requires appointments with a doctor, dentist, or other professional medical practitioner shall with supervisor approval be allowed to go to such appointments without loss of pay and without utilization of sick leave.

3) Family and Medical Leave

A) Eligibility: Employees who have been employed by the Office for at least twelve (12) months and have worked at least 1,250 hours during the twelve (12) months prior to the start of the FMLA leave are entitled to up to twelve (12) workweeks leave in any twelve (12) month period for one or more of the following:

i) because of the birth of a son or daughter of the employee and in order to care for such son or daughter;

ii) because of the placement of a son or daughter with the employee for adoption or foster care;

iii) to care for the spouse, or a son, daughter, or parent, of the employee, if such spouse, son, daughter or parent has a serious health condition;

iv) because of a serious health condition that makes the employee unable to perform the function of the position of such employee.

Spouses employed by the Office may be limited to a combined total of twelve (12) workweeks of family leave for the birth and care of a child, placement of a child for adoption or foster care, or to care for an employee's parent who has a serious health condition.

B) Use: The entitlement to leave under subsection (a)(3)(A)(i) and
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(ii), above, expires at the end of the twelve (12) month period beginning on the date of the birth or placement of the son or daughter. The leave granted under subsection (a)(3)(A)(iii) and (iv), above, may be taken intermittently when medically necessary and when scheduled so as to not unduly disrupt the Office's operations.

C) Benefits: Family and Medical Leave shall be unpaid. Accrued sick and vacation leave may be applied to the above periods of absence at the employee's option. The State will continue to pay the premiums for the basic (State-paid) health and life insurances for an employee on family and medical leave.

D) Restoration: Employees who take leave under this subsection (a)(3) shall be returned to the same or equivalent position with equivalent benefits, pay and other terms and conditions of employment as held by the employee when the leave commenced.

E) Optional Extension: Family and Medical Leave may be extended up to a total of six months at the discretion of the Auditor General.

F) Notice and Certification: An employee shall provide the Office with not less than 30 days' notice of the employee's intent to take Family and Medical Leave, or such other notice as is practical under the circumstances. Documentation supporting the reasons for taking a leave may be required. The Office may obtain a second opinion from a health care provider of its choosing. Authorization from an appropriate health care provider to return to work may be required.

G) The terms and conditions of Family and Medical Leave shall be governed by the federal Family and Medical Leave Act of 1993.

H) In determining whether a veteran meets the FMLA eligibility requirement, the months employed and the hours that were actually worked for the Office will be combined with the months and hours that would have been worked during the twelve months prior to the start of the leave requested but for the military service.

4) Administrative Leave: The Auditor General may grant administrative
leaves of absence to employees for purposes deemed appropriate. The Auditor General shall determine the duration of the leave and whether the leave shall be with or without pay, full or partial, and with or without State-paid benefits.

5) Excused Absence: An employee may be granted an excused absence with pay upon the approval of the Auditor General or the Director to whom the employee reports.

6) Military, Job Corps and Peace Corps Leaves: Leaves of absence shall be allowed employees who enter military service, the Peace Corps or the Job Corps as provided below and as may be required by law.

A) Military Service Leave: Leave of absence without pay shall be granted to all employees who leave their positions and enter military service for four (4) years or less (exclusive of any additional service imposed pursuant to law). An employee shall be restored to the same or a similar position on making application to the Auditor General within ninety (90) days after separation from active duty or from hospitalization continuing after discharge for not more than one (1) year. The employee must provide evidence of satisfactory completion of training and military service when making application for reinstatement and be qualified to perform the duties of the position. Continuous service and reemployment rights for veterans subject to federal law shall be as provided in the Uniformed Services Employment and Reemployment Rights Act (38 USC 4301-4333).

B) Military Reserve Training Leave: Any full-time employee of the State of Illinois, other than an independent contractor, who is a member of any reserve component of the United States Armed Forces or of any reserve component of the Illinois State Militia, shall be granted leave from State employment for any period actively spent in such military services, including:

i) basic training;

ii) special or advanced training, whether or not within the State and whether or not voluntary; and
iii) annual training. During such leaves, the employee's seniority and other benefits shall continue to accrue.

During leaves for annual training, the employee shall continue to receive his or her regular compensation as a State employee. During leaves for basic training and for up to sixty (60) days of special or advanced training, if such employee's compensation for military activities is less than his or her compensation as a State employee, he or she shall receive his or her regular compensation as a State employee minus the amount of his or her base pay for military activities. Any full-time employee who is a member of a reserve component of the United States Armed Forces, the Illinois National Guard or the Illinois Naval Militia shall be allowed leave with pay for one (1) full pay period each calendar year, and such additions or extensions thereof without pay as may be necessary for the employee to fulfill the military reserve obligation, provided, however, that during period of active service to meet emergencies as proclaimed by the Governor, the employee shall be granted a leave of absence with pay. Military earnings must be remitted to the Office and the Office will return it to the payroll fund from which the employee's payroll check was drawn. If the military earnings exceed the employee's earnings for the period of the leave, the employee shall retain the military pay and return to the Office the amount the Office paid the employee for that period. An employee shall provide certification by the commanding officer of the employee's unit that all leave time was used for such purpose. During such leave of absence, the employee's seniority and other benefits shall continue to accrue.

C) State Active Duty/Emergency Call Up: Any member of the National Guard employed by the Office whose absence from a position of employment is necessitated by reason of being called to State Active Duty, whether or not voluntary, shall be entitled to reemployment rights and benefits and other employment benefits as provided under the Illinois National Guard Employment Rights Law [20 ILCS 1805/Art. V-A] or any other applicable State law, regulation or policy. Except as otherwise provided by law, a member entitled to reemployment upon completion of a period of State Active Duty shall be promptly reemployed in the position of employment which he or she left with the same increases in status.
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seniority and wages that were earned during his or her period of State Active Duty by employees in like positions who were on the job at the time the returning member entered State Active Duty, or to a position of like seniority, status and pay, unless the Office's circumstances have so changed as to make it impossible or unreasonable to do so. Any member of the National Guard who is reemployed or seeks reemployment to a position of employment under this subsection (a)(6)(C) shall be considered as having been on furlough or leave of absence during his or her State Active Duty and shall be reemployed without loss of seniority and shall be entitled to participate in insurance or other benefits offered by the employer pursuant to established rules and practices relating to employees on furlough or leave of absence in effect at the time the member entered State Active Duty.

D) Active Duty Pay: Any full-time employee of the State of Illinois, other than an independent contractor, who is a member of the Illinois National Guard or a reserve component of the United States Armed Forces or the Illinois State Militia and who is mobilized to active duty shall continue during the period of active duty to receive his or her benefits and regular compensation as a State employee, minus an amount equal to his or her military active duty base pay. The terms and conditions of active duty leave shall be as determined by the Department of Central Management Services and the State Comptroller. Employees on active duty leave retain all rights to employment benefits, including insurance.

E) Certification of Leave: To be eligible for military leave or emergency call-up pay, the employee must provide certification from the commanding officer of his or her unit that the leave taken was for either such purpose.

F) Leave for Military Physical Examinations: Any employee drafted into military service shall be allowed up to three (3) days leave with pay to take a physical examination required by such draft. Upon request, the employee must provide the Office with certification by a responsible authority that the period of leave was actually used for such purpose.
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G) Peace Corps or Job Corps Enrollees Continuous Service Leave: Any employee who volunteers and is accepted for service in the overseas or domestic Peace Corps or Job Corps shall be given a leave of absence from his or her State employment for the duration of his or her initial period of service. The employee shall be restored to the same or similar position provided that the employee returns to his or her employment within ninety (90) days of the termination of his or her service or release from hospitalization for a Peace Corps or Job Corps service-connected disability.

H) Veterans Hospital Leave: An employee who is also a veteran shall be permitted two (2) days with pay per year to visit a veterans hospital for examination of a military service-connected disability. The two (2) days shall not be charged against any sick leave currently available to the employee.

7) Disaster Service Volunteer Leave: Any employee who is a certified disaster service volunteer of the American Red Cross or assigned to the Illinois Emergency Management Agency in accordance with the Illinois Emergency Management Agency Act, the Emergency Management Assistance Compact Act, or other applicable administrative rules may be granted leave from work with pay for not more than twenty (20) working days in any twelve (12) month period to participate in specialized disaster relief services for the American Red Cross or for the Illinois Emergency Management Agency, as the case may be, upon the request of the American Red Cross or the Illinois Emergency Management Agency for the services of that employee and upon the Office's approval related to a disaster occurring within the State of Illinois. Leave shall be granted upon the request of the American Red Cross and with the approval of the Auditor General. The employee shall be granted disaster service volunteer leave without loss of seniority, pay, vacation time or any other employee benefit.

8) Attendance in Court: Any employee called for jury duty or subpoenaed by any legislative, judicial, or administrative tribunal shall be allowed time away from work with pay for such purposes. Upon receiving the sum paid for jury service or witness fee, the employee shall submit the warrant, or its equivalent, to the Office to be returned to the fund in the State Treasury from which the original payroll warrant was drawn; provided, however, an employee may elect to fulfill such call or subpoena on accrued time off.
and retain the full amount received for such service.

9) Maternity/Paternity and Adoption Leave:

A) All female employees who show proof that they have received prenatal care in the first twenty (20) weeks will be eligible for four (4) weeks (20 work days) paid maternity leave. For pregnancies occurring on or after the effective date of this amendment, such proof shall be provided to the Office no later than the twenty-fourth (24th) week of pregnancy. All male employees who show proof that their spouses have received prenatal care in the first twenty (20) weeks, with notification to the Office within twenty-four (24) weeks if the pregnancy occurred on or after the effective date of this amendment, will be eligible for three (3) weeks (15 work days) of paid paternity leave. The Office may require proof of the birth and marriage for a non-covered spouse. Maternity and/or paternity leave shall be limited to one (1) leave per family for each birth.

B) All employees are eligible for three (3) weeks (15 work days) of paid leave with a new adoption, with the leave to commence when physical custody of the child has been granted to the employee, provided that the employee can show that the formal adoption process is underway. The Office must be notified, and the employee must submit proof that the adoption has been initiated. Adoption leave shall be limited to one leave per family per year.

C) Permanent part-time employees working nineteen (19) or more hours per week shall be eligible for paid maternity/paternity and adoption leave on a pro-rated basis determined by a fraction the numerator of which shall be the hours worked by the employee and denominator of which shall be normal working hours in the year required by the position.

10) Educational Leave: The Auditor General may grant an employee an educational leave of absence for the purpose of engaging in a training course. No educational leave may be granted unless in the Auditor General's judgment the training course would benefit the Office by improving the employee's qualifications to perform the duties of the employee's position or by qualifying the employee for advancement to
another position in State service. During a period of educational leave, State-paid health benefits and life insurance benefits shall continue as provided under Section 10(c) of the State Group Insurance Act [5 ILCS 375/10(c)].

11) Organ Donor/Blood Donor Leave: Upon request and approval by the Office, an employee may be entitled to organ donor and/or blood donor leave with pay as follows:

A) up to 30 days of organ donation leave in any 12-month period to serve as a bone marrow or organ donor. Medical documentation of the proposed organ or bone marrow donation shall be required before leave is approved;

B) up to one hour to donate blood every 56 days. Medical documentation to substantiate the use of leave time for this purpose may be required;

C) up to two hours to donate blood platelets in accordance with appropriate medical standards established by the American Red Cross or other nationally recognized standards. Leave to donate blood platelets may not be granted more than 24 times in a 12-month period.

An employee may not be required to use accumulated sick or vacation leave time before being eligible for leave under this subsection (a)(11). Medical documentation to substantiate the use of leave time for these purposes may be required.

12) Leave due to Domestic or Sexual Violence: An employee who is a victim of domestic or sexual violence or who has a family or household member who is a victim of domestic or sexual violence whose interests are not adverse to the employee as it relates to the domestic or sexual violence may be entitled to take up to 12 work weeks of unpaid leave during any 12-month period for the purposes and under the terms and conditions provided in the Victims' Economic Security and Safety Act [820 ILCS 180] and implementing regulations (56 Ill. Adm. Code 280).

13) School Visitation Leave: Employees may take up to a total of 8 hours during any school year, no more than 4 hours of which may be taken on
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any given day, to attend school conferences or classroom activities related to the employee's child if the conference or classroom activities cannot be scheduled during nonwork hours. No leave may be taken unless the employee has exhausted all accrued vacation leave, personal leave and any other leave that may be granted to the employee except sick leave and disability leave. The employee must provide the Office with a written request for leave at least 7 days in advance of the time the employee is required to utilize the visitation right. In emergency situations, no more than 24 hours notice shall be required. The employee must consult with the Office to schedule the leave so as not to disrupt unduly the Office's operations.

b) Employee Rights After Leave: When an employee returns from a leave of absence of six (6) months or less, the Office shall return the employee to the same or similar position in which the employee was incumbent prior to the commencement of such leave provided that all requirements for substantiation of use of leave or physical fitness have been furnished and that application for reassignment is made within the specified time limit of the leave. When an employee returns from a leave of absence exceeding six (6) months in duration, other than a leave of absence granted under subsection (a)(6), above, and there is no vacant position in the same position classification in which the employee was incumbent prior to the commencement of such leave, the employee may be laid off. An employee returning from a leave of absence under subsection (a)(6), above, shall be returned to the same or similar position in which the employee was incumbent prior to the commencement of such leave provided that all requirements for substantiation of use of leave or physical fitness have been furnished, that application for reassignment is made within the specified time limits of the leave, and that the Office's circumstances have not changed so as to make reassignment impossible or unreasonable.

c) Failure to Return: Failure to return from leave within five (5) days after the expiration date may be cause for discharge. An employee who fails to return from leave within five (5) working days after the expiration date shall be deemed to have resigned. Leave shall automatically terminate upon the employee's securing other employment during the leave period.

d) Accrual and Retention of Continuous Service During Certain Leaves: During the following leaves, an employee shall retain and accrue continuous service, provided appropriate application and return is made as required by this Section: family and medical leave; educational leave; administrative leave; military leaves;
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Peace Corps or Job Corps leave; disaster service volunteer leave; or service-connected disability leave.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.690 Holidays

a) Authorized Holidays: All full-time employees shall have time off, with full salary payment, for any days established by State or federal law for the observance of holidays and any other holidays or non-working days declared by the Auditor General. Permanent part-time employees working nineteen (19) or more hours per week shall earn holiday pay on a pro-rated basis determined by a fraction the numerator of which shall be the hours worked by the employee and the denominator of which shall be normal working hours in the year required by the position.

b) Holiday Observance: Where employees are scheduled and required to work on a holiday, equivalent time off will be granted within the following twelve month period at a time convenient to the employee and consistent with the Office's operating needs.

c) Holiday During Vacation: When a holiday falls on an employee's regularly scheduled work day during the employee's vacation period, an extra day shall be added to the employee's accumulated vacation days.

(Source: Amended at 28 Ill. Reg. 14457, effective December 1, 2004)

Section 600.699 Savings Clause

If any Section or part of any Section of this Part shall be held invalid, the remaining provisions of the Part shall have and be given full force and effect as completely as if the invalidated part had not been included therein.

(Source: Added at 28 Ill. Reg. 14457, effective December 1, 2004)
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1) **Heading of the Part**: Illinois Film Production Services Tax Credit Program

2) **Code Citation**: 14 Ill. Adm. Code 528

3) **Section Numbers**: Adopted Action:
   - 528.10  New Section
   - 528.20  New Section
   - 528.30  New Section
   - 528.40  New Section
   - 528.50  New Section
   - 528.60  New Section
   - 528.70  New Section
   - 528.80  New Section
   - 528.90  New Section
   - 528.100 New Section

4) **Statutory Authority**: Implementing and authorized by the Film Production Services Tax Credit Act [35 ILCS 15].

5) **Effective Date of Rules**: October 22, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Do these rules contain incorporations by reference?** No

8) A copy of the adopted rules, including any material incorporated by reference, is on file in the agency’s principal office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register**: 28 Ill. Reg. 474; January 9, 2004

10) **Has JCAR issued a Statement of Objection to these rules?** No

11) **Differences between proposal and final version**: Grammatical and stylistic changes were made.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR?** Yes

13) **Will these rules replace any emergency rules currently in effect?** No
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14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Rules: Illinois is offering an incentive program to encourage the training and hiring of Illinois residents in the motion picture industry and to encourage the motion picture industry to produce films within the boundaries of Illinois.

16) Information and questions regarding these adopted rules shall be directed to:

Ms. Jolene Clarke
Rules Administrator
Illinois Department of Commerce and Economic Opportunity
620 East Adams Street
Springfield IL 62701

217/557-1820

The full text of the Adopted Rules begins on the next page:
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY
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TITLE 14: COMMERCE
CHAPTER I: DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

PART 528
ILLINOIS FILM PRODUCTION SERVICES TAX CREDIT PROGRAM

Section 528.10 Purpose
The Department shall make Film Tax Credit awards under the Film Production Services Tax Credit Act for the purpose of preserving and expanding the existing human infrastructure for the motion picture industry in Illinois, and to promote and encourage the training and hiring of Illinois residents who represent the diversity of the Illinois population through the creation and implementation of training, education and recruitment programs organized in cooperation with Illinois colleges, universities, labor organizations and the motion picture industry. (Section 5 of the Act)

Section 528.20 Definitions
The following definitions are applicable to this Part:

"Accredited Production" means a film, video, or television production that has been certified by the Department in which the aggregate Illinois labor
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expenditures included in the cost of the production, in the period that ends 12 months after the time principal filming or taping of the production began, exceed $100,000 for productions of 30 minutes or longer, or $50,000 for productions of less than 30 minutes, but does not include a production that:

is news, current events, or public programming, or a program that includes weather or market reports;

is a talk show;

is a production in respect of a game, questionnaire, or contest;

is a sports event or activity;

is a gala presentation or awards show;

is a finished production that solicits funds;

is a production produced by a film production company if records, as required by 18 USC 2257, are to be maintained by that film production company with respect to any performer portrayed in that single media or multimedia program; or

is a production produced primarily for industrial, corporate, or institutional purposes. (Section 10 of the Act)

"Accredited Production Certificate" means a certificate issued by the Department certifying that the production is an accredited production that meets the guidelines of the Film Production Services Tax Credit Act. (Section 10 of the Act)

"Act" means the Film Production Services Tax Credit Act [35 ILCS 15].

"Applicant" means a taxpayer that is a film production company that is operating or has operated an accredited production located within the State of Illinois and that owns the copyright in the accredited production throughout the Illinois production period or has contracted directly with the owner of the copyright in the accredited production or a person acting on behalf of the owner to provide services for the production, where the owner of the copyright is not an eligible production corporation. (Section 10 of the Act)
"Credit" means the amount equal to 25% of the Illinois labor expenditure approved by the Department. (Section 10 of the Act)

"Department" means the Illinois Department of Commerce and Economic Opportunity, formerly known as the Illinois Department of Commerce and Community Affairs.

"Director" means the Director of the Department.

"Employees of the Applicant" means any employee, agent, or contractor whose salaries, wages, or other payments are included in the cost of production.

"Film Production Company" means any individual, corporation, partnership, or any other entity, or any of its agents, or assigned agents that is engaged, directly or indirectly, in any accredited production.

"Final Film Tax Credit Certificate" means the Final Accredited Production Certificate issued by the Department to the film production company certifying that it has complied with all requirements of the Act and this Part and that it is entitled to a credit under the Act.

"Illinois Labor Expenditure" means salary or wages paid to employees of the applicant for services on the accredited production. To qualify as an Illinois labor expenditure, the expenditure must be:

reasonable in the circumstances;

included in the federal income tax basis of the property;

incurred by the applicant for services on or after January 1, 2004;

incurred for the production stages of the accredited production, from the final script stage to the end of the post-production stage;

limited to the first $25,000 of wages paid or incurred to each employee of the production;

exclusive of the salary or wages paid to or incurred for the 2 highest paid employees of the production;
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directly attributable to the accredited production;

paid in the tax year for which the applicant is claiming the credit or no later than 60 days after the end of the tax year;

paid to persons resident in Illinois at the time the payments were made; and

paid for services rendered in Illinois. (Section 10 of the Act)

"Interim Film Tax Credit Certificate" means the Interim Accredited Production Certificate, issued by the Department to the film production company approving the Applicant’s application, that sets forth the amount of the potential credit based on the information in the application.

"Principal Filming" means the date on which actual filming of an accredited production commences. In other words, principal filming begins at the culmination of preparation activity and starts with photography of principal actors or action.

"State" means the State of Illinois.

"Taxpayer" means any person as defined by and subject to the tax imposed by the Illinois Income Tax Act [35 ILCS 5/1501(a)(18), (a)(24)].

Section 528.30  Eligibility Determination

Applicants must satisfy all of the following criteria in order to be eligible for a credit:

a) Ownership of Copyright in Accredited Production:

1) The applicant must own the copyright in the accredited production throughout the Illinois production period; or

2) The applicant has contracted directly with the owner of the copyright in the accredited production, or a person acting on behalf of the owner, to provide services for the production, where the owner, of the copyright is not an eligible production corporation. (Section 10 of the Act)
b) Illinois Taxpayer Status: An applicant that is not an Illinois taxpayer (has no Illinois income tax liability) may utilize one of the following structures in order to be eligible for the credit:

1) Partnership or Limited Liability Company (LLC) treated as a partnership for purposes of the Illinois Income Tax Act [35 ILCS 5] – An applicant may establish a partnership or an LLC for purposes of accomplishing the accredited production. (See 35 ILCS 5/1501(a)(16).)

2) Subsidiary Corporation. An applicant may establish a subsidiary corporation to accomplish an accredited production. If the applicant and the subsidiary corporation are members of a unitary business group, they must file a combined income tax return with the Illinois Department of Revenue on which the credit will be used against the combined income tax liability of the group. (See 35 ILCS 5/502(e) and 1501(a)(27).)

3) Contracting. An applicant may contract with an Illinois taxpayer to accomplish an accredited production and qualify for the credit and the value of the credit to the taxpayer may be taken into account in determining the payment to be made under the contract.

c) Aggregate Illinois Labor Expenditures: In order to qualify for a credit under the Act, the applicant must incur, in the 12-month period after the commencement of principal filming or taping of the production, Illinois labor expenditures that exceed the following amounts:

1) $100,000 for productions of 30 minutes or longer;
2) $50,000 for productions of less than 30 minutes.

d) To qualify as an Illinois labor expenditure, the expenditure must be:

1) reasonable in the circumstances;
2) included in the federal income tax basis of the property;
3) incurred by the applicant for services on or after January 1, 2004;
4) incurred for the production stages of the accredited production, from the final script stage to the end of the post-production stage;
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5) limited to the first $25,000 of wages paid or incurred to each employee of the production;

6) exclusive of the salary or wages paid to or incurred for the 2 highest paid employees of the production;

7) directly attributable to the accredited production;

8) paid in the tax year for which the applicant is claiming the tax credit or not later than 60 days after the tax year;

9) paid to persons resident in Illinois at the time the payments were made; and

10) paid for services rendered in Illinois. (Section 10 of the Act)

e) Non-eligible Productions: The following types of productions are not eligible for a credit:

1) news, current events, or public programming, or a program that includes weather or market reports;

2) talk show;

3) production in respect of a game, questionnaire, or contest;

4) sports event or activity;

5) gala presentation or awards show;

6) finished production that solicits funds;

7) production produced by a film production company if records, as required by 18 USC 2257, are to be maintained by that film production company with respect to any performer in that single media or multimedia program; and

8) production produced primarily for industrial, corporate, or institutional purposes. (Section 10 of the Act)
f) Only one credit will be awarded per accredited production.

Section 528.40 Form of Application

The Department will accept and evaluate applications from eligible applicants in accordance with the following provisions:

a) An applicant proposing a film or television production planned to be located in the State shall submit its application prior to the start of principal filming or taping in sufficient time to allow for the evaluation of the application by the Department.

b) Written applications will be required and must be submitted on the standard application form provided by the Department. Applications shall be submitted to the Department office location stated on the application. The applicant must provide the following information:

1) Legal name, address, and telephone number of applicant.

2) Name, title, and telephone number of primary contact person.

3) Applicant's form of organization – a description stating that the applicant is one of the following:

   A) Individual Proprietorship

   B) Partnership

   C) Corporation

   D) Subchapter S Corporation

   E) Limited Liability Corporation

   F) Other (applicant will provide description).

4) Date of incorporation or formation.

5) Federal Employer Identification Number (FEIN).
6) Production title.

7) Type of production – a description stating that the production is one of the following:
   A) Feature film
   B) Television program
   C) Commercial
   D) Other (applicant will provide description)
   E) Length of production.

8) Dates on which Illinois production expenses begin and end.

9) Number of shoot days in Illinois.

10) Total budget of production.

11) Estimated total Illinois labor expenditure.

12) Estimated number of Illinois residents to be hired to work on the production.

13) Percentage of minority workers in Illinois that the applicant plans to employ to perform work on the production.

14) Documentation evidencing applicant's intention to participate in training, education and recruitment programs offered by Illinois colleges, universities, labor organizations and the motion picture industry that are designed to promote training and hiring of Illinois residents who represent the diversity of the Illinois population.

15) Documentation evidencing that the receipt of the credit is essential to the decision to operate the accredited production in Illinois, such as documentation that Applicant has multi-state or international location options and could reasonably locate outside the State, or can demonstrate
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that at least one other state or nation is being considered for the production, or other documentation showing that the receipt of the tax credit is a major factor in the applicant's decision to locate the production in Illinois.

c) The applicant must submit a copy of the complete script of the production.

d) The applicant is responsible for the accuracy of all data, information, and documentation included in the application. Once submitted, applications shall become the property of the Department.

e) Upon written request, applicants shall issue any necessary authorization to the appropriate federal, State or local authority for the release of information concerning a production being considered under this Part, including but not limited to financial reports, and records relating to the applicant or the production for which the credit is requested.

Section 528.50 Evaluation of Applications

a) Prior to substantive evaluation of an application for a credit, the Department shall examine all applications to determine that all required information and documentation has been provided. Applicants will be notified of any deficiencies in applications and will be allowed to correct such deficiencies through submission of additional documentation, until principal filming commences.

b) In evaluating applications, the Department shall determine that a preponderance of the following conditions exists:

1) the applicant's production is economically sound and will increase opportunities for residents of Illinois to obtain employment;

2) the applicant will meet the requisite aggregate Illinois labor expenditure requirement in accordance with the provisions of Section 528.30(c) of this Part;

3) the extent to which the applicant plans to employ Illinois residents representing the diversity of the Illinois population subject to any applicable collective bargaining agreements to which the applicant is a signatory to perform work on the production;
4) the extent to which the applicant intends to participate in training, education and recruitment programs that are organized in cooperation with Illinois colleges and universities, labor organizations, and the motion picture industry and are designed to promote and encourage the training and hiring of Illinois residents who represent the diversity of the Illinois population; 

5) the applicant's demonstration that the credit is essential to its decision to locate the production in Illinois; and 

6) awarding the credit will result in an overall positive impact to the State.

Section 528.60 Approval/Denial of Applications

a) The Department reserves the right to make inquiries, to conduct studies in the manner and by the methods it deems necessary, and to review information with respect to the application. The Department also reserves the right to request information from the applicant that is necessary to calculate the amount of the tax credit.

b) The Department reserves the right to reject any application that does not comply with the requirements of this Part. Upon receipt of an applicant's request for the Final Film Tax Credit Certificate, the Department shall review the application and shall approve or deny the request within 30 days. Applications are subject to final approval by the Director of the Department.

c) Applicants shall be notified in writing as to the Department's evaluation of all completed applications. If the Department denies an application for the credit, it will specify the reasons for denial in writing and allow the applicant 30 days to amend and re-submit its application for evaluation.

Section 528.70 Amount and Duration of Credit

a) For tax years beginning on or after January 1, 2004, a taxpayer who has been awarded a tax credit under the Act is entitled to a credit against the taxes imposed under Section 201(a) and (b) of the Illinois Income Tax Act [35 ILCS 5/201(a) and (b)] in an amount determined by the Department. If the taxpayer is a partnership or Subchapter S corporation, the credit is allowed to the partners or shareholders in accordance with the determination of income and distributive
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share of income under sections 702 and 704 and Subchapter S of the Internal Revenue Code (26 USCA 702 and 704). The credit may not be carried forward or back. In no event shall a credit under the Act reduce the taxpayer's liability to less than zero. (See 35 ILCS 5/213.)

b) Eligible applicants will be awarded a credit equal to 25% of the Illinois labor expenditures approved by the Department for an accredited production. (Section 10 of the Act)

c) The duration of the credit may not exceed one taxable year. (Section 10 of the Act)

Section 528.80 Interim and Final Film Tax Credit Certifications

a) Interim Film Tax Credit Certificate: Once the Department determines the applicant's film, video or television production to be an accredited production, the Department shall issue an Accredited Film Production Certificate and an Interim Film Tax Credit Certificate to the applicant prior to the commencement of the principal filming. The Interim Film Tax Credit Certificate will set forth the amount of the potential credit based on the information set forth in the application and shall advise the applicant that the credit is subject to reduction in the event that the applicant's actual Illinois labor expenditures are less than the amount set forth in the application, which shall be verified after the principal filming has concluded.

b) Final Film Tax Credit Certificate: The applicant may request a Final Accredited Production Certificate from the Department certifying the actual amount of the credit to the applicant and the Illinois Department of Revenue at any time following the completion of the film production, but in no event later than 2 years following the completion of the film production. The Final Film Tax Credit Certificate will be issued upon the Department's verification that the applicant is in compliance with all requirements of the Act and this Part relative to the award of the credit, including verification of all costs submitted as qualifying as the applicant's Illinois labor expenditure.

Section 528.90 Non-Compliance Provisions

Material noncompliance with the requirements of the Interim Accredited Production Certificate may result in rescission of the credit by the Department, or the institution of proceedings to have the Illinois Department of Revenue revoke the credit.
Section 528.100  Books and Records

a) Record Retention: *The applicant must at all times keep proper books of record and accounts in accordance with generally accepted accounting principles consistently applied, with the books, records, or papers related to the accredited production in the custody or control of the taxpayer open for reasonable Department inspection and audits, and including, without limitation, the making of copies of the books, records, or papers, and the inspection or appraisal of any of the assets of the applicant or the accredited production. (Section 15(f) of the Act)*

b) Confidentiality: To the extent possible and permitted under the Act, the Department will maintain materials and information received from an applicant for application for a credit as confidential.
1) **Heading of the Part:** Brownfields Site Restoration Program

2) **Code Citation:** 35 Ill. Adm. Code 1740

3) **Section Numbers:**
   - 1740.10 New
   - 1740.20 New
   - 1740.30 New
   - 1740.40 New
   - 1740.50 New
   - 1740.60 New
   - 1740.70 New
   - 1741.80 New

4) **Statutory Authority:** Implementing and authorized by Section 5/58.15 of the Environmental Protection Act [415 ILCS 5/58.15]

5) **Effective Date of Rulemaking:** October 21, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain incorporations by reference?** No

8) A copy of the adopted rules, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** 28 Ill. Reg. 2927; February 20, 2004

10) **Has JCAR issued a Statement of Objection to these rules?** No

11) **Differences between proposal and final version:** Grammatical and stylistic changes were made.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR?** Yes

13) **Will this rulemaking replace any emergency amendments currently in effect?** No

14) **Are there any amendments pending on this Part?** No
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

NOTICE OF ADOPTED RULES

15) **Summary and Purpose of Rules:** Establishes rules for the Brownfields Site Restoration Program.

16) **Information and questions regarding this adopted rulemaking shall be directed to:**

Ms. Jolene Clarke  
Rules Administrator  
Illinois Department of Commerce and Economic Opportunity  
620 East Adams Street  
Springfield IL  62701  

217/557-1820

The full text of the Adopted Rules begins on the next page:
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

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TITLE 35: ENVIRONMENTAL PROTECTION
SUBTITLE G: WASTE PROTECTION
CHAPTER III: DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

PART 1740
BROWNFIELDS SITE RESTORATION PROGRAM

Section
1740.10 Purpose
1740.20 Definitions
1740.30 Eligible Applicant
1740.40 Eligible Projects
1740.50 Application
1740.60 Determination of Amount and Term of the Reimbursement Grant
1740.70 Computation of Time for Response to Application
1740.80 Confidentiality

AUTHORITY: Implementing and authorized by Section 58.15 of the Environmental Protection Act [415 ILCS 5/58.15].


Section 1740.10 Purpose

a) The Agency shall establish and administer a revolving loan program to be known as the "Brownfields Redevelopment Loan Program" for the purpose of providing loans to be used for site investigation, site remediation, or both, at brownfields sites. [415 ILCS 5/58.15(A)(a)]

b) Prior to applying to the Agency for payment, a remediation applicant shall first submit to the Agency its proposed remediation costs. The Agency shall make a pre-application assessment, which is not to be binding upon the Department of Commerce and Economic Opportunity (formerly the Department of Commerce and Community Affairs) or upon future review of the project, relating only to whether the Agency has adequate funding to reimburse the applicant for the remediation costs if the applicant is found to be eligible for reimbursement of remediation costs. If the Agency determines that it is likely to have adequate funding to reimburse the applicant for remediation costs, the remediation applicant may then submit to the Department of Commerce and Economic Opportunity an application for review of eligibility. The Department must review
the eligibility application to determine whether the remediation applicant is eligible for the payment. The application must be on forms prescribed and provided by the Department of Commerce and Economic Opportunity. [415 ILCS 5/58.15(B)(b)]

Section 1740.20 Definitions

The following definitions are applicable to this Part:

"Act" means Environmental Protection Act [415 ILCS 5/58.15].

"Agency" or "IEPA" means the Illinois Environmental Protection Agency.

"Aggregate Capital Investments" means all private capital investments and all public capital improvements at the eligible site for the period beginning 3 years prior to the site evaluation and ending 3 years after completion of site remediation.

"Application" means a written request for reimbursement containing the required information and attachments.

"Capital Improvements" means permanent tangible mechanical plants, structures, equipment and furnishings in a project sited in Illinois and in non-material goods, including organizational costs and research and development costs incurred in Illinois that are capitalized and all other costs normally capitalized. For mechanical plants, structures and equipment that are leased, the lease must equal or exceed the term of the reimbursement agreement and the cost of the property shall be determined from the present value, using the prevailing corporate interest rate, of the lease payments.

"Capital Investments" means expenditures on:

land, buildings and permanent structures, equipment and furnishings at the site;

capitalizable organizational costs such as site evaluation and remediation activity costs (whether capitalized or expensed on the applicant's tax return); and
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present value of any long-term lease of mechanical plants, structures and equipment calculated using the prevailing prime rate.

"Department" or "DCEO" means the Illinois Department of Commerce and Economic Opportunity.

"Eligible Site" means any single location, place, tract of land or parcel of property or portion thereof that:

- is abandoned property: real property previously used for, or that has the potential to be used for, commercial or industrial purposes that reverted to the ownership of the State, a county or municipal government, or an agency thereof, through donation, purchase, tax delinquency, foreclosure, default, or settlement, including conveyance by deed in lieu of foreclosure [415 ILCS 5/58.15(B)(b)(2)];

- is vacant, abandoned property: privately owned property that has been vacant (except for inconsequential use) for a period of not less than 3 years from the time an application is made to the Department [415 ILCS 5/58.15(B)(b)(2)]; or

- is underutilized property: real property of which less than 35% of the commercially usable space of the property and improvements thereon are used for their most commercially profitable and economically productive uses [415 ILCS 5/58.15(B)(b)(2)].

"Net Economic Benefit" means the positive impact associated with the purchase, remediation, and reuse of an eligible site based on factors, including but not limited to the capital investment, the number of jobs created, the number of jobs retained if it is demonstrated the jobs would otherwise be lost, capital improvements, the number of construction-related jobs, increased sales, material purchases, other increases in service and operational expenditures, and other factors established by the Department. Additionally, in determining the economic benefit to the State, the Department will give priority to sites located in areas with high levels of poverty, where the unemployment rate exceeds the State average, where an enterprise zone exists, or where the area is otherwise economically depressed as determined by the Department. [415 ILCS 5/58.15(B)(b)(3)]

"Project" means an activity or activities at a single site.
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"Project Costs" means cost of the project incurred or to be incurred by the applicant, including: capital investment, including, but not limited to, equipment, buildings, or land; infrastructure development; debt service, except refinancing of current debt; research and development; lease costs; but excluding the value of State incentives, including discretionary tax reimbursements and the interest savings of below market rate loans.

"Remediation Applicant" means any person seeking to perform or performing investigative or remedial activities under Title XVII of the Act, including the owner or operator of the site or persons authorized by law or consent to act on behalf of or in lieu of the owner or operator of the site. [415 ILCS 5/58.2]

Section 1740.30 Eligible Applicant

As long as the project is eligible, there is no restriction against who may apply.

Section 1740.40 Eligible Projects

The Department shall determine site eligibility. To qualify for site eligibility, the remediation applicant must certify that the site is an eligible site as defined in Section 1740.20, the site for which the Department's net economic benefit assessment and certification is being sought is enrolled in the Agency's Site Remediation Program, and the project must have received a No Further Remediation Letter from the Agency after December 31, 2001.

Section 1740.50 Application

a) Procedures

1) Prior to submitting to DCEO an application to determine eligibility, applicants must first submit their proposed remediation costs to the Agency. The Agency shall make a pre-application assessment, which is non-binding on the Department or upon future review of the projects, relating only to whether the Agency expects to have adequate funding to reimburse the applicant for the remediation costs if the applicant is found to be eligible for reimbursement of remediation costs. If the Agency determines it is likely to have adequate funding to reimburse the applicant for remediation costs, the applicant may then submit an application for review of eligibility to DCEO. Because IEPA has the ultimate responsibility to approve the reimbursement payment, the determination of available funding is the sole responsibility of the Agency.
DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

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2) Upon request, the Department shall supply interested potential applicants with application guidelines and instructions that describe the program rules, required information, and attachments. Applications will be accepted at any time during the year. Receipt of an application does not commit the Department to award certification.

3) Formal applications for consideration will be required and shall be submitted on the standard application form provided by the Department. Applications shall be submitted to the Department office location identified on the application. The applicant shall provide information that includes but is not limited to:

A) Applicant Information – name, address, and telephone number; key contact person and title; applicant FEIN number, North American Industry Classification System (NAICS), if available; and authorized signatures;

B) Project Summary – a detailed description of the project;

C) Site Map – an outline of the general location of the project on a site map, including the location of any flood plain areas, wetland areas, and enterprise zones;

D) Economic Benefit of Remediation Expenditures – site evaluation expenses and site remediation expenses;

E) Economic Benefit of Individuals Employed or to be Employed – a detailed description of the number of new, retained or construction employees to be hired and the occupation and payroll of the full-time jobs to be created or retained as a result of the project, and a schedule of anticipated starting dates of the new hires with information on the employment duration and the average annual salary or wages of the new, retained or construction employees;

F) Economic Benefit of Private Capital Investments – the investment the applicant will make in capital improvements, and the designated location in Illinois for the investment. This shall include a description (or specifications or lists) of the planned capital improvements demonstrating the investment is qualified;
NOTICE OF ADOPTED RULES

documentation to substantiate the value of the investment (value of capital improvements as provided by appraisers, vendors, contractors and/or architects and engineers), and a schedule regarding when the eligible investment will be placed in service; and

G) Economic Benefit of Public Capital Improvements – a detailed description of total project cost, items of expense and investment, including, but not limited to, equipment, buildings, or land; infrastructure development; debt service, except refinancing of current debt; research and development; job training and education; lease costs; or relocation costs.

4) Within 60 days from the date an application is determined to be complete, the Department shall notify the applicant that the application has been approved or rejected. If the application is rejected, the notification shall state the reasons for that determination. Resubmitted applications will be approved or denied in writing within 30 days after receipt. In the event of a complaint by the applicant, the Department will follow the procedures outlined in 56 Ill. Adm. Code 2605 (Administrative Hearing Rules).

b) Form of Application

1) All communications relating to the application procedures defined in Section 1740.60 shall be sent to the Department at:

Illinois Department of Commerce and Economic Opportunity
Re: Brownfields Site Restoration Program
100 West Randolph
Suite 3-400
Chicago IL  60601

2) An application shall be typed or computer generated using the current approved format provided by the Department.

3) An application shall contain one original and 3 copies.

4) An application shall include the information and supporting documents that will enable the application to be evaluated based on the criteria described in Section 1740.60 of this Part.
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5) Each application, including supporting documents and attachments, shall be contained under a single cover.

6) The applicant shall remit a $1,000 non-refundable application fee to the Department at the time of the submission of the application. The application fee shall be remitted in the form of a check or money order and shall be made payable to the Department of Commerce and Economic Opportunity for deposit into the Workforce Technology and Economic Development Fund.

Section 1740.60 Determination of Amount and Term of the Reimbursement Grant

The Department shall determine the maximum amount of the reimbursement awarded under the Act. In determining the amount of the reimbursement that should be awarded, the Department may take into consideration the following factors, based on agency site remediation program records, including but not limited to:

a) Reimbursement applies only to remediation costs incurred after the Department's written approval of the application.

b) Reimbursement shall be greater than or equal to a minimum capital investment as determined by the Department from information documented by the remediation applicant in its application.

c) Reimbursement cannot exceed 20% of the aggregate capital investment, as determined by the Department from information documented by the remediation applicant in its application.

d) Reimbursement cannot exceed the net economic benefit to the State, as determined by the Department from information documented by the remediation applicant in its application.

e) Reimbursement applies only to the costs incurred to remediate the site, not to exceed a total of $750,000. (Note: Remediation costs are to be documented to the satisfaction of the Agency through an IEPA final Assessment of Remediation Costs.)

Section 1740.70 Computation of Time for Response to Application
NOTICE OF ADOPTED RULES

Computation of any period of time prescribed by this Part shall begin with the first business day following the day on which the act, event or development initiating that period of time occurs and shall run until the end of the last day or the next business day if the last day is a Saturday, Sunday or federal or State holiday. Timeliness shall be deemed by the date of postmark or the date of hand delivery.

Section 1740.80 Confidentiality

Material submitted in the application may be subject to disclosure in response to requests received under provisions of the Freedom of Information Act [5 ILCS 140]. Information that could reasonably be considered to be proprietary, privileged or confidential commercial or financial information must be identified as such in the application. The Department will maintain the confidentiality of that information to the extent permitted by law.
ILLINOIS REGISTER

ILLINOIS TOLL HIGHWAY AUTHORITY

NOTICE OF ADOPTED AMENDMENTS

1) Heading of the Part: State Toll Highway Rules

2) Code Citation: 92 Ill. Adm. Code 2520

3) Section Numbers: Adopted Action:
   2520.110   Amend
   2520.403   Amend

4) Statutory Authority: 605 ILCS 10/10(b); 625 ILCS 5/11-603

5) Effective Date of Rulemaking: October 25, 2004

6) Does this rulemaking contain an automatic repeal date? No

7) Does this rulemaking contain incorporations by reference? No

8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.

9) Notice of Proposal Published in Illinois Register: 25 Ill. Reg. 7590; June 4, 2004

10) Has JCAR issued a Statement of Objection to these amendments? No

11) Differences between proposal and final version: The Authority included a definition of "Barrier Toll Plaza." Additionally, minor grammatical adjustments were made. Otherwise, there have been no substantive changes made between the agency's original proposal and the final version.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes


14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Rulemaking: This rulemaking, consisting of lowering the maximum speed limits at toll plaza approaches, is made in the interest of public safety in an effort to protect the Tollway's employees and patrons.
ILLINOIS TOLL HIGHWAY AUTHORITY

NOTICE OF ADOPTED AMENDMENTS

16) Information and questions regarding these adopted amendments shall be directed to:

Robert T. Lane
Assistant Attorney General
2700 Ogden Avenue
Downers Grove IL 60515

(603)241-6800x1530
Fax: (603) 271-7559

The full text of the Adopted Amendments begins on the next page:
ILLINOIS TOLL HIGHWAY AUTHORITY

NOTICE OF ADOPTED AMENDMENTS

TITLE 92: TRANSPORTATION
CHAPTER IV: ILLINOIS TOLL HIGHWAY AUTHORITY

PART 2520
STATE TOLL HIGHWAY RULES

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2520.110 Definitions

SUBPART B: GENERAL TRAFFIC RULES AND REGULATIONS

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2520.201 Use of Tollway Prohibited or Restricted
2520.202 Vehicles and Equipment Which May Be Excepted from Provisions of Section
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2520.404 Road Hazards and Construction Zones
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2520.504 Toll Collection Devices – Penalty for Breaking

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ILLINOIS TOLL HIGHWAY AUTHORITY

NOTICE OF ADOPTED AMENDMENTS

SUBPART G: General Provisions

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AUTHORITY: Implementing and authorized by the Toll Highway Act [605 ILCS 10].


SUBPART A: AUTHORITY AND DEFINITIONS
Section 2520.110  Definitions

The following words and phrases when used in this Part shall have the meanings respectively ascribed to them in this Section:

"Authority" means the Illinois State Toll Highway Authority, an instrumentality and administrative agency of the State of Illinois, formerly known as the Illinois State Toll Highway Commission.

"Authorized Emergency Vehicles" means vehicles of fire departments and police departments, ambulances, emergency vehicles of public service companies, and other vehicles approved and authorized by the Authority when performing emergency business.

"Barrier Toll Plaza" means all toll collection facilities located on the Tollway's main line and does not include ramp toll collection facilities.

"Complaint" and "Notice" means the documents or information sent by the Authority to the respondent notifying the respondent of the alleged violations.

"Department of Transportation" means the Department of Transportation of the State of Illinois.

"Final Notice" means the notice sent by the Authority to the respondent that informs the respondent of a finding of liability of the listed charges that has been entered against the respondent.

"Hazardous Materials" means and includes explosives, radioactive materials, etiologic agents, and other dangerous materials, as defined in 18 USC 831, including flammable liquids.

"Hearing" means a formal hearing conducted by the Authority or appointed Hearing Officer, to determine whether a violation of the Toll Highway Act and/or any of its rules and regulations promulgated thereto exists.


"I-PASS" means electronic toll collection.
"I-PASS All Lanes" means that, in addition to regular toll collection equipment and toll booths, all lanes are also "I-PASS" equipped.

"I-PASS Only Lanes" means that those lanes are restricted to cars and smaller, \textit{vehicles} and to dual wheeled vehicles that have "I-PASS" transponders.

"I-PASS Express Lanes" means that those lanes are restricted to vehicles with "I-PASS" transponders.

"Motor Driven Cycles" means every motorcycle or motor scooter with less than 150 cubic centimeter piston displacement, including motorized pedalcycles.

"Oases" means the portions of the Tollway Right-of-Way occupied by restaurants, buildings and service stations, and adjacent parking and landscaped areas.

"Person" means any individual, firm, corporation, cooperative, association, trust, partnership, joint venture or other legally recognized entity.

"Respondent" means any person charged with violating the Tollway Highway Act.

"Right-of-Way" means the entire area of the Tollway within the fence lines (or the barrier walls, where no fence exists), including but not limited to the roadways, shoulders, plazas, and landscaped areas. The right-of-way does not include property declared "excess property" or leased as declared by the Board and it does not include the maintenance buildings, Central Administration building or other buildings and their parking lots.

"Toll" means the fixed compensation to be paid to the Authority for the privilege of using the Tollway or any part thereof.

"Toll Highway Act" means 605 ILCS 10.

"Toll Plaza" means any toll collection facility located upon the Tollway, including manned toll booths and/or automatic toll collection machines.

"Tollway" means any and all toll highways operated and maintained by the Authority pursuant to State and federal laws as well as any and all intergovernmental agreements by and between the Authority and other governmental entities.
"Traffic Control Devices" means all signs, signals, markings and devices, including but not limited to barricades and traffic cones, placed or erected by the Authority or its agents for the purpose of regulating, warning, or guiding traffic.

"Traffic Lanes" are the lanes designated for vehicular travel on the Tollway which shall be designated numerically, within the extreme left lane of each directional roadway being numbered "Lane No. 1", and each lane to the right of Lane No. 1 carrying traffic in the same direction being numbered consecutively."

"Traffic Lanes" are the lanes designated for vehicular travel on the Tollway which shall be designated numerically, within the extreme left lane of each directional roadway being numbered "Lane No. 1", and each lane to the right of Lane No. 1 carrying traffic in the same direction being numbered consecutively."

"Truck I-PASS/Mixed Use Lanes" means lanes primarily intended for trucks only, which may be converted for us by all vehicles with I-PASS Transponders.

"Truck I-PASS Only Lanes" means lanes restricted for use by commercial vehicles as defined in the Illinois Motor Vehicle Code at 625 ILCS 5/1-111.8.

"Violation" or "Toll Evasion" means one or more acts prohibited by the Toll Highway Act and/or any rules or regulations relating to the payment or failure to pay tolls.

Any and all terms that are not specifically defined in this Section shall have the meanings ascribed to them in the Illinois Vehicle Code and the Toll Highway Act.

(Source: Amended at 28 Ill. Reg. 14530, effective October 25 2004)

SUBPART D: SPEED RESTRICTIONS

Section 2520.403 Maximum Speed Limits for Designated I-PASS Lanes, Service Areas, Parking Areas, Access Roads and Ramps, and Barrier Toll Plaza Approaches

a) The maximum speed limit for I-PASS Only electronic toll collection lanes shall be 30 m.p.h. or as otherwise posted.

b) The maximum speed limit for I-PASS Express electronic toll collection lanes shall be 55 m.p.h., or as otherwise posted.

c) The maximum speed limit for Truck I-PASS Only or Mixed Use (Car & Truck) electronic toll collection lanes shall be 5 m.p.h. or as otherwise posted.

d) The maximum speed limit for all vehicles in service areas, parking areas and
e) The maximum speed limit for all vehicles in approaches to Barrier Toll Plazas shall be as follows:

- 45 miles per hour approximately ½ mile south of 83rd Street Toll Plaza – Plaza 39 (M.P. 19.0 NB)
- 45 miles per hour approximately ½ mile north of 82nd Street Toll Plaza – Plaza 36 (M.P. 20.5 SB)
- 45 miles per hour approximately ½ mile south of Cermak Toll Plaza – Plaza 35 (M.P. 25.5 NB)
- 45 miles per hour approximately ½ mile north of Cermak Toll Plaza – Plaza 35 (M.P. 30.5 SB)
- 45 miles per hour approximately ½ mile north of Irving Park Toll Plaza – Plaza 33 (M.P. 39.5 SB)
- 45 miles per hour approximately ½ mile south of Touhy Avenue Toll Plaza – Plaza 29 (M.P. 41.3 NB)
- 55 miles per hour approximately 2 miles north of Waukegan Toll Plaza – Plaza 21 (M.P. 75.5 SB)
- 45 miles per hour approximately ½ mile north of Waukegan Toll Plaza – Plaza 21 (M.P. 74.0 SB)
- 45 miles per hour approximately ½ mile south of Waukegan Toll Plaza – Plaza 21 (M.P. 73.0 NB)
- 45 miles per hour approximately ½ mile east of Elgin Toll Plaza – Plaza 9 (M.P. 24.5 WB)
- 45 miles per hour approximately ½ mile west of Elgin Toll Plaza – Plaza 9 (M.P. 25.5 EB)
- 45 miles per hour approximately ½ mile west of Marengo-Hampshire Toll Plaza – Plaza 7 (M.P. 41.5 EB)
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- 45 miles per hour approximately ½ mile east of Marengo-Hampshire Toll Plaza – Plaza 7 (M.P. 40.5 WB)
- 55 miles per hour approximately 2 miles east of Marengo-Hampshire Toll Plaza – Plaza 7 (M.P. 39.0 WB)
- 55 miles per hour approximately 2 miles west of Marengo-Hampshire Toll Plaza – Plaza 7 (M.P. 43.0 EB)
- 45 miles per hour approximately ½ mile east of Belvidere Toll Plaza – Plaza 5 (M.P. 55.0 WB)
- 45 miles per hour approximately ½ mile west of Belvidere Toll Plaza – Plaza 5 (M.P. 56.0 EB)
- 55 miles per hour approximately 2 miles east of Belvidere Toll Plaza – Plaza 5 (M.P. 53.5 WB)
- 55 miles per hour approximately 2 miles west of Belvidere Toll Plaza – Plaza 5 (M.P. 57.5 EB)
- 45 miles per hour approximately ½ mile east of South Beloit Toll Plaza – Plaza 1 (M.P. 75.0 WB)
- 45 miles per hour approximately ½ mile west of South Beloit Toll Plaza – Plaza 1 (M.P. 76.0 EB)
- 55 miles per hour approximately 2 miles east of South Beloit Toll Plaza – Plaza 1 (M.P. 73.5 WB)
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- 45 miles per hour approximately ½ mile east of Devon Avenue Toll Plaza – Plaza 17 (M.P. 1.2 WB)
- 45 miles per hour approximately ½ mile west of River Road Toll Plaza – Plaza 19 (M.P. 1.1 EB)
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45 miles per hour approximately ½ mile east of York Toll Plaza – Plaza 51 (M.P. 138.7 WB)

45 miles per hour approximately ½ mile west of York Toll Plaza – Plaza 51 (M.P. 137.5 EB)

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45 miles per hour approximately ½ mile east of Dixon Toll Plaza – Plaza 69 (M.P. 53.9 WB)

45 miles per hour approximately ½ mile west of Dixon Toll Plaza – Plaza 69 (M.P. 54.8 EB)

55 miles per hour approximately 2 miles east of Dixon Toll Plaza – Plaza 69 (M.P. 52.3 WB)

55 miles per hour approximately 2 miles west of Dixon Toll Plaza – Plaza 69 (M.P. 56.3 EB)

(Source: Amended at 28 Ill. Reg. 14530, effective October 25, 2004)
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1) Heading of the Part: Medical Assistance Programs

2) Code Citation: 89 Ill. Adm. Code 120

3) Section Number: Adopted Action:
   120.80 Amendment

4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-13]

5) Effective Date of Amendment: November 1, 2004

6) Does this rulemaking contain an automatic repeal date? No

7) Does this rulemaking contain incorporations by reference? No

8) A copy of the adopted amendment, including any materials incorporated by reference, is on file in the agency's principal office and is available for public inspection.

9) Notice of Proposal Published in Illinois Register: June 4, 2004 (28 Ill. Reg. 7592)

10) Has JCAR issued a Statement of Objection to this rulemaking? No

11) Differences Between Proposal and Final Version: No changes have been made to this proposed rulemaking.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes

13) Will this amendment replace any emergency amendments currently in effect? No

14) Are there any other amendments pending on this Part? Yes

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15) Summary and Purpose of Amendment: This rulemaking prohibits medical assistance recipients who have been identified by the Department under the Recipient Restriction

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Program (RRP) from participation in Managed Care Organizations (MCOs). The RRP identifies recipients who unnecessarily utilize medical services. Such persons are then restricted to a Department selected primary care provider and/or primary care pharmacy for a minimum of four full quarters. Since MCO participants are not restricted to specific providers, recipients in MCOs who are selected for restriction under the RRP must be prohibited from enrolling in an MCO, and those who are already enrolled in an MCO must be disenrolled.

16) Information and questions regarding this adopted amendment shall be directed to:

Joanne Scattoloni  
Office of the General Counsel, Rules Section  
Illinois Department of Public Aid  
201 South Grand Avenue East, Third Floor  
Springfield, Illinois  62763-0002  
(217) 524-0081

The full text of the Adopted Amendment begins on the next page:
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TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER b: ASSISTANCE PROGRAMS

PART 120
MEDICAL ASSISTANCE PROGRAMS

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Section 120.1 Incorporation by Reference

SUBPART B: ASSISTANCE STANDARDS

Section
120.10 Eligibility For Medical Assistance
120.11 MANG(P) Eligibility
120.12 Healthy Start – Medicaid Presumptive Eligibility Program For Pregnant Women
120.14 Presumptive Eligibility for Children
120.20 MANG(AABD) Income Standard
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120.32 KidCare Parent Coverage Waiver Eligibility and Income Standard
120.40 Exceptions To Use Of MANG Income Standard
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SUBPART C: FINANCIAL ELIGIBILITY DETERMINATION

Section
120.60 Cases Other Than Long Term Care, Pregnant Women and Certain Children
120.61 Cases in Intermediate Care, Skilled Nursing Care and DMHDD – MANG(AABD) and All Other Licensed Medical Facilities
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120.63 Department of Mental Health and Developmental Disabilities (DMHDD) Approved Home and Community Based Residential Settings
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SUBPART D: MEDICARE PREMIUMS

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SUBPART E: RECIPIENT RESTRICTION PROGRAM

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Section
120.90 Migrant Medical Program (Repealed)
120.91 Income Standards (Repealed)

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Section
120.200 Elimination Of Aid To The Medically Indigent
120.208 Client Cooperation (Repealed)
120.210 Citizenship (Repealed)
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120.225 Social Security Numbers (Repealed)
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120.TABLE B Life Expectancy

AUTHORITY: Implementing Articles III, IV, V and VI and authorized by Section 12-13 of the
Illinois Public Aid Code [305 ILCS 5/Arts. III, IV, V and VI and 12-13].

SOURCE: Filed effective December 30, 1977; peremptory amendment at 2 Ill. Reg. 17, p. 117,
effective February 1, 1978; amended at 2 Ill. Reg. 31, p. 134, effective August 5, 1978;
emergency amendment at 2 Ill. Reg. 37, p. 4, effective August 30, 1978, for a maximum of 150
days; peremptory amendment at 2 Ill. Reg. 46, p. 44, effective November 1, 1978; peremptory
amendment at 2 Ill. Reg. 46, p. 56, effective November 1, 1978; emergency amendment at 3 Ill.
Reg. 16, p. 41, effective April 9, 1979, for a maximum of 150 days; emergency amendment at 3 Ill.
Reg. 28, p. 182, effective July 1, 1979, for a maximum of 150 days; amended at 3 Ill. Reg.
33, p. 399, effective August 18, 1979; amended at 3 Ill. Reg. 33, p. 415, effective August 18,
1979; amended at 3 Ill. Reg. 38, p. 243, effective September 21, 1979; peremptory amendment at
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SUBPART E: RECIPIENT RESTRICTION PROGRAM

Section 120.80 Recipient Restriction Program

a) The Recipient Restriction Program (RRP) shall identify recipients who unnecessarily utilize medical services. When the Department determines, on the basis of statistical norms and the medical judgment of physicians and/or pharmacologists, that a Medicaid recipient has received medical services that are not medically necessary based on the recipient's diagnoses and/or medical condition or conditions or in such a manner as to constitute an abuse of medical privileges, the decision to restrict a recipient to a Primary Care Provider and/or Primary Care Pharmacy will be made. RRP applies to all medical assistance programs administered by the Department.

b) Primary and Secondary Sources of Recipient Identification

1) The primary source of recipient identification shall be the Surveillance and Utilization Review Subsystem (SURS) of the Medicaid Management Information System (MMIS). On a quarterly basis, SURS analyzes the entire Medicaid population, determines medical usage per recipient and will identify recipients with usages in excess of the quarterly established norm of recipients in the same category of assistance and like demographic areas.

2) Secondary sources of identification shall be incoming referrals, such as referrals from medical providers, law enforcement officials or members of the general public. All referrals shall be reviewed and analyzed. Recipients found to have loaned or altered their medical cards for the purpose of obtaining medical benefits for which they or other persons are not legitimately entitled; falsely represented medical coverage; found in possession of blank or forged prescription pads; or who knowingly assisted providers in rendering excessive services or defrauding the Medical Assistance Program shall be restricted.
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c) Once a recipient is identified, medical usage based on diagnoses and/or medical condition for the nine months preceding identification shall be reviewed. Medical Assistance Consultants, licensed physicians and/or pharmacologists will determine if the recipient should be restricted due to the medical services received being not medically necessary. The Department shall initially designate, without regard to choice, a Primary Care Provider and/or Primary Care Pharmacy or Health Maintenance Organization (HMO). The Department's designation shall remain in effect for the entire period of the restriction unless the recipient changes this designation pursuant to subsection (f) of this Section. Each recipient to be restricted will be notified in writing. This notice will also contain a statement relating to the medical necessity of services consistent with the findings of the professional consultants; a statement advising the recipient of his or her right to appeal; and a toll-free number to call for information.

d) Department Designated Primary Care Provider and/or Primary Care Pharmacy or HMO

1) The Department will select one provider and/or one pharmacy or HMO in reasonable geographical proximity to the recipient's home to serve as the recipient's Primary Care Provider and/or Primary Care Pharmacy or HMO.

2) The primary care physician shall be a medical doctor or doctor of osteopathy, licensed to practice medicine in all its branches, or a clinic enrolled to provide primary care; a properly registered Medicaid provider in good standing with the Department per the physician registration; enrolled to provide physician services with the Department; and willing to serve as the primary care provider.

e) Types of Services Provided or Authorized

1) Once restricted, the Recipient Eligibility Verification (REV) system shall display information regarding the Primary Care Provider and/or Primary Care Pharmacy or HMO. REV will also display information that emergency services will not be restricted. If restricted to a Primary Care Provider, the Primary Care Provider must provide or authorize the following non-emergency ambulatory care services for the restricted recipient before the Department will render payment for the services:

A) Clinic
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B) Laboratory

C) Outpatient Hospital

D) Pharmacy

E) Physician

2) The Primary Care Pharmacy or HMO must supply all prescriptions. Authorization to obtain non-emergency prescriptions from any other source will only be approved in such instances when a specific item is not part of the Primary Care Pharmacy's or HMO's inventory and cannot be acquired through the Primary Care Pharmacy or HMO.

3) Other covered services may be provided by a qualified provider in the Department's Medical Program.

f) Changing the Designated Primary Care Provider and/or Primary Care Pharmacy or HMO

1) The recipient may change the Department's initial designation of a Primary Care Provider or Primary Care Pharmacy or Health Maintenance Organization once without cause. The request for change must be submitted to the Department in writing. The Department, by notice, shall inform the recipient how to request a change in Primary Care Provider or Primary Care Pharmacy or HMO.

2) The recipient may change his or her designated provider for cause if one of the following circumstances is verified:

A) Change of recipient's residence from the geographic area of the Primary Care Provider or Primary Care Pharmacy or HMO;

B) Change in the recipient's medical condition which the Primary Care Provider is unable to treat or refer to another provider;

C) Death of the Primary Care Provider;

D) Disenrollment of the Primary Care Provider and/or Primary Care Pharmacy or HMO from the Medical Assistance Program; and
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E) Notice from the Primary Care Provider and/or Primary Care Pharmacy or HMO that they will no longer serve as the Primary Care Provider.

3) The Department will notify the recipient in writing if the Primary Care Provider and/or Primary Care Pharmacy or HMO has disenrolled as a provider of Medicaid services or if the provider notifies the Department of their unwillingness to continue to serve as the recipient's Primary Care Provider.

4) Changes in designated Primary Care Provider and/or Primary Care Pharmacy or HMO shall be processed effective with the earliest possible date reflected on the eligibility file.

5) For the provider or pharmacy or HMO, the Department will determine if the requested change meets the criteria in subsection (d) of this Section.

g) Length of Restriction

1) Once recipients are restricted they remain in restriction for a minimum of four full quarters. If restricted recipients transfer to a different assistance unit, the restriction will be processed to follow the recipient. If a restricted recipient becomes inactive and is subsequently reactivated, the restriction will be reactivated until such time as four full quarters have elapsed.

2) Reevaluation of the Recipient's Medical Usage

A) When a recipient has had his or her medical card restricted for four full quarters, the Department shall reevaluate the recipient's medical usage to determine whether the recipient continues to receive medical services that are not medically necessary. The Department shall evaluate each case not later than eighteen months after the effective date of restriction. If the recipient is still receiving medical services that are not medically necessary, the restriction shall be continued for an additional period of eight full quarters. This additional period of eight full quarters shall begin with the first month immediately following the end of the first four full quarter restriction period. If the recipient no longer is receiving medical services that are not medically necessary, the
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restriction shall be discontinued. A "quarter", for purposes of this Section, shall be defined as one of the following three-month periods of time: January-March, April-June, July-September or October-December.

B) If necessary to determine if medical services that are not medically necessary are still being received, the Department shall obtain a complete copy of the recipient's medical record from the Primary Care Provider. The medical record will be reviewed by the Medical Assistant Consultant with a final determination by a licensed physician and/or pharmacologist to determine if the medical services received were medically necessary.

C) If the decision is to release the recipient from restriction, such release will be processed effective with the earliest possible date reflected on the eligibility file.

D) If the services are determined to be medically unnecessary, the recipient will be notified in writing of the continued restriction. The Department may designate a different Primary Care Physician and/or Primary Care Pharmacy or Health Maintenance Organization. The criteria in subsection (d) of this Section shall apply. This notice will also contain a statement relating to the medical necessity of services consistent with the findings of the professional consultants; a statement advising the recipient of his or her right to appeal; and a toll-free number to call for information.

3) If the restriction is continued, a review will be conducted in accordance with subsection (g)(2) of this Section, subsequent to the additional eight quarter period.

4) A recipient who has been restricted under this Section, is released and then is restricted under this Section a subsequent time, shall be restricted for a period of eight full quarters. Subsequent to this eight quarter period, a review will be conducted in accordance with subsection (g)(2) of this Section.

h) Recipients have the right to appeal inclusion in the program. (See 89 Ill. Adm. Code 102.80 through 102.84.)
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i) **Any recipient in** the RRP is not permitted to enroll in a Managed Care Organization (MCO).

j) **Any recipient designated by the Department for restriction in the RRP who is, at that time, enrolled in an MCO will be disenrolled from the MCO upon the RRP designation.**

(Source: Amended at 28 Ill. Reg. 14541, effective November 1, 2004)
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1) **Heading of the Part:** Hospital Services

2) **Code Citation:** 89 Ill. Adm. Code 148

3) **Section Numbers:**
   - 148.85 New Section
   - 148.90 New Section
   - 148.95 New Section
   - 148.100 New Section
   - 148.103 New Section
   - 148.110 New Section
   - 148.112 New Section
   - 148.310 Amendment

4) **Statutory Authority:** Section 12-13 of the Illinois Public Aid Code [305 ILCS 5/12-13] and Public Act 93-0659

5) **Effective Date of Amendments:** October 27, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain incorporations by reference?** No

8) A copy of the adopted amendments, including any materials incorporated by reference, is on file in the agency’s principal office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** April 9, 2004; 28 Ill. Reg. 5808

10) **Has JCAR issued a Statement of Objection to these amendments?** No

11) **Differences Between Proposal and Final Version:** No substantive changes have been made.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR?** Yes

13) **Will this rulemaking replace any emergency amendments currently in effect?** Yes

14) **Are there any other amendments pending on this Part?** Yes
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15) **Summary and Purpose of Amendments:** This rulemaking concerning hospital services was filed pursuant to Public Act 93-0659 under which a number of new quarterly rate adjustment programs are being established to improve access to hospital services. The amendments describe the eligibility requirements and rate methodology for each rate adjustment. The new programs include:

- Supplemental Tertiary Care Adjustment Payments,
- Medicaid Inpatient Utilization Rate (MIUR) Adjustment Payments,
- Medicaid Outpatient Utilization Rate (MOUR) Adjustment Payments,
- Outpatient Rural Hospital Adjustment Payments,
- Outpatient Service Adjustment Payments,
- Psychiatric Base Rate Adjustment Payments, and
- High Volume Adjustment Payments.

The amendments to Section 148.310 add rate review provisions for each of the new rate adjustment programs.

16) **Information and questions regarding these adopted amendments shall be directed to:**

Joanne Scattoloni  
Office of the General Counsel, Rules Section  
Illinois Department of Public Aid  
201 South Grand Avenue East, Third Floor  
Springfield, Illinois 62763-0002

(217) 524-0081

The full text of the Adopted Amendments begins on the next page:
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TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER d: MEDICAL PROGRAMS

PART 148
HOSPITAL SERVICES

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148.25 Definitions and Applicability
148.30 General Requirements
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SOURCE: Sections 148.10 thru 148.390 recodified from 89 Ill. Adm. Code 140.94 thru 140.398 at 13 Ill. Reg. 9572; Section 148.120 recodified from 89 Ill. Adm. Code 140.110 at 13 Ill. Reg. 12118; amended at 14 Ill. Reg. 2553, effective February 9, 1990; emergency amendment at 14 Ill. Reg. 11392, effective July 1, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 18293, effective November 8, 1990, for a maximum of 150 days; emergency expired November 30, 1991; emergency amendment at 16 Ill. Reg. 11942, effective July 10, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14778, effective October 1, 1992, for a maximum of
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SUBPART B: REIMBURSEMENT AND RELATED PROVISIONS

Section 148.85 Supplemental Tertiary Care Adjustment Payments
a) Qualifying Criteria. Supplemental Tertiary Care Adjustment Payments, as described in subsection (b) of this Section, shall be made to all qualifying Illinois hospitals. An Illinois hospital shall qualify for payment if it was deemed eligible for payments under the Tertiary Care Adjustment Payments for State fiscal year 2003, as described in Section 148.296, excluding:

1) County-owned hospitals as described in Section 148.25(b)(1)(A).

2) Hospitals organized under the University of Illinois Hospital Act [110 ILCS 330], as described in Section 148.25(b)(1)(B).

3) A hospital owned or operated by a State agency, as described in Section 148.25(b)(6).

b) Supplemental Tertiary Care Adjustment Payments

1) For the supplemental tertiary care adjustment period occurring in State fiscal year 2004, total payments will equal the State fiscal year 2003 tertiary care adjustment payment, as defined in Section 148.296, and shall be paid to the hospital on or before June 15, 2004.

2) For the supplemental tertiary care adjustment period occurring in State fiscal year 2005, total payments will equal the State fiscal year 2003 tertiary care adjustment payment, as defined in Section 148.296 and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.

c) "Supplemental Tertiary Care Adjustment Period" means, beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12-month period beginning July 1 of the year and ending June 30 of the following year.

d) Payment Limitations: Payments under this Section are not due and payable until:

1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;
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2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.

(Source: Added at 28 Ill. Reg. 14557, effective October 27, 2004)

Section 148.90 Medicaid Inpatient Utilization Rate (MIUR) Adjustment Payments

Heart Transplants (Repealed)

a) Qualifying Criteria. Medicaid Inpatient Utilization Rate (MIUR) Adjustment Payments as described in subsection (b) of this Section shall be made to an Illinois hospital, excluding hospitals described in 89 Ill. Adm. Code 140.80(j).

b) MIUR Adjustment Payments

1) Each qualifying hospital will receive a payment equal to the product of:

   A) The quotient of:

      i) $57.25

      ii) divided by the greater of the hospital's MIUR or 1.6 percent, and

   B) The hospital's Medicaid inpatient days in the MIUR base period.

2) For a hospital that files a combined Medicaid cost report with another hospital after January 1, 2001, and then subsequently closes, the payment described in subsection (b)(1) of this Section shall be multiplied by a fraction, the numerator of which is the number of occupied bed days attributable to the open hospital and the denominator of which is the sum of the occupied bed days of each open hospital and each closed hospital.

3) Payments will be the lesser of the calculation described in subsection (b)(1) or (b)(2) of this Section or $10,500,000.

c) Payment to a Qualifying Hospital

1) For the MIUR adjustment period occurring in State fiscal year 2004, total
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payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital on or before June 15, 2004.

2) For the MIUR adjustment period occurring in State fiscal year 2005, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.

d) Definitions

1) "MIUR base period" means the 12-month period beginning on July 1, 2000 and ending on June 30, 2001.

2) "MIUR adjustment period means", beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12 month period beginning July 1 of the year and ending June 30 of the following year.

3) "Medicaid inpatient days" means, for a given hospital, the sum of days of inpatient hospital service provided to recipients of medical assistance under Title XIX of the federal Social Security Act, excluding days for individuals eligible for Medicare under Title XVIII of that Act (Medicaid/Medicare crossover days), as tabulated from the Department's paid claims data for admissions occurring in the MIUR base period that were adjudicated by the Department through June 30, 2002.

4) "MIUR", for a given hospital, has the meaning as defined in Section 148.120(k)(4) and shall be determined in accordance with Section 148.120(c) and (f). For purposes of this Section, the MIUR determination that was used to determine a hospital's eligibility for Disproportionate Share Hospital Adjustment payments in rate year 2003 shall be the MIUR used in the MIUR adjustment.

5) "Occupied bed days" means the sum of the number of days that each bed was occupied by a patient for all beds during calendar year 2001, as reported by each hospital on the Annual Survey of Hospitals conducted by the Department of Public Health. If the sum of a hospital's occupied bed days is not reported on the Annual Survey of Hospitals, then the Department may obtain the sum of occupied bed days from any source.
available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

e) Payment Limitations: Payments under this Section are not due and payable until:

1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;

2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.

(Source: Old Section repealed at 16 Ill. Reg. 6255, effective March 27, 1992; new Section added at 28 Ill. Reg. 14557, effective October 27, 2004)

Section 148.95 Medicaid Outpatient Utilization Rate (MOUR) Adjustment Payments

a) Qualifying Criteria. Medicaid Outpatient Utilization Rate (MOUR) Adjustment Payments, as described in subsection (b) of this Section, shall be made to an Illinois hospital, excluding hospitals described in 89 Ill. Adm. Code 140.80(j).

b) MOUR Adjustment Payments

1) Each qualifying hospital will receive a payment equal to the product of:

A) The quotient of:

i) the hospital's Medicaid outpatient charges in the MOUR base period

ii) divided by the greater of the hospital's MOUR or 1.6 percent, and

B) 2.45 percent.

2) For a hospital that files a combined Medicaid cost report with another hospital after January 1, 2001, and then subsequently closes, the payment
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described in subsection (b)(1) of this Section shall be multiplied by a fraction, the numerator of which is the number of occupied bed days attributable to the open hospital and the denominator of which is the sum of the occupied bed days of each open hospital and each closed hospital.

3) Payments will be the lesser of the calculation described in subsection (b)(1) or (b)(2) of this Section or $6,750,000.

c) Payment to a Qualifying Hospital

1) For the MOUR adjustment period occurring in State fiscal year 2004, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital on or before June 15, 2004.

2) For the MOUR adjustment period occurring in State fiscal year 2005, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.

d) Definitions

1) "Total outpatient charges" means, for a given hospital, the gross outpatient revenue as reported on form CMS 2552-96, Worksheet G-2, Part I, row 25, column 2, for hospital fiscal years ending in calendar year 2001 filed in the March 2003 release of the Healthcare Cost Reporting Information System (HCRIS). If information was not available for hospitals on the HCRIS, the Department may obtain the gross outpatient charges from any source available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

2) "MOUR base period" means the 12-month period beginning on July 1, 2000 and ending on June 30, 2001.

3) "MOUR adjustment period" means, beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12 month period beginning July 1 of the year and ending June 30 of the following year.
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4) "MOUR", for a given hospital, means the ratio of Medicaid outpatient charges to total outpatient charges.

5) "Medicaid outpatient charges" means, for a given hospital, the sum of charges for ambulatory procedure listing services as described in Section 148.140(b), excluding charges for individuals eligible for Medicare under Title XVIII of the Social Security Act (Medicaid/Medicare crossover charges), as tabulated from the Department's paid claims data for services occurring in the MOUR base year that were adjudicated by the Department through September 12, 2003.

6) "Occupied bed days" means the sum of the number of days that each bed was occupied by a patient for all beds during calendar year 2001, as reported by each hospital on the Annual Survey of Hospitals conducted by the Department of Public Health. If the sum of a hospital's occupied bed days is not reported on the Annual Survey of Hospitals, then the Department of Public Aid may obtain the sum of occupied bed days from any source available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

e) Payment Limitations: Payments under this Section are not due and payable until:

1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;

2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.

(Source: Added at 28 Ill. Reg. 14557, effective October 27, 2004)

Section 148.100 Outpatient Rural Hospital Adjustment Payments Liver Transplants (Repealed)
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a) Qualifying Criteria. Outpatient Rural Hospital Adjustment Payments, as described in subsection (b) of this Section, shall be made to qualifying Illinois rural hospitals, as described in Section 148.25(g)(3), excluding:

1) County-owned hospitals as described in Section 148.25(b)(1)(A).

2) Hospitals organized under the University of Illinois Hospital Act [110 ILCS 330], as described in Section 148.25(b)(1)(B).

3) A hospital owned or operated by a State agency, as described in Section 148.25(b)(6).

b) Outpatient Rural Hospital Adjustment Payments

1) Each qualifying hospital's outpatient services for the outpatient rural base period will be divided by the sum of all qualifying hospitals' outpatient services for the outpatient rural base period.

2) This ratio will be multiplied by $14,500,000 to determine the hospital's Outpatient Rural Hospital Adjustment Payment.

3) For a hospital that files a combined Medicaid cost report with another hospital after January 1, 2001, and then subsequently closes, the payment described in subsection (b)(2) of this Section shall be multiplied by a fraction, the numerator of which is the number of occupied bed days attributable to the open hospital and the denominator of which is the sum of the occupied bed days of each open hospital and each closed hospital.

c) Payment to a Qualifying Hospital

1) For the outpatient rural hospital adjustment period occurring in State fiscal year 2004, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital on or before June 15, 2004.

2) For the outpatient rural hospital adjustment period occurring in State fiscal year 2005, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.
d) Definitions

1) "Occupied bed days" means the sum of the number of days that each bed was occupied by a patient for all beds during calendar year 2001, as reported by each hospital on the Annual Survey of Hospitals conducted by the Department of Public Health. If the sum of a hospital's occupied bed days is not reported on the Annual Survey of Hospitals, then the Department may obtain the sum of occupied bed days from any source available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

2) "Outpatient rural base period" means the 12-month period beginning on July 1, 2000 and ending on June 30, 2001.

3) "Outpatient rural adjustment period" means, beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12-month period beginning July 1 of the year and ending June 30 of the following year.

4) "Outpatient services" means, for a given hospital, the sum of ambulatory procedure listing services as described in Section 148.140(b), excluding services for individuals eligible for Medicare under Title XVIII of the Social Security Act (Medicaid/Medicare crossover services), as tabulated from the Department's paid claims data for services occurring in the outpatient rural base period that were adjudicated by the Department through September 12, 2003.

e) Payment Limitations: Payments under this Section are not due and payable until:

1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;

2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.
Section 148.103 Outpatient Service Adjustment Payments

a) Qualifying Criteria. Outpatient Service Adjustment Payments, as described in subsection (b) of this Section, shall be made to all Illinois hospitals excluding:

1) County-owned hospitals as described in Section 148.25(b)(1)(A).

2) Hospitals organized under the University of Illinois Hospital Act [110 ILCS 330], as described in Section 148.25(b)(1)(B).

3) A hospital owned or operated by a State agency, as described in Section 148.25(b)(6).

b) Outpatient Service Adjustment Payments

1) An average hospital specific outpatient service rate for the outpatient service base period will be calculated by taking the total payments for outpatient services divided by total outpatient services.

2) The average hospital specific outpatient service rate will be multiplied by 75.5 percent and then multiplied by the outpatient services.

3) For a hospital that files a combined Medicaid cost report with another hospital after January 1, 2001, and then subsequently closes, the payment described in subsection (b)(2) of this Section shall be multiplied by a fraction, the numerator of which is the number of occupied bed days attributable to the open hospital and the denominator of which is the sum of the occupied bed days of each open hospital and each closed hospital.

4) Outpatient Service Adjustment Payments will be the lesser of the amount determined in subsection (b)(2) or (b)(3) of this Section or $3,000,000.

c) Payment to a Qualifying Hospital

1) For the outpatient service adjustment period occurring in State fiscal year 2004, total payments will equal the methodologies described in subsection
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(b) of this Section and shall be paid to the hospital on or before June 15, 2004.

2) For the outpatient service adjustment period occurring in State fiscal year 2005, total annual payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.

d) Definitions

1) "Occupied bed days" means the sum of the number of days that each bed was occupied by a patient for all beds during calendar year 2001, as reported by each hospital on the Annual Survey of Hospitals conducted by the Department of Public Health. If the sum of a hospital's occupied bed days is not reported on the Annual Survey of Hospitals, then the Department may obtain the sum of occupied bed days from any source available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

2) "Outpatient service base period" means the 12-month period beginning on July 1, 2000 and ending on June 30, 2001.

3) "Outpatient service adjustment period" means, beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12-month period beginning July 1 of the year and ending June 30 of the following year.

4) "Outpatient services" means, for a given hospital, the sum of ambulatory procedure listing services as described in Section 148.140(b), excluding services for individuals eligible for Medicare under Title XVIII of the Social Security Act (Medicaid/Medicare crossover services), as tabulated from the Department's paid claims data for services occurring in the outpatient service base period that were adjudicated by the Department through September 12, 2003.

e) Payment Limitations: Payments under this Section are not due and payable until:
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1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;

2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.

(Source: Added at 28 Ill. Reg. 14557, effective October 27, 2004)

Section 148.110 Psychiatric Base Rate Adjustment Payments

Bone Marrow Transplants

(Repealed)

a) Qualifying Criteria

1) Psychiatric Base Rate Adjustment Payments, as described in subsection (b)(1) of this Section, shall be made to an Illinois general acute care hospital that has a distinct part psychiatric unit, excluding:

   A) County-owned hospitals as described in Section 148.25(b)(1)(A).

   B) Hospitals organized under the University of Illinois Hospital Act [110 ILCS 330], as described in Section 148.25(b)(1)(B).

   C) A hospital owned or operated by a State agency, as described in Section 148.25(b)(6).

2) Psychiatric Base Rate Adjustment Payments described in subsection (b)(2) of this Section shall be made to an Illinois general acute care hospital that has a distinct part psychiatric unit, excluding hospitals described in 89 Ill. Adm. Code 140.80(j).

b) Psychiatric Base Rate Adjustment Payments

1) For a hospital qualifying under subsection (a)(1) of this Section, the Department shall pay an amount equal to $400.00 less the hospital's per diem rate for Medicaid inpatient psychiatric services in effect on October 1, 2003, multiplied by the number of Medicaid inpatient psychiatric days.
provided in the psychiatric base rate period. In no event, however, shall that amount be less than zero.

2) For a hospital qualifying under subsection (a)(2) of this Section, whose inpatient psychiatric per diem rate in effect on October 1, 2003 is greater than $400.00, the Department shall pay an amount equal to $25.00 multiplied by the number of Medicaid inpatient psychiatric days provided in the psychiatric base rate period.

3) For a hospital that files a combined Medicaid cost report with another hospital after January 1, 2001, and then subsequently closes, the payment described in subsection (b)(1) or (b)(2) shall be multiplied by a fraction, the numerator of which is the number of occupied bed days attributable to the open hospital and the denominator of which is the sum of the occupied bed days of each open hospital and each closed hospital.

c) Payment to a Qualifying Hospital

1) For the psychiatric base rate adjustment period occurring in State fiscal year 2004, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital on or before June 15, 2004.

2) For the psychiatric base rate adjustment period occurring in State fiscal year 2005, total payments will equal the methodologies described in subsection (b) of this Section and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.

d) Limitations: Hospitals that qualify for Psychiatric Base Rate Adjustment Payments shall not be eligible for the total Psychiatric Base Rate Adjustment Payment if, during the psychiatric base rate adjustment period, the hospital no longer operates the psychiatric distinct part unit.

e) Definitions

1) "Psychiatric base rate period" means the 12-month period beginning on July 1, 2000 and ending on June 30, 2001.
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2) "Psychiatric base rate adjustment period" means, beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12-month period beginning July 1 of the year and ending June 30 of the following year.

3) "Medicaid inpatient psychiatric days" means, for a given hospital, the sum of days of inpatient psychiatric hospital service provided to recipients of medical assistance under Title XIX of the federal Social Security Act, excluding days for individuals eligible for Medicare under Title XVIII of that Act (Medicaid/Medicare crossover days), as tabulated from the Department's paid claims data for admissions occurring in the psychiatric base period that were adjudicated by the Department through June 30, 2002.

4) "Occupied bed days" means the sum of the number of days that each bed was occupied by a patient for all beds during calendar year 2001, as reported by each hospital on the Annual Survey of Hospitals conducted by the Department of Public Health. If the sum of a hospital's occupied bed days is not reported on the Annual Survey of Hospitals, then the Department may obtain the sum of occupied bed days from any source available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

f) Payment Limitations: Payments under this Section are not due and payable until:

1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;

2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.

(Source: Old Section repealed at 16 Ill. Reg. 6255, effective March 27, 1992; new Section added at 28 Ill. Reg. 14557, effective October 27, 2004)

Section 148.112 High Volume Adjustment Payments
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a) Qualifying criteria. High Volume Adjustment Payments shall be made to a qualifying Illinois hospital as defined in this subsection (a). A hospital not otherwise excluded under subsection (b) of this Section shall qualify for payment if it did not qualify for disproportionate share adjustments as described in Section 148.120 for the rate year 2003 determination and provided more than 20,000 Medicaid inpatient days in the high volume base period.

b) The following classes of hospitals are ineligible for High Volume Adjustment Payments associated with the qualifying criteria listed in subsection (a) of this Section:

1) County-owned hospitals as described in Section 148.25(b)(1)(A).

2) Hospitals organized under the University of Illinois Hospital Act [110 ILCS 330], as described in Section 148.25(b)(1)(B).

3) A hospital owned or operated by a State agency, as described in Section 148.25(b)(6).

c) High Volume Adjustment Payments

1) For a hospital qualifying under subsection (a) of this Section, the Department shall pay the product of $190.00 multiplied by the qualifying hospital's Medicaid inpatient days.

2) For a hospital that files a combined Medicaid cost report with another hospital after January 1, 2001, and then subsequently closes, the payment described in subsection (c)(1) of this Section shall be multiplied by a fraction, the numerator of which is the number of occupied bed days attributable to the open hospital and the denominator of which is the sum of the occupied bed days of each open hospital and each closed hospital.

3) For hospitals qualifying under subsection (a) of this Section that provided fewer than 30,000 Medicaid inpatient days in the high volume base period, payments will be the lesser of the calculation described in subsection (c)(1) or (c)(2) of this Section or $3,500,000.

d) Payment to a Qualifying Hospital
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1) For the high volume adjustment period occurring in State fiscal year 2004, total payments will equal the methodologies described in subsection (c) of this Section and shall be paid to the hospital on or before June 15, 2004.

2) For the high volume adjustment period occurring in State fiscal year 2005, total payments will equal the methodologies described in subsection (c) of this Section and shall be paid to the hospital in four equal installments on or before July 15, 2004, October 15, 2004, January 14, 2005 and April 15, 2005.

e) Definitions

1) "High volume base period" means the 12-month period beginning on July 1, 2000 and ending on June 30, 2001.

2) "High volume adjustment period" means, beginning June 1, 2004, the one month period beginning on June 1, 2004 and ending June 30, 2004, and beginning July 1, 2004, the 12-month period beginning July 1 of the year and ending June 30 of the following year.

3) "Medicaid inpatient days" means, for a given hospital, the sum of days of inpatient hospital service provided to recipients of medical assistance under Title XIX of the federal Social Security Act, excluding days for individuals eligible for Medicare under Title XVIII of that Act (Medicaid/Medicare crossover days), as tabulated from the Department's paid claims data for admissions occurring in the high volume base period that were adjudicated by the Department through June 30, 2002.

4) "Occupied bed days" means the sum of the number of days that each bed was occupied by a patient for all beds during calendar year 2001, as reported by each hospital on the Annual Survey of Hospitals conducted by the Department of Public Health. If the sum of a hospital's occupied bed days is not reported on the Annual Survey of Hospitals, then the Department may obtain the sum of occupied bed days from any source available, including, but not limited to, records maintained by the hospital provider, which may be inspected at all times during business hours of the day by the Department or its duly authorized agents and employees.

f) Payment Limitations: Payments under this Section are not due and payable until:
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1) the methodologies described in this Section receive federal approval from the Centers for Medicare and Medicaid Services in an appropriate State Plan Amendment;

2) the assessment imposed under 89 Ill. Adm. Code 140.80 is determined to be a permissible tax under Title XIX of the Social Security Act; and

3) the assessment described in 89 Ill. Adm. Code 140.80 is in effect.

(Source: Added at 28 Ill. Reg. 14557, effective October 27, 2004)

Section 148.310 Review Procedure

a) Inpatient Rate Reviews

1) Hospitals shall be notified of their inpatient rate for the rate year and shall have an opportunity to request a review of any rate for errors in calculation made by the Department. Such a request must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its rates. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

2) Hospitals reimbursed in accordance with Sections 148.250 through 148.300 and 89 Ill. Adm. Code 149 with respect to per diem add-ons for capital may request that an adjustment be made to their base year costs to reflect significant changes in costs that have been mandated in order to meet State, federal or local health and safety standards, and that have occurred since the hospital's filing of the base year cost report. The allowable Medicare/Medicaid costs must be identified from the most recent audited cost report available. These costs must be significant, i.e., on a per unit basis, they must constitute one percent or more of the total allowable Medicaid/Medicare unit costs for the same time period. Appeals for base year cost adjustments must be submitted, in writing, to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its rates. Such request shall include a clear explanation of the cost change and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.
b) Disproportionate Share (DSH) and Medicaid Percentage Adjustment (MPA) Determination Reviews

1) Hospitals shall be notified of their qualification for DSH and/or MPA payment adjustments and shall have an opportunity to request a review of the DSH and/or MPA add-on for errors in calculation made by the Department. Such a request must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its disproportionate share and/or Medicaid Percentage Adjustment qualification and add-on calculations. Such request shall include a clear explanation of the error and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

2) DSH and/or MPA determination reviews shall be limited to the following:

A) DSH and/or MPA Determination Criteria. The criteria for DSH determination shall be in accordance with Section 148.120. The criteria for MPA determination shall be in accordance with Section 148.122. Review shall be limited to verification that the Department utilized criteria in accordance with State regulations.

B) Medicaid Inpatient Utilization Rates.

i) Medicaid inpatient utilization rates shall be calculated pursuant to Section 1923 of the Social Security Act and as defined in Section 148.120(k)(4). Review shall be limited to verification that Medicaid inpatient utilization rates were calculated in accordance with federal and State regulations.

ii) Hospitals' Medicaid inpatient utilization rates, as defined in Section 148.120(k)(4), which have been derived from unaudited cost reports or HDSC forms, are not subject to the Review Procedure with the exception of errors in calculation by the Department. Pursuant to Section 148.120(c)(1)(B) and (c)(1)(C)(i) and (ii), hospitals shall have the opportunity to submit corrected information prior to the Department's final DSH and/or MPA determination.
C) Low Income Utilization Rates. Low Income utilization rates shall be calculated in accordance with Section 1923 of the Social Security Act, Section 148.120(a)(2) and (d), and Section 148.122(a)(2) and (c). Review shall be limited to verification that low income utilization rates were calculated in accordance with federal and State regulations.

D) Federally Designated Health Manpower Shortage Areas (HMSAs). Illinois hospitals located in federally designated HMSAs shall be identified in accordance with 42 CFR 5 (1989) and Section 148.122(a)(3) based upon the methodologies utilized by, and the most current information available to, the Department from the federal Department of Health and Human Services as of June 30, 1992. Review shall be limited to hospitals in locations that have failed to obtain designation as federally designated HMSAs only when such a request for review is accompanied by documentation from the Department of Health and Human Services substantiating that the hospital was located in a federally designated HMSA as of June 30, 1992.

E) Excess Beds. Excess bed information shall be determined in accordance with Public Act 86-268 (Section 148.122(a)(3) and 77 Ill. Adm. Code 1100) based upon the methodologies utilized by, and the most current information available to, the Illinois Health Facilities Planning Board as of July 1, 1991. Reviews shall be limited to requests accompanied by documentation from the Illinois Health Facilities Planning Board substantiating that the information supplied to and utilized by the Department was incorrect.

F) Medicaid Obstetrical Inpatient Utilization Rates. Medicaid obstetrical inpatient utilization rates shall be calculated in accordance with Section 148.122(a)(4), (h)(2), (h)(3) and (h)(4). Review shall be limited to verification that Medicaid obstetrical inpatient utilization rates were calculated in accordance with State regulations.

c) Outlier Adjustment Reviews
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The Department shall make outlier adjustments to payment amounts in accordance with 89 Ill. Adm. Code 149.105 or Section 148.130, whichever is applicable. Hospitals shall be notified of the specific information that shall be utilized in the determination of those services qualified for an outlier adjustment and shall have an opportunity to request a review of such specific information for errors in calculation made by the Department. Such a request must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of the specific information that shall be utilized in the determination of those services qualified for an outlier adjustment. Such request shall include a clear explanation of the error and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

d) Cost Report Reviews

1) Cost reports are required from:

   A) All enrolled hospitals within the State of Illinois;

   B) All out-of-state hospitals providing 100 inpatient days of service per hospital fiscal year, to persons covered by the Illinois Medical Assistance Program; and

   C) All hospitals not located in Illinois that elect to be reimbursed under the methodology described in 89 Ill. Adm. Code 149 (the DRG PPS).

2) The completed cost statement with a copy of the hospital's Medicare cost report and audited financial statement must be submitted annually within 90 days after the close of the hospital's fiscal year. A one-time 30-day extension may be requested. Such a request for an extension shall be in writing and shall be received by the Department's Office of Health Finance prior to the end of the 90-day filing period. The Office of Health Finance shall audit the information shown on the Hospital Statement of Reimbursable Cost and Support Schedules. The audit shall be made in accordance with generally accepted auditing standards and shall include tests of the accounting and statistical records and applicable auditing procedures. Hospitals shall be notified of the results of the final audited cost report, which may contain adjustments and revisions that may have
resulted from the audited Medicare Cost Report. Hospitals shall have the opportunity to request a review of the final audited cost report. Such a request must be received in writing by the Department within 45 days after the date of the Department's notice to the hospital of the results of the finalized audit. Such request shall include all items of documentation and analysis that support the request for review. No additional data shall be accepted after the 45 day period. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

e) Trauma Center Adjustment Reviews

1) The Department shall make trauma care adjustments in accordance with Section 148.290(c). Hospitals shall have the right to appeal the trauma center adjustment calculations if it is believed that a technical error has been made in the calculation by the Department.

2) Trauma level designation is obtained from the Illinois Department of Public Health as of the first day of July preceding the trauma center adjustment rate period. Review shall be limited to requests accompanied by documentation from the Illinois Department of Public Health, or the licensing agency in the state in which the hospital is located, substantiating that the information supplied to and utilized by the Department was incorrect.

3) Appeals under this subsection (e) must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for trauma center adjustments and payment amounts. Such a request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

f) Medicaid High Volume Adjustment Reviews

The Department shall make Medicaid high volume adjustments in accordance with Section 148.290(d). Review shall be limited to verification that the Medicaid inpatient days were calculated in accordance with Section 148.120. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the
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hospital of its qualification for Medicaid high volume adjustments and payment amounts. Such a request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

g) Sole Community Hospital Designation Reviews
The Department shall make sole community hospital designations in accordance with 89 Ill. Adm. Code 149.125(b). Hospitals shall have the right to appeal the designation if the hospital believes that a technical error has been made in the determination. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notification of the designation. Such a request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.

h) Geographic Designation Reviews

1) The Department shall make rural hospital designations in accordance with Section 148.25(g)(3). Hospitals shall have the right to appeal the designation if the hospital believes that a technical error has been made in the determination. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notification of the designation. Such a request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.

2) The Department shall make urban hospital designations in accordance with Section 148.25(g)(4). Hospitals shall have the right to appeal the designation if the hospital believes that a technical error has been made in the determination. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notification of the designation. Such a request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.
i) Critical Hospital Adjustment Payment (CHAP) Reviews

1) The Department shall make CHAP in accordance with Section 148.295. Hospitals shall be notified in writing of the results of the CHAP determination and calculation, and shall have the right to appeal the CHAP calculation or their ineligibility for the CHAP if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for CHAP and payment adjustment amounts, or a letter of notification that the hospital does not qualify for the CHAP. Such a request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

2) CHAP determination reviews shall be limited to the following:

A) Federally Designated Health Professional Shortage Areas (HPSAs). Illinois hospitals located in federally designated HPSAs shall be identified in accordance with 42 CFR 5, and Section 148.295(a)(3)(B) and (b)(3) based upon the methodologies utilized by, and the most current information available to, the Department from the federal Department of Health and Human Services as of the last day of June preceding the CHAP rate period. Review shall be limited to hospitals in locations that have failed to obtain designation as federally designated HPSAs only when such a request for review is accompanied by documentation from the Department of Health and Human Services substantiating that the hospital was located in a federally designated HPSA as of the last day of June preceding the CHAP rate period.

B) Trauma level designation. Trauma level designation is obtained from the Illinois Department of Public Health as of the last day of June preceding the CHAP rate period. Review shall be limited to requests accompanied by documentation from the Illinois Department of Public Health, substantiating that the information supplied to and utilized by the Department was incorrect.
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C) Accreditation of Rehabilitation Facilities. Accreditation of rehabilitation facilities shall be obtained from the Commission on Accreditation of Rehabilitation Facilities as of the last day of June preceding the CHAP rate period. Review shall be limited to requests accompanied by documentation from the Commission, substantiating that the information supplied to and utilized by the Department was incorrect.

D) Medicaid Inpatient Utilization Rates. Medicaid inpatient utilization rates shall be calculated pursuant to Section 1923 of the Social Security Act and as defined in Section 148.120(k)(5). Review shall be limited to verification that Medicaid inpatient utilization rates were calculated in accordance with federal and State regulations.

E) Graduate Medical Education Programs. Graduate Medical Education program information shall be obtained from the most recently published report of the American Accreditation Council for Graduate Medical Education, the American Osteopathic Association Division of Post-doctoral Training, or the American Dental Association Joint Commission on Dental Accreditation as of the last day of June preceding the CHAP rate period. Review shall be limited to requests accompanied by documentation from the above, substantiating that the information supplied to and utilized by the Department was incorrect.

j) Tertiary Care Adjustment Payment Reviews. The Department shall make Tertiary Care Adjustment Payments in accordance with Section 148.296. Hospitals shall be notified in writing of the results of the Tertiary Care Adjustment Payments determination and calculation, and shall have the right to appeal the Tertiary Care Adjustment Payments calculation or their ineligibility for Tertiary Care Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Tertiary Care Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Tertiary Care Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction.
The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

k) Pediatric Outpatient Adjustment Payment Reviews. The Department shall make Pediatric Outpatient Adjustment payments in accordance with Section 148.297. Hospitals shall be notified in writing of the results of the determination and calculation, and shall have the right to appeal the calculation or their ineligibility for payments under Section 148.297 if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification under Section 148.297 and payment adjustment amounts, or a letter of notification that the hospital does not qualify for such payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

l) Pediatric Inpatient Adjustment Payment Reviews. The Department shall make Pediatric Inpatient Adjustment payments in accordance with Section 148.298. Hospitals shall be notified in writing of the results of the determination and calculation, and shall have the right to appeal the calculation or their ineligibility for payments under Section 148.298 if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification under Section 148.298 and payment adjustment amounts, or a letter of notification that the hospital does not qualify for such payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

m) Safety Net Adjustment Payment Reviews. The Department shall make Safety Net Adjustment Payments in accordance with Section 148.126. Hospitals shall be notified in writing of the results of the determination and calculation, and shall have the right to appeal the Safety Net Adjustment Payment calculation or their ineligibility for Safety Net Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the
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Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Safety Net Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Safety Net Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

n) Psychiatric Adjustment Payment Reviews. The Department shall make Psychiatric Adjustment Payments in accordance with Section 148.105. Hospitals shall be notified in writing of the results of the Psychiatric Adjustment Payments determination and calculation, and shall have a right to appeal the Psychiatric Adjustment Payments calculation or their ineligibility for Psychiatric Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Psychiatric Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Psychiatric Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

o) Rural Adjustment Payment Reviews. The Department shall make Rural Adjustment Payments in accordance with Section 148.115.

1) Hospitals shall be notified in writing of the results of the Rural Adjustment Payments determination and calculation, and shall have a right to appeal the Rural Adjustment Payments calculation or their ineligibility for Rural Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department.

2) The designation of Critical Access Provider or Necessary Provider, which are qualifying criteria for Rural Adjustment Payments (see Section 148.115(a)), is obtained from the Illinois Department of Public Health (IDPH) as of the first day of July preceding the Rural Adjustment Payment rate period. Review shall be limited to requests accompanied by
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documentation from IDPH, substantiating that the information supplied to and utilized by the Department was incorrect.

3) The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Rural Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Rural Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

p) Supplemental Tertiary Care Adjustment Payment Reviews. The Department shall make Supplemental Tertiary Care Adjustment Payments in accordance with Section 148.85. Hospitals shall be notified in writing of the results of the Supplemental Tertiary Care Adjustment Payments determination and calculation. Hospitals shall have a right to appeal the Supplemental Tertiary Care Adjustment Payments calculation or their ineligibility for Supplemental Tertiary Care Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Supplemental Tertiary Care Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Supplemental Tertiary Care Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

q) Medicaid Inpatient Utilization Rate Adjustment Payment Reviews. The Department shall make Medicaid Inpatient Utilization Rate Adjustment Payments in accordance with Section 148.90. Hospitals shall be notified in writing of the results of the Medicaid Inpatient Utilization Rate Adjustment Payments determination and calculation. Hospitals shall have a right to appeal the Medicaid Inpatient Utilization Rate Adjustment Payments calculation or their ineligibility for Medicaid Inpatient Utilization Rate Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the
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hospital of its qualification for Medicaid Inpatient Utilization Rate Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Medicaid Inpatient Utilization Rate Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

r) Medicaid Outpatient Utilization Rate Adjustment Payment Reviews. The Department shall make Medicaid Outpatient Utilization Rate Adjustment Payments in accordance with Section 148.95. Hospitals shall be notified in writing of the results of the Medicaid Outpatient Utilization Rate Adjustment Payments determination and calculation. Hospitals shall have a right to appeal the Medicaid Outpatient Utilization Rate Adjustment Payments calculation or their ineligibility for Medicaid Outpatient Utilization Rate Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Medicaid Outpatient Utilization Rate Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Medicaid Outpatient Utilization Rate Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

s) Outpatient Rural Hospital Adjustment Payment Reviews. The Department shall make Outpatient Rural Adjustment Payments in accordance with Section 148.100. Hospitals shall be notified in writing of the results of the Outpatient Rural Adjustment Payments determination and calculation. Hospitals shall have a right to appeal the Outpatient Rural Adjustment Payments calculation or their ineligibility for Outpatient Rural Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Outpatient Rural Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Outpatient Rural Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the
t) Outpatient Service Adjustment Payment Reviews. The Department shall make Outpatient Service Adjustment Payments in accordance with Section 148.103. Hospitals shall be notified in writing of the results of the Outpatient Service Adjustment Payments determination and calculation. Hospitals shall have a right to appeal the Outpatient Service Adjustment Payments calculation or their ineligibility for Outpatient Service Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Outpatient Service Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Outpatient Service Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

u) Psychiatric Base Rate Adjustment Payment Reviews. The Department shall make Psychiatric Base Rate Adjustment Payments in accordance with Section 148.110. Hospitals shall be notified in writing of the results of the Psychiatric Base Rate Adjustment Payments determination and calculation. Hospitals shall have a right to appeal the Psychiatric Base Rate Adjustment Payments calculation or their ineligibility for Psychiatric Base Rate Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for Psychiatric Base Rate Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for Psychiatric Base Rate Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

v) High Volume Adjustment Payment Reviews. The Department shall make High Volume Adjustment Payments in accordance with Section 148.112. Hospitals shall be notified in writing of the results of the High Volume Adjustment Payments determination and calculation. Hospitals shall have a right to appeal
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the High Volume Adjustment Payments calculation or their ineligibility for High Volume Adjustment Payments if the hospital believes that a technical error has been made in the calculation by the Department. The appeal must be submitted in writing to the Department and must be received or post marked within 30 days after the date of the Department's notice to the hospital of its qualification for High Volume Adjustment Payments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for High Volume Adjustment Payments. Such a request must include a clear explanation of the reason for the appeal and documentation that supports the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

For purposes of this Section, the term "post marked" means the date of processing by the United States Post Office or any independent carrier service.

The review procedures provided for in this Section may not be used to submit any new or corrected information that was required to be submitted by a specific date in order to qualify for a payment or payment adjustment. In addition, only information that was submitted expressly for the purpose of qualifying for the payment or payment adjustment under review shall be considered by the Department. Information that has been submitted to the Department for other purposes will not be considered during the review process.

(Source: Amended at 28 Ill. Reg. 14557, effective October 27, 2004)
NOTICE OF ADOPTED AMENDMENTS

1) **Heading of the Part:** Assisted Living and Shared Housing Establishment Code

2) **Code Citation:** 77 Ill. Adm. Code 295

3) **Section Numbers:**

   - 295.400 Amendment
   - 295.500 Amendment
   - 295.600 Amendment
   - 295.1060 Amendment
   - 295.1070 Amendment
   - 295.1090 Amendment
   - 295.2000 Amendment
   - 295.2050 Amendment
   - 295.3000 Amendment
   - 295.4000 Amendment
   - 295.4060 Amendment

4) **Statutory Authority:** Assisted Living and Shared Housing Act [210 ILCS 9]

5) **Effective date of Amendments:** October 21, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain any incorporations by reference?** No

8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the Department's principal office and is available for public inspection.

9) **Notices of Proposal was Published in Illinois Register:** February 20, 2004; 28 Ill. Reg. 2937

10) **Has JCAR issued a Statement of Objection to these amendments?** No

11) **Differences between proposal and final version:**

    The following changes were made in response to comments received during the First Notice or public comment period:

    1. In the Table of Contents, "295.1110 Floating License" was deleted.
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2. The following was added to the Main Source Note: "emergency amendment at 27 Ill. Reg. 6378, effective April 1, 2003, for a maximum of 150 days; emergency expired August 28, 2003; amended at 27 Ill. Reg. 18087, effective November 12, 2003;".

3. In Section 295.400(d) and 295.600(a)(7), "of this Part" was deleted.

4. In Section 295.500(a)(3), "as evidenced by" was changed to "in".

5. In Section 295.1060(a)(6), "fines for repeat violations" was stricken.

6. In Section 295.1060(a)(6)(D), "may" was changed to "shall".

7. In Section 295.1070(c)(1), "Physician's assessment" was changed to "assessment".

8. In Section 295.1070(f), line 4, "violation" was stricken and "technical infraction" was added.

9. In Section 295.1090(b)(2), "295.1070" was added and "295.1080" was stricken.

10. In Section 295.1090(f), "no later than" was deleted and "within" was added.

11. In Section 295.1090(g), the text up to the period was changed to italics.

12. Section 295.1110 was deleted from the rulemaking.

13. In Section 295.2000(g), the first comma was replaced with "or".

14. In Section 295.2000(h), the text through "provider." was changed to italics.

15. In Section 295.3000(h)(4), "directly" was deleted.

16. In Section 295.3000(j), "independently" was added before "moving" and "independently" after "safety" was stricken.

17. In Section 295.4000(c), "by a physician" was added after "completed".

18. In Section 295.4060(d)(3)(B), "Impression" was added and "Scale" was stricken.

19. In Section 295.4060(i)(1)(A)(i), "management" was deleted.
20. In Section 295.4060(i)(1)(A)(ii), "working" was deleted.

The following changes were made in response to comments and suggestions of the JCAR:

No changes were requested.

In addition, various typographical, grammatical and form changes were made in response to the comments from JCAR.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the amendments issued by JCAR? Yes

13) Will these amendments replace any emergency amendments currently in effect? No

14) Are there any other amendments pending on this Part? No

15) Summary and purpose of the amendments: The Assisted Living and Shared Housing Establishment Code is being amended to implement P.A. 93-0141. This legislation amended the Assisted Living and Shared Housing Act to clarify requirements concerning care for residents with Alzheimer's disease and dementia, hospice care, and unlicensed establishments. Section 295.400 (License Requirement), Section 295.600 (Issuance of an Initial Regular License), Section 295.2000 (Residency Requirements), and Section 295.4060 (Alzheimer's and Dementia Programs) are being amended. Requirements for floating licenses, which are also authorized by P.A. 93-0141 and which appeared in the first notice version of this rulemaking, have been removed and will be re-proposed at a later date.

This rulemaking also includes amendments to Section 295.500 (Application for License) to list additional materials that must be submitted with an application for licensure. Section 295.1060 (Remedies and Sanctions) is being amended to delete references to expired time frames and to correct an incorrect cross-reference. Section 295.1070 (Annual On-Site Review and Complaint Investigation Procedures) is being amended to add "education and training" to the annual review of establishment staff. Section 295.1090 (Complaints) and Section 295.2050 (Incident and Accident Reporting) are being amended to reference the IDPH Central Complaint Registry. A separate assisted living registry has not been established. Section 295.2000 (Residency Requirements) is being amended to implement P.A. 92-562, which amended the Assisted Living and Shared Housing Act to require establishments to advise prospective residents to consult a physician to determine whether the prospective resident should obtain a vaccination
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against pneumococcal pneumonia. Section 295.3000 (Personnel requirements, Qualifications and Training) is being amended to require that employee personnel files include documentation that the employer has checked the employee's status on the Nurse Aide Registry. Establishments will also be required to contact the Department of Professional Regulation to verify active licensure prior to employing an individual in a position that requires a State professional license. Section 295.4000 is being amended to clarify that an establishment evaluation is not a replacement for a physician's assessment.

16) Information and questions regarding these adopted amendments shall be directed to:

Susan Meister
Division of Legal Services
Department of Public Health
535 West Jefferson, Fifth Floor
Springfield, Illinois 62761
217/782-2043

e-mail: rules@idph.state.il.us

The full text of the Adopted Amendments begins on the next page:
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TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER c: LONG-TERM CARE FACILITIES

PART 295
ASSISTED LIVING AND SHARED HOUSING ESTABLISHMENT CODE

SUBPART A: GENERAL PROVISIONS

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AUTHORITY: Implementing and authorized by the Assisted Living and Shared Housing Act [210 ILCS 9].


SUBPART A: GENERAL PROVISIONS

Section 295.400 License Requirement

a) No person may establish, operate, maintain, or offer an establishment as an assisted living establishment or shared housing establishment as defined by the Act within this State unless and until he or she obtains a valid license, which remains unsuspended, unrevoked, and unexpired.

b) An entity that operates as an assisted living or shared housing establishment as defined by the Act without a license shall be subject to the provisions, including penalties, of the Nursing Home Care Act.

c) No entity shall use in its name or advertise "assisted living" unless licensed as an
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assisted living establishment under the Act or as a shelter care facility under the Nursing Home Care Act that also meets the definition of an assisted living establishment under the Act, except a shared housing establishment licensed under the Act may advertise assisted living services.

d) No public official, agent, or employee may place any person in, or recommend that any person be placed in, or directly or indirectly cause any person to be placed in, any establishment that meets the definition under the Act and Section 295.200 that is being operated without a valid license. No public official, agent, or employee may place the name of an unlicensed establishment that is required to be licensed under the Act on a list of programs. (Section 25 of the Act)

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

Section 295.500 Application for License

a) An applicant shall provide the following information, on forms provided by the Department, to be considered for licensure:

1) The business name, street address, mailing address, and telephone number of the establishment;

2) The name and mailing address of the owner or owners of the establishment and, if the owner or owners are not natural persons, identification of the type of business entity of the owners, and the names and addresses of the officers and members of the governing body, or comparable persons for partnerships, limited liability companies, or other types of business organizations;

3) Financial information establishing that the project is financially feasible, in one of the following forms:

A) A surety bond in an amount equal to at least three months operating expenses;

B) An independent certified public accountant's report expressing an opinion on the financial status of the establishment;

C) An audited financial report certifying the financial status of the applicant;
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D) The entity's most recent bond rating (less than 2 years old) from Fitch's, Moody's, or Standard and Poor's rating agency that documents an "A" rating or better;

E) Evidence of operation for at least 2 years of a facility licensed under the Nursing Home Care Act or under the Assisted Living and Shared Housing Act; or

F) If the applicant is not able to provide any of the information listed in subsections (a)(3)(A)-(E), the applicant may provide any other information acceptable to the Department that demonstrates financial status.

4) The name and mailing address of the managing agent of the establishment, whether hired under a management agreement or lease agreement, if different from the owner or owners, and the name of the full-time manager;

5) Verification that the establishment has entered or will enter into a service delivery contract as provided in Section 295.2030, as required under the Act, with each resident or resident's representative;

6) The name and address of at least one natural person who shall be responsible for dealing with the Department on all matters provided for in this Part, on whom personal service of all notices and orders shall be made, and who shall be authorized to accept service on behalf of the owner or owners and the managing agent. Notwithstanding a contrary provision of the Code of Civil Procedure, personal service on the person identified pursuant to this subsection (a)(6) shall be considered service on the owner or owners and the managing agent, and it shall not be a defense to any action that personal service was not made on each individual or entity;

7) The signature of the authorized representative of the owner or owners;

8) Proof of an ongoing quality improvement program in accordance with Section 295.2060 of this Part;

9) Information about the number and types of units and the maximum census;

10) If all units are not licensed, the establishment shall maintain
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documentation of which units are providing assisted living services. This
number shall not exceed the number of units on the license. The entire
building having any licensed units shall meet the physical plant
requirements of this Part.

11) Information about the mandatory and optional services to be provided at
the establishment;

12) Proof of compliance with applicable State and local residential standards,
as evidenced by completion of the Department's Certificate of Compliance
form;

13) A copy of the standard contract offered to residents;

14) Documentation of adequate liability insurance; and (Section 30 of the
Act)

15) If the establishment does not have a permit under the Life Care Facilities
Act and the establishment requires entrance or application fees in excess
of three months of a resident's minimum fees, the establishment must
maintain a bond or restricted account that guarantees the return of the
resident's entrance fees and/or the unused portion of his or her deposit if
the establishment ceases to operate;

16) A completed Alzheimer's Special Care Disclosure form; and

17) A schematic drawing of the establishment.

b) To support regulatory activities necessary to implement the Act, applications shall
be accompanied by a nonrefundable fee of:

1) $300 for an assisted living establishment and $5 per unit; or

2) $150 for a shared housing establishment.

c) If any of the information in the application changes during the application
process, the applicant shall notify the Department, in writing, of those changes.
Such written notification will become a part of the licensee's file.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)
Section 295.600  Issuance of an Initial Regular License

a) Upon receipt and review of an application for a license and review of the applicant establishment, the Director may issue a license if he or she finds:

1) That the individual applicant, or the corporation, partnership, or other entity if the applicant is not an individual, is a person responsible and suitable to operate or to direct or participate in the operation of an establishment by virtue of financial capacity, appropriate business or professional experience, a record of lawful compliance with lawful orders of the Department and lack of revocation of a license issued under the Act or the Nursing Home Care Act during the previous five years;

2) That the establishment is under the supervision of a full-time manager who meets the requirements of Section 295.3010 of this Part;

3) That the establishment has staff sufficient in number with qualifications, adequate skills, education, and experience to meet the 24 hour scheduled and unscheduled needs of residents and who participate in ongoing training to serve the resident population;

4) That direct care staff meet the requirements of the Health Care Worker Background Check Act;

5) That the applicant is in substantial compliance with the Act and this Part;

6) That the applicant pays all required fees; and

7) That, if the applicant establishment offers, advertises or markets to provide specialized services for individuals with Alzheimer's disease and related dementias through an Alzheimer's special care program, the applicant has provided an accurate disclosure document to the Department in accordance with the Alzheimer's Special Care Disclosure Act and in substantial compliance with Section 150 of the Act and Section 295.4060.

b) The Department shall issue a regular license within 120 days after receipt of an application that meets the requirements of this Section. This time frame may be extended during the period from January 1, 2001 to January 1, 2002.

c) The license shall state the number of resident units and physical location of the establishment, the date the license was issued, and the expiration date of the
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license.

d) All regular licenses shall be valid for one year.

e) Each license shall be issued only for the premises and persons named in the application, and shall not be transferable or assignable. (Section 35 of the Act)

f) After the license is issued, the licensee shall advise the Department within 30 days after any changes in the information required in Section 295.500(a)(1), (2), (4), (6), (9), or (10) of this Part.

g) The license shall be posted in public view in the establishment.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

Section 295.1060 Remedies and Sanctions

a) The Department may impose the following remedies and sanctions upon an establishment that is found to have committed a violation under the following circumstances:

1) Consultative conference – possible for all violations. This may be part of the on-site review, via teleconference, or other means of communication. Failure to meet the requirements after the consultative conference may result in a higher sanction if the establishment does not come into compliance. A consultative conference is a remedy, not a sanction.

2) Statement of correction – shall be required for all levels of violation, either offered by the establishment or imposed by the Department. A statement of correction must be submitted by the licensee within 15 days after the notification to the establishment of the infraction or violation. A statement of correction must be in writing and must contain:

A) A description of the specific corrective action the establishment is taking;

B) A description of the steps that will be taken to avoid future occurrences; and

C) A specific date by which the correction shall be completed.
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3) Administrative warning – may be imposed for any Type 3 violation.

4) Mandatory training – may be required of establishment staff for any violation.

5) Imposed order of correction – may be imposed for violations and repeat violations after the establishment fails to submit or carry out its own statement of correction or the establishment's plan fails to address the issue. The Department may impose an immediate order of correction for a Type 1 violation.

6) Fines – fines for repeat violations shall be imposed as follows:

A) The Department may impose a fine of up to $500 for an initial Type 2 violation.

B) The Department may impose a fine of up to $1000 on any provider that has repeat Type 2 violations at a subsequent on-site inspection.

C) The Department may impose a fine of up to $2000 for Type 1 violations.

D) The Department shall impose a fine of up to $10,000 on any provider that has a repeat Type 1 violation or when the Director determines that a serious and immediate threat exists.

7) Revocation of license – may occur when other remedies have been progressively applied and the establishment has not achieved compliance. The decision to revoke a license may only be made by the Director of the Department.

b) Remedies and sanctions shall be evaluated and imposed on the basis of:

1) Gravity of the violation;

2) Severity of the violation;

3) Pattern of occurrences of the same or similar violations; and

4) History of compliance with the Act and this Part.
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| c) An unlicensed assisted living or shared housing establishment or an entity that violates Section 295.400 shall be assessed a civil penalty not to exceed $3,000. The entity will also be referred to the Department's Bureau of Long-Term Care for review and possible referral to the Office of the Attorney General. The Department may extend the 180-day time period to accommodate the initial processing of applications.

| d) Any licensee preventing the Department from carrying out its duties under this Section shall have its license revoked and be subject to a fine of not more than $250 per day.

| e) Any establishment caring for a resident whose care needs exceed those authorized under the Act shall be fined $500 for the first violation and $1,000 for each subsequent violation. The establishment shall not be found in violation if a sudden change in a resident's condition, making the resident ineligible for residency, has occurred within the last 72 hours, the establishment is actively attempting to find placement for the resident in an alternative care setting, and the establishment has initiated involuntary termination of residency proceedings. An establishment shall be deemed to be "actively attempting" to find alternative placement if the following occurs:

1) The establishment is assisting the resident in finding alternative placement; and

2) A reasonable relocation plan is in place, including a time frame and provision of services in the interim.

| f) An establishment that fails to conduct a health care worker background check as required by Section 295.3040 shall be fined $100 for each offense.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

Section 295.1070  Annual On-Site Review and Complaint Investigation Procedures

| a) The Department shall conduct an annual unannounced on-site visit at each assisted living and shared housing establishment to determine compliance with the applicable licensure requirements and standards, as set forth in the Act and this Part. Additional visits may be conducted without prior notice to the assisted living or shared housing establishment. (Section 110(a) of the Act)
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b) The purpose of the annual on-site review shall be to ensure establishments' compliance with this Part and to assist the licensee in meeting the requirements of this Part and providing quality services to the consumer. The visit shall focus on solving resident issues and concerns, and the quality improvement process implemented by the establishment to address resident issues. (Section 30(a) of the Act) The on-site review shall be conducted in a collaborative manner, with the Department and the establishment focused on meeting the needs of the residents.

c) The review shall address the following issues:

1) Assessment, service plan and services provided to ensure that resident needs are met;

2) Staff sufficient in numbers and with appropriate skill, education and training to provide services required by the resident population;

3) Compliance with the Health Care Worker Background Check Act;

4) Compliance with service delivery contracts and lease agreements;

5) Grievance procedures;

6) Service plan, negotiated risk, and protection of individual rights and resident's involvement in directing his or her own care;

7) Quality improvement policies and procedures to determine whether an effective procedure is in place. Quality improvement policies shall not be used as the sole criterion for issuance of a violation;

8) Whether an annual resident satisfaction survey has been conducted;

9) Compliance with physical plant, health and sanitation, and food preparation requirements as set forth in this Part;

10) Any complaints not reviewed through an on-site review; and

11) Incident and accident reports that are required to be submitted to the Department.

d) An establishment shall not restrict or hamper access by Department staff to the building, residents or designated records required to conduct routine or periodic
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review or investigations. A resident may limit access to his or her private dwelling space to reviewers, except if suspected violations exist that may pose a threat to the resident's or others' health, safety or well-being. A resident may also elect to limit access to himself or herself and his or her records, except as required as a condition of payment for publicly funded housing and/or services.

e) When the Department identifies a technical infraction during an on-site inspection, the Department representative shall engage the establishment staff in a consultative conference. If the establishment resolves the technical infraction prior to the end of the on-site inspection, no violation shall be deemed to exist and no violation shall be reported. The Department may recommend methods of addressing the technical infraction.

f) Prior to concluding the on-site inspection, the Department representative shall meet with the manager regarding any identified technical infraction. The Department shall allow the establishment an opportunity to discuss the technical infraction and to present any evidence that indicates that the technical infraction did not exist or evidence related to the level of the violation.

g) The Department shall provide the establishment with a written statement of findings and violations no later than 20 days after conclusion of the on-site review.

h) The establishment shall file a statement of correction within 15 days after receipt of the statement of findings and violations. The statement of correction may be in letter form and shall describe the action taken by the establishment to address the violation. The establishment may also submit a statement of dispute regarding any of the alleged violations within 15 days. The Department shall review all statements of dispute submitted prior to making its final determination that a violation exists or of the level of the violation. If the Department does not make a change to the statement of violations based upon the statement of dispute, it shall provide a brief justification of its determination in writing.

i) The notice of findings shall include the reason for the determination and a statement of the right to appeal the determination pursuant to the Department's Rules of Practice and Procedure in Administrative Hearings.

j) Whenever there is a revisit for a Type 1 violation or a pervasive pattern of Type 2 violations, the Department shall conduct the on-site revisit within 30 days after the Department's receipt of the statement of correction or within 30 days after the corrective action is completed to confirm that the establishment has carried out
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the corrective action. Nothing prohibits the Department from conducting a revisit at any time.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

Section 295.1090 Complaints

a) Complaints may be submitted either in writing, by telephone or by other electronic means to the IDPH Central Assisted Living Complaint Registry.

b) The Department shall conduct an onsite investigation (see Section 295.1070) of all complaints alleging abuse or neglect within seven days after the receipt of the complaint, except that complaints of abuse or neglect that indicate that a resident's life or safety is in imminent danger shall be investigated within 24 hours after receipt of the complaint.

c) The Department may address those complaints that do not require an on-site review through record review and/or telephone interviews.

d) At the initiation of a complaint investigation, the Department shall inform the establishment that a complaint has been filed and of the specific nature of the complaint so that the identity of the complainant or resident involved is not disclosed.

e) The Department shall review and consider any information submitted by the establishment in response to an investigation.

f) The Department shall determine whether the Act or this Part has been violated and shall inform the complainant and the establishment of its findings in writing within 20 days after its determination. The Department's findings may include documentation provided by either the complainant or the licensee pertaining to the complaint. The notice of such findings shall include the reason for the determination and a statement of the right to appeal pursuant to the Department's Rules of Practice and Procedure in Administrative Hearings.

g) The Department shall conduct an on-site review and evaluation of an assisted living or shared housing establishment found to be in violation of the Act within a specified period of time based on the gravity and severity of the violation and any pervasive pattern of occurrences of the same or similar violations. (Section 110(c) of the Act)
SUBPART B: POLICIES

Section 295.2000 Residency Requirements

a) No individual shall be accepted for residency or remain in residence if the establishment cannot provide or secure appropriate services, if the individual requires a level of service or type of service for which the establishment is not licensed or which the establishment does not provide, or if the establishment does not have the staff appropriate in numbers and with appropriate skill to provide such services. (Section 75(a) of the Act)

b) Only adults may be accepted for residency. (Section 75(b) of the Act)

c) A person shall not be accepted for residency if:

1) The person poses a serious threat to himself or herself or to others;

2) The person is not able to communicate his or her needs in any manner and no resident representative residing in the establishment, and with a prior relationship to the person, has been appointed to direct the provision of services;

3) The person requires total assistance with 2 or more activities of daily living;

4) The person requires the assistance of more than one paid caregiver at any given time with an activity of daily living;

5) The person requires more than minimal assistance in moving to a safe area in an emergency. For the purpose of this Section, minimal assistance means that the resident is able to respond, with or without assistance, in an emergency to protect himself/herself, given the staffing and construction of the building;

6) The person has a severe mental illness, which for the purposes of this Section means a condition that is characterized by the presence of a major mental disorder as classified in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV), where the individual is substantially disabled due to mental illness in the areas of self-
maintenance, social functioning, activities of community living and work skills, and the disability specified is expected to be present for a period of not less than one year, but does not mean Alzheimer's disease and other forms of dementia based on organic or physical disorders. Nothing in this Section is meant to prohibit an individual with a diagnosis of depression from living in an establishment so long as the resident is not substantially disabled in the areas of self-maintenance, social functioning, activities of community living, and work skills;

7) The person requires intravenous therapy or intravenous feedings unless self-administered or administered by a qualified, licensed health care professional;

8) The person requires gastrostomy feedings unless self-administered or administered by a licensed health care professional;

9) The person requires insertion, sterile irrigation, and replacement of catheter, except for routine maintenance of urinary catheters, unless the catheter care is self-administered or administered by a licensed health care professional;

10) The person requires sterile wound care unless care is self-administered or administered by a licensed health care professional;

11) The person requires sliding scale insulin administration unless self-performed or administered by a licensed health care professional;

12) The person is a diabetic requiring routine insulin injections unless the injections are self-administered or administered by a licensed health care professional;

13) The person requires treatment of stage 3 or stage 4 decubitus ulcers or exfoliative dermatitis; or

14) The person requires 5 or more skilled nursing visits per week for conditions other than those listed in subsection (c)(13) for a period of 3 consecutive weeks or more except when the course of treatment is expected to extend beyond a 3 week period for rehabilitative purposes and is certified as temporary by a physician. (Section 75(c) of the Act)

d) A resident with a condition listed in subsection (c) shall have his or her residency
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terminated in accordance with Section 295.2010. (Section 75(d) of the Act)

e) Residency shall be terminated in accordance with Section 295.2010 of this Part when services available to the resident in the establishment are no longer adequate to meet the needs of the resident. This provision shall not be interpreted as limiting the authority of the Department to require the residency termination of individuals. (Section 75(e) of the Act)

f) Subsection (d) of this Section shall not apply to terminally ill residents who receive or would qualify for hospice care and such care is coordinated by a hospice licensed under the Hospice Program Licensing Act or other licensed health care professional employed by a licensed home health agency and the establishment and all parties agree to the continued residency. (Section 75(f) of the Act)

g) Subsections (c)(3), (4), (5) and (9) shall not apply to individuals who are quadriplegic or paraplegic, or individuals with neuro-muscular diseases, such as muscular dystrophy and multiple sclerosis, or other chronic diseases and conditions if the individual is able to communicate his or her needs and does not require assistance with complex medical problems, and the establishment is able to accommodate the individual's needs. (Section 75(g) of the Act)

h) For the purposes of subsections (c)(7) through (11), a licensed health care professional may not be employed by the owner or operator of the establishment, its parent entity, or any other entity with ownership common to either the owner or operator of the establishment or parent entity, including but not limited to an affiliate of the owner or operator of the establishment. Nothing in this Section is meant to limit a resident's right to choose his or her health care provider. (Section 75(h) of the Act)

i) Before a prospective resident's admission to an assisted living establishment or a shared housing establishment, the establishment shall advise the prospective resident to consult a physician to determine whether the prospective resident should obtain a vaccination against pneumococcal pneumonia. (Section 76 of the Act)

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

Section 295.2050 Incident and Accident Reporting

a) An establishment shall report to the Department an incident or accident that has a
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significant negative effect on a resident's health, safety or welfare. A significant negative effect shall be assumed whenever an unplanned or unscheduled visit to a hospital is necessary as a result of that incident or accident, treatment is provided, and follow-up care is required.

b) The report shall be made by contacting the Department of Public Health Central Assisted Living Complaint Registry or by fax or by other electronic means within 24 hours after the occurrence of the incident or accident.

c) A copy of the report shall be maintained by the establishment for one year after the date of the incident or accident.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

SUBPART C: PERSONNEL

Section 295.3000 Personnel Requirements, Qualifications and Training

a) The establishment shall have staff sufficient in number with qualifications, adequate skills, education and experience to meet the 24 hour scheduled and unscheduled needs of residents and who participate in ongoing training to serve the resident population. (Section 35(a)(3) of the Act)

b) The establishment shall have on duty at all times at least one direct care staff person who has obtained cardiopulmonary resuscitation (CPR) training specific to adults, which includes a demonstration of the individual's ability to perform CPR, and who has current certification in CPR.

c) At the starting date of employment, each direct care staff member shall be 16 years of age or older.

d) Job descriptions shall define the minimum education and experience requirements for staff.

e) A file shall be maintained for each employee containing the following:

1) The employee's name, date of birth, home address, Social Security number and telephone number;

2) Documentation of:
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A) Freedom from pulmonary tuberculosis;

B) Employee orientation; and

C) Ongoing training;

3) An employee's starting date of employment and ending date, if applicable.

f) In addition to the information required in subsection (e) of this Section, the file for each direct care employee shall contain documentation of:

1) Current certification in CPR, if applicable;

2) Initial health evaluation; and

3) Compliance with the Health Care Worker Background Check Act; and

4) Documentation that the employer has checked the status of the employee with the Nurse Aide Registry.

g) All records required by this Section shall be maintained throughout the individual's employment or service and for at least 12 months after the individual's last date of employment or service, unless required for a longer period of time by State or federal law.

h) The establishment shall have sufficient personnel to provide the following for its current resident population:

1) All mandatory services;

2) Services established in each resident's service plan;

3) Service to meet the needs of each resident, including 24 hour scheduled and unscheduled needs, general supervision, and the ability to intervene in a crisis;

4) Food services (if provided by the establishment);

5) Environmental services;

6) Evacuation of residents during emergencies; and
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7) Any optional services to be provided by the establishment as stated in the service plan.

i) The personnel schedule shall:

1) Indicate the date, scheduled work hours, and name and position of each employee assigned;

2) Reflect actual work hours; and

3) Be maintained and made available upon request for at least 12 months after the last date on the schedule.

j) If an establishment accepts individuals with impairments that prevent them from moving to an area of safety independently, sufficient staff must be present and awake to enable these residents to move to a safe area 24 hours per day.

k) Shared housing establishments shall have at least one staff member on site at all times, except in situations, such as taking a resident to the emergency room or planned or unplanned trips to the grocery store, that would require the staff person to be away from the facility for a brief period of time. In such situations, arrangements shall be made to monitor the safety of the residents in accordance with the service delivery plan.

l) Assisted living establishments shall have at least one staff member awake, on duty and on site 24 hours per day.

m) The establishment shall check the status of all applicants with the Nurse Aide Registry prior to hiring. The establishment is prohibited from hiring any individual who has a finding of abuse, neglect, or misappropriation of property on the Nurse Aide Registry.

n) Prior to employing any individual in a position that requires a State professional license, the establishment shall contact the Illinois Department of Professional Regulation to verify that the individual's license is active. A copy of the verification shall be placed in the individual's personnel file.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)
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SUBPART D: RESIDENT CARE AND SERVICES

Section 295.4000  Physician's Assessment

a) No more than 120 days prior to admission of a resident to any establishment, a comprehensive assessment that includes an evaluation of the prospective resident's physical, cognitive, and psychosocial condition, shall be completed by a physician. The physician's assessment shall include documentation of the presence or the absence of tuberculosis infection in accordance with the Control of Tuberculosis Code. At the time of admission, the physician's assessment must reflect the resident's current condition.

b) At least annually, once a resident has moved into the establishment, a comprehensive assessment shall be completed by a physician.

c) A physician's assessment shall be completed by a physician upon identification of a significant change in the resident's condition.

d) When a physician's assessment is conducted pursuant to this Part, all current negotiated risk agreements shall be renegotiated as necessary.

e) More frequent assessments of skin integrity and nutritional status shall be required (Section 15 of the Act) as ordered by the resident's physician and as arranged for by the resident.

f) It is the responsibility of the resident or his/her representative to have physician's assessments and reassessments completed.

g) Establishments may develop their own tools for evaluating their residents; however, the establishment evaluation does not replace the requirement for a physician's assessment. Documentation of evaluations and re-evaluations may be in any form that is accurate, that addresses the resident's condition, and that incorporates the physician's assessment.

h) The establishment shall monitor and have a reporting procedure in place for notifying a relative or other individual in an emergency situation, significant change in resident's condition, or termination of residency.

i) The establishment shall have policies in place to respond to the gradual deterioration of a resident's ability to carry out the activities of daily living that may accompany the aging process.
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(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

Section 295.4060 Alzheimer's and Dementia Programs

a) In addition to except as provided in this Section, Alzheimer and dementia programs shall comply with all of the other provisions of the Act. (Section 150(a) of the Act)

b) No person shall be admitted or retained in an assisted living or shared housing establishment if the establishment cannot provide or secure appropriate care, if the resident requires a level of service or type of service for which the establishment is not licensed or which the establishment does not provide, or if the establishment does not have the staff appropriate in numbers and with appropriate skill to provide such services. (Section 150(b) of the Act)

c) No persons shall be accepted for residency or remain in residence if the person's mental or physical condition has so deteriorated to render residency in such a program to be detrimental to the health, welfare or safety of the person or of other residents of the establishment. The assessment must be approved by the resident's physician and shall occur prior to acceptance for residency, annually, and at such time that a change in the resident's condition is identified by a family member, staff of the establishment, or the resident's physician. (Section 150(c) of the Act)

d) Individual residents shall be assessed prior to admission to the establishment using any one or a combination of the following assessment tools, based on the resident's condition and stage in the disease process:

1) Functional

   A) Functional Activities Questionnaire (FAQ)

   B) Physical Self-Maintenance Scale (PSMS); Activities of Daily Living

   C) Instrumental Activities of Daily Living (IADL)

   D) Clock Drawing Task (CDT)

   E) Progressive Deterioration Scale (PDS)
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F) Functional Assessment Staging (FAST)

2) Cognitive

A) Allen Cognitive Disabilities Theory

B) Alzheimer's Disease Assessment Scale, Cognitive Subsection (ADAS-Cog)

C) Blessed Information-Memory Concentration Test (BIMC)

D) Short Test of Mental State (STMS)

E) Clinical Dementia Rating Scale (CDR)

F) Mini-Mental State Examination (MMSE)

3) Global

A) Clinical Global Impression of Change (CGIC)

B) Clinical Interview-Based Impression Scale (CIBI)

C) Global Deterioration Scale (CDS)

D) Brief Cognitive Rating Scale (BCRS) (to use with Global Deterioration Scale)

e) No person shall be accepted for residency or remain in residence if the person is dangerous to self or others and the establishment would be unable to eliminate the danger through the use of appropriate treatment modalities. (Section 150(d) of the Act)

f) No person shall be accepted for residency or remain in residence if the person meets the criteria provided in subsections (b) through (g) of Section 75 of the Act. (Section 150(e) of the Act)

g) If an establishment accepts any individuals with cognitive impairments that prevent them from safely evacuating the establishment independently, sufficient staff members shall be present and awake 24 hours a day to assist in evacuation.
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h) An establishment that offers to provide a special program for persons with Alzheimer's disease and related disorders shall:

1) Disclose to the Department and to a potential or actual resident of the establishment information as specified under the Alzheimer's Special Care Disclosure Act;

2) Ensure that a resident's representative is designated for the resident;

3) Develop and implement policies and procedures that ensure the continued safety of all residents in the establishment including, but not limited to, those who:
   A) May wander; and
   B) May need supervision and assistance when evacuating the building in an emergency;

4) Provide coordination of communications with each resident, resident's representative, relatives and other persons identified in the resident's service plan;

5) Provide, in the service plan, appropriate cognitive stimulation and activities to maximize functioning, which include a structure and rhythm that are comfortable and predictable; offer an appropriate balance of rest and activity and private and social time; allow residents to express their accustomed social roles, whatever they may be; offer residents access to familiar activities that they enjoyed doing and that tap memories and retained abilities; and provide the flexibility to accommodate variations in the resident's mood, energy level, and inclination;

6) Provide an appropriate number of staff for its resident population. The establishment shall provide staff sufficient in number, with qualifications, adequate skills, education, and experience to meet the 24-hour scheduled and unscheduled needs of the residents and who participate in ongoing training, to serve the resident population. At a minimum, at least one staff member shall be awake and on duty at all times;

7) At a minimum, provide 1.4 hours of services per resident per day. For purposes of this Section, services shall mean assistance with activities of
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daily living, activities-based programming, and services delivered to the resident to meet the unique needs of residents with dementia;

8) Require the manager and direct care staff to complete sufficient comprehensive and ongoing dementia and cognitive deficit training as set forth in subsection (i) of this Section;

9) Develop emergency procedures and staffing patterns to respond to the needs of residents; (Section 150(f) of the Act)

10) Provide encouragement to eat snacks and meals and to take liquids; and

11) Have a supervisor of the program with training as outlined in subsection (i)(1) of this Section.

i) Training requirements for individuals working in a special program:

1) Manager qualifications and training:

A) The manager of an establishment providing Alzheimer care or the supervisor of an Alzheimer program must be 21 years of age and have:

i) a college degree with documented course work in dementia care, plus one year of experience working with persons with dementia; or

ii) at least two years of management experience with persons with dementia.

B) The manager or supervisor must complete, in addition to the training required in subsection (i)(2) of this Section and in Section 295.3020, six hours of annual continuing education regarding dementia care.

2) Staff training:

A) All staff members must receive, in addition to the training required in Section 295.3020, four hours of dementia-specific orientation prior to assuming job responsibilities without direct supervision within the Alzheimer's/dementia program. Training must cover, at
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A minimum, the following topics:

i) basic information about the causes, progression, and management of Alzheimer's disease and other related dementia disorders;

ii) techniques for creating an environment that minimizes challenging behavior;

iii) identifying and alleviating safety risks to residents with Alzheimer's disease;

iv) techniques for successful communication with individuals with dementia; and

v) residents' rights.

B) Direct care staff must receive 16 hours of on-the-job supervision and training within the first 16 hours of employment following orientation. Training must cover:

i) encouraging independence in and providing assistance with the activities of daily living;

ii) emergency and evacuation procedures specific to the dementia population;

iii) techniques for creating an environment that minimizes challenging behaviors;

iv) resident rights and choice for persons with dementia, working with families, caregiver stress; and

v) techniques for successful communication.

C) Direct care staff must annually complete 12 hours of in-service education regarding Alzheimer's disease and other related dementia disorders. Topics may include:

i) assessing resident capabilities and developing and implementing service plans;
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ii) promoting resident dignity, independence, individuality, privacy and choice;

iii) planning and facilitating activities appropriate for the dementia resident;

iv) communicating with families and other persons interested in the resident;

v) resident rights and principles of self-determination;

vi) care of elderly persons with physical, cognitive, behavioral and social disabilities;

vii) medical and social needs of the resident;

viii) common psychotropics and side effects;

ix) local community resources; and

x) other related issues.

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)
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1) **Heading of the Part:** Skilled Nursing and Intermediate Care Facilities Code

2) **Code Citation:** 77 Ill. Adm. Code 300

3) **Section Numbers:**
   - 300.7000 New Section
   - 300.7010 New Section
   - 300.7020 New Section
   - 300.7030 New Section
   - 300.7040 New Section
   - 300.7050 New Section
   - 300.7060 New Section
   - 300.7070 New Section
   - 300.7080 New Section

4) **Statutory Authority:** Nursing Home Care Act [210 ILCS 45]

5) **Effective date of amendments:** October 20, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain any incorporations by reference?** No

9) A copy of the adopted amendments, including any material incorporated by reference, is on file in the Department's principal office and is available for public inspection.

9) **Notices of Proposal was Published in Illinois Register:** 27 Ill. Reg. 16220; October 24, 2003

10) **Has JCAR issued a Statement of Objection to these amendments?** No

11) **Differences between proposal and final version:** The following changes were made in response to comments received during the First Notice or public comment period:

1. In the Main Source Note, "amended at 27 Ill. Reg. 18105, effective November 15, 2003; expedited correction at 28 Ill. Reg. 3528, effective November 15, 2003;" was added.

2. In Section 300.7000, subsection (c) was added before "a location . . .".

3. A new subsection "e)" was added in Section 300.7000, as follows:
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"e) A location that, subsequent to the recognition, has an A violation or repeat B violation shall notify current residents and their representatives. Within seven days after a location is issued an A or repeat violation, the licensee shall notify entities that have referred individuals to the unit within the previous 90 days, such as hospital discharge planners, Area Agency on Aging, and Alzheimer's Association."

4. In Section 300.7010(c), line 1, "pre-admission" was deleted; "of the resident before the resident is admitted. The evaluation" was added; ", which" was deleted.

5. In Section 300.7010(c), line 2, "health status" was added; in line 6, "this" was added after "for"; "the pre-admission" was deleted; "pre-admission" was deleted.

6. In Section 300.7010(d), "pre-admission" was deleted and "comprehensive" was added in line 1; in line 6, "on admission" was added after "needs"; "comprehensive" was added; "pre-admission" was deleted.

7. The following was added at the end of Section 300.7010(e): "If there are no available rooms, and reassignment is not possible, other measures shall be taken to protect residents' physical and mental health, e.g., increased staffing, or supervision."

8. The following was added at the end of Section 300.7020(a): "The assessment shall be completed within 14 days after admission."

9. In Section 300.7020(a)(1), a period was added after "resident" in line 2; "The facility shall attempt to interview" was added; "and interviews" was deleted; in line 3, "with" was deleted; the following was added at the end of the subsection: "This attempt shall be documented."

10. In Section 300.7020(b), "the resident's" was added before "admission" in line 2; "the resident's family" was deleted in line 5; the following was added after "plan" in line 7: "Others may participate at the discretion of the resident."

11. In Section 300.7010(b)(5), "of the resident" was added after "daily care".

12. In Section 300.7020(b)(8), ", resident's family" was deleted in line 1; "with the resident's permission" was deleted in line 3; in lines 4-5, "resident's" was changed to "resident"; "family" was deleted; ", with the approval of the resident" was deleted.
13. A new subsection (c) was added in Section 300.7020 as follows, and existing (c)-(e) were re-labeled:
"c) The facility shall include the resident's family (other than the resident's representative) in the interdisciplinary team and in care planning, and shall provide information to the family about the resident and the resident's care plan, with the consent of the resident or, as appropriate, the resident's representative.".

14. In Section 300.7020, new (f), "aides" was changed to "aids".

15. In Section 300.7030(a), the semi-colon after "used" in line 8 was changed to a period; "b)" was added after "used"; "flexibility" was changed to "Flexibility"; in line 10, the following was added after "residents": "The use of staff in nontraditional roles shall be documented in the unit's policies and procedures. Non-licensed staff who are not certified nursing assistants shall not provide nursing or personal care but are limited to assisting with activities of daily living and providing verbal cueing, for which the staff have been trained.".

16. In Section 300.7030 new (c), "2004" was changed to "2005" and "January" was changed to "July" in line 2.

17. A new subsection (d) was added in Section 300.7030:
"d) The unit shall use a distinct approach to resident care that is designed for persons with Alzheimer's disease and related dementia. The use of ability-centered care is recommended. If the facility uses an alternative approach, this approach shall be reviewed by the Department to determine if the care goals of the ability-centered care have been satisfied. Alternative methodologies shall not be implemented until the Department has approved them.".

18. Existing subsection 300.7030(c) was deleted; "d)" was changed to "e)".

19. In Section 300.7040(c), "with a census" was added after "Units" in line 1; "a census of" was added after "with" in line 2.

20. In Section 300.7040(e), "the" was deleted in line 1; "hours of" was deleted in line 3.

21. A new Section 300.7050(a)(2) was added:
"2) The unit director may support off-unit activities related to persons with
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Alzheimer's disease and related dementia, such as providing training to facility staff, assessment of potential residents, counseling to potential residents and their families, and consultation/assessment/care planning for facility residents with Alzheimer's disease and related dementia who do not reside on the unit."

"2)" was changed to "3)"); "requirements" was added after "following" in new subsection (a)(3).

22. In Section 300.7050(c)(1), "causes" was deleted and "nature" was added.

23. In Section 300.7050(f), "the effective date of this amendatory rulemaking" was replaced with "January 1, 2005."

24. In Section 300.7050, subsection (g) was relettered to (h) and a new subsection was added:

"g) For each training requirement in this Section, staff shall be evaluated to determine if they have met or exceeded stated learning objectives. Results shall be documented."

25. In Section 300.7060(d), "shall be provided" was moved to follow "areas".

26. In Section 300.7060(e), "2004" was changed to "2005"); "in those particular rooms" was deleted.

27. Section 300.7060(f) was deleted; "g)" was changed to "f)"); "2004" was changed to "2005" in new subsection (f).

28. In Section 300.7060, "h)" was changed to "g)"); "or hallways" was added after "bathrooms"; "(h)(1)" was changed to "h)"); "2004" was changed to "2005".

29. Section 300.7060(h)(2) was deleted.

30. The following was added in Section 300.7070(a)(1):

"F) Appropriate numbers of staff; and

G) Staff turnover."

31. In Section 300.7000(new)(d), "subsequently . . . compliance" was deleted; the following was added after "location": "that, subsequent to the recognition, has an A violation or a repeat B violation that is related to the operation of the unit". 
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32. In Section 300.7020(b)(7), " if appropriate." was added after "and"; a period was added after "physician"; "if appropriate" was deleted after "physician".

The following changes were made in response to comments and suggestions of the JCAR:

The changes requested by JCAR are nonsubstantive technical, typographical and format changes, all of which have been made.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes

13) Will this rulemaking replace an emergency rulemaking currently in effect? No

14) Are there any other amendments pending on this Part? Yes

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15) Summary and purpose of the amendments: This rulemaking adds a new Subpart U: Alzheimer's Special Care Unit or Center Providing Care to Persons with Alzheimer's Disease or Other Dementia. Subpart U is being added to implement Public Act 92-157, which required the Director of Public Health to appoint a Dementia Patient Care Advisory Committee to study appropriate care and staffing for dementia patients residing in long-term care facilities and to make recommendations regarding appropriate standards of care and staffing. Subpart U applies to facilities and distinct parts (units) that are subject to the Alzheimer's Special Care Disclosure Act, which requires a facility that offers to provide care for persons with Alzheimer's disease through an Alzheimer's special care unit or center to disclose information to the Department and to clients concerning the services offered by the facility. The rules include admission criteria for
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the Alzheimer's unit, resident assessments and care planning, provision for ability-centered care, activity programming, staffing requirements, requirements for the environment of the unit, quality assessment and improvement, and variances to enhance residents' quality of life.

16) Information and questions regarding these adopted amendments shall be directed to:

Susan Meister
Division of Legal Services
Department of Public Health
535 West Jefferson, Fifth Floor
Springfield, Illinois  62761

217/782-2043
e-mail: rules@idph.state.ill.us

The full text of the Adopted Amendments begins on the next page:
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TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER c: LONG-TERM CARE FACILITIES

PART 300
SKILLED NURSING AND INTERMEDIATE CARE FACILITIES CODE

SUBPART A: GENERAL PROVISIONS

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AUTHORITY: Implementing and authorized by the Nursing Home Care Act [210 ILCS 45].

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SUBPART U: ALZHEIMER'S SPECIAL CARE UNIT OR CENTER PROVIDING CARE TO PERSONS WITH ALZHEIMER'S DISEASE OR OTHER DEMENTIA

Section 300.7000 Applicability

a) This Subpart, in addition to the remainder of Part 300, as applicable, shall apply to facilities and distinct parts (units) that are subject to the Alzheimer's Special Care Disclosure Act.

b) The facility shall comply with the Alzheimer's Special Care Disclosure Act, in accordance with Section 300.163 of this Part, for this unit.

c) Facilities substantially in compliance with the requirements of this Subpart will receive written recognition from the Department.

d) A location that, subsequent to the recognition, has an A violation or a repeat B violation that is related to the operation of the unit shall immediately discontinue using the recognition, including, but not limited to, removing documentation of the recognition that may have been posted and removing any mention of the recognition from written documentation provided to families or the community.

e) A location that, subsequent to the recognition, has an A violation or repeat B violation shall notify current residents and their representatives. Within seven days after a location is issued an A or repeat violation, the licensee shall notify entities that have referred individuals to the unit within the previous 90 days, such
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as hospital discharge planners, Area Agency on Aging, and Alzheimer's Association.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7010 Admission Criteria

a) The unit shall have clearly defined admission, admission exclusion, and discharge criteria. This shall include a policy specifying the individuals whom the unit will admit and retain based on the stages of Alzheimer's disease, individuals' behaviors, or other definable needs. These criteria shall reflect the unit's mission and scope of services. A copy of these criteria shall be provided to the resident, resident's family, resident's representative, and prospective residents and their family/representative prior to admission.

b) All unit residents shall have a diagnosis of Alzheimer's disease or other types of dementia.

c) Unit staff shall complete a comprehensive evaluation of the resident before the resident is admitted. The evaluation shall include, but not be limited to, the prospective resident's health status, life-style, behavior, interests, and history. In addition to appropriate medical, behavioral, and social service professionals, the resident, the resident's family, the resident's representative, and the resident's most recent care giver shall have the opportunity to provide information for this evaluation. This information shall be available to staff before admission and shall be used in the assessment process after admission.

d) A resident may be admitted to the unit without a comprehensive evaluation in situations where a sudden change in circumstances renders the primary care giver unable to continue to provide care (e.g., death or incapacitating illness of the care giver; treatment and release of the prospective resident from a hospital emergency room). A plan shall be put in place prior to admission to meet the resident's needs on admission. In these situations, a comprehensive evaluation shall be initiated within 24 hours after admission and shall be completed within seven days after admission.

e) The health and behavior of each resident shall be considered by the facility in assigning roommates, so that no resident's physical or mental health is adversely affected by his or her roommate. If a resident's health or behavior changes after admission to the unit, or staff receive new information about a resident's health or behavior that indicates that the current room assignment would be harmful to a
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Resident's health, rooms will be reassigned as necessary to protect the health of all residents on the unit. If there are no available rooms, and reassignment is not possible, other measures shall be taken to protect residents' physical and mental health, e.g., increased staffing or supervision.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7020  Assessment and Care Planning

a) Resident assessments, in addition to requirements in other applicable State and federal regulations, shall include a standardized, functional, and objective evaluation of the resident's abilities, strengths, interests, and preferences. The assessment shall be completed within 14 days after admission.

1) Assessments shall include at least a behavioral and a functional assessment, as well as direct observations of the resident. The facility shall attempt to interview the resident, the resident's family, the resident's representative, and recent and current direct care givers. This attempt shall be documented.

2) Assessments shall include at least the following:

A) daily routine;

B) dining, mealtime approaches, and non-mealtime nutrition and hydration needs;

C) dressing, toileting, grooming, preference in bathing (e.g., bathing, showering, a.m./p.m.) and other personal care abilities;

D) ambulation and transferring abilities;

E) behavior triggers; effective calming approaches; and an analysis of each of the resident's patterns of dementia-related behaviors, such as wandering, agitation, anxiety, and safety issues; and

F) adaptive equipment or activities that allow the resident to function at the highest practical level.

3) Assessments shall be conducted by a nurse, physical therapist, occupational therapist, social worker or unit director who has at least two
years of experience working with residents with dementia and who has training in conducting behavioral or functional assessments.

4) The assessment process shall be ongoing by direct care staff or other professionals, as needed, and shall include the assessment components in subsection (a)(2).

b) The care plan shall be developed by an interdisciplinary team within 21 days after the resident's admission to the unit or center. The interdisciplinary team shall include, at least, the attending physician, a nurse with responsibility for the resident, other appropriate staff in disciplines as determined by the resident's needs, the resident, the resident's representative, and the certified nursing assistant (CNA) who is primarily responsible for this resident's direct care, or an alternate, if needed, to provide input and gain insight into the care plan. Others may participate at the discretion of the resident.

1) The care plan shall be ability centered in focus (see Section 300.7030) and shall define how the identified abilities, strengths, interests, and preferences will be encouraged and used by addressing the resident's physical and mental well-being; dignity, choice, security, and safety; use of retained skills and abilities; use of adaptive equipment; socialization and interaction with others; communication, on whatever level possible (verbal and nonverbal); healthful rest; personal expression; ambulation and physical exercise; and meaningful work.

2) As new behaviors manifest, the behaviors shall be evaluated and addressed in the care plan.

3) The resident's care plan shall be reviewed by the unit director 30 and 60 days after the initial care plan's development and shall be modified, as needed, with the participation of the interdisciplinary team.

4) The care plan shall be reviewed at least quarterly.

5) All appropriate staff shall have access to and shall use the information in the care plan in order to integrate the care plan into the daily care of the resident.

6) The care plan shall be implemented and followed by staff who care for the resident.
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7) Revisions may be made to the care plan at any time, with input from the resident, resident's family, and resident's representative, the care coordinator, and, if appropriate, the physician.

8) The resident and the resident's representative shall be given the opportunity to participate in care plan development and modification. If they are unable to attend, a copy or summary of the care plan or modifications shall be provided to the resident and resident's representative.

c) The facility shall include the resident's family (other than the resident's representative) in the interdisciplinary team and in care planning and shall provide information to the family about the resident and the resident's care plan, with the consent of the resident or, as appropriate, the resident's representative.

d) When a resident is moved within the facility or different direct care staff are newly assigned, discharging and receiving staff shall communicate verbally and with written documentation to the newly assigned staff about the care plan and the needs of the resident.

e) The unit shall have and follow a written plan for communicating information within departments, between shifts, between units, and with resident's family and resident's representative.

f) The unit shall have a procedure that is implemented and monitored for safeguarding residents' adaptive equipment, such as hearing aids, glasses, dentures, and feeding and ambulation equipment.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7030 Ability-Centered Care

a) Ability-centered care programming, also called activity-focused programming, recognizes the resident's abilities and competencies in care planning. Tasks are adapted and modified to provide for the resident's involvement at the maximum level of the resident's ability. Ability-centered care programming embraces the following concepts: activities are every event, encounter, and exchange with a staff member, volunteer, relative, or other individuals; activities are redefined as traditional (i.e., work related, recreational) and nontraditional (i.e., bathing, eating, walking); both independent and structured events are used.
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b) Flexibility is allowed in traditional staff roles and staff are encouraged to develop relationships with residents. The use of staff in non-traditional roles shall be documented in the unit's policies and procedures. Non-licensed staff who are not certified nursing assistants shall not provide nursing or personal care but are limited to assisting with activities of daily living and providing verbal cueing, for which the staff have been trained.

c) Unit directors and activity professionals for units established before January 1, 2005 shall participate in ability-centered care training before July 1, 2005. Unit directors and activity professionals for units established after January 1, 2005 shall have had course work in ability-centered care programming.

d) The unit shall use a distinct approach to resident care that is designed for persons with Alzheimer's disease and related dementia. The use of ability-centered care is recommended. If the facility uses an alternative approach, this approach shall be reviewed by the Department to determine if the care goals of the ability-centered care have been satisfied. Alternative methodologies shall not be implemented until the Department has approved them.

e) Dining and mealtime approaches shall address the special needs of individuals with dementia.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7040 Activities

a) The unit's activity program shall use ability-centered care programming.

b) Families shall have access to activity supplies and materials and shall be welcome and encouraged to participate.

c) Units with a census of more than 40 residents shall have a full-time activity professional who meets the requirements of Section 300.1410(c). Units with a census of 40 or fewer residents shall have an activity professional on duty at least 20 hours per week. This individual shall be responsible for providing activities and training staff in an ability-centered programming approach.

d) Activity programming shall be planned and provided throughout the day and evening, at least 7 days a week for an average of 8 hours per day.
Activities shall be adapted, as needed, to provide for maximum participation by individual residents. If a particular resident does not participate in at least an average of 4 activities per day over a one-week period, the unit director shall evaluate the resident's participation and have the available activities modified and/or consult with the interdisciplinary team.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7050  Staffing

a) The unit shall have a full-time unit director.

1) The director may have other responsibilities, within the unit, in units with fewer than 40 residents.

2) The unit director may support off-unit activities related to persons with Alzheimer's disease and related dementia, such as providing training to facility staff, assessment of potential residents, counseling to potential residents and their families, and consultation/assessment/care planning for facility residents with Alzheimer's disease and related dementia who do not reside on the unit.

3) The unit director shall have documented course work in dementia care and ability-centered care, and shall meet at least one of the following requirements:

   A) Have an associate's or a bachelor's degree and/or be a registered nurse and have at least one year of experience working with persons with Alzheimer's disease and other dementia; or

   B) Have a minimum of 5 years of experience working with persons with Alzheimer's disease and other dementia, at least two years of which are management experience working with persons with Alzheimer's disease and other dementia.

4) The unit director shall obtain at least 12 hours of continuing education every year, especially related to serving residents with Alzheimer's disease and other dementia.

b) The unit shall have assigned, consistent staff. There shall be enough staff to meet the scheduled and unscheduled needs of each resident, as defined in the
care plan, taking into account the purpose of the setting, the severity of dementia, and the resident's physical abilities, behavior patterns, and social and medical needs.

c) All staff who ever work on the unit (e.g., nurses, CNAs, housekeepers, social services and activities staff, and food service staff) shall receive at least four hours of dementia-specific orientation within the first 7 days of working on the unit. This orientation shall include:

1) Basic information about the nature, progression, and management of Alzheimer's disease and other dementia;

2) Techniques for creating an environment that minimizes challenging behavior from residents with Alzheimer's disease and other dementia;

3) Methods of identifying and minimizing safety risks to residents with Alzheimer's disease and other dementia; and

4) Techniques for successful communication with individuals with Alzheimer's disease and other dementia.

d) Nurses, CNAs, and social service and activities staff who work on the unit at least 50 percent of the time that they work at the facility shall participate in a minimum of 12 additional hours of orientation within the first 45 days after employment, specifically related to the care of persons with Alzheimer's disease and other dementia. This orientation shall be defined in facility policies and procedures; shall be in a form of classroom, return demonstration, and mentoring; and shall define to new staff the elements contained in Section 300.7050(e)(1)-(10).

e) Nurses, CNAs, and social services and activities staff who work on the unit at least 50 percent of the time that they work at the facility shall attend at least 12 hours of continuing education every year, specifically related to serving residents with Alzheimer's disease and other dementia. (Completion of the 12 hours of orientation in accordance with subsection (d) of this Section may be counted as continuing education for the year in which this orientation is completed.) Topics shall include, but not be limited to:

1) Promoting the philosophy of an ability-centered care framework;
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2) Promoting resident dignity, independence, individuality, privacy and choice;

3) Resident rights and principles of self-determination;

4) Medical and social needs of residents with Alzheimer's disease and other dementia;

5) Assessing resident capabilities and developing and implementing services plans;

6) Planning and facilitating activities appropriate for a resident with Alzheimer's disease and other dementia;

7) Communicating with families and others interested in the resident;

8) Care of elderly persons with physical, cognitive, behavioral, and social disabilities;

9) Common psychotropics and their side effects; and

10) Local community resources.

f) Within 6 months after January 1, 2005, or within 6 months after hire, the facility administrator and director of nursing shall attend the orientation for staff who work on the unit at least 50 percent of the time in accordance with subsection (d).

g) For each training requirement in this Section, staff shall be evaluated to determine if they have met or exceeded stated learning objectives. Results shall be documented.

h) Training requirements of this Section are in addition to requirements for nurse aide training. Orientation requirements of this Section are in addition to regular staff orientation.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7060 Environment

a) The environment (cultural, social, and physical) shall support the
functioning of cognitively impaired residents. It shall accommodate behaviors, maximize functional abilities, promote safety, and encourage residents' independence by compensating for losses resulting from the disease process in accordance with each resident's care plan.

b) The unit shall use a variety of sensory cues to differentiate rooms, spaces, and uses.

c) The unit shall be designed and maintained to ensure an appropriate range of environmental and sensory stimulation and information; e.g., using minimally distracting security, pager and safety systems.

d) Visual supervision of indoor and outdoor activity areas shall be provided, supported by architectural design. Staff shall be present in activity areas when residents are in these areas.

e) Resident rooms shall not contain more than two beds. Rooms containing more than 2 beds within units established prior to January 1, 2005 may retain more than 2 beds.

f) A secure out-of-doors space shall be provided in units established after January 1, 2005 and, whenever possible, in units established before January 1, 2005. If a secure out-of-doors space is not available, the facility shall implement a plan to provide residents with the opportunity for daily, routine outdoor activities, weather permitting.

g) Social space appropriate to the needs of the individual with Alzheimer's disease and other dementia shall be provided. Social space is any space that is independently accessible to the resident, except for the resident's bedroom, the bathroom, or shower/bathrooms or hallways. Social space includes, but is not limited to, dining room, living room, family visitation areas, unit kitchen, and activity areas.

h) In facilities establishing a unit after January 1, 2005, this social space shall equal at least 40 square feet per resident bed.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7070 Quality Assessment and Improvement
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED AMENDMENTS

The unit shall have a written plan that is part of the facility's overall quality assurance plan to assess residents' quality of care, quality of life, and overall well-being.

a) The licensee shall develop and implement a quality assessment and improvement program designed to meet at least the following goals:

1) Ongoing monitoring and evaluation of the quality of care and service provided at the facility, including, but not limited to:

   A) Admission of residents who are appropriate to the capabilities of the facility;

   B) Resident assessment;

   C) Development and implementation of appropriate individualized, ability-centered treatment plans;

   D) Resident satisfaction;

   E) Infection control;

   F) Appropriate numbers of staff; and

   G) Staff turnover.

2) Identification and analysis of problems.

3) Identification and implementation of corrective action or changes in response to problems.

b) The program shall operate pursuant to a written plan that shall include, but not be limited to:

1) A detailed statement of how problems will be identified, including procedures to elicit insights from residents, residents' families, and residents' representatives;

2) The methodology and criteria that will be used to formulate action plans to address problems, which shall include the insights of residents, residents' families, and residents' representatives;
NOTICE OF ADOPTED AMENDMENTS

3) Procedures for evaluating the effectiveness of action plans and revising action plans to prevent reoccurrence of problems;

4) Procedures for documenting the activities of the program; and

5) Identifying the persons responsible for administering the program.

c) A copy of the plan shall be provided to residents, residents' families, or residents' representatives.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)

Section 300.7080 Variances to Enhance Residents' Quality of Life

a) The Department will consider requests for variances from this Part where the variance will enhance the residents' quality of life. The variance shall be requested in writing and shall contain the following information:

1) Facility contact person;

2) The specific Section of this Part from which the applicant is requesting a variance;

3) The proposed alternative plan, service, or approach to meet the needs of the residents;

4) The benefit to the residents if the variance is approved; and

5) The facility plan to evaluate the effectiveness of the variance in meeting the residents' needs, including eliciting insights from residents, residents' families, and residents' representatives.

b) The facility shall not implement the variance prior to receiving written approval from the Department.

c) The Department will advise the facility in writing if the variance is approved, denied or approved with conditions or limitations within 90 days after receipt of the request. The Department's decision to approve, deny, or approve the variance with conditions or limitations shall be based on whether the proposed alternative provides an equivalent level of care and safety to the residents.
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED AMENDMENTS

d) Variances will not be granted for statutory requirements.

(Source: Added at 28 Ill. Reg. 14623, effective October 20, 2004)
NOTICE OF ADOPTED RULES

1) **Heading of the Part:** Americans With Disabilities Act Grievance Procedure

2) **Code Citation:** 4 Ill. Adm. Code 1625

3) **Section Numbers:**
   - 1625.10 New Section
   - 1625.20 New Section
   - 1625.30 New Section
   - 1625.40 New Section
   - 1625.50 New Section
   - 1625.60 New Section
   - 1625.70 New Section

4) **Statutory Authority:** 230 ILCS 5/9(b)

5) **Effective Date:** November 1, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Do these rules contain incorporations by reference?** No

8) A copy of these adopted rules, together with any material incorporated by reference, is available for public inspection at the IRB Central Office, 100 West Randolph, Suite 7-701, Chicago, Illinois, during the hours of 9:00 a.m. to 5:00 p.m.

9) **Notice of Proposal Published in Illinois Register:** 28 Ill. Reg. 8822; 6/25/04

10) **Has JCAR issued a Statement of Objection to this rulemaking?** No

11) **Differences between proposal and final version:** None

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the letter issued by JCAR?** Yes

13) **Will these rules replace any emergency rules currently in effect?** No

14) **Are there any other proposed amendments pending on this Part?** No
ILLINOIS RACING BOARD

NOTICE OF ADOPTED RULES

15) **Summary and purpose of rules:** 28 CFR 35.107 requires all agencies of state government, employing at least 50 persons, to publish rules governing the grievance procedure under the Americans with Disabilities Act of 1990.

16) **Information and questions regarding these adopted rules shall be directed to:**

   Mickey Ezzo  
   Illinois Racing Board  
   100 West Randolph, Suite 7-701  
   Chicago, Illinois 60601  
   (312) 814-5017

   The full text of the Adopted Rules begins on the next page:
Section 1625.10  Purposes

a) This grievance procedure is established pursuant to the Americans With Disabilities Act of 1990 (42 USC 12101 et seq.) (ADA) and specifically Section 35.107 of the Title II regulations, 28 CFR 35, requiring that a grievance procedure be established to resolve grievances asserted by qualified individuals with disabilities. Should any individual desire to review the ADA or its regulations to understand the rights, privileges and remedies afforded by it, please contact the Designated Coordinator.

b) In general, the ADA requires that each program, service and activity offered by the Illinois Racing Board (Board), when viewed in its entirety, be readily accessible to and usable by qualified individuals with disabilities.

c) It is the intention of the Board to foster open communication with all individuals requesting readily accessible programs, services and activities. The Board encourages supervisors of programs, services and activities to respond to requests for modifications before they become grievances.
Section 1625.20 Definitions

"Act" or "ADA" means the Americans With Disabilities Act of 1990 (42 USC 12101 et seq.).

"Board" means the Illinois Racing Board.

"Complainant" is an individual with a disability who files a Grievance Form provided by the Board under this procedure.

"Designated Coordinator" is the person appointed by the Executive Director who is responsible for the coordination of efforts of the Board to comply with and carry out its responsibilities under Title II of the ADA, including investigation of grievances filed by complainants. The Designated Coordinator may be contacted at 100 W. Randolph St., Suite 11-100, Chicago, Illinois 60601. (See 28 CFR 35.107.)

"Executive Director" means the Executive Director of the Illinois Racing Board.

"Disability" means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of that individual; a record of the impairment; or being regarded as having an impairment.

"Grievance" is any complaint under the ADA that is reduced to writing by an individual with a disability who meets the essential eligibility requirements for participation in or receipt of the benefits of a program, activity or service offered by the Board and believes he or she has been excluded from participation in or denied the benefits of any program, service or activity of the Board, or has been subject to discrimination by the Board.

"Grievance Form" is prescribed for the purpose of filing a grievance under this Part and includes information such as name, address, phone number, and nature of the grievance, with specificity, including date of incident, time, place and witnesses, if applicable.

"Qualified individual with a disability" means an individual with a disability who, with or without reasonable modifications to rules, policies, or practices, the removal of architectural, communication, or transportation barriers, or the provision of auxiliary aids and services, meets the essential eligibility requirements for the receipt of services or the participation in programs or activities provided by the Illinois Racing Board.

Section 1625.30 Procedure
Grievances must be submitted in accordance with the steps and time limits set forth in Sections 1625.40 and 1625.50. It is mutually desirable and beneficial that grievances be satisfactorily resolved in a prompt manner. Time limits established in this procedure are in calendar days, unless otherwise stated, and may be extended by mutual agreement, in writing, by the complainant and the reviewer, at the Designated Coordinator and Final Levels described in Section 1625.50.

A complainant's failure to submit a grievance, or to submit or appeal it to the next level of procedure within the specified time limits, shall mean that the complainant has withdrawn the grievance or has accepted the last response given in the grievance procedure.

The Board shall, upon being informed of an individual's desire to file a formal grievance, instruct the individual how to receive a copy of this procedure and the Grievance Form.

Section 1625.40 Designated Coordinator Level

If an individual desires to file a formal written grievance, the individual shall promptly, but no later than 180 days after the alleged discrimination, submit the grievance to the Designated Coordinator in writing on the Grievance Form prescribed for that purpose. The Grievance Form must be completed in full in order to receive proper consideration by the Designated Coordinator.

Upon request, assistance shall be provided by the Board to complete the Grievance Form.

The Designated Coordinator, or his/her representative, shall investigate the grievance and, if the grievance is found to be valid, shall make reasonable efforts to resolve it. The Designated Coordinator shall provide a written response to the complainant and Executive Director within 15 business days after receipt of the Grievance Form.

Section 1625.50 Final Level

If the grievance has not been resolved at the Designated Coordinator Level to the satisfaction of the complainant, the complainant may submit a copy of the Grievance Form and Designated Coordinator's response to the Executive Director for final review. The complainant shall submit these documents to the Executive Director, together with a short written statement explaining the reasons for
NOTICE OF ADOPTED RULES

dissatisfaction with the Designated Coordinator's written response, within 15 business days after receipt by the complainant of the Designated Coordinator's response.

b) Within 15 business days, the Executive Director shall appoint a 3-member panel to review the grievance at the Final Level. One member so appointed shall be designated chairman. The panel shall schedule a review of the grievance, which shall commence no later than 15 business days after the last member of the panel is appointed.

c) The complainant shall be afforded an opportunity to appear before the panel. Complainant shall have a right to appoint a representative to appear on his/her behalf. The panel shall review the Designated Coordinator's written response and may conduct interviews and seek advice as it deems appropriate.

d) Upon reaching a concurrence, but not later than 15 business days after the review described in subsection (b), the panel shall make recommendations in writing to the Executive Director as to the proper resolution of the grievance. All recommendations shall include reasons for such recommendations and shall bear the signatures of the concuring panel members. A dissenting member of the panel may make a recommendation to the Executive Director in writing and shall also sign the recommendation.

e) Within 15 business days after receipt of recommendations from the panel, the Executive Director shall approve, disapprove or modify the panel recommendations; shall render a decision on those recommendations in writing; shall state the basis for his or her decision; and shall cause a copy of the decision to be served on the parties. The Executive Director's decision shall be final. If the Executive Director disapproves or modifies the panel's recommendations, the Executive Director shall include written reasons for such disapproval or modification.

f) The Grievance Form, the Designated Coordinator's response, the statement of reasons for dissatisfaction, the recommendations of the panel, and the decision of the Executive Director shall be maintained in accordance with the State Records Act [5 ILCS 160] or as otherwise required by law.

Section 1625.60  Accessibility
The Board shall ensure that all stages of the grievance procedure are readily accessible to and usable by individuals with disabilities.

Section 1625.70 Case-by-Case Resolution

Each grievance involves a unique set of factors that includes but is not limited to: the specific nature of the disability; the essential eligibility requirements, the benefits to be derived, and the nature of the service, program or activity at issue; the health and safety of others; and whether an accommodation would constitute a fundamental alteration to the program, service or activity or undue hardship on the Board. Accordingly, termination of a grievance at any level, whether through the granting of relief or otherwise, shall not constitute a precedent on which any other complainants should rely.
ILLINOIS REGISTER

ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

1) Heading of the Part: Racing Rules

2) Code Citation: 11 Ill. Adm. Code 1318

3) Section Number: Adopted Action:
   1318.30 Amended

4) Statutory Authority: 230 ILCS 5/9(b)

5) Effective Date: November 1, 2004

6) Does this rulemaking contain an automatic repeal date? No

7) Does this amendment contain incorporations by reference? No

8) A copy of this adopted amendment, including any material incorporated by reference, is available for public, inspection at the IRB Central Office, 100 West Randolph, Suite 7-701, Chicago, Illinois, between the hours of 9:00 a.m. and 5:00 p.m.

9) Notice of Proposal Published in Illinois Register: 28 Ill. Reg. 10348; 7/23/04

10) Has JCAR issued a Statement of Objection to this rulemaking? No

11) Differences between proposal and final version: None

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes

13) Will this amendment replace any emergency amendment currently in effect? No

14) Are there any other proposed amendments pending on this Part? No

15) Summary and purpose of amendment: The rulemaking as previously written was ambiguous because it permitted the disqualification of an entry mate of a horse that was found guilty of a racing violation if the stewards determined that the violation affected the finish of the race. Any racing incident, no matter how minor, could theoretically affect the finish of the race. The original intent of the rule was to disqualify the entry mate only in the event the violation directly improved its finishing position.
ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

16) **Information and questions regarding this adopted amendment shall be directed to:**

   Mickey Ezzo  
   Illinois Racing Board  
   100 West Randolph, Suite 7-701  
   Chicago, Illinois 60601  
   (312) 814-5017

   The full text of the Adopted Amendment begins on the next page:
ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

TITLE 11: ALCOHOL, HORSE RACING, AND LOTTERY
SUBTITLE B: HORSE RACING
CHAPTER I: ILLINOIS RACING BOARD
SUBCHAPTER f: RULES AND REGULATIONS OF HARNESS RACING

PART 1318
RACING RULES

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<td>1318.20</td>
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<td>1318.190</td>
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AUTHORITY: Authorized by Section 9(b) of the Illinois Horse Racing Act of 1975 [230 ILCS 5/9(b)].

NOTICE OF ADOPTED AMENDMENT

Section 1318.30 Disqualification of Entries

a) If two or more horses are coupled in the betting as an entry and one or more of them is guilty of interference or is disqualified for violation of any portion of this Part (11 Ill. Adm. Code 1318), the other horse coupled as an entry shall also be disqualified if the stewards determine that it improved its finishing position as a direct result of the violation, based on their viewing of the race and the video replays, that such violation affected the finish of the race. If said violation is without effect upon the finish of the race, the offender shall be disqualified and the other horse in the entry shall not be disqualified.

b) In determining the extent of disqualification, the stewards shall disqualify and place the offending horse or horses behind such horses as may have suffered by reason of the violation of the rules.

(Source: Amended at 28 Ill. Reg. 14658, effective November 1, 2004)
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

1) **Heading of the Part:** Property Tax Code

2) **Code Citation:** 86 Ill. Adm. Code 110

3) **Section Number:** 110.160  
   **Adopted Action:** Amendment

4) **Statutory Authority:** 35 ILCS 200/2-10 and 2-15

5) **Effective Date of Amendment:** October 19, 2004

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this amendment contain incorporations by reference?** No

8) A copy of the adopted amendment, including any material incorporated by reference, is on file in the agency’s principal office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** 28 Ill. Reg. 9237; 07/09/04

10) **Has JCAR issued a Statement of Objection to this amendment?** No

11) **Differences between proposal and final version:** The only changes made were the ones agreed upon with JCAR. The changes made were grammar and punctuation or technical. No substantive changes were made.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR?** Yes

13) **Will this amendment replace any emergency amendments currently in effect?** Yes

14) **Are there any amendments pending on this Part?** Yes

<table>
<thead>
<tr>
<th>Section Number</th>
<th>Proposed Action</th>
<th>Illinois Register Citation</th>
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<tr>
<td>110.170</td>
<td>Amendment</td>
<td>28 Ill. Reg. 12402; 09/03/04</td>
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15) **Summary and Purpose of Amendment:** Subsection (b): Corrects listing for new multi-township assessment districts in DeWitt and Vermilion counties.
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

16) Information and questions regarding this adopted amendment shall be directed to:

Mark Dyckman  
Senior Counsel  
Legal Services Office  
Illinois Department of Revenue  
101 West Jefferson  
Springfield, Illinois 62794  

Phone: (217) 782-2844

The full text of the Adopted Amendment begins on the next page:
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

TITLE 86: REVENUE
CHAPTER I: DEPARTMENT OF REVENUE

PART 110
PROPERTY TAX CODE

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<th>Title</th>
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<td>110.105</td>
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<td>Procedures for Assessment of Pollution Control Facilities and Low Sulphur Dioxide Emission Coal Fueled Devices</td>
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<td>110.130</td>
<td>Hearings and Records of Chief County Assessment Officers</td>
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<td>110.135</td>
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<td>110.ILLUSTRATION A</td>
<td>State of Illinois Board of Review Course and Exam Requirements</td>
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</tbody>
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AUTHORITY: Implementing the Property Tax Code [35 ILCS 200] and authorized by Section 2505-625 of the Civil Administrative Code of Illinois [20 ILCS 2505/2505-625].
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT


Section 110.160 Multi-township Assessment Districts

a) The following list of multi-township assessment districts has been promulgated by this Department in accordance with Sections 2-10 and 2-15 of the Property Tax Code [35 ILCS 200/2-10 and 2-15], which has been in effect since January 1, 1994, and:

1) for candidacy purposes related to terms beginning January 1, 2006, will continue to be in effect until the certification of pre-election requirements
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

by the Department under Sections 2-50 and 2-52 of the Property Tax Code [35 ILCS 200/2-50 and 2-52];

2) for purposes of appointing assessors or contracting with a qualified person to fill office vacancies, will continue to be in effect through December 31, 2005;

3) for purposes of distributions under Section 2-10 and disbursements under Section 2-25 of the Property Tax Code [35 ILCS 200/2-10 and 2-25], will continue to be in effect through November 30, 2005; and

4) for assessment purposes, will continue to be in effect through December 31, 2005:

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<thead>
<tr>
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<th>Townships in District</th>
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<tbody>
<tr>
<td>Adams</td>
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<td></td>
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<td>4. Houston, Northeast</td>
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<td>5. Clayton, Concord</td>
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<td>6. Fall Creek, Payson</td>
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<tr>
<td>Bond</td>
<td>1. Mills, Tamalco</td>
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<tr>
<td>Boone</td>
<td>1. Manchester, LeRoy, Caledonia</td>
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<td></td>
<td>2. Bonus, Spring</td>
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<tr>
<td>Brown</td>
<td>1. Lee, Pea Ridge, Missouri, Ripley, Cooperstown</td>
</tr>
<tr>
<td></td>
<td>2. Buckhorn, Elkhorn, Versailles</td>
</tr>
<tr>
<td>Bureau</td>
<td>1. Bureau, Walnut</td>
</tr>
<tr>
<td></td>
<td>2. Berlin, Westfield</td>
</tr>
<tr>
<td></td>
<td>3. Leepertown, Selby</td>
</tr>
<tr>
<td></td>
<td>4. Fairfield, Gold, Mineral</td>
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<td>5. Neponset, Macon</td>
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<td>6. Greenville, Manlius</td>
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<td>7. Indiantown, Arispie, Milo, Wheatland</td>
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<td></td>
<td>8. Ohio, Dover</td>
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</tbody>
</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

9. LaMoille, Clarion

Carroll
1. Washington, Woodland, Freedom
2. Salem, Fairhaven
3. Elkhorn Grove, Wysox

Cass
1. Sangamon Valley, Virginia
2. Ashland, Philadelphia
3. Panther Creek, Newmansville, Chandlerville
4. Bluff Springs, Arenzville, Hagener

Champaign
1. East Bend, Newcomb, Condit, Hensley
2. Ludlow, Rantoul
3. Harwood, Kerr, Compromise
4. Stanton, Ogden
5. Colfax, Sadorus
6. Pesotum, Crittenden
7. Raymond, Ayers, South Homer

Christian
1. Mt. Auburn, Mosquito
2. Stonington, Prairieton
3. King, Bear Creek, Johnson
4. Greenwood, Rosamond, Locust

Clark
1. Westfield, Parker
2. Dolson, Auburn, Douglas, Anderson, Darwin
3. Johnson, Orange, Melrose, York

Clay
1. Larkinsburg, Oskaloosa, Blair
2. Bible Grove, Hoosier, Pixley
3. Stanford, Clay City
4. Songer, Xenia

Clinton
1. St. Rose, Wheatfield
2. Irishtown, Carlyle
3. Santa Fe, Lake
4. Clement, Meridian, East Fork
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

Coles
1. Seven Hickory, Charleston
2. Morgan, East Oakland
3. Ashmore, Hutton
4. North Okaw, Humboldt

Crawford
1. Licking, Prairie
2. Lamotte, Montgomery
3. Martin, Honey Creek, Southwest

Cumberland
1. Cottonwood, Union, Crooked Creek
2. Spring Point, Woodbury

DeKalb
1. South Grove, Mayfield
2. Malta, Milan
3. Afton, Pierce
4. Shabbona, Paw Paw
5. Victor, Somonauk

DeWitt
1. Waynesville, Barnett
2. Wilson, Rutledge, Harp, DeWitt
3. Tunbridge, Texas
4. Nixon, Creek

Douglas
1. Murdock, Newman
2. Bowdre, Sargent

Edgar
1. Brouilletts Creek, Edgar, Prairie
2. Buck, Embarrass, Grandview
3. Elbridge, Hunter, Stratton
4. Shiloh, Young America

Effingham
1. Banner, Liberty, Moccasin
2. Jackson, Mason
3. Mound, West
4. Watson, Union
5. Bishop, Lucas

Fayette
1. North Hurricane, South Hurricane, Shafter, Bear Grove
2. Seminary, Pope, Kaskaskia
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

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<tbody>
<tr>
<td>3.</td>
<td>Wilberton, Lone Grove, LaClede</td>
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<tr>
<td>4.</td>
<td>Sefton, Otego, Wheatland</td>
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<td>5.</td>
<td>Loudon, Carson, Bowling Green</td>
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**Ford**

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<td>1.</td>
<td>Drummer, Dix</td>
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<td>2.</td>
<td>Patton, Button</td>
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<td>3.</td>
<td>Sullivant, Peach Orchard, Lyman, Wall</td>
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<td>4.</td>
<td>Brenton, Pella, Mona, Rogers</td>
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**Franklin**

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<tr>
<td>1.</td>
<td>Goode, Barren</td>
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<td>Ewing, Northern</td>
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<td>Eastern, Cave</td>
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**Fulton**

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<tr>
<td>1.</td>
<td>Ellisville, Young Hickory, Deerfield, Lee</td>
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<td>Fairview, Joshua</td>
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<td>3.</td>
<td>Harris, Cass, Bernadotte, Farmers</td>
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<td>4.</td>
<td>Pleasant, Isabel, Woodland, Kerton, Waterford</td>
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<td>5.</td>
<td>Banner, Liverpool</td>
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**Gallatin**

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<tbody>
<tr>
<td>1.</td>
<td>New Haven, Shawnee</td>
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<td>2.</td>
<td>Omaha, Asbury, North Fork</td>
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<tr>
<td>3.</td>
<td>Equality, Bowlesville, Eagle Creek</td>
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**Greene**

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<td>Patterson, Roodhouse</td>
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<td>2.</td>
<td>Athensville, Rubicon, Wrights</td>
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<td>3.</td>
<td>Walkerville, Bluffdale, Woodville</td>
</tr>
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<td>4.</td>
<td>Linder, Rockbridge</td>
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**Grundy**

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<td>Norman, Wauponsee</td>
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<td>2.</td>
<td>Highland, Vienna, Mazon</td>
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<td>3.</td>
<td>Goodfarm, Garfield, Greenfield</td>
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<tr>
<td>4.</td>
<td>Maine, Braceville</td>
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<tr>
<td>5.</td>
<td>Nettle Creek, Erienna</td>
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**Hamilton**

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<tbody>
<tr>
<td>1.</td>
<td>Dahlgren, Knights Prairie</td>
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<td>2.</td>
<td>Flannigan, South Flannigan, Twigg, South Twigg, Mayberry</td>
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<tr>
<td>3.</td>
<td>Crouch, South Crouch, Beaver Creek, Crook</td>
</tr>
</tbody>
</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

| Hancock   | 1. Nauvoo, Appanoose, Sonora  |
|           | 2. Pontoosuc, Dallas City, Rock Creek |
|           | 3. Prairie, Carthage |
|           | 4. Warsaw, Wilcox, Rocky Run |
|           | 5. Durham, Pilot Grove, Fountain Green, Hancock |
|           | 6. Wythe, Walker, St. Albans |
|           | 7. Chili, Augusta |
|           | 8. Bear Creek, Harmony, St. Mary |

| Henderson | 1. Biggsville, Rozetta, Bald Bluff |
|           | 2. Media, Raritan, Terre Haute |
|           | 3. Stronghurst, Carman |

| Henry     | 1. Edford, Osco |
|           | 2. Lynn, Andover |
|           | 3. Munson, Cornwall, Burns |
|           | 4. Loraine, Yorktown, Alba |
|           | 5. Weller, Galva |

| Iroquois  | 1. Ridgeland, Onarga, Artesia |
|           | 2. Pigeon Grove, Fountain Creek |
|           | 3. Milford, Stockland, Lovejoy, Prairie Green |
|           | 4. Crescent, Ash Grove |
|           | 5. Milks Grove, Ashkum |
|           | 6. Beaver, Concord |
|           | 7. Papineau, Beaverville |
|           | 8. Danforth, Iroquois |

| Jackson   | 1. Ora, Vergennes |
|           | 2. Degognia, Kinkaid, Fountain Bluff, Levan |
|           | 3. Sand Ridge, Grand Tower, Pomona |

| Jasper    | 1. Crooked Creek, Grandville, Hunt City |
|           | 2. Smallwood, Fox, Sainte Marie, Willow Hill |
|           | 3. Grove, North Muddy, South Muddy |

| Jefferson | 1. Grand Prairie, Casner |
|           | 2. Blissville, Bald Hill, Elk Prairie |
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

3. Field, Farrington
4. Pendleton, Moores Prairie

Jersey
1. Ruyle, Jersey, Fidelity
2. Richwood, English
3. Rosedale, Otter Creek

Jo Daviess
1. Apple River, Thompson
2. Berreman, Derinda, Pleasant Valley, Wards Grove
3. Council Hill, Guilford, Scales Mound
4. Elizabeth, Woodbine
5. Hanover, Rice
6. Menominee, Rawlins, Vinegar Hill
7. Nora, Rush, Warren

Kankakee
1. Rockville, Manteno
2. Sumner, Yellowhead
3. Essex, Salina

Kendall
1. Lisbon, Seward, Na-au-say

Knox
1. Rio, Henderson
2. Walnut Grove, Lynn, Copley, Victoria
3. Persifer, Truro
4. Knox, Galesburg, Cedar, Indian Point
5. Orange, Haw Creek
6. Chestnut, Maquon, Salem, Elba

LaSalle
1. Meriden, Ophir, Troy Grove
2. Freedom, Serena
3. Mission, Miller
4. Dimmick, Waltham, Wallace
5. Utica, Deer Park
6. Fall River, Grand Rapids
7. Vermilion, Farm Ridge
8. Hope, Richland
9. Brookfield, Allen
10. Osage, Groveland
<table>
<thead>
<tr>
<th>County</th>
<th>Towns</th>
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<td>1. Allison, Denison</td>
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<td>3. Petty, Bond, Russell</td>
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<td>2. Nelson, Harmon</td>
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<td>3. South Dixon, Marion, East Grove, Hamilton</td>
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<td>4. Reynolds, Alto, Viola, Willow Creek</td>
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<td>5. Brooklyn, Wyoming</td>
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<td>6. Ashton, Bradford</td>
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<td>7. Amboy, Lee Center</td>
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<td>Livingston</td>
<td>1. Chatsworth, Germanville</td>
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<td>3. Sunbury, Nevada, Esmen</td>
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<td>4. Round Grove, Union, Broughton</td>
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<td>5. Long Point, Amity</td>
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<td>6. Rooks Creek, Waldo, Pike</td>
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<td>7. Owego, Eppards Point, Avoca</td>
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<td>8. Saunemin, Sullivan, Pleasant Ridge, Charlotte</td>
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<td>9. Indian Grove, Belle Prairie</td>
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<td>10. Forrest, Fayette</td>
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<td>Logan</td>
<td>1. Prairie Creek, Sheridan</td>
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<td>2. Orvil, Eminence</td>
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<td>3. Atlanta, Oran</td>
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<td>4. Chester, Mount Pulaski</td>
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<td>5. Corwin, Broadwell</td>
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<td>6. Hurlbut, Elkhart</td>
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<td>7. Aetna, Laenna, Lake Fork</td>
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<td>McDonough</td>
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<td>2. Sciota, Walnut Grove</td>
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<td>3. Bushnell, Prairie City</td>
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<td>4. Chalmers, New Salem, Scotland</td>
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<td>5. Tennessee, Lamoine, Bethel</td>
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<td>6. Industry, Eldorado</td>
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<td>7. Macomb, Mound</td>
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</tbody>
</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

McLean
1. Allin, Dale
2. Old Town, Downs
3. West, Bellflower, Cheneys Grove
4. Yates, Lawndale, Cropsey, Anchor
5. Money Creek, Lexington
6. Blue Mound, Martin
7. Dawson, Arrowsmith
8. White Oak, Dry Grove
9. Mount Hope, Funk's Grove

Macon
1. Austin, Illini
2. Oakley, Whitmore
3. Niantic, Harristown
4. Blue Mound, Pleasant View
5. Mount Zion, Milam

Macoupin
1. Scottville, Barr, Western Mound, Chesterfield
2. North Palmyra, North Otter
3. South Palmyra, South Otter
4. Nilwood, Shaws Point, Honey Point
5. Bird, Polk, Hillyard, Brushy Mound

Madison
1. New Douglas, Leef

Marion
1. Patoka, Carrigan
2. Foster, Tonti
3. Kinnamon, Meacham
4. Alma, Omega
5. Stevenson, Haines
6. Iuka, Romine

Marshall
1. Saratoga, Whitefield, La Prairie
2. Hopewell, Roberts, Bell Plain, Richland

Mason
1. Forest City, Quiver
2. Allens Grove, Pennsylvania, Salt Creek
3. Crane Creek, Kilbourne, Sherman
4. Bath, Lynchburg
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

Mercer 1. Eliza, Duncan, Perryton
2. Keithsburg, Abington, Ohio Grove
3. Suez, North Henderson
4. New Boston, Millersburg

Montgomery 1. Harvel, Pitman, Zanesville
2. Butler Grove, Irving, Rountree
3. Audubon, Nokomis
4. Witt, Fillmore, South Fillmore
5. Grisham, Walshville

Moultrie 1. Dora, Marrowbone
2. Lowe, Jonathan Creek
3. East Nelson, Whitley

Ogle 1. Eagle Point, Buffalo, Woosung
2. Brookville, Forreston
3. Scott, White Rock
4. Maryland, Lincoln
5. Pine Creek, Grand Detour
6. Taylor, Lafayette, Pine Rock
7. Lynnville, Dement

Peoria 1. Millbrook, Brimfield
2. Princeville, Akron
3. Logan, Trivoli

Piatt 1. Goose Creek, Willow Branch

Pike 1. Fairmount, Perry, Chambersburg
2. Hadley, New Salem, Pleasant Vale, Derry
3. Flint, Detroit, Montezuma
4. Newburg, Hardin
5. Atlas, Martinsburg
6. Pleasant Hill, Ross
7. Spring Creek, Pearl
8. Kinderhook, Levee, Cincinnati

Putnam 1. Hennepin, Senachwine
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

<table>
<thead>
<tr>
<th>County</th>
<th>Towns</th>
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<tbody>
<tr>
<td>Richland</td>
<td>Noble, Decker, Denver</td>
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<td>Madison, Bonpas</td>
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<td>Buffalo Prairie, Drury</td>
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<td>Canoe Creek, Zuma</td>
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<td>Cordova, Port Byron</td>
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<td>Saline</td>
<td>Galatia, Long Branch, Tate</td>
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<td>Brushy, Raleigh</td>
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<td>Rector, East Eldorado, Cottage</td>
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<td>Stonefort, Independence, Mountain</td>
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<td>Sangamon</td>
<td>Buffalo Hart, Mechanicsburg</td>
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<td>Island Grove, New Berlin</td>
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<td>Browning, Hickory, Woodstock, Bainbridge,</td>
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<td>Shelby</td>
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<td>Flat Branch, Ridge, Rural, Pickaway</td>
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<td>Todd's Point, Okaw</td>
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<td>Richland, Ash Grove</td>
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<td>Oconee, Cold Spring</td>
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<td>Herrick, Dry Point</td>
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<td>Big Spring, Sigel</td>
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<td>Elmira, Osceola</td>
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<td>Goshen, West Jersey</td>
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<td>Essex, Valley, Penn</td>
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<td>Stephenson</td>
<td>Winslow, Waddams</td>
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<td>Erin, Kent</td>
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</tbody>
</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

3. Jefferson, Loran
4. Dakota, Rock Grove

Tazewell
1. Sand Prairie, Malone
2. Dillon, Delavan
3. Hopedale, Boynton
4. Hittle, Little Mackinaw

Vermilion
1. Pilot, Middlefork
2. McKendree, Love
3. Jamaica, Vance
4. Carroll, Elwood

Warren
1. Sumner, Hale
2. Kelly, Coldbrook
3. Lenox, Floyd, Berwick
4. Greenbush, Swan, Point Pleasant
5. Tompkins, Ellison

Washington
1. Venedy, Johannisburg, Lively Grove
2. Covington, Hoyleton
3. Beaucoup, Ashley, Richview
4. Plum Hill, Oakdale, Pilot Knob
5. Bolo, DuBois

Wayne
1. Garden Hill, Orchard, Hickory Hill, Four Mile
2. Keith, Zif, Mt. Erie, Elm River
3. Indian Prairie, Berry, Arrington
4. Massilon, Barnhill, Leech

White
1. Mill Shoals, Burnt Prairie
2. Heralds Prairie, Emma, Hawthorne

Whiteside
1. Ustick, Clyde
2. Genesee, Jordan
3. Albany, Garden Plain
4. Newton, Fenton
5. Erie, Portland
6. Hume, Montmorency
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

7. Tampico, Hahnaman

Will
1. Florence, Wilton

Winnebago
1. Laona, Durand
2. Harrison, Burritt

Woodford
1. Partridge, Cazenovia
2. Linn, Clayton, Greene, Panola
3. Cruger, Olio
4. Palestine, Kansas

b) The following list of multi-township assessment districts has been promulgated by this Department in accordance with Sections 2-10 and 2-15 of the Property Tax Code [35 ILCS 200/2-10 and 2-15], which:

1) for candidacy purposes related to terms beginning January 1, 2006, is effective beginning with the certification of pre-election requirements by the Department under Sections 2-50 and 2-52 of the Property Tax Code [35 ILCS 200/2-50 and 2-52];

2) for purposes of appointing assessors or contracting with a qualified person to fill vacancies, is effective January 1, 2006;

3) for purposes of distributions under Section 2-10 and disbursements under Section 2-25 of the Property Tax Code [35 ILCS 200/2-10 and 2-25], is effective December 1, 2005; and

4) for assessment purposes, is effective January 1, 2006:

<table>
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<tr>
<th>County</th>
<th>Townships in District</th>
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<tbody>
<tr>
<td>Adams</td>
<td>Liberty, Columbus</td>
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<td>Burton, Gilmer, Honey Creek</td>
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<td>Lima, Keene</td>
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<td>Houston, Northeast</td>
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<td>Concord, McKee, Beverly, Richfield</td>
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<tr>
<td></td>
<td>Fall Creek, Payson</td>
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<tr>
<td>Bond</td>
<td>Mills, Tamalco</td>
</tr>
</tbody>
</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

2. LaGrange, Old Ripley

Boone
1. Manchester, LeRoy
2. Bonus, Spring, Poplar Grove

Brown
1. Lee, Pea Ridge, Missouri, Ripley, Cooperstown
2. Buckhorn, Elkhorn, Versailles

Bureau
1. Bureau, Walnut
2. Berlin, Westfield
3. Leepertown, Selby
4. Fairfield, Gold, Mineral
5. Neponset, Macon
6. Greenville, Manlius
7. Indiantown, Arispie, Milo, Wheatland
8. Ohio, Dover
9. LaMoille, Clarion

Carroll
1. Washington, Woodland, Freedom
2. Salem, Fairhaven
3. Elkhorn Grove, Wysox

Cass
1. Sangamon Valley, Virginia
2. Ashland, Philadelphia
3. Panther Creek, Newmansville, Chandlerville
4. Bluff Springs, Arenzville, Hagener

Champaign
1. East Bend, Newcomb, Condit, Hensley
2. Ludlow, Rantoul
3. Harwood, Kerr, Compromise
4. Stanton, Ogden
5. Colfax, Sadorus
6. Pesotum, Crittenden
7. Raymond, Ayers, South Homer

Christian
1. Mt. Auburn, Mosquito
2. Stonington, Prairieton
3. King, Bear Creek, Johnson
4. Greenwood, Rosamond, Locust
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

Clark
1. Westfield, Parker
2. Dolson, Auburn, Douglas, Anderson, Darwin
3. Johnson, Orange, Melrose, York

Clay
1. Larkinsburg, Oskaloosa, Blair
2. Bible Grove, Hoosier, Pixley
3. Stanford, Clay City
4. Songer, Xenia

Clinton
1. St. Rose, Wheatfield, Irishtown
2. Santa Fe, Lake
3. Clement, Meridian, East Fork

Coles
1. Seven Hickory, Charleston
2. Morgan, East Oakland
3. Ashmore, Hutton
4. North Okaw, Humboldt

Crawford
1. Licking, Prairie
2. Lamotte, Hutsonville, Montgomery
3. Martin, Honey Creek, Southwest

Cumberland
1. Cottonwood, Union, Crooked Creek
2. Spring Point, Woodbury

DeKalb
1. South Grove, Mayfield
2. Malta, Milan
3. Afton, Pierce
4. Shabbona, Paw Paw
5. Victor, Somonauk

DeWitt
1. Waynesville, Barnett
2. Wilson, Rutledge, Harp, DeWitt Creek, Harp, Wilson, Rutledge
3. Tunbridge, Texas
4. Nixon, Creek, DeWitt, Nixon

Douglas
1. Murdock, Newman
2. Bowdre, Sargent
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

<table>
<thead>
<tr>
<th>City</th>
<th>Benchmarks</th>
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<tbody>
<tr>
<td>Edgar</td>
<td>Brouilletts Creek, Edgar, Prairie</td>
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<td>Buck, Kansas, Grandview</td>
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<td>Jackson, Mason, Mound, West</td>
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<td>St. Francis, Teutopolis</td>
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<td>Linder, Rockbridge</td>
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</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

Grundy 1. Norman, Wauponsee
2. Highland, Vienna, Mazon
3. Goodfarm, Garfield, Greenfield
4. Maine, Braceville
5. Nettle Creek, Erienna

Hamilton 1. Dahlgren, Knights Prairie
2. Flannigan, South Flannigan, Twigg, South Twigg, Mayberry
3. Crouch, South Crouch, Beaver Creek, Crook

Hancock 1. Nauvoo, Appanoose, Sonora
2. Pontoosuc, Dallas City, Rock Creek
3. Prairie, Carthage
4. Warsaw, Wilcox, Rocky Run
5. Durham, Pilot Grove, Fountain Green, Hancock
6. Wythe, Walker, St. Albans, Bear Creek
7. Harmony, St. Mary, Chili, Augusta

Henderson 1. Biggsville, Rozetta, Bald Bluff
2. Media, Raritan, Terre Haute, Lomax
3. Stronghurst, Carman

Henry 1. Edford, Osco, Munson
2. Lynn, Andover
3. Burns, Weller, Galva
4. Loraine, Yorktown, Alba, Cornwall
5. Oxford, Clover

Iroquois 1. Ridgeland, Onarga, Artesia
2. Pigeon Grove, Fountain Creek
3. Milford, Stockland, Lovejoy, Prairie Green
4. Crescent, Ash Grove
5. Milks Grove, Ashkum
6. Beaver, Concord
7. Papineau, Beaverville
8. Danforth, Iroquois

Jackson 1. Ora, Vergennes
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

2. Degorgia, Kinkaid, Fountain Bluff, Levan
3. Sand Ridge, Grand Tower, Pomona

Jasper
1. Crooked Creek, Grandville, Hunt City
2. Smallwood, Fox, Sainte Marie, Willow Hill
3. Grove, North Muddy, South Muddy

Jefferson
1. Grand Prairie, Casner
2. Blissville, Bald Hill, Elk Prairie
3. Field, Farrington
4. Pendleton, Moores Prairie

Jersey
1. Ruyle, Jersey, Fidelity
2. Richwood, English
3. Rosedale, Otter Creek

Jo Daviess
1. Apple River, Thompson
2. Berreman, Derinda, Pleasant Valley, Wards Grove
3. Council Hill, Guilford, Scales Mound
4. Elizabeth, Woodbine
5. Hanover, Rice
6. Menominee, Rawlins, Vinegar Hill
7. Nora, Rush, Warren

Kankakee
1. Rockville, Manteno
2. Sumner, Yellowhead
3. Essex, Salina

Kendall
1. Lisbon, Seward, Na-au-say

Knox
1. Galesburg, Knox, Cedar, Orange, Haw Creek, Elba,
Indian Point, Chestnut, Maquon, Salem
2. Rio, Ontario, Walnut Grove, Lynn, Henderson, Sparta,
Copley, Victoria, Persifer, Truro

LaSalle
1. Meriden, Ophir, Troy Grove
2. Freedom, Serena
3. Mission, Miller
4. Dimmick, Waltham, Wallace
5. Fall River, Grand Rapids
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

Lawrence 1. Allison, Denison
          2. Christy, Lukin
          3. Petty, Bond, Russell

Lee 1. Nachusa, Franklin Grove
     2. Nelson, Harmon
     3. South Dixon, Marion, East Grove, Hamilton
     4. Reynolds, Alto, Viola, Willow Creek
     5. Brooklyn, Wyoming
     6. Ashton, Bradford
     7. Amboy, Lee Center
     8. May, Sublette

Livingston 1. Chatsworth, Germanville
           2. Reading, Newtown
           3. Sunbury, Nevada, Esmen
           4. Round Grove, Broughton, Sullivan
           5. Long Point, Amity
           6. Rooks Creek, Waldo, Pike
           7. Owego, Eppards Point, Avoca
           8. Saunemin, Pleasant Ridge, Charlotte, Union
           9. Indian Grove, Belle Prairie
          10. Forrest, Fayette

Logan 1. Prairie Creek, Sheridan
      2. Orvil, Eminence, West Lincoln
      3. Atlanta, Oran
      4. Chester, Mount Pulaski
      5. Corwin, Broadwell, Elkhart, Hurlbut
      6. Aetna, Laenna, Lake Fork

McDonough 1. Blandinsville, Hire
           2. Sciota, Walnut Grove
           3. Bushnell, Prairie City, Macomb, Mound
           4. Chalmers, New Salem, Scotland
           5. Tennessee, Lamoine, Bethel
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

6. Industry, Eldorado

McLean 1. Allin, Dale
2. West, Bellflower, Cheneys Grove
3. Yates, Lawndale, Cropsey, Anchor
4. Blue Mound, Martin
5. Dawson, Arrowsmith
6. White Oak, Dry Grove
7. Mount Hope, Funk's Grove

Macon 1. Austin, Illini
2. Oakley, Whitmore
3. Niantic, Harristown
4. Blue Mound, Pleasant View
5. Mount Zion, Milam

Macoupin 1. Scottville, Barr, Western Mound, Chesterfield
2. North Palmyra, North Otter
3. South Palmyra, South Otter
4. Nilwood, Shaws Point, Honey Point
5. Bird, Polk, Hillyard, Brushy Mound

Madison 1. New Douglas, Leef

Marion 1. Patoka, Carrigan
2. Foster, Tonti
3. Kinmundy, Meacham
4. Alma, Omega
5. Stevenson, Haines
6. Iuka, Romine

Marshall 1. Saratoga, Whitefield, La Prairie
2. Hopewell, Roberts, Bell Plain, Richland

Mason 1. Forest City, Quiver
2. Allens Grove, Pennsylvania, Salt Creek
3. Crane Creek, Kilbourne, Sherman
4. Bath, Lynchburg

Mercer 1. Eliza, Duncan, Perryton
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

| Montgomery       | 1. Harvel, Pitman, Zanesville |
|                 | 2. Butler Grove, Irving, Rountree |
|                 | 3. Audubon, Nokomis |
|                 | 4. Witt, Fillmore, South Fillmore |
|                 | 5. Grisham, Walshville, East Fork |
| Moultrie        | 1. Dora, Marrowbone |
|                 | 2. Lowe, Jonathan Creek |
|                 | 3. East Nelson, Whitley |
| Ogle            | 1. Eagle Point, Buffalo, Woosung |
|                 | 2. Brookville, Forreston |
|                 | 3. Scott, White Rock |
|                 | 4. Maryland, Lincoln |
|                 | 5. Pine Creek, Grand Detour |
|                 | 6. Taylor, Lafayette, Pine Rock |
|                 | 7. Lynnville, Dement |
| Peoria          | 1. Millbrook, Brimfield |
|                 | 2. Princeville, Akron |
|                 | 3. Logan, Trivoli |
| Piatt           | 1. Goose Creek, Willow Branch |
| Pike            | 1. Fairmount, Perry, Chambersburg |
|                 | 2. Hadley, New Salem, Pleasant Vale, Derry |
|                 | 3. Flint, Detroit, Montezuma, Pearl |
|                 | 4. Newburg, Hardin, Spring Creek |
|                 | 5. Atlas, Martinsburg |
|                 | 6. Pleasant Hill, Ross |
|                 | 7. Kinderhook, Levee, Cincinnati |
| Putnam          | 1. Hennepin, Senachwine |
| Richland        | 1. Noble, Decker, Denver |
|                 | 2. German, Claremont |
### DEPARTMENT OF REVENUE

#### NOTICE OF ADOPTED AMENDMENT

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<td>Dakota, Rock Grove</td>
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</table>
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

5. Florence, Silver Creek

Tazewell
1. Dillon, Delavan, Sand Prairie, Malone
2. Hopedale, Boynton, Hittle, Little Mackinaw

Vermilion
1. Pilot, Middlefork
2. Georgetown, Love, McKendree
3. Jamaica, Vance
4. Carroll, Elwood

Warren
1. Kelly, Coldbrook, Floyd, Berwick
2. Lenox, Sumner, Hale
3. Greenbush, Swan, Point Pleasant
4. Tompkins, Ellison

Washington
1. Venedy, Johannisburg, Lively Grove
2. Covington, Hoyleton
3. Beaucoup, Ashley, Richview
4. Plum Hill, Oakdale, Pilot Knob
5. Bolo, DuBois

Wayne
1. Garden Hill, Orchard, Hickory Hill, Four Mile
2. Keith, Zif, Mt. Erie, Elm River
3. Indian Prairie, Berry, Arrington
4. Massilon, Barnhill, Leech

White
1. Mill Shoals, Burnt Prairie
2. Heralds Prairie, Emma, Hawthorne

Whiteside
1. Ustick, Clyde
2. Genesee, Jordan, Hopkins
3. Albany, Garden Plain
4. Newton, Fenton, Portland
5. Union Grove, Mt. Pleasant
6. Hume, Montmorency, Hahnaman

Will
1. Florence, Wilton

Winnebago
1. Laona, Durand
DEPARTMENT OF REVENUE

NOTICE OF ADOPTED AMENDMENT

2. Harrison, Burritt
3. Pecatonica, Seward

Woodford  1. Partridge, Cazenovia
2. Linn, Clayton, Greene, Panola
3. Cruger, Olio
4. Palestine, Kansas

(Source: Amended at 28 Ill. Reg. 14662, effective October 19, 2004)
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

1) **Heading of the Part:** Pay Plan

2) **Code Citation:** 80 Ill. Adm. Code 310

3) **Section Numbers:**
   - 310.Appendix A, Table G  Amend
   - 310.Appendix A, Table L  Amend
   - 310.Appendix A, Table P  Amend

4) **Reference to the Specific State or Federal Court Order, Federal Rule or Statute which Requires this Peremptory Rulemaking:**

   These peremptory amendments as they pertain to the Agreements are for fiscal year 2005 only. The Department of Central Management Services will submit proposed amendments prior to the beginning of each subsequent fiscal year in the below Agreements to reflect the parts of the Agreements that affect the particular fiscal year.

   The Department is amending the Pay Plan 310.Appendix A, Table G to reflect the Agreement effective July 1, 2004, between the Department of Central Management Services and the Illinois Federation of Public Employees Local 4408, AFT/AFL-CIO, for RC-045.

   The Department is amending the Pay Plan 310.Appendix A, Table P to reflect the Agreement effective July 1, 2004, between the Department of Central Management Services and the Illinois Federation of Public Employees Local 4408 for RC-029.

   Both of these Agreements were signed September 24, 2004 and include a 2.00% increase for all rates subject to the regular retirement formula and a 2.75% increase for all rates subject to the alternative retirement formula effective January 1, 2005.

   The Department is amending the Pay Plan 310.Appendix A, Tables L to reflect the certification by the Illinois Department of Labor of the Boiler Safety Specialists' prevailing rates and effective dates for the northern region. The northern region information was certified on October 5, 2004. The northern region’s prevailing rate is $6,406.68 per month effective July 1, 2004.

5) **Statutory Authority:** Authorized by Sections 8 and 8a of the Personnel Code [20 ILCS 415/8 and 20 ILCS 415/8a].

6) **Effective Date:**
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

7) A Complete Description of the Subjects and Issues Involved: Both Section 310.Appendix A, Table G and Section 310.Appendix A, Table P are amended to reflect the 2.00% increase for all rates subject to the regular retirement formula and the 2.75% increase for all rates subject to the alternative retirement formula effective January 1, 2005. For both tables, rates no longer used are removed.

Section 310.Appendix A, Tables L is amended so that the northern region’s prevailing rate is $6,406.68 per month effective July 1, 2004.

8) Does this rulemaking contain an automatic repeal date? No

9) Date filed with the Index Department:

10) This and other Pay Plan amendments are available in the Division of Technical Services of the Bureau of Personnel.

11) Is this in compliance with Section 5-50 of the Illinois Administrative Procedure Act? Yes

12) Are there any other proposed amendments pending on this Part?

<table>
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<tr>
<th>Section Numbers</th>
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<tr>
<td>310.110</td>
<td>Amend</td>
<td>28 Ill. Reg. 11532, 8/13/04 (Corrected at 28 Ill. Reg. 12728, 9/10/04)</td>
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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

13) **Statement of Statewide Policy Objectives:** These amendments to the Pay Plan affect only the employees subject to the Personnel Code and do not set out any guidelines that affect local or other jurisdictions in the State.

14) **Information and questions regarding these peremptory amendments shall be directed to:**

   Ms. Dawn DeFraties  
   Deputy Director  
   Department of Central Management Services  
   503 William G. Stratton Building  
   Springfield IL 62706  
   217/524-8773  
   Fax: 217/558-4497

The full text of the Peremptory Amendments begins on the next page:
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND
POSITION CLASSIFICATIONS
CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 310
PAY PLAN

SUBPART A: NARRATIVE

Section 310.20 Policy and Responsibilities
310.30 Jurisdiction
310.40 Pay Schedules
310.50 Definitions
310.60 Conversion of Base Salary to Pay Period Units
310.70 Conversion of Base Salary to Daily or Hourly Equivalents
310.80 Increases in Pay
310.90 Decreases in Pay
310.100 Other Pay Provisions
310.110 Implementation of Pay Plan Changes for Fiscal Year 2004
310.120 Interpretation and Application of Pay Plan
310.130 Effective Date
310.140 Reinstitution of Within Grade Salary Increases (Repealed)
310.150 Fiscal Year 1985 Pay Changes in Schedule of Salary Grades, effective July 1, 1984 (Repealed)

SUBPART B: SCHEDULE OF RATES

Section 310.205 Introduction
310.210 Prevailing Rate
310.220 Negotiated Rate
310.230 Part-Time Daily or Hourly Special Services Rate
310.240 Hourly Rate
310.250 Member, Patient and Inmate Rate
310.260 Trainee Rate
310.270 Legislated and Contracted Rate
310.280 Designated Rate
310.290 Out-of-State or Foreign Service Rate
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

310.300 Educator Schedule for RC-063 and HR-010
310.310 Physician Specialist Rate
310.320 Annual Compensation Ranges for Executive Director and Assistant Executive Director, State Board of Elections
310.330 Excluded Classes Rate (Repealed)

SUBPART C: MERIT COMPENSATION SYSTEM

Section
310.410 Jurisdiction
310.420 Objectives
310.430 Responsibilities
310.440 Merit Compensation Salary Schedule
310.450 Procedures for Determining Annual Merit Increases
310.455 Intermittent Merit Increase
310.456 Merit Zone (Repealed)
310.460 Other Pay Increases
310.470 Adjustment
310.480 Decreases in Pay
310.490 Other Pay Provisions
310.495 Broad-Band Pay Range Classes
310.500 Definitions
310.510 Conversion of Base Salary to Pay Period Units (Repealed)
310.520 Conversion of Base Salary to Daily or Hourly Equivalents
310.530 Implementation
310.540 Annual Merit Increase Guidechart for Fiscal Year 2004
310.550 Fiscal Year 1985 Pay Changes in Merit Compensation System, effective July 1, 1984 (Repealed)

APPENDIX A Negotiated Rates of Pay

310.TABLE A HR-190 (Department of Central Management Services – State of Illinois Building – SEIU) (Repealed)
310.TABLE B HR-200 (Department of Labor – Chicago, Illinois – SEIU) (Repealed)
310.TABLE C RC-069 (Firefighters, AFSCME) (Repealed)
310.TABLE D HR-001 (Teamsters Local #726)
310.TABLE E RC-020 (Teamsters Local #330)
310.TABLE F RC-019 (Teamsters Local #25)
310.TABLE G RC-045 (Automotive Mechanics, IFPE)
310.TABLE H RC-006 (Corrections Employees, AFSCME)
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

310.TABLE I  RC-009 (Institutional Employees, AFSCME)
310.TABLE J  RC-014 (Clerical Employees, AFSCME)
310.TABLE K  RC-023 (Registered Nurses, INA)
310.TABLE L  RC-008 (Boilermakers)
310.TABLE M  RC-110 (Conservation Police Lodge)
310.TABLE N  RC-010 (Professional Legal Unit, AFSCME)
310.TABLE O  RC-028 (Paraprofessional Human Services Employees, AFSCME)
310.TABLE P  RC-029 (Paraprofessional Investigatory and Law Enforcement Employees, IFPE)
310.TABLE Q  RC-033 (Meat Inspectors, IFPE)
310.TABLE R  RC-042 (Residual Maintenance Workers, AFSCME)
310.TABLE S  HR-012 (Fair Employment Practices Employees, SEIU)
310.TABLE T  HR-010 (Teachers of Deaf, IFT)
310.TABLE U  HR-010 (Teachers of Deaf, Extracurricular Paid Activities)
310.TABLE V  CU-500 (Corrections Meet and Confer Employees)
310.TABLE W  RC-062 (Technical Employees, AFSCME)
310.TABLE X  RC-063 (Professional Employees, AFSCME)
310.TABLE Y  RC-063 (Educators, AFSCME)
310.TABLE Z  RC-063 (Physicians, AFSCME)
310.TABLE AA  NR-916 (Department of Natural Resources, Teamsters)
310.TABLE AB  VR-007 (Plant Maintenance Engineers, Operating Engineers)

310.APPENDIX B  Schedule of Salary Grades – Monthly Rates of Pay for Fiscal Year 2004
310.APPENDIX C  Medical Administrator Rates for Fiscal Year 2004
310.APPENDIX D  Merit Compensation System Salary Schedule for Fiscal Year 2004
310.APPENDIX E  Teaching Salary Schedule (Repealed)
310.APPENDIX F  Physician and Physician Specialist Salary Schedule (Repealed)
310.APPENDIX G  Broad-Band Pay Range Classes Salary Schedule for Fiscal Year 2004

AUTHORITY: Implementing and authorized by Sections 8 and 8a of the Personnel Code [20 ILCS 415/8 and 8a].

SOURCE: Filed June 28, 1967; codified at 8 Ill. Reg. 1558; emergency amendment at 8 Ill. Reg. 1990, effective January 31, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 2440, effective February 15, 1984; emergency amendment at 8 Ill. Reg. 3348, effective March 5, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 4249, effective March 16, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 5704, effective April 16, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 7290, effective May 11, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 11299, effective June 25, 1984;
NOTICE OF PEREMPTORY AMENDMENTS

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

NOTICE OF PEREMPTORY AMENDMENTS

Section 310. APPENDIX A  Negotiated Rates of Pay

Section 310. TABLE G  RC-045 (Automotive Mechanics, IFPE)

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*Cook County only.

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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*Serving as Automotive Parts Warehousers in Cook County.

B) Departments of Agriculture, Central Management Services, Conservation and Transportation – (All Other Counties Except Cook)

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

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C) Department of Corrections—(All Other Counties Except Cook) (Alternative Retirement Formula)

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

(Source: Amended by peremptory rulemaking at 28 Ill. Reg. 14689, effective October 22, 2004)
## Section 310. APPENDIX A  Negotiated Rates of Pay

### Section 310. Table L  RC-008 (Boilermakers)

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- **Northern Region:** Boone, Cook, DeKalb, DuPage, Grundy, Kane, Kankakee, Kendall, Lake, McHenry, Will, and Winnebago Counties.


(Source: Amended by peremptory rulemaking at 28 Ill. Reg. 14689, effective October 22, 2004)
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

Section 310. APPENDIX A   Negotiated Rates of Pay

Section 310. TABLE P   RC-029 (Paraprofessional Investigatory and Law Enforcement Employees, IFPE)

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### DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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RC-029 Alternative Retirement Formula Schedule

Effective July 1, 2004

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

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Effective July 1, 2005
**DEPARTMENT OF CENTRAL MANAGEMENT SERVICES**

**NOTICE OF PEREMPTORY AMENDMENTS**

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

RC-029 Alternative Retirement Formula Schedule

Effective July 1, 2005

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## Notice of Peremptory Amendments

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- Step 1: 2378
- Step 2: 2464
- Step 3: 2563
- Step 4: 2651
- Step 5: 2749
- Step 6: 2896
- Step 7: 2952

### Vehicle Emissions Quality Assurance Auditor
- Step 1: 2476
- Step 2: 2578
- Step 3: 2679
- Step 4: 2776
- Step 5: 2879
- Step 6: 3040
- Step 7: 3100

### Vital Records Quality Control Inspector
- Step 1: 2378
- Step 2: 2464
- Step 3: 2563
- Step 4: 2651
- Step 5: 2749
- Step 6: 2896
- Step 7: 2952

### Warehouse Claims Specialist
- Step 1: 3325
- Step 2: 3481
- Step 3: 3643
- Step 4: 3796
- Step 5: 3955
- Step 6: 4194
- Step 7: 4277

### Warehouse Examiner
- Step 1: 2713
- Step 2: 2826
- Step 3: 2938
- Step 4: 3057
- Step 5: 3171
- Step 6: 3361
- Step 7: 3427

### Warehouse Examiner Specialist
- Step 1: 2984
- Step 2: 3122
- Step 3: 3253
- Step 4: 3384
- Step 5: 3522
- Step 6: 3732
- Step 7: 3807

### Well Inspector I
- Step 1: 2594
- Step 2: 2698
- Step 3: 2815
- Step 4: 2918
- Step 5: 3029
- Step 6: 3205
- Step 7: 3270

### Well Inspector II
- Step 1: 2984
- Step 2: 3122
- Step 3: 3253
- Step 4: 3384
- Step 5: 3522
- Step 6: 3732
- Step 7: 3807

### RC-029 Alternative Retirement Formula Schedule

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**Note:** The Step 7 rate shall be increased by $50 per month for those employees (non-sworn) who attain 15 years of service and have 3 or more years of creditable service on Step 7 in the same pay-grade.

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

years of service in the same classification series.

Effective January 1, 2001

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

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RC-029 Alternative Retirement Formula Schedule

Effective January 1, 2001

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

Note: The Step 8 rate shall be increased by $50 per month for those employees (non-sworn) who attain 15 years of service and have 3 or more years of creditable service on Step 8 in the same pay grade.

The Arson Investigator I, II, Commerce Commission Police Officer I, II, Police Officer I, II and III shall be placed in a longevity schedule receiving a salary increase of an additional $50 per month upon reaching 10 years, 13 years, 15 years and 17 years of service in the same classification series.

Effective March 1, 2001

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**DEPARTMENT OF CENTRAL MANAGEMENT SERVICES**

**NOTICE OF PEREMPTORY AMENDMENTS**

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

| Specialist | Warehouse Examiner | 2815 | 2932 | 3048 | 3172 | 3290 | 3487 | 3556 | 3592 | 3627 |
| Warehouse Examiner | 3096 | 3239 | 3375 | 3511 | 3654 | 3872 | 3950 | 3990 | 4029 |
| Warehouse Examiner Specialist | 3096 | 3239 | 3375 | 3511 | 3654 | 3872 | 3950 | 3990 | 4029 |
| Well Inspector I | 2694 | 2799 | 2924 | 3027 | 3143 | 3325 | 3393 | 3427 | 3461 |
| Well Inspector II | 3096 | 3239 | 3375 | 3511 | 3654 | 3872 | 3950 | 3990 | 4029 |

**RC-029 Alternative Retirement Formula Schedule**

**Effective July 1, 2004**

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Note: The Step 8 rate shall be increased by $50 per month for those employees (non-sworn) who attain 15 years of service and have 3 or more years of creditable service on Step 8 in the same pay grade.

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**DEPARTMENT OF CENTRAL MANAGEMENT SERVICES**

**NOTICE OF PEREMPTORY AMENDMENTS**

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

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RC 029 Alternative Retirement Formula Schedule

Effective July 1, 2002

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

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Note: The Step 8 rate shall be increased by $50 per month for those employees (non-sworn) who attain 15 years of service and have 3 or more years of creditable service on Step 8 in the same pay grade.

Effective July 1, 2003

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**DEPARTMENT OF CENTRAL MANAGEMENT SERVICES**

**NOTICE OF PEREMPTORY AMENDMENTS**

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**RC-029 Alternative Retirement Formula Schedule**

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**Note:** The Step 8 rate shall be increased by $50 per month for those employees (non-sworn) who attain 15 years of service and have 3 or more years of creditable service on Step 8 in the same pay grade.

The Arson Investigator I, II, Commerce Commission Police Officer I, II, Police Officer I, II and III shall be placed in a longevity schedule receiving a salary increase
DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PEREMPTORY AMENDMENTS

of an additional $50 per month upon reaching 10 years, 13 years, 15 years and 17 years of service in the same classification series; and after reaching 17 years of service in the same classification series, an increase of an additional $75 per month shall be granted.

(Source: Amended by peremptory rulemaking at 28 Ill. Reg. 14689, effective October 22, 2004)
1) **Heading of the Part:** Hospital Services

2) **Code Citation:** 89 Ill. Adm. Code 148

3) **Section Numbers:**
   - 148.283 Action: Repeal
   - 148.295 Action: Amendment

4) **Notice of Emergency Amendments Published in the Illinois Register:** July 16, 2004 (28 Ill. Reg. 10157)

5) **JCAR Statement of Objection to Emergency Amendments Published in the Illinois Register:** August 27, 2004 (28 Ill. Reg. 12241)

6) **Summary of Action Taken by the Agency:**

At its meeting on August 10, 2004, the Joint Committee on Administrative Rules issued an Objection to the Department's emergency rulemaking titled Hospital Services (89 Ill. Adm. Code 148), which was published on July 16, 2004 at 28 Ill. Reg. 10157. The Objection specifically centered on Section 148.283 (Excellence in Alzheimer's Disease Center Treatment Payments Program) and Section 148.295 (Critical Hospital Adjustment Payments). The Committee objected to these sections because the Department adopted emergency rules before the substantive authorizing legislation was signed and because the fiscal year 2005 budget did not contain an appropriation for the Excellence Program.

The Department accepts the Committee's Objection and has repealed new Section 148.283 and the amendment to Section 148.295 by emergency action. The repeal of Section 148.283 was effective on August 6, 2004, and the repeal of the emergency amendments to Section 148.295 was effective on August 3, 2004. Notices of these emergency actions were published on August 27, 2004 at 28 Ill. Reg. 12227 and August 20, 2004 at 28 Ill. Reg. 12036, respectively.
JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

NOTICES: The scheduled date and time for the JCAR meeting are subject to change. Due to Register submittal deadlines, the Agenda below may be incomplete. Other items not contained in this published Agenda are likely to be considered by the Committee at the meeting and items from the list can be postponed to future meetings.

If members of the public wish to express their views with respect to a rulemaking, they should submit written comments to the Office of the Joint Committee on Administrative Rules at the following address:

Joint Committee on Administrative Rules
700 Stratton Office Building
Springfield, Illinois 62706
Email: jcar@legis.state.il.us
Phone: 217/785-2254

RULEMAKINGS CURRENTLY BEFORE JCAR

PROPOSED RULEMAKINGS

Agriculture

1. Weights and Measures Act (8 Ill. Adm. Code 600)
   -First Notice Published: 28 Ill. Reg. 8809 – 6/25/04
   -Expiration of Second Notice: 11/27/04

Central Management Services

2. Conditions of Employment (80 Ill. Adm. Code 303)
   -First Notice Published: 28 Ill. Reg. 9217 – 7/9/04
   -Expiration of Second Notice: 12/3/04
JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

Education

3. Gifted Education (Repeal) (23 Ill. Adm. Code 227)
   -First Notice Published: 28 Ill. Reg. 8994 – 7/2/04
   -Expiration of Second Notice: 11/10/04

4. Summer School for Gifted and Remedial Education (23 Ill. Adm. Code 230)
   -First Notice Published: 28 Ill. Reg. 9007 – 7/2/04
   -Expiration of Second Notice: 11/10/04

5. Driver Education (23 Ill. Adm. Code 252)
   -First Notice Published: 28 Ill. Reg. 9013 – 7/2/04
   -Expiration of Second Notice: 11/10/04

   -First Notice Published: 28 Ill. Reg. 9019 – 7/2/04
   -Expiration of Second Notice: 11/10/04

Financial and Professional Regulation-Division of Professional Regulation

   -First Notice Published: 28 Ill. Reg. 9845 – 7/16/04
   -Expiration of Second Notice: 12/22/04

   -First Notice Published: 28 Ill. Reg. 9886 – 7/16/04
   -Expiration of Second Notice: 12/22/04

   -First Notice Published: 28 Ill. Reg. 11479 – 8/13/04
   -Expiration of Second Notice: 11/20/04
JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

   -First Notice Published: 28 Ill. Reg. 6394 – 4/23/04
   -Expiration of First Notice: 11/20/04

   -First Notice Published: 28 Ill. Reg. 11484 – 8/13/04
   -Expiration of First Notice: 11/26/04

   -First Notice Published: 28 Ill. Reg. 11514 – 8/13/04
   -Expiration of Second Notice: 11/26/04

Natural Resources

   -First Notice Published: 28 Ill. Reg. 10546 – 7/30/04
   -Expiration of Second Notice: 11/13/04

Public Aid

   -First Notice Published: 28 Ill. Reg. 9923 – 7/16/04
   -Expiration of Second Notice: 11/25/04

15. Hospital Services (89 Ill. Adm. Code 148)
   -First Notice Published: 28 Ill. Reg. 9926 – 7/16/04
   -Expiration of Second Notice: 12/8/04

16. Long Term Care Reimbursement Changes (89 Ill. Adm. Code 153)
   -First Notice Published: 28 Ill. Reg. 9930 – 7/16/04
   -Expiration of Second Notice: 12/5/04

JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

-First Notice Published: 28 Ill. Reg. 9933 – 7/16/04
-Expiration of Second Notice: 11/25/04

Public Health

18. Language Assistance Services Code (77 Ill. Adm. Code 940)
   -First Notice Published: 28 Ill. Reg. 7232 – 5/21/04
   -Expiration of Second Notice: 12/4/04

   -First Notice Published: 28 Ill. Reg. 10556 – 7/30/04
   -Expiration of Second Notice: 12/4/04

Racing Board

20. Medication (11 Ill. Adm. Code 603)
   -First Notice Published: 28 Ill. Reg. 7533 – 5/28/04
   -Expiration of Second Notice: 11/25/04

   -First Notice Published: 28 Ill. Reg.11073 – 8/6/04
   -Expiration of Second Notice: 11/19/04

Revenue

   -First Notice Published: 28 Ill. Reg. 4143 – 3/5/04
   -Expiration of Second Notice: 12/1/04

   -First Notice Published: 28 Ill. Reg. 4150 – 3/5/04
   -Expiration of Second Notice: 12/1/04

Secretary of State
JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

   -First Notice Published: 28 Ill. Reg. 11673 – 8/13/04
   -Expiration of Second Notice: 12/8/04

   -First Notice Published: 28 Ill. Reg. 12410 – 9/3/04
   -Expiration of Second Notice: 12/1/04

   State Police

26. AMBER Alert Notification Plan (20 Ill. Adm. Code 1292)
   -First Notice Published: 28 Ill. Reg. 11077 – 8/6/04
   -Expiration of Second Notice: 11/10/04

   Teachers Retirement System

27. The Administration and Operation of the Teachers' Retirement System (80 Ill. Adm. Code 1650)
   -First Notice Published: 28 Ill. Reg. 11082 – 8/6/04
   -Expiration of Second Notice: 11/27/04

   Transportation

28. Oversize and Overweight Permit Movements on State Highways (92 Ill. Adm. Code 554)
   -First Notice Published: 28 Ill. Reg. 11998 – 8/20/04
   -Expiration of Second Notice: 11/19/04

EMERGENCY RULEMAKINGS

   Central Management Services

29. Pay Plan (80 Ill. Adm. Code 310)
   -Notice Published: 28 Ill. Reg. 14174 – 10/29/04
JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

Corrections

    -Notice Published: 28 Ill. Reg. 13805 – 10/15/04

Education

31. Public Schools Evaluation, Recognition and Supervision (23 Ill. Adm. Code 1)
    -Notice Published: 28 Ill. Reg. 13637 – 10/8/04

Gaming Board

32. Riverboat Gambling (86 Ill. Adm. Code 3000)
    -Notice Published: 28 Ill. Reg. 13238 – 10/1/04

Labor

33. Prevailing Wage Hearing Procedures (56 Ill. Adm. Code 100)
    -Notice Published: 28 Ill. Reg. 14204 – 10/29/04

Natural Resources

34. General Hunting and Trapping on Department-Owned or-Managed Sites (17 Ill. Adm.
    Code 510)
    -Notice Published: 28 Ill. Reg. 13809 – 10/15/04

Public Aid

35. Pharmaceutical Assistance Program (89 Ill. Adm. Code 119)
    -Notice Published: 28 Ill. Reg. 13816 – 10/15/04

    -Notice Published: 28 Ill. Reg. 14214 – 10/29/04
Joint Committee on Administrative Rules

Scheduled Meeting:

Stratton Office Building
Room C-1
Springfield, Illinois
9:00 A.M.
November 9, 2004

Revenue

37. Income Tax (86 Ill. Adm. Code 100)
   -Notice Published: 28 Ill. Reg. 14271 – 10/29/04

Treasurer

38. General Administrative Provisions (74 Ill. Adm. Code 760)
   -Notice Published: 28 Ill. Reg. 13919 – 10/22/04

Peremptory Rulemaking

Central Management Services

   -Notice Published: 28 Ill. Reg. 13247 – 10/1/04

40. Pay Plan (80 Ill. Adm. Code 310)
   -Notice Published: 28 Ill. Reg. 13656 – 10/8/04

Human Services

41. Food Stamps (89 Ill. Adm. Code 121)
   -Notice Published: 28 Ill. Reg. 13834 – 10/15/04

Agency Responses

Board of Higher Education

42. Health Services Education Grants Act (23 Ill. Adm. Code 1020; 28 Ill. Reg. 284)
JOINT COMMITTEE ON ADMINISTRATIVE RULES

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
NOVEMBER 9, 2004

Capitol Development Board


Commerce and Economic Opportunity


Public Aid

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICE RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of October 18, 2004 through October 25, 2004 and have been scheduled for review by the Committee at its November 9, 2004 meeting in Springfield. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rulemaking should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Bldg., Springfield IL 62706.

<table>
<thead>
<tr>
<th>Second Notice Expires</th>
<th>Agency and Rule</th>
<th>Start Of First Notice</th>
<th>JCAR Meeting</th>
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<tr>
<td>12/5/04</td>
<td>Department of Public Aid, Long Term Care Reimbursement Changes (89 Ill. Adm. Code 153)</td>
<td>7/16/04 28 Ill. Reg. 9930</td>
<td>11/9/04</td>
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<td>12/8/04</td>
<td>Department of Public Aid, Hospital Services (89 Ill. Adm. Code 148)</td>
<td>7/16/04 28 Ill. Reg. 9926</td>
<td>11/9/04</td>
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JOINT COMMITTEE ON ADMINISTRATIVE RULES  
ILLINOIS GENERAL ASSEMBLY  
SECOND NOTICE RECEIVED  

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<tr>
<th>Date</th>
<th>Description</th>
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<tbody>
<tr>
<td>12/8/04</td>
<td>Secretary of State, Public Library Construction Grants (23 Ill. Adm. Code 3060)</td>
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<td>11/9/04</td>
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PROCLAMATIONS

2004-302 (Revised)
Paralegal Day (edit to Paralegal Association Day)

WHEREAS, paralegals provide significant legal support for many organizations, including law firms, corporate legal departments, and government offices; and
WHEREAS, to meet the increasing demands for legal services in the United States, the skilled work of paralegals will grow in importance and contribution to the running of American organizations and the execution of American law. According to the United States Bureau of Labor Statistics, the paralegal profession will see greater than average growth through the year 2012; and
WHEREAS, the Illinois Paralegal Association—one of the oldest and largest organizations supporting paralegals in the state—will be celebrating its 32nd Anniversary this year; and
WHEREAS, the purpose of the Illinois Paralegal Association is to promote communication among members of the paralegal profession, the legal community, and civic and professional organizations; to encourage and provide for the continuing education of paralegals; and, to advance the paralegal profession in the United States:

THEREFORE, I, Rod Blagojevich, Governor of the State of Illinois, do hereby proclaim November 11, 2004 as PARALEGAL DAY in Illinois, and encourage citizens and organizations to recognize the efforts and contributions of paralegals to our state and our communities.

Issued by the Governor October 14, 2004.
Filed by the Secretary of State October 25, 2004.

2004-310
Childhood Lead Poisoning Prevention Week

WHEREAS, approximately 434,000 children in this country between the ages of one and five have blood lead levels greater than the U.S. Centers for Disease Control and Prevention’s recommended level of 10 micrograms of lead per deciliter of blood; and
WHEREAS, even though lead-based paints were banned in 1978, the major source of lead exposure among American children remains lead-based paint and lead-contaminated dust found in the nearly 24 million deteriorating housing units in the country; and
WHEREAS, lead poisoning can affect nearly every system in the body, causing learning disabilities, behavioral problems and, in extreme instances, seizure, coma and even death; and
WHEREAS, lead poisoning can affect children from all socioeconomic levels, but those living at or below the poverty line—who frequently live in older homes—are at a greater risk; and
WHEREAS, Illinois has the highest number of children tested, and the highest childhood lead poisoning prevalence rate of any state in the nation; and
WHEREAS, Illinois is pleased to join with health care professionals, agencies and their delegates in observance of National Lead Poisoning Prevention Week, an effort to increase awareness and to promote the prevention of lead poisoning in children:
PROCLAMATIONS

THEREFORE, I, Rod Blagojevich, Governor of the State of Illinois, proclaim October 24-30, 2004, as CHILDHOOD LEAD POISONING PREVENTION WEEK in Illinois, and encourage all citizens to recognize the prevalence of lead poisoning in our society and to join in working toward eradicating this unfortunate and unnecessary condition.
Issued by the Governor October 19, 2004.
Filed by the Secretary of State October 19, 2004.

2004–311
Family Caregivers Month

WHEREAS, family caregivers selflessly provide physical, emotional and spiritual support to loved ones who are chronically ill, elderly and/or disabled; and
WHEREAS, one in four households across the country take on the role of providing care to family members and friends who are fifty years of age and older; and
WHEREAS, over 1.1 million family caregivers in the State of Illinois are able to utilize programs through the Illinois Department on Aging’s Caregiver Support Program. Among many other services available, they are able to grow with individual counseling, support groups or caregiver training; and
WHEREAS, it is estimated that it would cost the citizens of the United States a collective $200 billion per year if the services provided by family caregivers were replaced with those of professionals; and
WHEREAS, twenty-five percent of all working citizens in this county provide elder care. A large majority of those individuals are employed full-time, and are forced to rearrange their work schedules to care for their loved ones. For that, and many other reasons, family caregivers deserve our utmost respect and commendation:
THEREFORE, I, Rod Blagojevich, Governor of the State of Illinois, do hereby proclaim November 2004 as FAMILY CAREGIVERS MONTH in Illinois, and encourage all citizens to join in reaffirming our appreciation for family caregivers and the tremendous efforts they put forth each day.
Issued by the Governor October 19, 2004.
Filed by the Secretary of State October 19, 2004.

2004-312
Healthcare Quality Week

WHEREAS, the quality of healthcare in our nation is important to all citizens. It is mandatory that all individuals receive the best healthcare available and that all citizens are treated equally within that system; and
WHEREAS, healthcare professionals strive to make a positive contribution to improving clinical outcomes as well as providing the best service available to its patients; and
WHEREAS, my administration is working diligently to solve the problem of citizens without healthcare. The expansion of KidCare and FamilyCare will help to insure over 20,000
more children and 100,000 more working parents; and

WHEREAS, there are several organizations in Illinois working toward helping people to receive the best healthcare possible. These organizations strive to achieve quality healthcare, a human right that is deserved by all peoples:

THEREFORE, I, Rod Blagojevich, Governor of Illinois, do hereby proclaim October 17 – 23, 2004 as HEALTHCARE QUALITY WEEK in Illinois, and encourage the populace to support the right of all citizens to receive quality healthcare.

Issued by the Governor October 19, 2004.

Filed by the Secretary of State October 19, 2004.
ILLINOIS ADMINISTRATIVE CODE
Issue Index - With Effective Dates

Rules acted upon in Volume 28, Issue 45 are listed in the Issues Index by Title number, Part number, Volume and Issue. Inquires about the Issue Index may be directed to the Administrative Code Division at (217) 782-7017/18.

**PROPOSED RULES**

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**ADOPTED RULES**

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**AGENCY MODIFICATION IN RESPONSE TO A STATEMENT OF OBJECTION**

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**EXECUTIVE ORDERS AND PROCLAMATIONS**

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(Processing fee for credit cards purchases, if applicable.) $ 1.50

**TOTAL AMOUNT OF ORDER** $ ____________

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**Send Payment To:** Secretary of State  
Department of Index  
Administrative Code Division  
111 E. Monroe  
Springfield, IL 62756

**Fax Order To:** (217) 524-0308

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